

## **FACT SHEET**

### **Pennsylvania State Plan Amendment (SPA) 07-019**

**Official Program Name: Copayment Exclusions for low-income Residents in Personal Care and Domiciliary Homes**

**Date SPA Submitted: September 28, 2007**

**Date SPA Approved: November 29, 2007**

**Date SPA to be Implemented: October 1, 2007**

**Date SPA to Expire: Not Applicable**

#### **SUMMARY**

On September 28, 2007, the State of Pennsylvania submitted a SPA to impose a zero copayment for all services for persons living in personal care homes and domiciliary homes with income above 100 percent of the Federal poverty level (FPL) but less than 150 percent of the FPL. Pennsylvania submitted this SPA using the authority of Section 6041 of the Deficit Reduction Act of 2005 that gives States the option to impose cost sharing on any group of individuals identified by the State in their State plan.

The State implemented the copayment exclusion for persons with lower income living in personal care and domiciliary homes. The State implemented this co-pay exclusion because these residents must contribute a large portion of their income to room and board expenses, which leaves them with very limited resources to pay copayments for medical care and services.

Prior to implementation of Section 6041 of the DRA of 2005, States were unable to impose or exclude cost sharing for individual groups or subgroups - identified by the State; i.e., prior to the DRA cost sharing was imposed in a uniform manner.