



**Humana** **CareSource**  
**Network Notification**

**Notice Date:** October 1, 2018  
**To:** Kentucky Medicaid Health Partners  
**From:** Humana – CareSource®  
**Subject:** Copayment Update  
**Effective Date:** October 1, 2018

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Attention providers: Humana – CareSource members will receive the following communication. Please implement the change.

**What's changing?**

As our member we want to ensure you are aware of any changes that may impact your health insurance. Based on guidance received by the Commonwealth of Kentucky on July 31, 2018 regarding cost sharing requirements, Humana – CareSource will no longer require copayments for medical, dental and vision services effective October 1, 2018. Only pharmacy services will require a copayment.

You will not be required to pay more than five percent of your household's income in a quarter. Refer to the copay grid below for the service or item that you are required to pay as your share of the cost for your prescriptions. Exemptions may apply.

As Humana – CareSource implements this change, you may experience a pharmacy visit where you may not be asked to pay a copayment. Don't worry you won't be asked to pay the required copay for prescriptions you received that day or be asked to make a payment in the future for that date of service. The copayment requirement is still in effect and will be required for future pharmacy visits. This will be a temporary error that may occur due to system changes only.

**What is a copayment?**

A copayment is an amount you are required to pay as your share of the cost for a medical service like a doctor's visit or a prescription. Benefits that require a copayment are:

<b>Service or Item</b>	<b>Copayment Amount</b>
Preferred and non-preferred generic drug	\$1.00
Preferred brand name drug that does not have a generic equivalent	\$4.00



Service or Item	Copayment Amount
Non-preferred brand name drug	\$4.00

Exemptions may apply but are not limited to:

Foster children, preventive services, pregnant women, terminally ill and hospice care, emergency services, and some family planning services.

For any questions regarding copayments, please contact us at: **1-855-852-7005** (TTY: 1-800-648-6056).

We are happy to have you as our member.

Sincerely,

Humana – CareSource