

Transmittal No: 95 LCM-87

Date: August 1, 1995

Division: Health and Long Term

Care

TO: Local District Commissioners

SUBJECT: Pharmacy Co-Payment Attachments

ATTACHMENTS: Dear Medicaid Recipient letter

(English and Spanish) (not on-line)

Medicaid Co-Payment & Exempt Services Chart

(English and Spanish) (not on-line)

Dear Pharmacy Provider letter (not on-line)

CONTACT: Questions should be directed to the Bureau of Ambulatory Policy and Utilization Review at 1-800-343-8859, ext. 3-5983.

On June 30, 1995, 95 LCM-68 was issued. That LCM contained information and instructions regarding the implementation of Pharmacy Co-Payments. The purpose of this Local Commisssioner's Memorandum (LCM) is to provide you with the above mentioned Pharmacy Co-Pay documents, which were not contained in 95 LCM-68.

These letters are being provided to you for informational purposes. Social services departments continue, however, to be responsible for distributing the Medicaid Co-Payment Fact Sheets (contained in 95 LCM-68) to all new Public Assistance and Medical Assistance applicants, until such time as you receive the revised Client Booklets containing the co-payment information.

The Medicaid Co-Payment and Exempt Services Chart (Attachment II) has been revised. This chart should be distributed to new applicants along with the Medicaid Co-Payment Fact Sheet.

Attachment I is a copy of the "Dear Medicaid Recipient Letter" sent to New York City recipients. Although the Co-Payment Fair Hearing Notice in the letter is identified as a New York City notice, the contents of the letter, including the fair hearing information, is identical to the notice sent to upstate recipients.

Richard T. Cody Deputy Commissioner Division of Health and Long Term Care