

**Covered Benefit: Male Genital and Urinary System Services** 

<u>Definition</u>: Male genital and urinary services include a broad range of surgical services and procedures involving the male genital system, the urinary system, and lithotripsy.

<u>Benefit Packages</u>: RIte Care, Children with Special Health Care Needs, Substitute Care, Rhody Health Partners and Rhody Health Options Phase One.

Coverage Limitations:

- All inpatient hospitalizations require medical review and prior authorization.
- All experimental procedures and non FDA approved services are not covered unless for the treatment of cancer.
- Cosmetic surgery and procedures are not covered.

## Exclusions:

Extended Family Planning (EFP) members are excluded; EFP members do not have a comprehensive benefit package.

Coverage Includes:

- Surgical services male genital system
- Surgical services urinary system
- Lithotripsy
- Circumcision

VERSION HISTORY: Create Date: 06/22/10 Revision Dates: 07/08/10 PEC Revision Date: 10/3/13