Vermont Medicaid Co-Pay Clarification

The DVHA would like to clarify that medications covered by Medicaid cannot be denied to a Medicaid beneficiary who does not pay their co-pays. Although members are expected to make co-payments, if the member states they are unable to make a payment, Medicaid providers may not deny services.

Health Care Administrative Rule 6.100 Medicaid Cost Sharing provides the following at 6.100.2:

(b) Copayments are a portion of the Medicaid rate and are deducted from the Medicaid payment for each service that is subject to cost sharing, regardless of whether the provider has collected the payment or waived the cost sharing.
(c) If a beneficiary is unable to pay the copayment, providers shall not deny medical services.
(d) A beneficiary’s inability to pay does not eliminate his or her liability for the copayment amount. Providers may bill a beneficiary for unpaid copayments.

Additionally, the DVHA Pharmacy Provider manual states, “A pharmacy may not refuse to dispense a prescription to a Medicaid beneficiary who does not provide the copayment. However, the beneficiary will still owe the pharmacy any copayment that is not paid.” There is no rule that a pharmacy needs to “waive” a copay. The pharmacy can continue to request payment. [http://dvha.vermont.gov/for-providers/dvha-pharmacy-provider-manual.pdf](http://dvha.vermont.gov/for-providers/dvha-pharmacy-provider-manual.pdf)

Thank you for your continued support of the State of Vermont’s pharmacy programs.

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