
INFORMATIONAL LETTER NO. 2599-FFS

DATE: June 6, 2024

TO: All Iowa Medicaid Providers

APPLIES TO: Fee-for-Service (FFS)

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

RE: Iowa Medicaid Pharmacy Copayments Reinstatement

EFFECTIVE: July 1, 2024

During the national [public health emergency \(PHE\)](#)¹, Iowa Medicaid suspended prescription copayments for all members ([Informational Letter \(IL\) No. 2123-MC-FFS-CVD](#))².

Effective July 1, 2024, member copayments of \$1.00 for covered prescription and non-prescription drugs will be reinstated. This guidance applies to Fee-for-Service (FFS) members only. Copayments for outpatient prescription drugs do not apply to members covered under a Managed Care (MC) plan.

The following member groups continue to be excluded from copayments:

1. Under the age of 21
2. Receiving Family Planning Services
 - Oral Contraceptives
3. Pregnant Women
4. Income below 50% of the Federal Poverty Level (FPL)
5. Residing in a nursing facility

The treatments for COVID-19, Paxlovid and Lagevrio, will continue to be excluded from the copay reinstatement through their respective dates below and will not require cost sharing for members through those dates.

- Lagevrio is excluded through September 30, 2024
- Paxlovid is excluded through December 31, 2024

¹ <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/current-projects/medicaid-unwind>

² [https://secureapp.dhs.state.ia.us/impa/Information/ViewDocument.aspx?viewdocument=\(8c5a0344-a4ab-4169-9c1a-dfd5647fd96e\)](https://secureapp.dhs.state.ia.us/impa/Information/ViewDocument.aspx?viewdocument=(8c5a0344-a4ab-4169-9c1a-dfd5647fd96e))

If you have questions, please contact Iowa Medicaid Provider Services:

Iowa Medicaid Provider Services:

- Phone: 1-800-338-7909
- Email: imeproviderservices@dhs.state.ia.us