



TO: All Primary Care Providers

RE: Medicaid Update - Updated Implementation Date: Ambulatory Patient Group Weight Adjustment for Phosphate Binders

IMPACTED PLANS: Medicaid Managed Care, PIC, & HARP

The previously announced update to the Medicaid policy to include phosphate binder costs in the dialysis clinic APG rate has been **delayed until January 1, 2026**. Until that date, dialysis patients may continue to obtain phosphate binders through the pharmacy benefit.

Reminders:

- The APG weight for dialysis (APG 168) reverts to **1.3651**, retroactive to July 1, 2025.
- Claims paid at the higher weight (1.5302) will be **automatically reprocessed**; providers do **not** need to resubmit.

Effective as of January 1, 2026:

- Phosphate binder prescription drugs for dialysis patients will no longer be covered as a pharmacy benefit and must be provided by the dialysis clinic.
- APG weight will increase to include binder costs.
- Dialysis clinics must dispense phosphate binders; they will no longer be covered under the pharmacy benefit.
- Managed Care payments will also include binder costs.

No immediate action is required.

For more details, please refer to the [NYS Medicaid Update](#).

If you have any questions regarding this memo, please contact MetroPlusHealth at: ProviderRelationsOps@metroplus.org.

Thank you,

MetroPlusHealth