# Maximizing the HFS Family Planning Program to Protect Care and Revenue at Your Health Center

### THE HFS FAMILY PLANNING PROGRAM

The HFS Family Planning Program (HFS FPP) is a Medicaid partial benefit program that allows people ineligible for full Medicaid coverage to access coverage for specified family planning and related services.

Illinoisans of any age and gender with INDIVIDUAL incomes up to \$3,754 a month can apply for immediate, temporary coverage (31–60 days, can apply 2xs/year), known as Family Planning Presumptive Eligibility (FPPE), and U.S. citizens and qualified immigrants can also apply for ongoing 12 months of coverage (FPP).



Once covered, a patient can receive **no-cost** annual wellness exams/physicals, HIV testing and prevention, including PEP & PREP, treatment for reproductive, genital and urinary concerns, birth control, STI testing and treatment, cancer screenings, and certain vaccines! And **your health center can bill HFS directly as fee-for-service, without a cap!** 

### **WHY IT MATTERS**

Operationalizing the HFS Family Planning Program provides a proactive and fiscally prudent strategy to protect preventative healthcare, including reproductive care, and promote your health center's sustainability amidst attacks to the Medicaid funding structure and cuts to Title X.

### HFS FPP can ensure your patients receive family planning care despite cuts to Title X:

- HFS FPP/FPPE is Medicaid coverage and unaffected by cuts to the federal Title X program.
- HFS FPP/FPPE can provide no-cost access to reproductive and sexual healthcare to almost <u>all</u> people who would qualify for care at no or low cost under Title X. Only people who don't reside in IL can't apply for FPP/FPPE. Even folks with private insurance can receive family planning coverage under HFS FPP/FPPE!

### HFS FPP can decrease the uninsured rate among patients and create sustainable revenue for your health center:

- On average, 17% of patients at Illinois Community Health Centers are uninsured. HFS FPP can decrease this rate by providing coverage to patients who make too much for full Medicaid coverage. This reduces patient financial barriers and advances equity for uninsured and underinsured patients of all ages and genders.
- Instead of writing off patient balances or relying on unsteady, limited grant dollars for uninsured patients, health centers can enroll eligible individuals in FPPE and bill Medicaid for covered services without a cap!
- A patient's FPP coverage lasts 12 months and can be renewed, ensuring that your patients have continuity of coverage that your health center can rely on.
- The same administrative tasks for Medicaid compliance apply to FPP/FPPE—no additional reporting or compliance tasks are required!



## HFS FPP must be prioritized because the coverage they provide is critical for this moment when reproductive healthcare is under threat:

- Demand for contraceptive care has skyrocketed post-election. Some reports indicated a 760% increase in IUD appointments and a 460% increase in emergency contraception sales. FPP/FPPE ensures people have coverage for the reproductive healthcare they need at a time when that care is increasingly threatened.
- When more and more people are seeking contraceptive care, it is important that your health center be reimbursed for meeting the moment and providing such care, even when capacity is stretched. Enrolling eligible individuals in FPP/FPPE ensures your health center is paid for this essential work.

#### HFS FPP can provide your patients with coverage if Medicaid Expansion ends:

- Because the income threshold for FPP is higher than the ACA Expansion group, anyone who was enrolled in Expansion can enroll in FPP/FPPE if Expansion ends. Starting in early 2026, HFS will be auto-enrolling people who lose full coverage into FPP, so get a head start.
- Illinois has a trigger law that ends the state's Expansion program if the Expansion FMAP is reduced. HFS FPP can cover the 770,000+ thousand people in Illinois who will immediately lose coverage if the FMAP is reduced.

### HFS FPP safeguards against religious refusals of contraceptive coverage:

• If the Trump administration allows more types of employers to refuse to cover contraceptives on religious grounds, many of your patients may need alternative coverage for birth control. FPP/FPPE can provide that alternative coverage!

### **TAKE ACTION**

#### How to operationalize HFS FPP/FPPE to protect care and sustainable revenue at your health center:



- Focus on increasing enrollment to maximize the number of enrollees with coverage, decrease your patients' uninsured rate, and maximize reimbursement for the services your health center provides.
- Train on covered services and billing to ensure your patients receive a broad scope of care and that your health center is paid for all of the care you provide!
- Screen all patients for contraceptive and sexual health needs
  and desires to desilo, destigmatize, and normalize contraception
  and sexual health as basic healthcare and ensure your patients' visit
  and care is covered under HFS FPP/FPPE.
- Connect with ICAN! for no-cost technical assistance and training on the HFS FPP/FPPE program. ICAN! can assist with training on eligibility and enrollment, routine screening, billing and coding best practices, covered services, and more!