

Copayments for Medicaid Services

As an Alabama Medicaid recipient, you may be asked to pay a small part of the cost for some medical services. This is known as a **copayment**. Alabama Medicaid will cover the rest of the cost. Providers cannot charge any additional amount other than the copayment for Medicaid-covered services.

Copayment amounts by service:

Service	Copayment Amount
Doctor visits	\$1.30 to \$3.90 per visit
Optometric (eye care) services	\$1.30 to \$3.90 per visit
Certified nurse practitioner visits	\$1.30 to \$3.90 per visit
Health care center visits	\$3.90 per visit
Rural health clinic visits	\$3.90 per visit
Inpatient hospital	\$50 per admission
Outpatient hospital	\$3.90 per visit
Prescription drugs	65¢ to \$3.90 per prescription
Medical equipment	\$1.30 to \$3.90 per item
Supplies and appliances	65¢ to \$3.90 per item
Ambulatory surgical centers	\$3.90 per visit

You **do not** have to pay a copayment if you are a Medicaid recipient who is:

- In a nursing home
- 18 years of age or younger
- Receiving pregnancy-related services
- Receiving family planning services
- A Native American Indian with an active user letter from Indian Health Services (IHS)

Services that do not require a copayment:

- Birth control (family planning) services
- Case management services
- Chemotherapy
- Dental services for recipients under 21 years of age
- Doctor fees for surgeries performed in a doctor's office
- Doctor visits in a hospital or nursing home
- Emergency services
- Home and community services for the intellectually disabled, elderly, and physically disabled
- Home health care services
- Mental health and substance use disorder treatment services
- Preventive health education services
- Physical therapy in a hospital outpatient setting
- Radiation treatments
- Renal dialysis treatments