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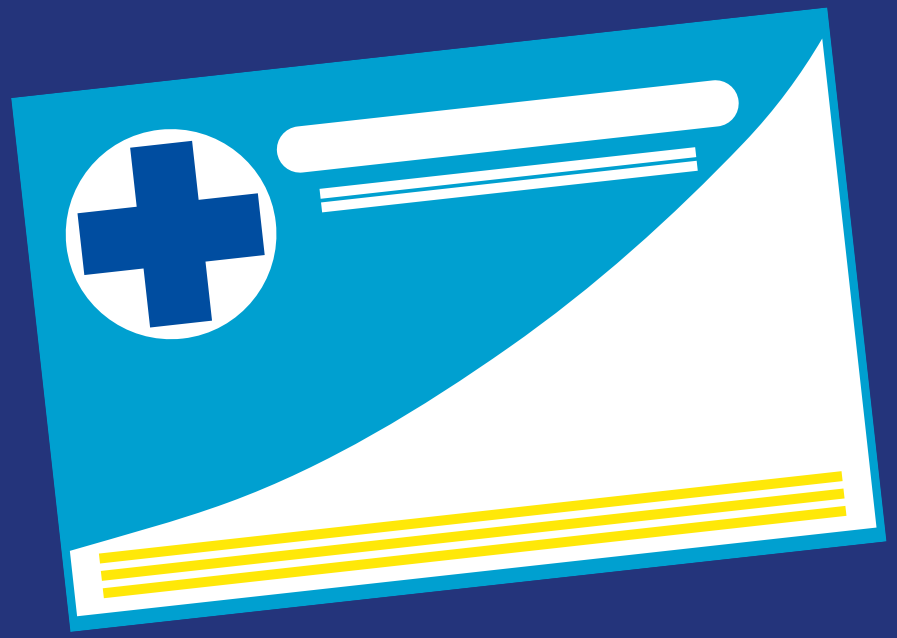
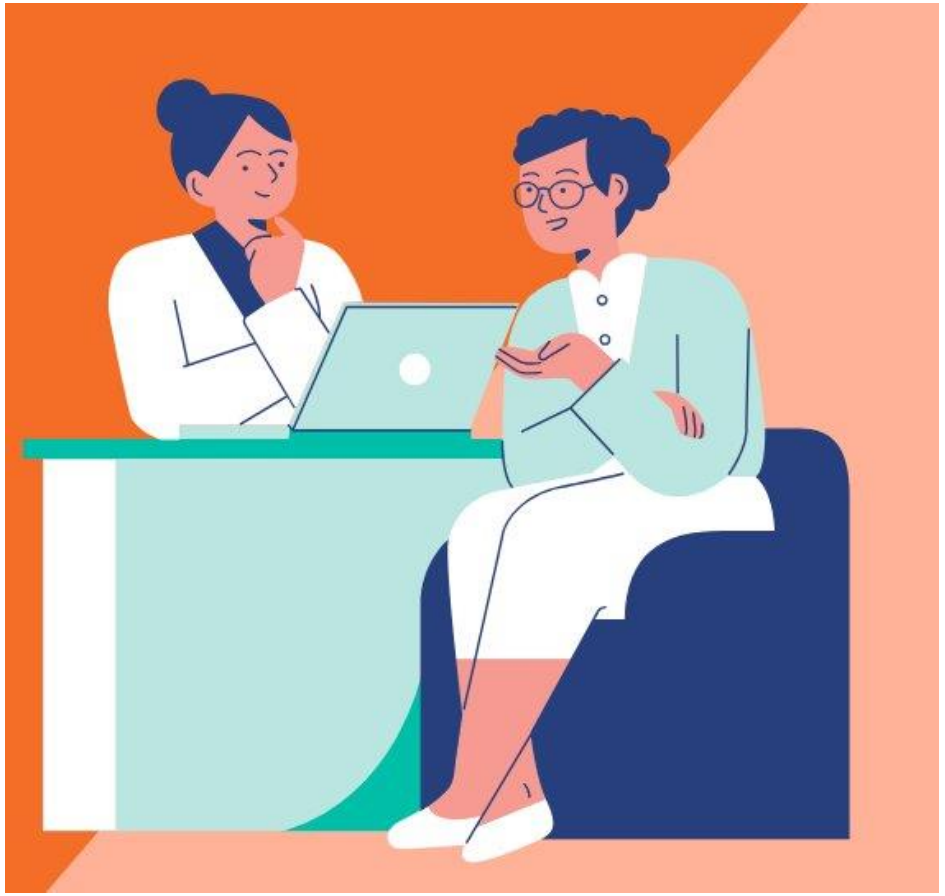


Michigan's Plan First Medicaid Family Planning Program

Introduction and Opportunities

Tell us about you!

