**Section 123.320 Co-payments and Cost Sharing**

a) Co-payments or cost sharing may be charged for services provided to a child by a health care provider as described in subsection (b), except for practitioner visits scheduled for well-baby care, well-child care, age appropriate immunizations, preventative dental visits or family planning services.

b) Co-payment and cost sharing requirements are as follows:

1) Practitioner office visit co-payment: $10 per visit.

2) Dental visits co-payment: $10 per visit.

3) Inpatient hospitalization cost sharing: $100 per admission.

4) Hospital or Ambulatory Surgical Treatment Center outpatient encounter, as set forth in 89 Ill. Adm. Code 148.140, cost sharing: 5% of the Department's rate.

5) Hospital Emergency Visit co-payment: $30 per visit.

6) Prescription drugs co-payment: $3 for a 1- to 30-day supply of generic drugs or $7 for a 1- to 30-day supply of brand name drugs.

c) The out-of-pocket co-payment and cost sharing expense children enrolled in All Kids Premium Level 2 will incur shall not exceed $250 per annual enrollment period multiplied by the number of children in the family enrolled in All Kids Premium Level 2.

d) Providers will be responsible for collecting co-payments.

e) Providers may elect not to charge co-payments. If co-payments are charged, the co-payment may not exceed the amounts established in subsection (b).

f) The Department will not require providers to deliver services when co-payments properly charged under the Program are not paid.

(Source: Amended at 44 Ill. Reg. 19697, effective December 11, 2020)