

Plan First Program (Family Planning Services Only)

Frequently Asked Questions

1. What is the Plan First Program?

The Plan First Program is a separate program administered by NJ FamilyCare. Plan First is a limited benefit program, which provides family planning services only. The program is designed to provide a full range of family planning services to people who do not have access. Family planning services do not provide basic healthcare coverage such as routine care.

2. Does the Plan First Program provide comprehensive health insurance coverage?

No. Enrollment in Plan First will <u>not</u> provide health insurance coverage. New Jersey residents are required to maintain essential health coverage through an individual health insurance mandate. Health insurance mandate information is available at: https://nj.gov/treasury/njhealthinsurancemandate/index.shtml

3. Who is eligible for the Plan First Program?

- Women and Men
- Not currently pregnant or sterile
- US Citizens or Qualified Immigrants
- New Jersey Residents
- Individuals whose income is greater than the NJ FamilyCare Medicaid limit of 138% but below 205% of the federal poverty level. Please see the chart below for the 2024 maximum gross annual and monthly incomes for each household (HH) size.

HH size	Plan First 205% FPL (2024)	
	Annual	Monthly
1	\$30,873	\$2,573
2	\$41,902	\$3,492
3	\$52,931	\$4,411
4	\$63,960	\$5,330
+1	\$11,029	\$ 920

4. What services are covered under the Plan First Program?

Services include, but are not limited to, the following:

- Most birth control methods including condoms, pills, the shot, and IUDs. A
 prescription is required for all methods.
- · Family planning counseling
- Pregnancy tests
- Tubal ligations and Vasectomies
- Family planning lab tests

5. How can I apply for the Plan First Program?

The NJ FamilyCare online application is available at www.njfamilycare.org or by phone at 1-800-701-0710 (TTY: 711).

6. What information will I need to provide when applying for the Plan First Program?

You may need to provide:

- Identification and citizenship information, including social security numbers and immigration documentation
- Employer and income information for everyone in your household, such as paystubs, W-2 forms, wage earnings and/or tax statements
- Policy/identification numbers for current health insurance policies
- Information about any job-related healthcare insurance that may be available to you and members of your family

7. How do I report a change in my circumstances?

All changes in circumstances must be reported within 10 days of the change. Changes may include pregnancy, a change in income or a new address. To report a change, please call the Eligibility Determining Agency (EDA) listed on the confirmation page of your application. Contact information for NJ FamilyCare is 1-800-701-0710 (TTY: 711) and a listing of local County Boards of Social Services can be found at: https://www.nj.gov/humanservices/njsnap/home/cbss.shtml

8. Will I have to renew my eligibility for Plan First every year?

Yes. You will receive a renewal packet at least every 12 months from the Eligibility Determining Agency. This packet must be updated and returned within 30 days or your coverage will be terminated.

9. What doctors or providers participate in the Plan First Program?

Any family planning fee-for-service provider participating in NJ FamilyCare can be seen for the Plan First Program. See Medical Assistance Customer Centers list on Page 5.

10. What if I have healthcare insurance?

Your health insurance plan will be billed first for all services. Plan First is the last payor and will be billed if there is a remaining balance due; or when a benefit is provided that is not covered by your health insurance plan. You may be responsible for co-pays or out-of-pocket expenses required by your health insurance plan.

11. Do I have to pay a co-pay when using Plan First benefits?

If the Plan First Program is your only benefit, you will not have a co-pay. However, if you have healthcare insurance, your plan may require a co-pay.

12. Will there be an out-of-pocket expense for me when using Plan First benefits?

If your only benefit is through the Plan First program, you will not have an out-of-pocket expense. However, if you have health insurance you may have an out-of-pocket expense through your plan.

13. Will I need a prescription for birth control and condoms?

Yes, prescriptions are required for all birth control. This includes condoms. Your prescriptions can be filled at a pharmacy participating in NJ FamilyCare.

14. Can I get birth control and condoms whether I am a female or male?

Yes, family planning products and services are available with a prescription to women and men enrolled in Plan First.

15. Can I get any brand of condoms?

Yes, with a prescription.

16. How many boxes of condoms or birth control pills can I get at one time?

You can discuss with your healthcare provider to determine the amount prescribed.

17. Is Plan B or the 'morning after' pill covered?

Yes, with a prescription.

18. If I'm not eligible, are there other coverage options?

If you are ineligible for the Plan First Program and/or NJ FamilyCare Medicaid-sponsored programs, you may apply for health insurance coverage through GetCoveredNJ, the State Marketplace, at www.getcovered.nj.gov or contact a private health insurance company.

19. I didn't apply for the Plan First Program, how did I get enrolled?

The NJ FamilyCare application includes a family planning question (see the question in the box below). 'Yes' was checked on your household's application and all eligible members in the household were enrolled in the Plan First Program.

If any person on this application is not eligible for NJ FamilyCare would you like them to be evaluated for family planning services (Plan First Program)?

Yes
Check here for all applicants on this application to be evaluated for family planning services.

Plan First is a program for women and men that provides only family planning and related services (such as birth control and some forms of reproductive health care). Family planning services <u>do not provide</u> minimum essential health care coverage (such as routine care).

20. What if I am enrolled in the Plan First Program and want to disenroll?

If you would like to disenroll from the Plan First Program, please call NJ FamilyCare at 1-800-701-0710 or (TTY: 711) to voluntarily withdraw from the program.

21. What is the contact information for NJ FamilyCare?

Website: www.njfamilycare.org Phone: 1-800-701-0710 (TTY: 711)