

Global Commitment Register

January 23, 2023

GCR 22-028 FINAL

Medicaid Copay Changes

Policy Summary:

Beginning February 1, 2023, Vermont Medicaid will reinstate copays from Medicaid members for hospital outpatient services and certain prescription drugs for coughs, colds, analgesics, and inhalers. These copays were put on hold in 2020 due to the federal COVID-19 public health emergency (see GCR 20-032). Copays for dental services and other prescription drugs were not put on hold during this time period.

Medicaid members will not incur copays for services, drugs, testing, and vaccines for the treatment and prevention of COVID-19 during the American Rescue Plan Act coverage period. This remains in place until the end last day of the first calendar quarter that begins one year after the last day of the federal COVID-19 public health emergency declaration.

Vermont Medicaid copay exemptions required by state and federal regulations remain in place.

See additional information below for the complete list of Vermont Medicaid copays and exemptions.

This change will be submitted to the Centers for Medicare and Medicaid Services as SPA # 23-0005.

Effective Date:

February 1, 2023

Authority/Legal Basis:

Medicaid State Plan

American Rescue Plan Act of 2021, Section 9811

Population Affected:

All Medicaid

Fiscal Impact:

The estimated gross annualized budget impact is a savings of \$1,050,000.



Public Comment Period:

The public comment period ended January 20, 2023. No comments were received.

To be added to the GCR email list, send an email to <u>AHS.MedicaidPolicy@vermont.gov</u>.

Additional Information:

Medicaid Provider Manual Section 4.4 Member Cost Sharing

Health Care Administrative Rule 6.100 Medicaid Cost Sharing

The list of all Vermont Medicaid copays includes:

Prescription Drug Copay

\$1.00 for prescriptions costing less than \$30.00

\$2.00 for prescriptions costing \$30.00 or more, but less than \$50.00

\$3.00 for prescriptions costing \$50.00 or more

Dental Copay

\$3.00 per visit for dental services. Preventive dental services do not require a copay.

Outpatient Hospital Copay

\$3.00 per day per hospital for outpatient hospital services.

Copays are not required for the following:

- Medicaid Members:
 - o In a long-term care facility
 - o Under age 21
 - o Who are pregnant or in the postpartum period
 - o Who are in the Breast and Cervical Cancer Treatment Program
- Medicaid Services:
 - o Preventive services
 - o Family planning services and supplies
 - o Emergency services
 - o Sexual assault related services

The draft SPA provides additional details on the proposed changes; copies of the draft SPA can be requested from local Department for Children and Families (DCF) offices or from the Department of Vermont Health Access (DVHA) at (802) 355-8843, or can be found on the Agency of Human Services website.

