
CHAPTER 21: FAMILY PLANNING WAIVER – TAKE CHARGE

SECTION 21.1: RECIPIENT REQUIREMENTS

RECIPIENT REQUIREMENTS

Family planning waiver services are available to women, who are Louisiana residents, and who meet the following criteria:

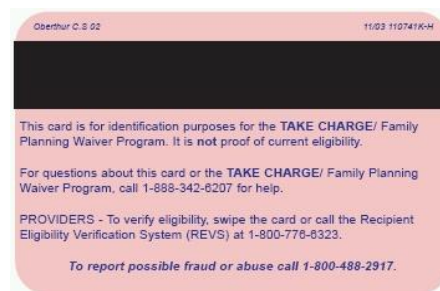
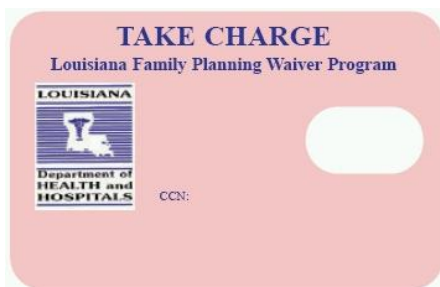
- Are between ages 19 through 44 years
- Have family income at or below 200% of the Federal Poverty Level
- Are not eligible for any other Medicaid program
- Have no major medical insurance coverage that covers family planning services
- Are not sterilized prior to program participation
- Are not incarcerated

Enrollment/Applications

Applications for the TAKE CHARGE program are available in Title X Family Planning Clinics (Public Health Units), local health departments, certified Medicaid application centers, public hospitals/clinics, local Medicaid offices and online (see appendix B for Take Charge website).

Recipient Identification Card

TAKE CHARGE program recipients receive a pink eligibility card similar in appearance to a regular Medicaid card. The recipients' eligibility will be verified when the card is swiped using the Medicaid Eligibility Verification System (MEVS) or by telephone using Recipient Eligibility Verification System (REVS). Below is a sample of the pink eligibility card.



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Eligibility Verification

The provider must verify eligibility each time a service is provided.

MEVS Eligibility Confirmation

The information identified in the confirmation of eligibility in MEVS is contingent on the type of provider making the inquiry. The following chart is an example of the information given during an inquiry by a hospital provider.

Health Benefit Plan Coverage

| Benefit | Coverage Level | Insurance Type | Plan Coverage Description |
|---------------------|----------------|----------------|---|
| Active Coverage | Individual | Medicaid | Family Planning Waiver SVS. |
| Benefit Description | Individual | Medicaid | Recipient Entitled To Limited Benefits. |
| Benefit Description | Individual | Medicaid | Preferred Language: English. |

Service Limitations

| | |
|----------------|---|
| Coverage Level | Individual |
| Service Type | Professional (Physician) Visit - Office |
| Insurance Type | Medicaid |
| Units | 4 Visits Remaining |

REVS Eligibility Confirmation

Providers who verify eligibility via REVS will receive the following information when confirming eligibility:

- The Recipient is eligible for Family Planning Waiver Services only.
- Benefits are limited.
- The recipient has _"X"_ Family Planning visits remaining.