1. Please share your name, role and organization in the chat.
2. Share your familiarity with Michigan's Medicaid Family Planning coverage (Plan First) on a scale of 1 - 3:
    - 1 — I'm brand new to Plan First.
    - 2 — I'm familiar with these coverage options but have limited experience enrolling patients/billing.
    - 3 — I feel very familiar with Plan First and enroll patients regularly at my clinic.



About ican!

Our team of policy analysts, attorneys, health care providers, public health professionals, and data analysts provides expert guidance to advance your state's Medicaid Family Planning Program.

This work is a critical piece of **our mission** to transform how sexual and reproductive health care is delivered, accessed, and paid for.

OUR NO-COST SERVICES & OFFERINGS



Policy analysis and behind-the-scenes technical assistance to state agencies and organizations.



Training and support to safety net providers to improve billing and enrollment procedures.



Resources to drive patient awareness of Medicaid Family Planning Program benefits.



Learning Objectives

- Understand Plan First coverage and why it is important for your community.
- Learn ways to seamlessly incorporate Plan First screening and enrollment into your existing workflow.
- Recognize covered services, documentation requirements, and coding best practices needed for successful program billing.

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Plan First — A Safety Net During Medicaid Changes

Plan First can help people losing full Medicaid coverage under H.R. 1 to retain access to essential health services, helping prevent gaps in coverage and support continued access to care.

Unlike broader Healthy Michigan (Medicaid) changes, Plan First will NOT be subject to:

- Work requirements
- Redeterminations every 6 months



*Michigan **automatically enrolls** eligible applicants into Plan First if they don't qualify for full Medicaid.*

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Plan First Overview



Plan First:

- **A limited Medicaid benefit** administered by the Michigan Department of Health and Human Services (MDHHS) that covers family planning services, contraceptive services and supplies, STI testing and treatment, vaccines, and other preconception health services for eligible Michigan residents

- Covers certain primary and preventative care services, including annual exams and all FDA-approved birth control.

- This program can be a **default program for individuals who do not qualify for full Medicaid** or have private insurance that does not cover family planning services.

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Plan First



You may qualify if:

- You're a Michigan resident and a US citizen or have a qualifying immigration status.
- You are not currently enrolled in another Medicaid benefit category.
- Your household income, before taxes, is less ≤195% FPL

You should also know that coverage is open to:

- People of all genders.
- People of all ages.

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Plan First Services

Services covered with no out-of-pocket cost

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Covered services include:

- Annual wellness exams and E/M office visits that includes family planning and related care
- Contraceptive counseling and supplies
- Pregnancy testing and counseling
- STI testing and treatment
- Cervical cancer screening and treatment related to prevention of cervical cancer
- Voluntary sterilization procedures (vasectomy and tubal)
- Vaccines (HPV, Hep B) and other preconception health services
- HIV PrEP and PEP services

Services Covered

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Plan First Enrollment

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How to enroll and the Plan First Application

- Plan First uses **the same application as Healthy Michigan**, available online through the MI Bridges portal.
- Applicants who apply on MI Bridges will be considered for Plan First coverage if they do not qualify for full Healthy Michigan.
- Eligibility is determined based on household size, income, MI residency, and citizenship or a qualifying immigration status.



Talking to Patients About Plan First Coverage

1

Explain how they were enrolled in Plan First.

Explain that the MI Bridges application first considers eligibility for comprehensive Medicaid benefits, including medical, dental, behavioral, and emergency health services.

2

Educate about covered services and how to access care.

Share about comprehensive sexual and reproductive health coverage and that Plan First members can obtain covered family planning services from **any qualified Medicaid-enrolled provider.**

3

Emphasize the importance of staying connected to care.

Explain how Plan First helps patients maintain access to some important, no-cost preventative care services, rather than going without coverage entirely.

How to Maximize Plan First Coverage at Your Clinic

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How can Plan First work for your organization?

Screen all uninsured repro age patients & enroll in Plan First.

