

TO: Local Commissioners, Medicaid Directors

FROM: Kathryn Kuhmerker, Deputy Commissioner
Office of Medicaid Management

SUBJECT: Medicaid Recipient Co-Payment Program Changes

EFFECTIVE DATE: April 1, 2005

CONTACT PERSON: Mary Rondeau, 518-473-2160

Please note the following Medicaid recipient co-payment changes effective April 1, 2005:

- **Medicaid managed care plan enrollees will be subject to co-payments on pharmacy items (\$2.00 for brand-name drugs and \$0.50 for generic drugs or over-the-counter medications ordered by a practitioner).**

Medicaid managed care enrollees will be subject to the same co-payment year and annual co-payment maximum as recipients in fee-for-service Medicaid. (The annual maximum co-payment per recipient per year is \$100. The co-pay year begins on April 1 each year and ends on March 31 of the following year.)

Recipient notification letters will be mailed during the last week of February. The Office of Managed Care will work with the managed care plans to insure that plan member handbooks are changed to reflect this change and to insure that Medicaid recipients enrolled in managed care plans are adequately notified.

When providing Medicaid applicants with Book 1, Book 2 and Book 3 client informational books, the attached amendment should be included to correct information regarding recipient co-payment exemptions appearing in Book 2(LDSS-4148B). The amendment is provided in English and Spanish.

Also, copies (English and Spanish) of the recipient notification letter are attached for your information.