

То:	Nebraska Medicaid Managed Care Plans
From:	Kevin Bagley, Director
Date:	May 9, 2023
Re:	Suspension of Cost Sharing

This health plan advisory is being issued to inform providers that cost-sharing (including copayments/copays and premiums) will continue to be waived for Nebraska Medicaid members until June 1, 2024. This means that members will not be required to pay out-of-pocket costs for medications or services at this time.

In May 2020, the program received authority from the federal government to temporarily waive cost-sharing to support patients and providers during the pandemic. As part of the return to regular eligibility operations, cost-sharing will be restarted on June 1, 2024. Cost-sharing does not apply to all members, even when it restarts. Members are informed by mail whenever cost-sharing applies to them.

At this time, Nebraska Medicaid and its health plans will continue to pay the Medicaid-allowed amount for services and medications, and will not reduce payments for services that normally are subject to copayments.

Important Note: Share of cost is different than cost-sharing – and share of cost continues to be in effect at this time. Share of cost is like a monthly deductible that some members have to meet on their own before Medicaid coverage pays for any remaining covered services needed during that month. Share of cost is a way that members who have income a bit higher than the regular limits can spend down that income to become eligible. To learn more about share of cost, <u>visit our website</u>.

Members who might pay a share of cost include:

- Nursing facility residents
- Members who receive waiver services
- Members with very high monthly medical costs

Health Plan Advisories, such as this one, are posted on the DHHS website at

<u>http://dhhs.ne.gov/pages/Heritage-Health-Plan-Advisories.aspx</u>. Please subscribe to the page to help you stay up to date about new Health Plan Advisories.