

## North Carolina - State Required Benefits

Benefit	Name of Required Benefit	Market Applicability	Citation Number
<b>Outpatient Facility Fee (e.g., Ambulatory Surgery Center)</b>	Coverage for the diagnosis and treatment of lymphadema	Individual, small group, large group	58-3-280
<b>Emergency Room Services</b>	Coverage for emergency care	Individual, small group, large group	58-3-190
<b>Inpatient Hospital Services (e.g., Hospital Stay)</b>	Minimum inpatient stays following delivery of a baby	Individual, small group, large group	58-3-169 + federal mandate
<b>Substance Abuse Disorder Outpatient Services</b>	Minimum benefit offering for alcoholism/drug abuse treatment	Only group and "blanket" policies	58-51-50
<b>Non-Preferred Brand Drugs</b>	Access to nonformulary drugs	Individual, small group, large group	58-3-221
<b>Hearing Aids</b>	Coverage for hearing aids	Individual, small group, large group	58-3-285
<b>Preventive Care/Screening/Immunization</b>	Coverage for bone mass measurement	Individual, small group, large group	58-3-174
<b>Preventive Care/Screening/Immunization</b>	Coverage for prescription drug contraceptives or devices	Individual, small group, large group	58-3-178
<b>Preventive Care/Screening/Immunization</b>	Coverage for colorectal cancer screening	Individual, small group, large group	58-3-179
<b>Preventive Care/Screening/Immunization</b>	Coverage for newborn hearing screening	Individual, small group, large group	58-3-260
<b>Preventive Care/Screening/Immunization</b>	Coverage for ovarian cancer surveillance tests	Individual, small group, large group	58-3-270
<b>Preventive Care/Screening/Immunization</b>	Coverage for mammograms and cervical cancer screening	Individual, small group, large group	58-51-57
<b>Preventive Care/Screening/Immunization</b>	Coverage for prostate cancer screening	Individual, small group, large group	58-51-58
<b>Breast Reconstructive Surgery</b>	Coverage for reconstructive breast surgery following a mastectomy	Individual, small group, large group	58-51-62 + federal mandate
<b>Cleft Lip/Palate and Congenital Abnormalities</b>	Coverage for congenital defects and anomalies	Individual, small group, large group	58-51-30
<b>Clinical Trials</b>	Coverage for certain clinical trials	Individual, small group, large group	58-3-255
<b>Dental Anesthesia</b>	Anesthesia and hospital charges for dental procedures for certain individuals	Individual, small group, large group	58-3-122
<b>Diabetes Care Management</b>	Coverage for treatment of diabetes	Individual, small group, large group	58-51-61

<b>Benefit</b>	<b>Name of Required Benefit</b>	<b>Market Applicability</b>	<b>Citation Number</b>
<b>Mental Health Other</b>	Equity in benefits for mental health in employer group health benefit plans	Large group	58-3-220(i) + federal mandate
<b>Mental Health Other</b>	Mental illness minimum coverage requirement	Small group	58-3-220
<b>Off-Label Prescription Drugs</b>	Coverage for certain off-label drug use for the treatment of cancer	Individual, small group, large group	58-51-59
<b>Temporomandibular joint disorder and craniomandibular disorder</b>	TMJ joint dysfunction coverage	Individual, small group, large group	58-3-121