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Who bears the burden of Medicaid drug copayment policies?

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Abstract

This DataWatch examines the impact of Medicaid prescription drug copayment policies in thirty-eight states using survey data from the 1992 Medicare Current Beneficiary Survey. Findings indicate that elderly and disabled Medicaid recipients who reside in states with copay provisions have significantly lower rates of drug use than their counterparts in states without copayments. After controlling for other factors, we find that the primary effect of copayments is to reduce the likelihood that Medicaid recipients fill any prescription during the year. This burden falls disproportionately on recipients in poor health.

Articles citing this article

Paradigm Lost: Provider Concentration And The Failure Of Market Theory

Health Aff (Millwood) June 2014 33:61083-1087

[Abstract](#) [Full Text](#) [PDF](#)**Copayments Did Not Reduce Medicaid Enrollees' Nonemergency Use Of Emergency Departments**

Health Aff (Millwood) September 2010 29:91643-1650

[Abstract](#) [Full Text](#) [PDF](#)**Burden of Common Multiple-Morbidity Constellations on Out-of-Pocket Medical Expenditures Among Older Adults**

The Gerontologist August 2007 47:4423-437

[Abstract](#) [Full Text](#) [PDF](#)**Physicians' Perceived Knowledge of and Responsibility for Managing Patients' Out-of-Pocket Costs for Prescription Drugs**

Ann Pharmacother September 2006 40:91534-1540

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