

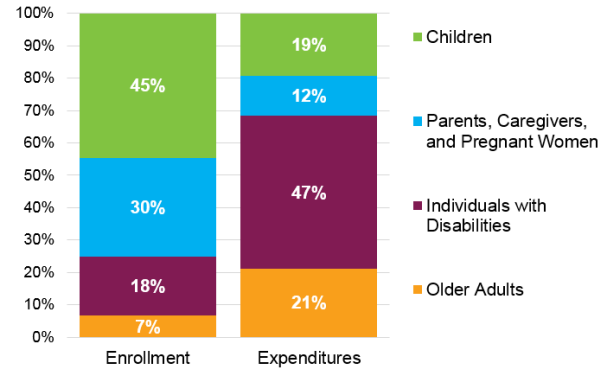
2019 MEDICAID AT A GLANCE

Medicaid Overview

The Virginia Department of Medical Assistance Services (DMAS) plays a critical role in improving the health and well-being of Virginians through access to high-quality health care coverage. This year, Medicaid expanded eligibility for health coverage to close to 400,000 Virginia adults. This year also marks the one-year anniversary of Virginia's nationally-renowned Substance Use Disorder benefit, the Addiction and Recovery Treatment Services program. DMAS also achieved major milestones in the two overarching managed care programs that serve Medicaid beneficiaries, including implementation of Medallion 4.0 and the one-year anniversary of Commonwealth Coordinated Care Plus for complex individuals.

In Fiscal Year 2018, the agency experienced an average monthly enrollment of 1.2 million members. A majority of members are children and parents, but a majority of Medicaid expenditures go to care for older adults and individuals with disabilities.

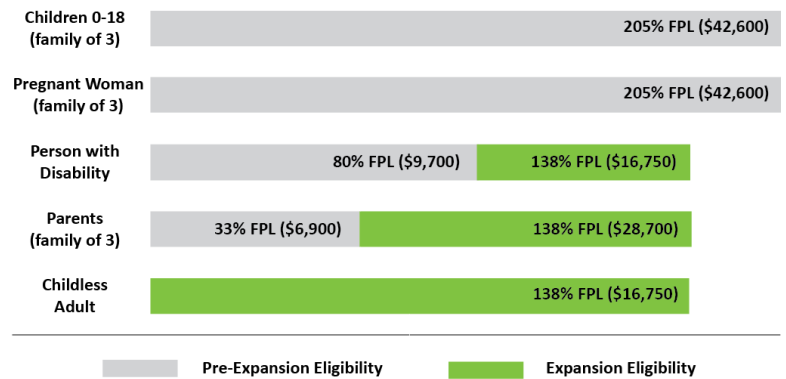
Medicaid Enrollees and Expenditures
FY 2018



Medicaid Expansion

Medicaid expansion is generating cost savings that benefit the overall state budget. The new eligibility rules are also changing the face of the Medicaid program as more parents and single adults gain health coverage. Virginia adults may now be eligible if they are between the ages of 19 and 64, are not receiving or eligible to receive Medicare, and meet income eligibility rules. Effective January 1, 2019, expansion services will be provided through DMAS' existing delivery systems and contracted health plans. More information about the new health coverage for adults is available at coverva.org. When you visit the website, please sign up for regular email and text updates.

Medicaid Expansion Eligibility



The decision to expand Medicaid eligibility qualifies the Commonwealth for a federal funding match of no less than 90 percent for the newly eligible adults. The state's share is covered by a provider assessment on certain Virginia hospitals that stand to benefit from a decline in the number of uninsured patients receiving charitable care.


Also in 2018, agency staff prepared the state's application for a Section 1115 Waiver, which is entitled Creating Opportunities for Medicaid Participants to Achieve Self-Sufficiency, or COMPASS. The agency completed the application within the deadline established by the state's 2018 budget and submitted the document to the Centers for Medicare and Medicaid for review.



Kara's Story

Kara Murdock from Prince William County got up before dawn on November 1, 2018, so she could be the first person in line in her community to apply for the new health coverage. Kara lost her arm to a blood clot in 2014, which prevented her from working as a dog groomer and training to become a paramedic. When she turned 26, she could no longer be covered by her parents' insurance, and she was forced to stop taking some of her medications, including a blood thinner to prevent additional clots. She was excited to learn about the new eligibility rules for Virginia Medicaid. **"It's going to change my life!"**

How to Apply for the New Health Coverage



Call Cover Virginia Call at 1-855-242-8282
(TDD: 1-888-221-1590)

Call the Virginia Department of Social Services Enterprise Call Center at **1-855-635-4370**
(If you also want to apply for other benefits)



Apply online at Common Help
www.commonhelp.virginia.gov

Apply online at the Health Insurance Marketplace
www.healthcare.gov



Mail or drop off a paper application to your local Department of Social Services.







Visit www.dss.virginia.gov/localagency/ to find your local department of social services.

(Mailing may take longer than other methods of applying).

Learn More About Medicaid Expansion

More information about the new health coverage for adults is available at coverva.org. When you visit the website, please sign up for regular email and text updates. On the website, you can find an income eligibility screening tool, brochures, posters and other resources to help people in your community understand the new coverage.



 <h3>ARTS Year One Snapshot</h3> <p>(April 2017-April 2018)</p>	
 <h2>24,600</h2> <p>Medicaid members received lifesaving addiction and recovery treatment</p>	<h2>27%</h2> <p>decline in opioid prescriptions to Medicaid members</p> 
<h2>25%</h2> <p>decrease in emergency department visits by members with opioid use disorder</p>	
<h2>3,000</h2> <p>providers offering outpatient addiction treatment services to Medicaid members.</p> 	<p>Providers delivering outpatient opioid use disorder treatment</p>  <h2>570 → 1,352</h2> <p>Pre-ARTS April 2018</p>

Addiction and Recovery Treatment Services (ARTS)

Since its launch in April 2017, Virginia's Addiction and Recovery Treatment Services (ARTS) program has enabled thousands of men and women to obtain treatment, recruited new providers offering treatment and recovery services, and reduced the number of ER visits and opioid prescriptions in the Medicaid program. Under Medicaid expansion, these lifesaving services will now be available to many more Virginia adults seeking evidence-based treatment that offers a path to recovery.

The ARTS program's model of transforming the Medicaid benefit and services based on national evidence-based practices, paired with new eligibility rules offering more Virginia adults access to coverage, will serve as the foundation for DMAS' work with the Department of Behavioral Health and Developmental Services to redesign Virginia's Medicaid behavioral health delivery system. The vision for Medicaid behavioral health redesign is to keep Virginians well and thriving in their communities, shift our system's need to focus on crisis by investing in prevention and early intervention, and deliver integrated behavioral health services in schools and primary care where people present for care.