

# Co-pay Chart



Co-payments (co-pays) are the same for both Traditional and Non-Traditional Medicaid.

The following Medicaid members do not have co-pays:

- Alaska Natives
- American Indians
- Members eligible for EPSDT
- Members in the Cancer Program
- Members on hospice care
- Pregnant members
- Targeted Adults Medicaid (TAM) members
- Members with Temporary Assistance to Needy Families (TANF)

All other members, over the age of 18, 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, Urgent Care, Podiatrist, & Outpatient Hospital Services	\$4 co-pay, up to \$100 per year, or 5% of income, whichever is less*
Vision Services	\$4 co-pay for an optometrist

## Out-of-Pocket Maximum Co-pays:

- Pharmacy - \$20 co-pay per month
- Physician, urgent care, podiatrist, and outpatient hospital services - \$100 co-pay per year, or up to 5% of income, whichever is less

*\*A co-pay year starts in January and goes through December.*

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

## You will not have a co-pay for:

- Dental services
- Family planning services
- Immunizations (shots)
- Lab and Radiology services
- Outpatient Mental Health/Substance Use Disorder Services
- Preventive services
- Tobacco Cessation services
- Nursing home stays

For more information, please refer to the Medicaid Member Guide. To request a guide, call 1-866-608-9422.

Information is also available online: Utah Medicaid [www.medicaid.utah.gov](http://www.medicaid.utah.gov).