Medicare Part D Copayments
Highlights for Stakeholders

MLTC has received inquiries from stakeholders in regards to Medicaid assistance with Medicare Part D copayments. Included below is information regarding Medicare Part D copayments and the Medicaid program.

What is Medicare Part D?

Medicare Part D is the prescription drug benefit administered by the Medicare program. Medicare Part D prescription drugs are the responsibility of the Medicare Part D plan for those dually eligible for Medicare and Medicaid.

How are Medicare Part D copayment levels determined?

Medicare Part D copayment levels are based on criteria established by the Medicare program. According to Medicare Part D guidelines, there should not be a copay for Medicare Part D covered prescriptions drugs for institutionalized individuals or those receiving Home and Community Based waiver services. Institutionalized individuals are defined as clients who are an inpatient in a medical institution or nursing facility for which payment is made by Medicaid throughout a month. Questions regarding your Medicare Part D copayment should be directed to your Medicare Part D plan.

Does Medicaid offer assistance with Medicare Part D copayments?

No. Federal regulations (42 CFR 423.906(b)(2)) do not allow federal Medicaid funds to be used to cover Medicare Part D cost sharing. State regulations (471 NAC 3-004.04A; 471 NAC 3-004.05C; 471 NAC 16-003) do not allow Medicaid to cover Medicare Part D copayments.

Will Heritage Health plans assist with Medicare Part D copayments?

If a Heritage Health plan chooses to cover a Medicare Part D copayment, that cost is considered a value-add benefit that the health plan must cover at its own expense. For 2019, all three Heritage Health plans opted not to cover Medicare Part D copayments as a value-add benefit.

My Heritage Health plan has covered my Medicare Part D copayment in the past. Did my health plan change its coverage?

Prior to 2019, Heritage Health plans covered Medicare Part D copayments to varying degrees. For 2019, all three health plans opted not to cover Medicare Part D copayments as a value-add benefit.

Previous Medicaid Provider Bulletins indicated that Medicaid may cover Medicare Part D copayments. Is that guidance still accurate?

No. Nebraska Medicaid has rescinded Provider Bulletins with outdated Medicare Part D copayment guidance. State regulations do not allow Medicaid to cover Medicare Part D copayments.
I have a Share of Cost obligation as a condition of my Medicaid eligibility. Do Medicare Part D copayments impact my Share of Cost budget?

Medicare Part D copayments are an allowable deduction to the Share of Cost amount owed by a beneficiary. Please contact AccessNebraska for questions on your Share of Cost obligation.

AccessNebraska
http://www.dhhs.ne.gov/ACCESSNebraska

Call: (855) 632-7633
Lincoln: (402) 473-7000
Omaha: (402) 595-1178
TTDD: (402) 471-7256

I have questions about whether I am in the right Medicare Part D plan. Who can I contact for assistance?

Senior Health Insurance Information Program (SHIIP) counselors may be able to assist you with questions about Medicare Part D and selecting the plan that is right for you. For more information about SHIIP services please visit: https://doi.nebraska.gov/consumer/senior-health or call 1-800-234-7119