

Medicaid Cost-Share FAQs



1 What is Medicaid cost-sharing, and when does it begin?

Medicaid cost-sharing involves certain Medicaid members contributing a small percentage of the cost to maintain their coverage. This can include copays paid directly at the time of medical services and monthly contributions/premiums paid by invoice. Copays only apply to members in the Healthy Indiana Plan (HIP) and Children's Health Insurance Plan (CHIP). Monthly contributions/premiums apply to HIP, CHIP and MED Works (Medicaid for working individuals who have a disability). Copayments for HIP and CHIP will begin July 1, 2024, and invoices for HIP, CHIP and MED Works monthly payments will be sent in early July for August's benefits.

3 Has cost-sharing always been a part of Medicaid coverage?

Yes, but cost-sharing for Medicaid coverage has been suspended since 2020 due to federal public health emergency orders. It is now returning on July 1, 2024, requiring some members to share a portion of the coverage cost.

2 How will I know if I need to contribute to Medicaid cost-sharing?

If you are a HIP member, you will receive an invoice from your health plan (Anthem, CareSource, MDwise or MHS). If you are or have a child in CHIP or if you receive MED Works coverage and are required to pay premiums, you will receive a bill from the premium vendor in July.

Medicaid members can check their status online in their benefits portal account (FSSABenefits.IN.gov) to determine if they are required to pay monthly contributions/ premiums. Eligibility notices from FSSA and monthly invoices will also be provided by the member's health plan (for HIP members) or the premium vendor (for CHIP and MED Works members) to keep members informed.

4 When will Medicaid members start contributing to the cost-share?

Cost-sharing is set to resume July 1, 2024. HIP and CHIP members should be prepared to pay a small copay at the time of medical services. HIP, CHIP and MED Works members should also watch for an invoice in the mail and pay the amount due by the date given in order to maintain their coverage.





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