

APPLICABLE CO- PAYMENTS

Children under the age of 21, pregnant women, nursing facility residents and hospice care members are exempt from co-payments. There are no co-payments for family planning or emergency services except as defined below. Services may not be denied to anyone based on the inability to pay these co-payments.

| Service | Additional Exceptions | Co-Pay Amount |
|-----------------------------|--|---|
| Ambulatory Surgical Centers | | A \$3 co-payment to be deducted from the surgical procedure code billed. In the case of multiple surgical procedures, only one \$3 amount will be deducted per date of service. |
| FQHC/RHCs | | A \$2 co-payment on all FQHC and RHC. |
| Outpatient | | A \$3 co-payment is required on all non-emergency outpatient hospital visits. |
| Inpatient | Members who are admitted from an emergency department or following the receipt of urgent care or are transferred from a different hospital, from a skilled nursing facility, or from another health facility are exempted from the inpatient co-payment. | A co-payment of \$12.50 will be imposed on hospital inpatient services. |
| Emergency Department | | A \$6 co-payment will be imposed if the condition is not an emergency medical condition. |
| Oral Maxiofacial Surgery | | A \$2 co-payment will be imposed on all evaluation and management procedure codes (99201-99499) billed by oral surgeons. |
| Prescription Drugs | | Drug Cost / Co-pay Amount Less than \$10.01 / \$.50 \$10.01 - \$25.00 / \$1.00 \$25.01 - \$50.00 / \$2.00 More than \$50.01 / \$3.00 |