

Medicaid Pharmacy Program (NYRx) Co-pays

Individuals enrolled in Medicaid will have their pharmacy benefits administered by the Medicaid Pharmacy Program (NYRx).

Some prescriptions require a co-pay at the point of service.

- \$3.00 for non-preferred Brand Name Drugs
- \$1.00 for Generic Drugs, preferred Brand Name Drugs, and Brand Drugs included in the Brand Less than Generic Drugs Program
- \$0.50 for Non-Prescription (over the counter) Products
- \$1.00 for Medical Supplies

Each individual has a **Co-pay Maximum of \$200** in a service year. This includes pharmacy co-pays. The Co-pay year starts April 1 and ends March 31. When a member reaches the quarterly Co-pay Maximum (\$50), they will receive a letter confirming the date on which the Co-pay Maximum was met, exempting the member from a co-pay until the end of the current co-pay quarter.

The following members and service categories will not pay a co-pay:

- Children under 21
- Pregnant members, during pregnancy and for the twelve (12) months after the month in which their pregnancy ends
- Family planning (birth control) services this includes family planning drugs or supplies like birth control pills and condoms
- Residents of an Adult Care Facility licensed by the New York State Department of Health
- Residents of a nursing home
- Residents of an Office of Mental Health (OMH) or Office for People with Developmental Disabilities (OPWDD) certified community residence.
- Enrollees in a Comprehensive Medical Case Management (CMCM) or Services Coordination Program.
- Enrollees in the Home and Community Based Services (HCBS) or Traumatic Brain Injury (TBI) waiver programs.
- Psychotropic and Tuberculosis drugs
- Members with incomes below 100% (100 percent) of the Federal Poverty Level
- Members in Hospice
- American Indians and Alaska Natives who have ever received a service from the Indian Health Service, tribal health programs or under-contract health services referral

<u>Consumers cannot be denied care or services because of their inability to pay a co-payment. A provider has the right to ask the consumer for the co-payment at each visit and bill for any unpaid co-payments.</u>