

July 21, 2016 Plan First Public Forum

Questions/Comments and Issues and Responses

Question: What happens to a Plan First recipient /patient who has a migrated or embedded IUD?

Answer: There is a new covered service that has been added to Plan First and is of great benefit to providers. Medicaid has now added coverage for migrated and embedded IUDS to the Plan First Program.

Question: (Katie Magoulich- MY CARE) Let's say a lot of women have full Medicaid. If a Plan First woman has high blood pressure and doesn't have full Medicaid coverage what happens to her then and who manages that?

Answer: (Meredith Adams-ADPH) The recipient can be referred to an FQHC or seen by a Care Coordinator who will then arrange a referral to a Primary Care M.D. or an FQHC or a rural health provider from an available list.

Answer #2: (Ruth Harris/Plan First Program Manager) In the past safe and effective hypertensive medicines have been given free by the ADPH who were unable to purchase these medications. Also with the assistance of a Care Coordinator free or low cost medications may be provided to a recipient by a drug manufacturer thru indigent medication programs.

Question: (Katie Magoulich- MY CARE) From an RCO perspective how can we be supportive of the Plan First Program? What is the role of the RCO in Plan First? Can collaboration be done with Plan First so there is quicker access to care for these recipient's to meet their needs, these would include women and now men.

Answer: (Sylisa) If a recipient has full Medicaid she will receive Family Planning in the RCO. If she's a Plan First recipient, she won't be carved into the RCOs. What RCO's can do now is to get familiar and make a collaboration effort to educate and establish relationships with Plan First Providers. A list of Providers can be found on the Medicaid website. Initial contact and communication with them is very important.

Question: Now that the gentleman are being included in Plan First will Care Coordination services be extended to them at the level the females receive?

Answer: #1 (Sylisa) Medicaid is currently reviewing a request to add care coordination for males to the Waiver. This will take a waiver amendment approved by CMS.

Answer #2 (Meredith): Care Coordination Services would not be needed at the extent that a female receive services because he is not at risk for pregnancy and does not have the same risk factors.