

Plan First  
WebEx training for Clinics  
Frequently Asked Questions

1. Q. SubQ Depo clarification -- will a PHOTOCOPY of a written RX for SubQ depo serve as adequate documentation for attachment to the claim form?  
**A. CLARIFICATION: HEALTH DEPARTMENTS ARE NOT REQUIRED TO SUBMIT AN ATTACHMENT OF MEDICAL DOCUMENTATION FOR J CODES, INCLUDING J8499. Non-Health Department providers have to submit the additional medical documentation supporting use of billing J8499.**
2. Q. Does the requirement of the NDC/qualifier/metric unit for J codes in blocks 24A & 24D on the CMS-1500 claim form apply for plain Medicaid of Virginia or only Plan First?  
**A. Both.**
3. Q. Is there an age limit for STI testing (for example only testing people under age 26)?  
**A. There is no age limit on codes for STI testing.**
4. Q. Is the HPV vaccine covered?  
**A. Not through Plan First.**
5. Q. Must annual exams be at least one calendar year apart?  
**A. Yes, if you must perform the annual exam prior to one calendar year from previous exam (date of service), attach medical documentation supporting the need to perform exam sooner.**
6. Q. Is there a list of providers who perform bilateral tubal ligations?  
**A. DMAS has a list of Plan First providers, but not specifically who performs sterilizations.**
7. Q. Is the code for Depo Sub-Q J1056?  
Q. Can we use J1056 instead of J8499 for SubQ Depo Provera?  
**A. The procedure code for billing SubQ Depo-Provera is J8499. J1056 is for Medroxyprogesterone acetate/estradiol cypionate, 5mg/25mg (Lunelle monthly contraceptive).**
8. Q. Will contraceptives be covered if they are obtained from care provider instead of OTC?  
Q. How many boxes of condoms will a person be able to get a month?  
**A. A care provider can provide the following OTC contraceptives (limit per day in parenthesis):**
  1. A4261 – Cervical cap (1)
  2. A4268 – Female condom (3)
  3. A4266 – Diaphragm (1)
  4. A4269 – Spermicide (1)

5. **A4267 – Male condom (3)**
  6. **J7303 – Nuvaring (3)**
  7. **J7304 – Contraceptive Patch (1)**
  8. **J8499 - Misc. contraception (SubQ Depo-Provera - 1)**
  9. **S4993 – Birth Control Pills (13)**
- 
9. Q. Will Plan First pay for pregnancy test now when ordered before birth control is dispensed?  
A. **The pregnancy test will be covered under Plan First as long as the code used is on this list of approved codes and the primary diagnosis is a V25 series diagnosis.**
  10. Q. Do we have to use V25 codes in Plan First?  
A. **Yes, otherwise claims will not pay. The V25 category diagnosis has to be in the primary diagnosis field on the claim.**
  11. Q. Is a repeat pap covered through Plan First?  
A. **No.**
  12. Q. Do we still bill with modifier FW?  
A. **No.**
  13. Q. Pap screenings are allowed under Plan First, 1 per 6 months, yet repeat pap is not. If the client opted to wait 6 months to do a repeat, is it covered then?  
A. **Only if it is performed within the scope of a family planning visit so you can use the V25 category diagnosis in the primary diagnosis field on the claim. If it is not done within the context of a family planning visit, it is not covered.**
  14. Q. Why will Plan First cover the Nuvaring and Medicaid won't? We've had several Medicaid clients served in health departments who have taken prescriptions to the local pharmacy for Nuvaring, and the denial is that it must substitute for generic.  
A. **The DMAS State Plan requires that prescriptions for multiple-source drugs must be filled with generic drug products unless the physician or other licensed, certified practitioners certify in their own handwriting "Brand Necessary" for the prescription to be dispensed as written.**
  15. Q. For enrollment, would Plan First accept someone who is a legal resident?  
A. **Citizenship and Alien requirements are complex. Verification of Alien status must be obtained. Eligibility is dependant on when the individual entered the U.S. It is best to follow up with the eligibility worker for specifics.**

**If the applicant is a legal immigrant, they must provide their Alien/INS#, country of birth and the date they entered the U.S. Some adults who are legal immigrants may qualify for Plan First.**