


## Module 7: After Enrollment



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### Term of Coverage: Full-Benefit ABD Programs

- ☛ Coverage usually begins on the **1<sup>st</sup> day** of the month the signed application was received, if eligible.
- ☛ In some cases, coverage **may be retroactive up to 3 months** prior to month of application.
- ☛ Enrollees are typically covered for **12 months**, unless their **financial or household circumstances change**.
- ☛ The enrollee must **report changes** in income, family size, or address **within 10 calendar days** to their local DSS.

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### Annual Renewal of Coverage

- ☛ **Annual renewal** of coverage is required
- ☛ DSS **will attempt a renewal without contacting the enrollee** (called an *ex parte* or “administrative” renewal).
- ☛ DSS will check electronic sources to see if current income and resource information is available. If it is, the eligibility worker will determine whether the enrollee still qualifies.
- ☛ If the enrollee **is able to be renewed ex parte**, the state will send a *Notice of Action* with new coverage dates.
- ☛ **If the state cannot verify information** electronically to complete the *ex parte* renewal, the enrollee will receive a **pre-populated renewal form** to review, update, and return via mail to the LDSS.



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## Pre-Populated Renewal Form

- 🔔 **Can be lengthy! Upwards of 20+ pages.**
- 🔔 Enrollee should review the information, and do the following **within 30 days**:
  - **Call the Cover Virginia Call Center** to give requested information and any other updates to complete the renewal, or
  - **Go online** to complete the renewal via CommonHelp, or
  - Provide the requested information **on the paper form**, fix any errors on it, sign it, and return it to the **Local DSS**.
- 🔔 If enrollee fails to return the form and gets a cancellation notice, s/he **still has 90 days** to act upon it **and coverage can be reinstated**.
- 🔔 State had suspended sending these during the pandemic.

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## Medicaid Renewals Have Resumed!

- 🔔 **During the pandemic**, most Medicaid members **did not need to renew** their eligibility annually. The state kept them covered.
- 🔔 **Renewals resumed in March 2023!**
- 🔔 Members may not realize they need to renew. They may need help!
- 🔔 **DMAS needs help to ensure that Medicaid/FAMIS members' contact information is up-to-date**, so that they can receive communication about renewals at the appropriate time.
- 🔔 **If a member has moved or changed phone numbers in the last 3 years, s/he should report this important change:**
  - By contacting his/her Medicaid Managed Care Organization (MCO)
  - Online at [commonhelp.virginia.gov](http://commonhelp.virginia.gov),
  - By calling Cover Virginia, or
  - By calling the local Department of Social Services

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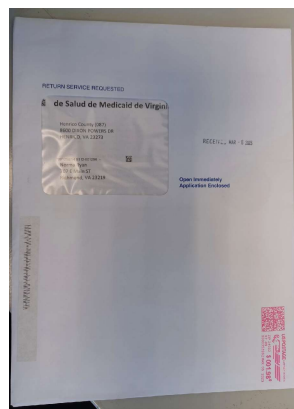
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## The Renewal Envelope



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**First Page of the Renewal Form**

PLEASE DO NOT REMOVE THIS PAGE; IT MUST BE USED IN THE RETURN ENVELOPE TO MAIL THE COMPLETED FORM BACK TO YOUR LOCAL AGENCY.

**It is Time to Renew Your Health Coverage from Virginia Medicaid.**

**Commonwealth of Virginia**  
Department of Social Services  
Questions? Call: 999-999-9999

Amherst County (008)  
PO Box 610  
215 Street 2  
Amherst, VA 24521-0213

Letter Date: February 13, 2023  
Response Due: March 15, 2023  
Case Number: 114051089  
Case Worker Name: G. JARA  
Worker User ID: x00009

Send Mail  
6123 Postal Road  
Lynchburg, VA 24515

Please complete your renewal by: **March 15, 2023**

Completing your renewal online ([www.commonhelp.virginia.gov](http://www.commonhelp.virginia.gov)) or by phone (1-855-242-8282) can be faster and easier! See below for more information.

