



Co-pay Information

Co-pays are the same for Traditional and Non-Traditional Medicaid.

The following Medicaid members do not have co-pays:

- American Indians
- Alaska Natives
- Pregnant women
- Members getting hospice care
- Members in the Medicaid Cancer Program
- Members eligible for EPSDT (also called CHEC)

All other members have the following co-pays:

Service	Co-pay
Emergency Room (ER)	\$8 co-pay for non-emergency use of the ER
Inpatient Hospital	\$75 co-pay for each inpatient hospital stay
Pharmacy	\$4 co-pay per prescription, up to \$20 per month
Physician Visits, Podiatrist & Outpatient Hospital Services	\$4 co-pay, up to \$100 per year*
Vision Services	\$4 co-pay for ophthalmologists

*A co-pay year is January through December.

Out-of-Pocket Maximum Co-pays:

Pharmacy - \$20 co-pay per month

Physician, podiatry and outpatient hospital services - \$100 co-pay per year combined

Please note: You might not have a co-pay if you have other insurance, including Medicare.

You will **not** have a co-pay for the following:

- Family planning
- Immunizations (shots)
- Preventative services
- Outpatient mental health/substance use disorder treatment
- Radiology
- Lab services
- Nursing home stays

For more information, please refer to the Medicaid Member Guide. To request a guide, call 1-866-608-9422. Find more information online at medicaid.utah.gov.