



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth



MassHealth
 Eligibility Letter 234
 September 26, 2019

TO: MassHealth Staff

FROM: Daniel Tsai, Assistant Secretary for MassHealth

RE: Revisions to Regulations about Copayments for Smoking Cessation Products and Drugs

MassHealth has revised its regulations at 130 CMR 506.015(B) and 130 CMR 520.037(B) to eliminate copayments for smoking cessation products and drugs.

Additionally, MassHealth has updated terminology referring to individuals with intellectual disabilities in 130 CMR 506.015(A)(1)(e) and 130 CMR 520.037(A)(1)(e).

These regulations are effective as of September 25, 2019.

MANUAL UPKEEP

<u>Insert</u>	<u>Remove</u>	<u>Trans. By</u>
506.015	506.015	E.L. 228
520.037	520.037	E.L. 213

MASSHEALTH: FINANCIAL REQUIREMENTS

- (e) members who are inpatients in nursing facilities, chronic-disease or rehabilitation hospitals, or intermediate-care facilities for individuals with intellectual disabilities or who are admitted to a hospital from such a facility or hospital;
- (f) members receiving hospice services;
- (g) persons receiving medical services through the Emergency Aid to the Elderly, Disabled and Children Program pursuant to 130 CMR 450.106: *Emergency Aid to the Elderly, Disabled and Children Program*, if they do not receive MassHealth Standard, MassHealth CarePlus, or MassHealth Family Assistance; and
- (h) members who are American Indians or Alaska Natives who are currently receiving or have ever received an item or service furnished by the Indian Health Service, an Indian tribe, a tribal organization, or an urban Indian organization, or through referral, in accordance with federal law.

(2) Members who have accumulated copayment charges totaling the maximum of \$250 per calendar year do not have to pay further MassHealth copayments on pharmacy services during the calendar year in which the member reached the MassHealth copayment maximum for pharmacy services.

(3) Members who have accumulated copayment charges totaling the maximum of \$36 per calendar year on nonpharmacy services do not have to pay further MassHealth copayments on nonpharmacy services during the calendar year in which the member reached the MassHealth copayment maximum for nonpharmacy services.

(4) Members who have accumulated premium and copayment charges totaling an amount equal to five percent of the member's MAGI income of the MassHealth MAGI household or the MassHealth Disabled Adult household, as applicable, in a given calendar quarter do not have to pay further MassHealth copayments during the quarter in which the member reached the 5% cap.

(5) Members who have other comprehensive medical insurance, including Medicare, do not have to pay MassHealth copayments on nonpharmacy services.

(6) Members who are inpatients in a hospital do not have to pay a separate copayment for pharmacy services provided as part of the hospital stay.

(B) Excluded Services. The following services are excluded from the copayment requirement described in 130 CMR 506.016:

- (1) family planning services and supplies such as oral contraceptives, contraceptive devices, such as diaphragms and condoms, and contraceptive jellies, creams, foams, and suppositories;
- (2) nonpharmacy behavioral-health services;
- (3) smoking cessation products and drugs;
- (4) emergency services; and
- (5) provider-preventable services as defined in 42 CFR 447.26(b).

Trans. by E.L. 234
Rev. 09/25/19

**MASSHEALTH
FINANCIAL ELIGIBILITY**

Chapter 520
Page 520.037

- (e) members who are inpatients in nursing facilities, chronic-disease or rehabilitation hospitals, or intermediate-care facilities for individuals with intellectual disabilities or who are admitted to a hospital from such a facility or hospital;
- (f) members receiving hospice services;
- (g) persons receiving medical services through the Emergency Aid to the Elderly, Disabled and Children Program pursuant to 130 CMR 450.106: *Emergency Aid to the Elderly, Disabled and Children Program*, if they do not receive MassHealth Standard, or MassHealth Family Assistance;
- (h) members who are former foster care individuals and who are eligible for MassHealth Standard until they reach the age of 21 or the age of 26, as specified in 130 CMR 505.002(H): *Eligibility Requirements for Former Foster-Care Individuals*; and
- (i) members who are American Indians or Alaska Natives who are currently receiving or have ever received an item or service furnished by the Indian Health Service, an Indian tribe, a tribal organization or an urban Indian organization, or through referral, in accordance with federal law.

(2) Members who have accumulated copayment charges totaling the maximum of \$250 per calendar year do not have to pay further MassHealth copayments on pharmacy services during the calendar year in which the member reached the MassHealth copayment maximum for pharmacy services.

(3) Members who have accumulated copayment charges totaling the maximum of \$36 per calendar year on nonpharmacy services do not have to pay further MassHealth copayments on nonpharmacy services during the calendar year in which the member reached the MassHealth copayment maximum for nonpharmacy services.

(4) Members who have accumulated premium and copayment charges totaling an amount equal to five percent of the member's countable income as described at 130 CMR 520.000 in a given calendar quarter do not have to pay further MassHealth copayments during the quarter in which the member reached the five percent cap.

(5) Members who have other comprehensive medical insurance, including Medicare, do not have to pay MassHealth copayments on nonpharmacy services.

(6) Members who are inpatients in a hospital do not have to pay a separate copayment for pharmacy services provided as part of the hospital stay.

(B) Excluded Services. The following services are excluded from the copayment requirement described in 130 CMR 520.038:

- (1) family-planning services and supplies such as oral contraceptives, contraceptive devices such as diaphragms and condoms, and contraceptive jellies, creams, foams, and suppositories;
- (2) nonpharmacy behavioral-health services;
- (3) smoking cessation products and drugs;
- (4) emergency services; and
- (5) provider-preventable services as defined in 42 CFR 447.26(b).