**If you do not complete your renewal, you will lose your Medicaid health coverage**

Renew your Medicaid by any one of these ways:

- **Online:**
  - Go to [Commonhelp.Virginia.gov](http://Commonhelp.Virginia.gov).
  - Click "Renew My Benefits."
  - To link your case to your account:
- **By Mail or Fax:**
  - Go to [Commonhelp.Virginia.gov](http://Commonhelp.Virginia.gov)
  - Click "Renew My Benefits"
  - To link your case to your account:
- **By Phone:**
  - Call 1-855-242-8282 (TTY: 1-888-225-2596); this call is free.
- **In Person:**
  - Bring the completed form to: Amherst County (008) PO Box 1390 223 STREET 2 AMHERST, VA 24521-1325

CommonHelp accounts using the information below, log in and select "Renew My Benefits"

Case Number: 114051089  
Client ID: 220568409

You can get this letter in another language, in large print, or in another way that's best for you. Call us at 1-855-242-8282 (TTY: 1-888-225-2596).

Case #: 114051089 Page 1 of 22 Correspondence #: 713704194

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**Renewal Calendar**  
Paper renewal forms are sent the 4<sup>th</sup> week of the month

| #  | Overdue Renewals              | Current Renewals | Renewal Mailed Out |
|----|-------------------------------|------------------|--------------------|
| 1  | NA                            | May 2023         | March 2023 ✓       |
| 2  | March – October 2020          | June 2023        | April 2023 ✓       |
| 3  | November 2020 – March 2021    | July 2023        | May 2023           |
| 4  | April – September 2021        | August 2023      | June 2023          |
| 5  | October 2021                  | September 2023   | July 2023          |
| 6  | November 2021                 | October 2023     | August 2023        |
| 7  | December 2021                 | November 2023    | September 2023     |
| 8  | January – February 2022       | December 2023    | October 2023       |
| 9  | March – May 2022              | January 2024     | November 2023      |
| 10 | June – October 2022           | February 2024    | December 2023      |
| 11 | November 2022 – February 2023 | March 2024       | January 2024       |
| 12 | March – April 2023            | April 2024       | February 2024      |

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**How to Know When A Renewal Will Be Mailed?**

- If you are a Medicaid provider and have access to the Provider Portal, see "Case Review Date" under Member Name and ID Number
- Medicaid Members can:
  - See it in CommonHelp if they linked their case, click on "About My Benefits" and the renewal date will be listed
  - If no CommonHelp Account
    - Create one and link case to it and follow steps above
    - Call their local DSS office and ask for the date
    - Call Cover Virginia
    - Call your MCO

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## Medicaid Renewals Have Resumed!

- DMAS has developed two **Unwinding Tool Kits** (Phase I and Phase II & III) for Stakeholders and Providers, to help promote the need for Medicaid members to update their contact information.
- “Plug-and-play” outreach materials available at [coverva.org/en/toolkits-materials](https://coverva.org/en/toolkits-materials).



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## Benefits Delivery

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## Introducing...



- Virginia Medicaid rebranded its health coverage programs as Cardinal Care on January 1, 2023.
- All managed care and fee-for-service members are part of Cardinal Care. The managed care delivery methods [Medallion 4.0 and Commonwealth Coordinated Care Plus (CCC Plus)] will be combined into one program.
- Members can keep their health plans and do not need to take any action to be enrolled in Cardinal Care.
- Cardinal Care offers same programs and services and does not reduce or change any existing coverage.
- Members can start using their new cards (Medicaid ID and/or Managed Care Card) with the new logo now!

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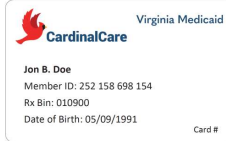
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Benefits Delivery: In the Beginning...

When someone is enrolled in Medicaid, s/he is initially enrolled in "Fee-For-Service" Medicaid.

This means s/he can go to any Medicaid/FAMIS provider and use the blue-and-white Virginia Medicaid ID card (or new Cardinal Care card) for service.



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Managed Care Organizations

These 6 MCOs serve Virginia Medicaid enrollees in all areas of the state:



Note: MCO cards will now have the Cardinal Care logo on them as well.

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CCC Plus MCO: Added Benefits

Table comparing added benefits for Aetna, Anthem, Molina, OptimaHealth, UnitedHealthcare, and Virginia Premier across various categories like Adult vision, Adult hearing, Phone services, Wellness programs, and Other benefits.

