



Family Planning Benefit Program

The Family Planning Benefit Program (FPBP) is a free public health insurance program for New Yorkers who need family planning services, but may not be able to afford them. There are no premiums or co-pays for FPBP services. The FPBP is intended to increase access to **confidential** family planning services and to enable individuals of any age and sex to prevent or reduce the incidence of unintentional pregnancies. There are many Medicaid-enrolled providers that can provide family planning services, including but not limited to hospital-based and free-standing clinics, family planning clinics, county health department clinics, federally qualified health centers, rural health centers, obstetricians, gynecologists, physicians, licensed midwives, nurse practitioners, pharmacies, and laboratories.

You may be eligible for and covered by the FPBP if:

- You are a female or male of any age
- You are a New York State resident
- You are a U.S. citizen, national, Native American, or have satisfactory immigration status
- You meet certain income requirements (currently under 223% of the Federal Poverty Level)
- You are able to father or bear children
- You are not receiving Medicaid **and** you wish to only apply for the Family Planning Benefit Program

Family Planning Services include:

- Most FDA approved birth control methods, devices, and supplies (e.g., birth control pills, injectables, or patches, condoms, diaphragms, IUDs)
- Emergency contraception services and follow-up care
- Male and female sterilization
- Transportation
- Preconception counseling and preventive screening and family planning options **before and after** pregnancy

The following additional services are considered family planning only when provided within the context of a family planning visit *and* when the service provided is directly related to family planning:

- Pregnancy testing and counseling
- Comprehensive health history and physical examination, including breast exam and referrals to primary care providers as indicated (mammograms are not covered)
- Screening and treatment for sexually transmitted infections (STI's)
- Screening for cervical cancer and urinary tract or female-related infections
- Screening and related diagnostic laboratory testing for medical conditions that affect the choice of birth control, e.g. a history of diabetes, high blood pressure, smoking, blood clots, etc.
- HIV counseling and testing
- Counseling services related to pregnancy, informed consent, and STD/HIV risk counseling
- Bone density scan (only for women who plan to use or are currently using Depo-Provera)
- Ultrasound (to assess placement of an intrauterine device)
- **NOTE: Abortions, treatment for infertility, and follow-up care that is not related to family planning are *not covered* by the Family Planning Benefit Program.**

To apply for the FPBP, a Family Planning Program Application (DOH-4282) should be submitted to an approved, Medicaid-enrolled family planning provider. **Be sure to tell the provider who is assisting you if your application needs to be confidential.** You may also be able to be screened at certain providers, and if eligible, receive Presumptive Eligibility for the Family Planning Benefit Program coverage. If you are determined to be presumptively eligible for the FPBP, you will have access to covered services from the first day of the determination. You must still fill out a FPBP application and provide required documentation to be determined eligible for ongoing FPBP after the presumptive period has ended. If you need help in locating a Medicaid enrolled family planning provider in your area or obtaining an application, call toll free 1-800-541-2831.

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