

**Distribution:** Dental 04-02                      Pharmacy 04-01  
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**Issued:** December 1, 2004

**Subject:** Change in Co-payment Requirement

**Effective:** January 1, 2005

**Programs Affected:** Medicaid

In response to Section 1620 of the Michigan Department of Community Health (MDCH) FY 05 appropriations bill, the following changes are being implemented for Medicaid fee-for-service beneficiaries effective January 1, 2005.

- A \$3 co-payment will be implemented for Medicaid beneficiaries age 21 and older for each brand name drug dispensed whether a generic is available or not.
- A \$1 co-payment is still required for each generic drug dispensed.

Current co-payment exemptions, as detailed in the Pharmacy Chapter of the Michigan Medicaid Provider Manual, still apply.

### Manual Maintenance

Retain this bulletin until incorporated in the Michigan Medicaid Provider Manual.

### Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231 or e-mail [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll free 1-800-292-2550.

### Approved



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