

KMAP PHARMACY BULLETIN 18012

Medicare Part D Copayment Assistance Amount Update

Effective with dates of service on and after January 1, 2018, the Medicare Part D copayment assistance amount for full dual-eligible beneficiaries is a maximum of \$8.35 per 30-day supply (maximum of 90 days).

Note: The effective date of the policy is January 1, 2018. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Claims Resolution Logs on the KMAP [Bulletins](#) page document the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.

KMAP[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday