Planning for Healthy Babies Quick Reference Guide





- Patient education and counseling
- Follow up family planning visits.
- Counseling and referrals to
 - Social services
 - Primary health care providers
- Family planning lab tests:
 - Pregnancy tests
 - □ Pap Smear
- Screening, treatment and follow up for STD(s), except HIV/AIDS and Hepatitis B
 - Treatment is available for infections identified during the routine family planning visit
- Tubal Ligation (Sterilization)
- Drugs, supplies, or devices related to family planning services.
- Multi-vitamins with Folic Acid/Folic Acid Supplements
- Hepatitis B and Tetanus-Diphtheria vaccines.

Who is eligible for these services?

Participants in the P4HB program must:

- Be a US citizen or person with qualified proof of citizenship.
- Be a woman between the ages of 18 and 44.
- Be a Georgia resident.
- Not be eligible for any other Medicaid program or managed care program.
- Meet family gross income requirements of no more than 211% of the federal poverty level (FPL).
- Be losing Medicaid pregnancy care coverage and at the conclusion of 60 days postpartum are not otherwise eligible for Medicaid or the Children's Health Insurance Program (CHIP).
- Meet the above requirements and have delivered a VLBW baby (less than 1,500 grams) on or after January 1, 2011. These women qualify for the IPC and Resource Mother Outreach programs.

Where do I refer women for primary care services who are enrolled in the Family Planning component of the waiver?

The Georgia Primary Care maintains a list of providers who are available to provide primary care services to the Family Planning Only P4HB Participants. A list is available to facilitate referrals for primary care for waiver participants. Women enrolled in the Interpregnancy Care component of the P4HB Program will have an in-network provider for all primary care services.

What is the role of the Primary Care Provider (PCP) to women enrolled in the IPC component of the waiver?

The PCP is responsible for supervising, coordinating, and providing all primary care to each assigned IPC Demonstration Participant. In addition, the PCP is responsible for:

- Coordinating and/or initiating referrals for noncovered paid or provided specialty care.
- Maintaining continuity of each IPC P4HB
 Participant's health care and maintaining the IPC
 P4HB Participant's Medical Record, which includes documentation of all services provided by the PCP as well as any specialty services.

Are hospitalizations covered?

Peach State Health Plan has a comprehensive Provider network of hospitals that are available and accessible for Demonstration related service and benefit delivery to all P4HB Participants.

Will the providers receive training on the P4HB program?

Peach State Health Plan will provide ongoing training to all providers of family planning and family planning related services. The training will provide information regarding the requirements of the P4HB Program and will ensure compliance with the Program.



How do I know if a woman is eligible for the program?

Web portal verification is available via the Peach State Health Plan website. Each P4HB Participant will have a Category of Eligibility (COE) that will identify which component of the waiver they are currently enrolled in.

- Participants with COE 181 are eligible for family planning only benefits.
- Participants with COE 180 will be eligible for the Inter- pregnancy Care benefits, which include Resource Mother Outreach.
- Participants with COE 182 or 183 will be eligible for Re- source Mother Outreach. These participants will also have a second COE and membership card. Those with COE 182 will also have Low Income Medicaid benefits, and those with COE 183 will have SSI benefits.

How long are women eligible for the P4HB Program?

Women enrolled in the Family Planning Only component of the P4HB program will be eligible to

receive benefits through the demonstration period which began on January 1, 2011. Eligibility is redetermined on an annual basis. Women enrolled in the IPC and Resource Mother components are eligible for up to 24 months.

How does a member become ineligible for the P4HB Program?

Women become ineligible for the P4HB Program when they:

- Become pregnant.
- Receive a sterilization procedure and complete all necessary follow-up.
- Move out of the state.
- Change income status
- Become unable to become pregnant.
- Aged out

These women will be disenrolled from the P4HB Program and will no longer be eligible to receive services. Women who participate in the IPC and Resource Mother components will be disenrolled after 24 months of participation.

What is a Resource Mother?

The Resource Mother is a paraprofessional employed or contracted by Peach State Health Plan to assist nurse case managers in providing support to the IPC P4HB Participants as well as to mothers in other Medicaid programs who have delivered a VLBW baby. They will provide telephonic and home visits and will assist nurse case managers to achieve the following goals:

- Increased adoption of health behaviors such as healthy eating choices and smoking cessation
- Support compliance with primary care medical appointments, including assisting with arranging nonemergency medical transportation.
- Assist mothers of VLBW babies to obtain regular preventive health visits and appropriate immunizations for their child.
- Support mothers' compliance with medications to treat chronic health conditions.
- Assist with coordination of social services support.
- Assist with linking mothers to community resources such as the Special Supplemental Nutrition Program for Women, Infants, and Children.





For more information about our programs and services contact:

1-866-874-0633 pshpgeorgia.com

How much do I get paid for the services?

Participating providers will be paid their contractual rate by Peach State Health Plan.

How do I bill for P4HB services?

Billing for these services is the same as the current billing procedures for Medicaid and Peach Care for Kids Members.

How are Behavioral Health and Dental Services billed?

Billing for these services is the same as the current billing procedures for Medicaid and Peach Care for Kids members.

How do members apply for the P4HB program?

- Applications can be completed on the new Georgia Gateway Customer Portal at https://gateway.ga.gov.
- Applicants can apply by printing the application from https://dch.georgia.gov/planning-healthy-babies and faxing or mailing in the information.
- They can also obtain applications at their local:
 - Public Health Departments
 - Department of Family and Children Services (DFCS)
 - Federally Qualified Health Center

Completed applications and required documents should be faxed to 912-632-0389 or mailed to:

RSM Group 426 West 12th Street Alma, GA 31510

How do I get more information?

- www.dch.georgia.gov/p4hb
- www.dch.georgia.gov/
- **1**-877-427-3224
- Local Public Health departments
- Department of Family and Children Services (DFCS)