

**Managed Care Operations Memorandum**  
**General Operations**  
**MCOPS Memo # 06/2020-014**

**Date:** June 12, 2020

**Subject:** No Charge to Medical Assistance Beneficiaries for Personal Protective Equipment

**To:** Physical Health HealthChoices Managed Care Organizations (PH-MCOs) – Statewide

**From:** Laurie Rock, Director, Bureau of Managed Care Operations, Office of Medical Assistance Programs

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**Purpose:**

The Office of Medical Assistance Programs (OMAP) is issuing this Operations Memorandum to advise Physical-Health HealthChoices Managed Care Organizations (PH-MCOs) that providers enrolled in Medical Assistance (MA) may not charge MA beneficiaries for Personal Protective Equipment (PPE) used to provide medical or dental services.

**Background:**

On March 6, 2020, Governor Wolf issued an emergency [disaster declaration](#) in response to the presence of the coronavirus (COVID-19) in Pennsylvania. Because COVID-19 is a communicable disease, individuals may be required to wear PPE to protect themselves and others with whom they come in contact.

**Discussion:**

The Department has received requests from providers to charge MA beneficiaries for the PPE needed to provide medical or dental services during the COVID-19 emergency. The Department recognizes this is an unexpected expense for providers; however, the requirements surrounding PPE, and the increased expense, is not an expense that can be passed on to the Medicaid beneficiaries.

The Department has taken the position that PPE is part of the provider's overhead and cost of doing business. As such providers may not charge MA beneficiaries for any PE that is used in connection with medical or dental services.

The Human Services Code, 62 P.S. § 1406(a), and MA regulations at 55 Pa. Code 1101.63, provide that all payments to providers in the MA program, plus any copayment, constitute full payment for covered service. Providers are to accept the MA fee, and any required copayment, as payment in full and may not seek or accept supplementary payment for a covered service. A provider who seeks or accepts supplementary payment of another kind for a covered service or item is required to return the supplementary payment. See Pa. Code 1101.63a

PH-MCOs and their providers may negotiate payment for medically necessary services rendered to eligible MA beneficiaries.

**Next Steps:**

PH-MCOs must ensure its providers are not charging beneficiaries for PPE. Providers who have charged MA beneficiaries for PPE must refund or credit the payment to the beneficiary.

**Obsolete:**

The MCOPS Memo remains in effect until further notice.

**Attachment:**

N/A