

Copayments

Services requiring a copayment and the corresponding copayment amounts will not change with HealthChoices Expansion. However, there are some changes in copayment protocols that occurred under *Healthy PA* that are not applicable now under HealthChoices Expansion. Please see the table below for these differences.

In the Past...

Going Forward...

<i>Healthy PA</i>	HealthChoices Expansion
<p>Providers were instructed they could deny services if an individual between age 18 to 64 (Adult) was unable to pay their copay AND their household income was > 100% of the applicable Federal Poverty Level (FPL)</p> <p>Note: Only if it was the provider's standard office practice to deny service for all individuals, not just the Medicaid population</p>	<p>Providers CANNOT deny services if an individual is unable to pay their copay</p>
<p>Copay responsibility was based on FPL</p>	<p>Copay responsibility IS NOT tied to the FPL</p>
<p>The Eligibility Verification System (EVS) was modified to display a copay message if an individual's income was > 100% of the FPL</p>	<p>**EVS NO LONGER displays the copay message</p>

Recipients receiving services under the MA Program are responsible to pay the provider the applicable copayment amounts.

EVS Response Update - March 2015

Eligibility Detail

Status:	Co-insurance
Service Type:	30-Health Benefit Plan Coverage
Coverage Description:	PA Medicaid-No Co-insurance
Benefit Percent:	0
In Plan Network:	Yes
Benefit Related Entry:	Payer Copayment Desk Reference Information Contact Uniform Resource Locator (URL): http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/communication/s_002857.pdf
Message Text:	Patient Financial Responsibility information returned on this response may not apply in all billing situations. For this recipient, the provider may require payment of MA copayments prior to provision of care, services, or items.



****This message no longer displays on EVS**