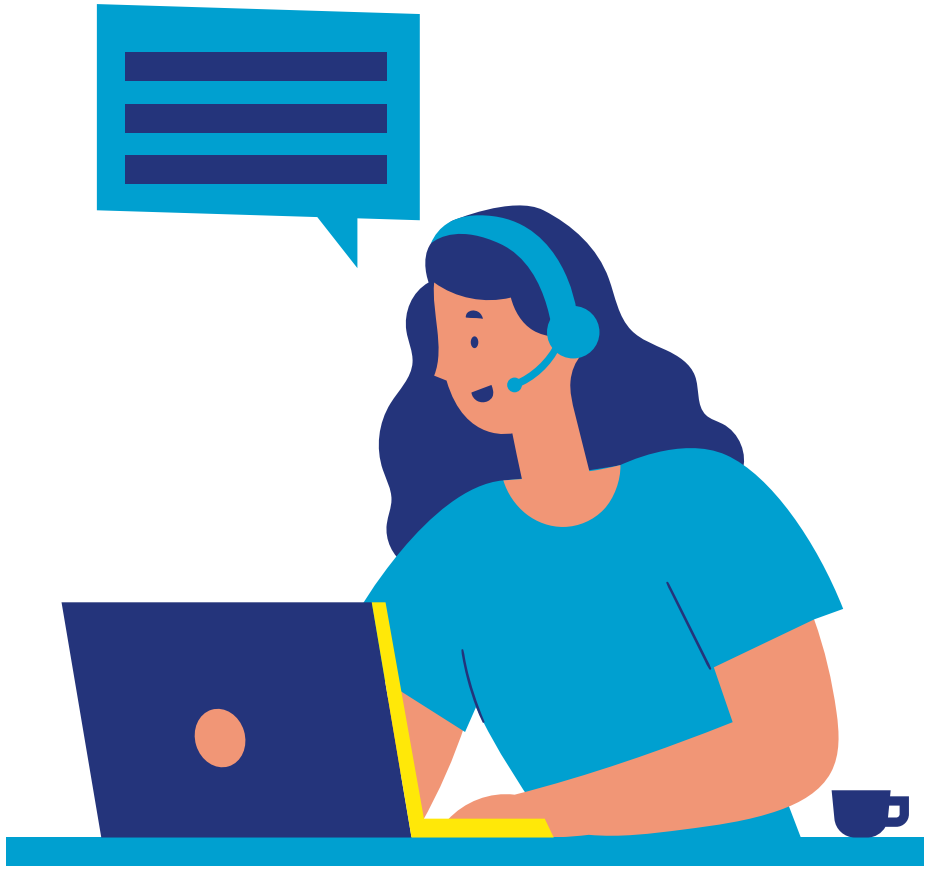
Routinely screen, counsel and document (which includes coding) for contraceptive needs and desires with every repro age patient.

Recoup revenue for previously uninsured patients, capture new patients who may have forgone care.

Best Practice #1: Enroll Eligible Patients Regardless of Visit Type

Key Message: Plan First is not just a birth control program — it offers basic primary and preventative care coverage.

- Screen and enroll patients for Plan First eligibility **regardless** of visit type.
- Use MI Bridges application for those over-income for Healthy Michigan.
- Every visit is an opportunity to connect patients to coverage.

