

Plan First

Montana's MEDICAID Family Planning Waiver



What is Plan First?

- ▶ Plan First is a Montana Medicaid Family Planning Waiver Program administered by the Department of Public Health and Human Services.
- ▶ It is designed for women who are over income for Montana Medicaid enrollment but have incomes at or below 211% of the federal poverty level.



Who is Eligible?

- ▶ Montana resident;
- ▶ Woman age 19 through 44 years;
- ▶ Able to bear children and not presently pregnant;
- ▶ Not eligible for or enrolled in Montana Medicaid; and
- ▶ Have a family income at or below 211% of the 2014 federal poverty limit



Montana's Family Planning Waiver

- ▶ The 1115 Family Planning Waiver renewal has been approved. The current waiver is in effect through December 31, 2017.

Enrollment

- ▶ Currently Plan First enrollment is staying close to 2,000.
- ▶ Plan First is allowed by the waiver to serve a maximum of 4,000 enrolled women.

Plan First Covered Services:

- ▶ Annual visit,
- ▶ Follow-up visits,
- ▶ Comprehensive history,
- ▶ Physical exams,
- ▶ Lab services,
- ▶ Medical counseling,
- ▶ Contraceptive supplies,
- ▶ Vaccinations against Sexually Transmitted Diseases (STD)s, and
- ▶ STD treatment.

Plan First Covered Services:

- ▶ A complete list of Plan First covered services can be found in the following provider notice
- ▶ Also found at <http://www.dphhs.mt.gov/planfirst/documents/MemberNoticeJune2013.pdf>.
- ▶ A new covered service list and Provider Notice will be published July 1, 2015.

Plan First Covered Services:

- ▶ There are only two categories on the new list.
 - Always Family Planning
 - May be family planning or family planning related service
- ▶ The new covered code list will include the following additions:
 - Hysterectomies
 - The new Gardasil 9 vaccine (90651)
 - The two new HPV lab codes 87623 and 87624

How to Apply for Plan First

- ▶ Online at <http://www.dphhs.mt.gov/planfirst/>
- ▶ Paper applications can be printed from this website or can be sent from the Plan First Eligibility Office.
- ▶ Mail enrollment applications to Plan First, PO Box 202915, Helena, MT 59620-2915.
- ▶ Or you may fax applications to (406) 444-3486.

Billing Issues

- ▶ Plan First covers a limited menu of benefits.
- ▶ Determine if services to be provided are not covered and get a signed private pay agreement.
- ▶ Most services must be billed with either a FP modifier or a V25.XX diagnosis to be paid. Refer to the list of covered services.

Treatment Planning Issues

- ▶ Some Plan First services may have prior authorization requirements. Providers can determine if the Plan First services require prior authorization by checking the related Medicaid Fee schedule.
 - For instance, if a procedure requires prior authorization on the physician or hospital fee schedule, it will require prior authorization for Plan First.

Cost Sharing

- ▶ Family planning services are exempt from cost sharing. Care needs to be taken to code claims using the appropriate cost share indicators. Otherwise, the claims processing system will reduce provider reimbursement by the amount of the cost share.

Billing Issues Continued

- ▶ The FP modifier must be in the first slot.
- ▶ Please provide this billing information to other providers that you work with, such as radiologist or reference labs.
- ▶ Pharmacies also require that the family planning diagnosis (The contraceptive diagnosis from the last family planning visit) must accompany the prescription and the pharmacy must submit the diagnosis into the point of sale software.

Billing Issues Continued

- ▶ When the required modifier or diagnosis is not present claim will post the 458 edit-
- ▶ "when claim has been billed where client has overlapping and or MHSP and/or MHCS.

Billing Issues Continued

- ▶ Reimbursement for providers who perform services for Plan First members is the same as for services with other Medicaid eligibility groups. The one exception is for Rural Health Clinics (RHC) and Federally Qualified Health Centers (FQHC). RHCs and FQHCs must not bill using the UB-04/837I claim form. RHC and FQHC providers who perform services for Plan First members must bill services on a CMS-1500/837P claim form using his or her own provider number.
- ▶ Reimbursement for products received free of charge is not permitted.

Contact Information

- ▶ Mail enrollment applications to Plan First, PO Box 202915, Helena, MT 59620-2915.
- ▶ Plan First email: planfirst@mt.gov.
- ▶ Plan First enrollment-855-854-1399
- ▶ Plan First Program Officer, Liz LeLacheur, (406) 444-6002.
