

Important Information about MassHealth Copays and Premiums THIS IS NOT A BILL. YOUR MASSHEALTH BENEFITS ARE NOT CHANGING.

Starting July 1, 2021, MassHealth will make changes so that **your copays will not be more than 2% of your monthly household income** each month. Also, during the COVID-19 Public Health Emergency, you will not be charged more than \$250 in total copays annually.

Your MassHealth copays and premiums will not be more than 5% of your monthly household income. A copay is the dollar amount a patient is expected to pay at the time of a service. Drugs you get from a pharmacy are the only MassHealth covered service that may have copays.

The information below explains how MassHealth will calculate this new monthly copay cap.

- A copay cap is the highest dollar amount that you can be charged for copays for covered drugs in a month. This means you will not have to pay copays for covered drugs once you hit that cap for the rest of the month.
- MassHealth will calculate a monthly copay cap for you based on the lowest income in your household and your household size, as applicable. MassHealth will round your copay cap down to the nearest ten-dollar increment.

No copay cap will be more than \$60.

• The following table shows what your final monthly copay cap will be:

If your monthly copay cap is calculated to be:	Your final monthly copay cap will be:
\$0 to \$9.99	No Copays
\$10 to \$19.99	\$10
\$20 to \$29.99	\$20
\$30 to \$39.99	\$30
\$40 to \$49.99	\$40
\$50 to \$59.99	\$50
\$60 or More	\$60

• For example, if your monthly copay cap is \$12.50 in July, you will not be charged more than \$10 of copays in July. If your household income or family size changes in August, your monthly copay cap may change for August.

In addition, starting July 1, 2021, for members currently paying a premium, the amount you pay each month for your health coverage (your premium), will not be more than 3% of your monthly household income. This limit does not apply to CommonHealth members. Please note that most MassHealth members do not have premiums.

How will I know what my monthly copay cap is?

MassHealth will review your account. We will send you a letter when you get a new monthly copay cap or whenever you reach your monthly copay cap. If you have questions about any letter you receive, want to check on your copay cap, or if you have questions about your copays, please call the MassHealth Customer Service Center. See contact information below.

What are the current copay amounts?

Drugs you get at a pharmacy are the only MassHealth covered service that may have a copay. There are no copays for other MassHealth covered services—including visits with your primary care doctor or other providers.

Copays for drugs covered by MassHealth are:

- \$1 for certain generic drugs and over-the-counter drugs mainly used for diabetes, high blood pressure, and high cholesterol; and
- \$3.65 for each prescription and refill for all other generic, brand-name, and over-the-counter drugs that are not \$1 as outlined above or excluded from copays.

There are no copays for the following drugs and products:

- Substance Use Disorder (SUD) treatment, such as Medication-Assisted Therapy (MAT) (for example, Suboxone or Vivitrol),
- Certain preventive drugs such as low-dose aspirin for heart conditions, drugs used to prevent HIV, and drugs used to prepare for a colonoscopy,
- Certain vaccines and their administration,
- Family planning drugs or supplies, such as oral contraceptives (birth control pills),
- Products and drugs to help you stop smoking,
- Other services described in MassHealth regulations (130 CMR 506.015 and 130 CMR 520.037).

If you cannot afford the copay at the time you receive a covered drug, tell your pharmacy. You should never go without covered drugs or treatment that you need because you cannot afford the copay. The pharmacy must still provide you with covered drugs even if you cannot afford to pay the copay. However, the pharmacy can still bill you for the copay.

Please note. If you are receiving a 90-day supply of a prescription drug covered by MassHealth, the total copay amount for that 90-day supply will either be \$1 or \$3.65 depending on the type of drug as outlined above.

If I need to update my information, what should I do?

If you have a change in your income or other circumstances, your monthly copay cap may change. You must report any changes to MassHealth within 10 days of a change or as soon as possible. To report changes, please call the MassHealth Customer Service Center. See contact information below. Members under the age of 65 who have an existing HIX account may report changes by using the change feature and the document upload feature.

Where do I go for more information?

If you have questions, need more information, or for a complete list of copay exclusions, go to www.mass.gov/copayment-information-for-members, or call us at (800) 841-2900, Monday through Friday between 8:00 a.m. and 5:00 p.m. For TTY, call (800) 497-4648 during the same hours.

Sincerely,

MassHealth