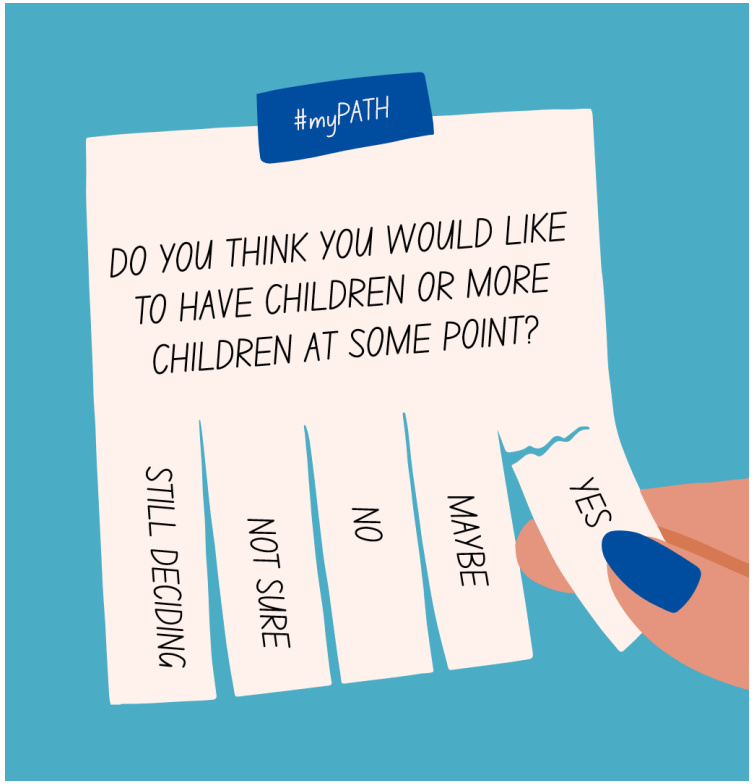


Best Practice #2: Routinely Screen for Contraceptive Needs & Desires

Key Message: Treat contraceptive screening like any other preventative screening.

Routine Screening:

- Supports patients to decide if, when, and under what circumstances to become pregnant or to parent.
- Encourages timely preconception and/or STI care.
- Supports health center UDS reporting on STIs/HIV prevention, cervical cancer, and routine contraceptive screening.
- Helps maximize coverage for patients and health center reimbursement under Plan First.



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Best Practices #3: Document and Code Consistently

Key Message: **Routinely document screening for contraceptive needs and desires or preconception counseling (Z30.XX or Z31.XX) along with other related care in a standardized way with your EMR.**

- **Claims must include family planning and family planning related codes to be considered covered under Plan First.**
- **FQHCs and RHCs will be reimbursed their encounter rate (T1015)**

Medicaid Provider Manual

Covered ICD-10 Codes

CPT/HCPCS Codes

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Best Practice #4: Build Cross-Clinic Ownership of Plan First

Key Message: Training alone is not enough. Successful programs have champions across leadership, clinical, enrollment, and billing teams who prioritize implementation and accountability.

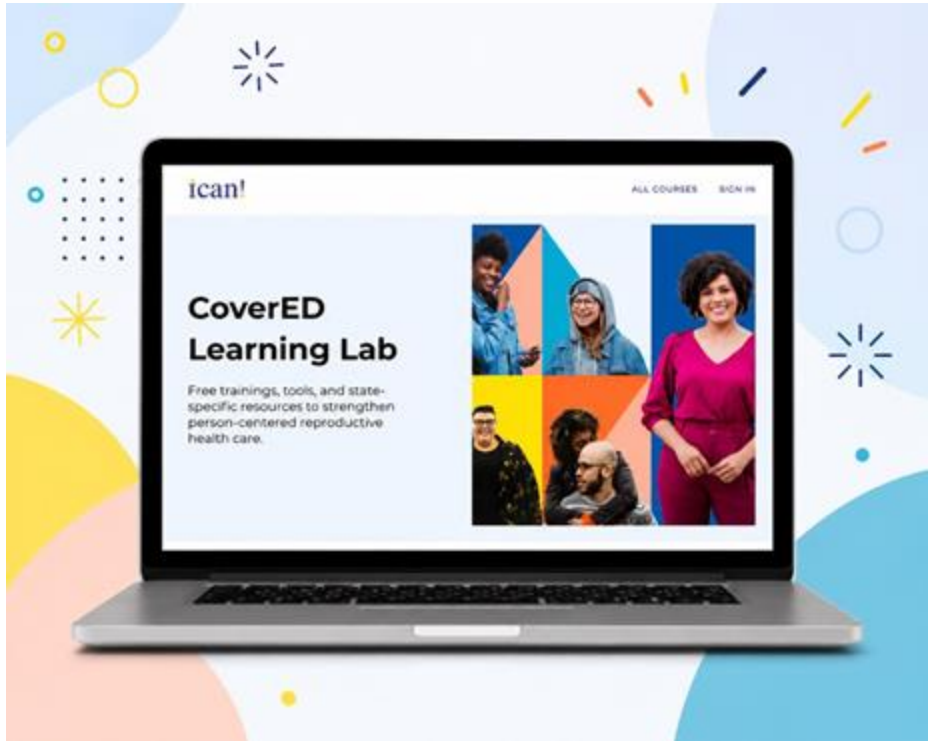
- Designate clinical, enrollment, and billing champions to support implementation and problem-solving.
- Incorporate Plan First screening and enrollment opportunities into routine workflows.
- Track key metrics such as enrollments, contraceptive counseling, and billed claims to maintain visibility and accountability.



Next Steps

ICAN!'s CoverED Learning Lab

CoverED is ICAN!'s online learning library designed to help health center teams implement Medicaid Family Planning Programs and strengthen person-centered reproductive health care.



