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- e. Maintains a daily record for each patient.

**Special Enrollment.** Enrollment of a Member or Dependent under the Plan as allowed under section 3. Special Enrollment is allowed after certain events happen.

**Specialist.** A Provider who practices in a specialty area of medicine, including, but not limited to, radiology, cardiology, surgery, orthopedics, and oncology.

**Stabilized/Stabilization.** With respect to an emergency medical condition, that no material deterioration of the condition is likely, within reasonable medical probability, to result or occur before an individual can be transferred.

**Subscriber.** The person who meets the eligibility requirements to be a Member as described in this Agreement and who is not a Dependent. For a person to qualify as a Subscriber, we must have received and approved the required Application and Premium.

**Substance Use Disorder.** A physical or psychological dependency, or both, on a controlled substance or alcohol agent. These are defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association. This term does not include conditions you cannot attribute to a mental disorder that are a focus of attention or treatment or an addiction to nicotine products, food or caffeine intoxication.

**Substance Use Disorder Treatment Facility.** A residential or nonresidential institution that meets all of the following requirements:

- a. Licensed and accredited as a Substance Use Disorder Treatment Facility;
- b. Provides care to one or more patients for alcoholism and/or drug dependency; and
- c. Is a freestanding unit or a designated unit of another licensed health care facility.

**Surprise Bill.** A bill for health care services, including, but not limited to, emergency services received by an enrollee for covered services rendered by an out-of-network provider, when such services were rendered by that out-of-network provider at a network provider, during a service or procedure performed by a network provider or during a service or procedure previously approved or authorized by the carrier and the enrollee did not knowingly elect to obtain such services from that out-of-network provider. "Surprise bill" does not include a bill for health care services received by an enrollee when a network provider was available to render the services and the enrollee knowingly elected to obtain the services from another provider who was an out-of-network provider.

**Telehealth.** Telehealth has the same meaning as provided under Maine law.

**Usual, Customary, and Reasonable Charge (UCR).** As determined by Health Options, an amount that is consistent with a usual range of charges by Providers for the same, or similar, service, equipment, or supplies in the geographic area where the service, equipment, or supply was provided to a Member.

**Utilization Review.** The process Health Options uses to determine the Medical Necessity, appropriateness, effectiveness, or efficiency of health care services. Techniques include Inpatient admission review, continued Inpatient Stay review, discharge planning, post-admission review, and case management.