



North Carolina
Department of Health and Human Services
Division of Medical Assistance
Recipient Services EIS

1985 Umstead Drive – 2512 Mail Service Center - Raleigh, N.C. 27699-2512
Courier Number 56-20-06

Michael F. Easley, Governor
Carmen Hooker Buell, Secretary

Nina M. Yeager, Director
(919) 857-4019

August 10, 2001

RE: Changes to Copayment for Brand Name Medicines

Dear County Director of Social Services:

Effective October 1, 2001, Medicaid recipients that are required to pay copayments for prescriptions will be paying \$3.00 for brand name drugs instead of \$1.00. Generic drugs will remain as \$1.00 copayment.

Doctors and pharmacists are being notified of this change with articles in the provider bulletins. Recipients will be notified via an insert in the September 2001 Medicaid ID cards. Attached for your information is a copy of this insert.

If you have any questions, please contact the Medicaid Eligibility Unit, (919) 857-4019.

Nina M. Yeager

Attachment

NMY/dar

**IF YOU CURRENTLY PAY \$1.00 COPAYMENT PER
PRESCRIPTION THIS APPLIES TO YOU!**

Beginning October 1, 2001 there will be a change for Medicaid recipients required to pay a copayment for prescriptions. Medicaid will continue to pay for no more than six prescriptions per month unless you meet certain criteria. The copayment for **brand name drugs will now be \$3.00**. Copayment for **generic drugs will remain at \$1.00**. The change is made under the authority of Chapter 108A-54 of the North Carolina General Statutes. Your doctor and druggist are being told of this change. If you have any questions regarding this change, please call the CARE-LINE, Information and Referral Service, toll free at (800) 662-7030.

September 1, 2001

Division of Medical Assistance