Visit CoverED to explore practical resources, including:

- Plan First patient education materials to support Plan First outreach and enrollment
- Front desk/navigator job aids for Plan First eligibility and program comparison

https://icancovered.thinkific.com/

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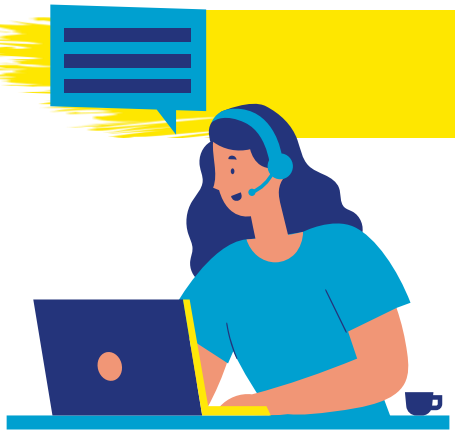
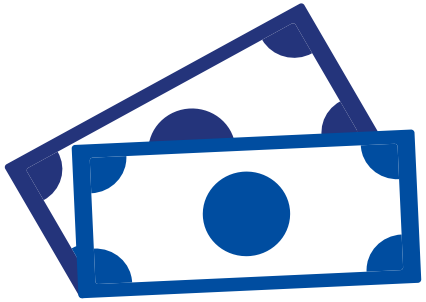
Engage ICAN! To Help Your Center Maximize Plan First

No-Cost Training and Technical Assistance for Staff



Provide front line / call center staff with resources to pre-screen uninsured and underinsured patients with cost concerns for Medicaid program eligibility and connect eligible patients to enrollment support.

Provide operations and revenue cycle staff with training on Plan First billing and coding requirements, including appropriate use of modifiers and claims workflows to help clinics maximize reimbursement opportunities.



Train providers to routinely screen for contraceptive needs and desires and include the appropriate ICD-10 code as a primary diagnosis code (i.e. Z30.XX) to ensure visits are covered by Plan First .



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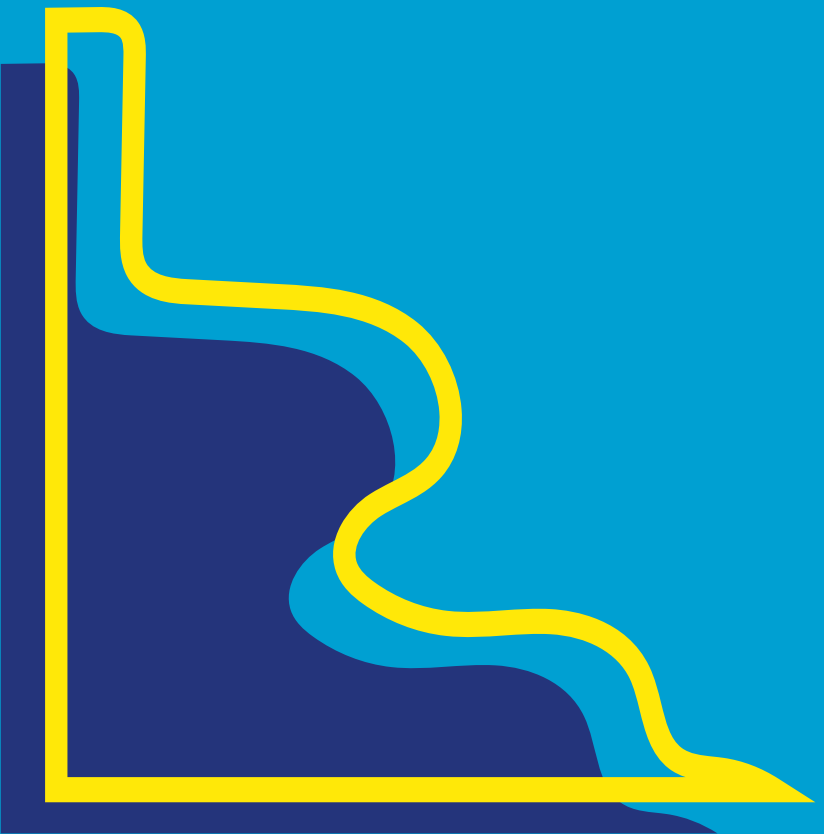
Questions



We Want Your Feedback!

Please Take 2 Minutes to Complete Our Survey:

https://ican4all.org/ican-training-feedback/

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