



Provider Manual Copayment Appendix

Kentucky Medicaid
Copay Policy Update
for Providers

Humana

 **CareSource**

Beginning on Jan. 1, 2019, all managed care organizations (MCOs) and providers are required to charge copays for specific nonpreventive services given to some Kentucky Medicaid beneficiaries.

Services and Items Requiring a Copay

The following table displays the copayment amounts a recipient shall pay, unless the recipient is exempt from cost sharing.

Benefit	Copayment amount
Acute inpatient hospital admission	\$50
Outpatient hospital or ambulatory surgical center visit	\$4
Emergency room for a nonemergency visit	\$8
Durable medical equipment, prosthetics, orthotics and supplies (DMEPOS)	\$4
Podiatry office visit	\$3
Chiropractic office visit	\$3
Dental office visit	\$3
Optometry office visit	\$3
General ophthalmological office visit	\$3
Physician office visit	\$3
Office visit for care by a physician assistant, an advanced practice registered nurse, a certified pediatric and family nurse practitioner, or a nurse midwife	\$3
Office visit for behavioral healthcare	\$3
Office visit to a rural health clinic	\$3
Office visit to a federally qualified health center or a federally qualified health center look-alike	\$3
Office visit to a primary care center	\$3
Physical therapy office visit	\$3
Occupational therapy office visit	\$3
Speech-language pathology services office visit	\$3
Laboratory, diagnostic or radiological service	\$3
Service for a Medicaid or KCHIP beneficiary who is younger than 19 years	\$0
Branded drug	\$4
Generic drug	\$1
Branded drug preferred over generic drug	\$1
Pharmacy product class: certain antipsychotic drug	\$1
Pharmacy product class: contraceptives for family planning	\$0
Pharmacy product class: tobacco cessation	\$0
Pharmacy product class: diabetes supplies, blood glucose meters	\$0
Pharmacy product class: diabetes supplies, all other covered diabetic supplies	\$4 for first fill, \$0 for second fill and beyond, per day
Pharmacy patient attribute: pregnant	\$0
Pharmacy patient attribute: long-term care resident	\$0
Pharmacy patient attribute: younger than 18	\$0

The full amount of the copayment established in the previous table shall be deducted from the provider's reimbursement. The maximum amount of cost sharing shall not exceed 5 percent of a family's income for a quarter.

Exemptions may apply, including, but are not limited, to:

- Foster children
- A Medicaid or KCHIP beneficiary who is younger than 19
- Individuals receiving hospice care
- Pregnant women (includes 60-day period after pregnancy ends)
- Beneficiaries who have reached their cost share limit for the quarter

Providers should reach out to the MCO for specific codes.

Humana – CareSource shall not waive copays.

Frequently Asked Questions (FAQs)

1. How will providers know if a beneficiary has a copay?

Providers should check **KYHealthNet** (<http://www.kymmis.com/kymmis/index.aspx>) to verify the requirement to collect a copayment from a member. If the beneficiary is subject to copays **and** has not met his/her cost-sharing limit for the quarter, the provider should collect a copay. Please see Pages 3 and 4 of the **Managed Care Copayment FAQ & Quick Reference Guide for Providers** for more information and detailed screenshots showing how to check these indicators.

Please note: If the beneficiary has reached his/her cost-sharing limit for the quarter, the provider must waive the copay. In these instances, the provider will be fully reimbursed for the service.

2. Are any services exempt from copays?

The following exemptions may apply, but are not limited to:

- Emergency services
- Some family planning services
- Preventive services

Providers should reach out to Humana – CareSource for specific codes.

3. Are any beneficiaries exempt from copays?

The following exemptions may apply, but are not limited to:

- Foster children
- Children enrolled in Medicaid
- Pregnant women (includes 60-day period after pregnancy ends)
- Kentucky Medicaid beneficiaries who reached their cost share limit for the quarter
- Individuals receiving hospice care

Please note: Kentucky Medicaid beneficiaries receiving healthcare services through the fee-for-service model already are paying copays. The policy that took effect on Jan. 1, 2019, applies that existing copay structure to all Kentucky Medicaid beneficiaries.



4. How will providers know which services require copays?

Please see the services that require copay section above or Page 5 of the **Managed Care Copayment FAQ & Quick Reference Guide for Providers Document** for services and items requiring a copay.

5. If a Medicaid beneficiary receives more than one service in one day, will he or she have multiple copays?

Copays are paid per visit. A visit is defined as an encounter or series of encounters that are performed on the same date of service at the same entity, including telehealth services.

6. Can a provider refuse to see a Medicaid beneficiary if he or she does not pay the copay?

If the beneficiary's income is at or below 100 percent of the federal poverty level (FPL), they cannot be refused services. If the beneficiary's income is over 100 percent FPL and they do not pay the copay, it is up to the provider whether to deny services. Services only may be denied for failure to pay if that is the current business practice for all patients. ***Pregnant women and children can never be refused services for inability to pay.***

7. How will providers know if a beneficiary is under or over 100 percent FPL?

Providers should check **KYHealthNet** (<http://www.kymmis.com/kymmis/index.aspx>) to see whether a beneficiary is under or over 100 percent FPL. Please refer to Page 6 of the **Managed Care Copayment FAQ & Quick Reference Guide for Providers** for more information and detailed screenshots.

8. How will providers know if a beneficiary is part of an exempt group?

Providers should check **KYHealthNet** (<http://www.kymmis.com/kymmis/index.aspx>) to see whether a beneficiary is exempt from copays. Please see Page 7 of the **Managed Care Copayment FAQ & Quick Reference Guide for Providers** for more information and detailed screenshots.