Handout/Section 4

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### Choosing a Medicaid MCO

| Where to choose MCO   | Enrollee can change his/her MCO...  |
|---|---|
| <p><b>CCC Plus Helpline</b><br/>Toll Free (844) 374-9159</p> <p>Monday – Friday,<br/>8:30AM – 6PM</p> <p><a href="http://www.cccplusva.com">www.cccplusva.com</a></p> | <ul style="list-style-type: none"> <li>• Within <b>90 days</b> of initial enrollment</li> <li>• With <b>"good cause"</b></li> <li>• <b>New Regional Open Enrollment Dates:</b> <ul style="list-style-type: none"> <li>▪ Tidewater: 2/19 - 4/30</li> <li>▪ Central: 4/19 – 6/30</li> <li>▪ Northern VA: 6/19-8/31</li> <li>▪ Charlottesville/Western Halifax: 8/19 -10/31</li> <li>▪ Southwest and Roanoke/Alleghany: 12/19 – 2/28/24</li> </ul> </li> </ul> <p><i>For listings of localities in each region go to:</i><br/><a href="http://www.cccplusva.com/open-enrollment">www.cccplusva.com/open-enrollment</a></p> |

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## Covered Services



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### Benefits: Full Coverage Groups

- Doctor, hospital and emergency services
- Behavioral health services and addiction and recovery treatment services (ARTS)
- Comprehensive dental benefits (diagnostic, preventive, restorative, endodontic, periodontic, prosthodontic)
- Prescription drugs, labs, and X-rays
- Home health services, durable medical equipment, and supplies
- Rehabilitative services (PT, OT, speech)
- Family planning, maternity, and newborn care
- Non-emergency transportation
- Long-term services and supports (LTSS), nursing home and community-based care
- COVID-19 testing, treatment, and vaccination
- And More!



*New in 7/1/21!*

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## Accessing Dental Benefits: Full Coverage Programs

- ☛ Virginians enrolled in **full-benefit** Medicaid receive dental services via the **Smiles For Children** program, administered by **DentaQuest**
- ☛ Central Call Center: **(888) 912-3456**
  - Monday - Friday from 8am – 6pm
  - Clients may call to:
    - Verify eligibility and benefits
    - Access lists of dental providers
    - Get help **finding a dentist and making an appointment**
    - Report problems
- ☛ Note: Even though its name is **Smiles For Children**, this program administers Medicaid dental benefits for adults too.



**Smiles For Children**  
Improving Dental Care Across Virginia

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## Medicare Savings Plans

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## Terms of Enrollment: Medicare Savings Plans



- ☛ Premium payment begins on the **1<sup>st</sup> day of the month of application**.
  - **Exception: QMB payment begins the month following approval for eligibility.**
- ☛ Retroactive coverage **is** available. Medicare premium can be **backdated**, paid by DMAS each month from a **special fund**.
  - **Exception: QMB does not allow for retroactive coverage.**
- ☛ Member receives notice from **Social Security Administration** that Medicare premium payments are being paid on his/her behalf.
- ☛ Annual renewal is required

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## Cost of Services: Medicare Savings Plans

| Program   | What's Covered   |
|---|--|
| <b>Qualified Medicare Beneficiary (QMB)</b>             | Medicare Part A and B premiums, copays, coinsurance, deductibles |
| <b>Special Low-Income Medicare Beneficiary (SLMB)</b>   | Medicare Part B premiums   |
| <b>Qualified Individual (QI)</b>                        | Medicare Part B premiums   |
| <b>Qualified Disabled and Working Individual (QDWI)</b> | Medicare Part A premiums   |

☛ **QMB:** Should **not** have to pay copays, except for **outpatient drugs** (*can be up to \$4, so long as drug is covered by Medicare Part D*).

☛ **SLMB, QI, and QDWI:** Subject to **Medicare** copays, coinsurance, and deductibles for Medicare-covered services.

☛ All MSP enrollees qualify for "**Extra Help**" (*Low-Income Subsidy, LIS*) which helps with prescription drug costs.

**Section 4**

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