

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201579 DECEMBER 1, 2015

IHCP to require copayments for Hoosier Care Connect members

Effective January 1, 2016, the Indiana Health Coverage Programs (IHCP) will require certain Hoosier Care Connect members to make copayments for select services. Providers will need to collect copayments for the services shown in Table 1 at the time services are rendered.

Table 1 – Services requiring copayments from Hoosier Care Connect members effective January 1, 2016

Service	Copayment amount
Emergency room (ER)	\$3 for each nonemergent date of service
Pharmacy	\$3 for each prescription
Transportation	\$1 for each one-way trip

Hoosier Care Connect members will not be subject to the copayments if they are:

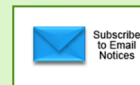
- Under 18 years old
- American Indian or Alaskan Native
- Pregnant
- Receiving services related to pregnancy or family planning

In addition, affected Hoosier Care Connect members who have reached the 5% (of income) maximum out-of-pocket requirement within each quarter will not be required to make a copayment. Providers serving Hoosier Care Connect members must check the member's *Cost Sharing* information in the portal of the managed care entity (MCE) with which the member is enrolled to determine if a copayment should be collected. Based on the member's current status, the system will indicate the copayment dollar amount if a copayment should be collected or will indicate "No Copay" if a copayment does not apply. Pharmacy providers will interact with the MCE's pharmacy benefit manager (PBM) to determine member copayment obligations.

For more information or if you have questions about this bulletin, please call the Hoosier Care Connect Helpline at 1-866-963-7383.

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