

§3173-C. Copayments

1. Authorization required. The department may not require any MaineCare member to make any payment toward the cost of a MaineCare service unless that payment is specifically authorized by this section, except that any copayment or premium expressly approved by the federal Secretary of the Department of Health and Human Services as part of a waiver must be implemented.

[PL 2003, c. 20, Pt. K, §5 (AMD).]

2. Prescription drug services. Total copayments must be capped per member per month at no more than the dollar amount equivalent to 10 times the copayment amount. If a member is prescribed a drug in a quantity specifically intended by the provider or pharmacist, for the recipient's health and welfare, to last less than one month, only one payment for that drug for that month may be required.

[PL 2023, c. 546, §1 (AMD).]

3. Exemptions. No copayment may be imposed with respect to the following services:

A. Family planning services; [PL 1983, c. 240 (NEW).]

B. Services furnished to individuals under 21 years of age; [PL 1983, c. 240 (NEW).]

C. Services furnished to any individual who is an inpatient in a hospital, nursing facility or other institution, if that individual is required, as a condition of receiving services in that institution, to spend for costs of care all but a minimal amount of income required for personal needs; [PL 1991, c. 780, Pt. R, §3 (AMD).]

D. Services furnished to pregnant women, and services furnished during the post-partum phase of maternity care to the extent permitted by federal law; [PL 1983, c. 240 (NEW).]

E. Emergency services, as defined by the department; [PL 1983, c. 240 (NEW).]

F. [PL 2023, c. 546, §2 (RP).]

G. Any other service or services required to be exempt under the provisions of the United States Social Security Act, Title XIX and successors to it; [PL 2023, c. 546, §3 (AMD).]

H. Primary care services; and [PL 2023, c. 546, §4 (NEW).]

I. Community-based behavioral health services. [PL 2023, c. 546, §5 (NEW).]

[PL 2023, c. 546, §§2-5 (AMD).]

4. Persons in state custody. Any copayment imposed on a Medicaid recipient in the custody of the State is to be collected from the state agency having custody of the recipient.

[PL 1983, c. 240 (NEW).]

5. Limitation.

[PL 1993, c. 6, Pt. C, §7 (RP).]

6. Designated copayment.

[PL 1991, c. 780, Pt. R, §4 (RP); PL 1991, c. 780, Pt. R, §10 (AFF).]

7. Copayments. The department shall consider, in any reduction in reimbursement to providers or imposition of copayments, the need to maintain provider participation in the Medicaid program to the extent required by 42 United States Code, Section 1396a(a)(30)(A) or any successor provision of law.

The department shall maintain copayments on the following services that are nominal in amount and that may contain exclusions per service category:

A. Outpatient hospital services; [PL 2023, c. 546, §6 (AMD).]

B. Home health services; [PL 2023, c. 546, §6 (AMD).]

- C. Durable medical equipment services; [PL 2023, c. 546, §6 (AMD).]
- D. Private duty nursing and personal care services; [PL 2023, c. 546, §6 (AMD).]
- E. Ambulance services; [PL 2023, c. 546, §6 (AMD).]
- F. Physical therapy services; [PL 2023, c. 546, §6 (AMD).]
- G. Occupational therapy services; [PL 2023, c. 546, §6 (AMD).]
- H. Speech therapy services; [PL 2023, c. 546, §6 (AMD).]
- I. Podiatry services; [PL 2023, c. 546, §6 (AMD).]
- J. Psychologist services; [PL 2023, c. 546, §6 (AMD).]
- K. Chiropractic services; [PL 2023, c. 546, §6 (AMD).]
- L. Laboratory and x-ray services; [PL 2023, c. 546, §6 (AMD).]
- M. Optical services; [PL 2023, c. 546, §6 (AMD).]
- N. Optometric services; [PL 2023, c. 546, §6 (AMD).]
- O. [PL 2023, c. 546, §6 (RP).]
- P. [PL 2023, c. 546, §6 (RP).]
- Q. Hospital inpatient services; and [PL 2023, c. 546, §6 (AMD).]
- R. [PL 2023, c. 546, §6 (RP).]
- S. [PL 2023, c. 546, §6 (RP).]
- T. Prescription drug services. [PL 2023, c. 546, §6 (NEW).]
[PL 2023, c. 546, §6 (AMD).]

8. Notification. The department shall notify each MaineCare member who is subject to the copayment requirement in subsection 2 of the copayment requirements, any exemptions and limitations prior to coding the member's information for required copayments and shall notify the member again during annual recertification of eligibility. The department shall publish a list of all copayments and amounts by service category on the department's publicly accessible website.
[PL 2023, c. 546, §7 (AMD).]

SECTION HISTORY

PL 1981, c. 703, §A24 (NEW). PL 1983, c. 240 (RPR). PL 1991, c. 528, §§P10,11 (AMD). PL 1991, c. 528, §RRR (AFF). PL 1991, c. 591, §§P10,11 (AMD). PL 1991, c. 622, §M11 (AMD). PL 1991, c. 780, §§R3,4 (AMD). PL 1991, c. 780, §R10 (AFF). PL 1993, c. 6, §§C5-8 (AMD). PL 1993, c. 410, §§I8,9 (AMD). PL 2003, c. 20, §§K5-8 (AMD). PL 2003, c. 451, §H1 (AMD). PL 2003, c. 451, §H3 (AFF). PL 2007, c. 240, Pt. GGG, §1 (AMD). PL 2009, c. 415, Pt. A, §12 (AMD). PL 2011, c. 458, §§1, 2 (AMD). PL 2011, c. 458, §4 (AFF). PL 2017, c. 407, Pt. A, §76 (AMD). RR 2021, c. 2, Pt. B, §159 (COR). PL 2023, c. 405, Pt. A, §61 (AMD). PL 2023, c. 546, §§1-7 (AMD).

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