

**FAMILY PLANNING PROGRAM****SECTION:** Medical Services Administration**POLICY AND PROCEDURE MANUAL****SUBJECT:** Supply Visits

**POLICY:** Supply visits must be individualized based on client's need for education, counseling and/or clinical care.

**GUIDELINES:**

1. The need for supply visits is determined by the primary care provider at the initial visit:
  - a. Clients selecting hormonal contraceptives, intrauterine devices (IUD's), cervical caps, vaginal rings or diaphragms for the first time should be scheduled for a revisit as appropriate after initiation of the method to reinforce its proper use, to check for possible side effects, and to provide additional information or clarification.
  - b. A new or established client who chooses to continue a method already in use need not return for early revisits unless a need for reevaluation is determined on the basis of the findings at the initial visit.
2. Other supplies (foams and condoms) may be supplied according to caregiver's discretion and desires of client:
  - a. The client needs to be knowledgeable about use of method.
  - b. The caregiver should evaluate the need for reinforcement of use of method.
3. Agencies may distribute oral contraceptive supplies to client through the use of a pill card. Agencies must have written procedures on how this is managed.
4. Agencies may mail contraceptive supplies to clients. Agencies must have written procedures and guidelines that address confidentiality, how to identify for which clients this is appropriate, and number of cycles, etc. will be mailed at one time.
5. Client may have blood pressure checked at a supply visit:
  - a. Client will not be charged for this.
  - b. Frequent blood pressure requests not medically indicated may be charged a nominal fee.
6. Clients may be charged an education/counseling fee at a supply visit, if so indicated. Education/counseling must be face-to-face with a health care provider and duration must be 15 minutes or greater.

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7. Supply visits must be documented in client's medical record, signed/initialed and dated by caregiver.

## Reference:

1. Program Guidelines for Project Grants for Family Planning Services, January 2001, p. 23, section 8.3, History, Physical Assessment, and Laboratory Testing - Revisits.