



Department of Medical Assistance Services
 600 East Broad Street, Suite 1300
 Richmond, Virginia 23219
www.dmas.virginia.gov

Plan First

Virginia's Family Planning Services Program For Men and Women

The following information is given as a guideline only. In order for Plan First eligibility to be determined, an application must be filed with the local department of social services for the city or county in which you live.

What is Plan First?	A Medicaid program that pays for family planning services for eligible men and women.
Who is Eligible?	<p>To be eligible, you must:</p> <ul style="list-style-type: none"> • Have countable income less than or equal to 133% of the federal poverty level (resources are not considered); • Be a resident of Virginia; and • Be a citizen or an alien eligible for Plan First coverage. <p>Individuals who have had a sterilization procedure, have medical insurance coverage or are eligible for full-benefit Medicaid are not eligible to participate.</p>
How Do I Enroll?	<ul style="list-style-type: none"> • Plan First application is required. • Applications are available on the web at www.dmas.virginia.gov, local Department of Social Services (DSS) and local health clinics. • Completed applications need to be submitted to the local DSS agency. Mail-in applications are accepted; it is not necessary to have a face-to-face interview. <p>A redetermination of your eligibility must be completed every 12 months after the date of your enrollment to Plan First. If you remain eligible, you may receive an additional 12 months of Plan First coverage.</p> <p>If you have questions or need assistance with completing your Plan First application, contact your local department of social services.</p>
What Services are Covered through Plan First?	<p>Routine and periodic family planning office visits including:</p> <ul style="list-style-type: none"> • Annual family planning exams; • Cervical cancer screening for women; • Sexually transmitted infection (STI) testing; • Laboratory services for family planning and STI testing; • Family planning education and counseling; • Sterilization procedures*; • Most Food and Drug Administration (FDA) approved prescription contraceptives; • Most FDA approved over-the-counter contraceptives; and • Referrals to a primary care provider, who can provide care for free or on a sliding fee scale for services not covered through Plan First. <p><small>*Sterilization Consent Form for sterilization procedures must be signed at least 30 days prior to the surgery being performed.</small></p>
What Does Plan First not Cover?	<ul style="list-style-type: none"> • Performance of, counseling for, or recommendations of abortions; • Infertility treatments; • Performance of a hysterectomy or partial hysterectomy; • Follow up services to a family planning visit; • Repeat PAPs due to abnormal results; • Annual exams if they are not performed within the family planning visit; • Transportation to a family planning service; and • Primary care services.
Primary Care Referrals	To obtain a list of primary care providers in your area who may provide treatment for medical conditions at a reduced rate or on a sliding-fee scale, please call the Virginia Information and Referral line at "2-1-1".