## Health Safety Net and Co-Payments: Which Patients Have Co-Pay Requirements?

Program	Co-payment Requirements
MassHealth	<ul> <li>The only co-pays for MassHealth patients are</li> <li>pharmacy co-pays of \$1 on generic and \$3 on brand name</li> </ul>
	• \$3 co-pays on acute inpatient stays
	Even if the patient is in a category of MassHealth that has Health Safety Net (HSN) Secondary, they can't use HSN for their MassHealth co-pays.
	Pharmacies (hospital, health center, or retail pharmacies) will ask MassHealth patients for their co-pay, although they are bound by MassHealth regulation to provide the medications even if the patients can't pay.
MassHealth Premium Assistance	Patients on Premium Assistance with private insurance, where MassHealth pays their private insurance premiums, have HSN Secondary but only for non-covered services, co-insurance, and deductibles. They can't use HSN for their private insurance copays.
Commonwealth	Commonwealth Care patients on Plan Type 1 (under 100% FPL) only have pharmacy co-pays of \$1 and \$3.
	• Commonwealth Care patients on Plan Types 2,3, and 4 (101% - 300% FPL) have co-pays for most visits, including ED visits, pharmacy, office visits to hospitals and health centers, and specialty visits (there are some exceptions, such as prenatal care and family planning visits.)
	Practices should be able to view patients' co-pay requirements on their insurance cards, or in the same systems that are used to find co-pay requirements for privately insured patients.
	Commonwealth Care patients only have HSN Secondary to cover dental services; they can't use HSN for their Commonwealth Care co-pays.
	Pharmacies (hospital, health center, or retail pharmacies) will ask     Commonwealth Care patients for their co-payments, and they are     NOT bound to provide the medications if the patients can't pay.

Health Safety Net	Currently, patients who only have HSN do not have any co-pays.
	• HSN co-pays were supposed to go into effect on 12/1, but have been delayed until <u>March 3<sup>rd</sup>, 2008</u> . More information coming soon.
Private Insurance	Patients with private insurance who are low income may qualify for HSN Secondary.
	HSN Secondary will cover services that are not covered by the private insurance, and any private insurance co-insurance or deductibles.
	• Although Free Care used to cover private insurance co-pays, <u>HSN</u> <u>Secondary WILL NOT cover private insurance co-pays.</u> Practices that see patients with private insurance and HSN should collect the private insurance co-pays. Patients who want to apply for HSN just to cover their private insurance co-pays should not bother completing an application.
Medicare	Patients with Medicare who are low income may qualify for HSN Secondary.
	HSN Secondary will cover services that are not covered by Medicare, and any co-insurance, deductibles, or co-pays.
	• If a Medicare patient also has a private health plan, HSN Secondary will cover services that are not covered by Medicare or the private health plan, and any private health plan co-insurance, deductibles, or co-pays.
	Medicare patients are the only patients who may use HSN     Secondary for their co-pays, whether they are Medicare co-pays or private insurance co-pays.
	Medicare patients who are not enrolled in a Part D plan may use HSN to cover their medications at the hospital and health center pharmacies.