

Possible Correspondence Received by a Medicaid/FAMIS Applicant

Correspondence	Sender	Rationale
“Request for Verification”	Local DSS Office <u>or</u> Cover Virginia Central Processing Unit (CPU)	If the eligibility worker needs any additional information. Any needed items will be listed on the form. A due date for the information will be provided (minimum of 10 calendar days).
“Notice of Action on Benefits”		Tells whether application has been approved or denied for “Medical Assistance.” If denied, the reason for denial is given, and another page in the mailing will provide information on filing an Appeal. A FAMIS/FAMIS MOMS/FAMIS Prenatal enrollee’s notice will include information about how to choose an MCO via the Cover Virginia Call Center.
“Virginia Insurance Marketplace Referral Notice”		If the person is not eligible for full coverage in Medicaid or FAMIS, the application will be referred to the Virginia Insurance Marketplace for evaluation for tax credits and subsidies toward purchasing private insurance. The notice gives the phone number and web address for follow up.
Commonwealth of Virginia Medicaid (Cardinal Care) ID Card	VA Department of Medical Assistance Services (DMAS)	An ID card will be sent for each enrollee in the family.
Letter – “It is time to Choose a Managed Care Organization”		Sent to the Medicaid/FAMIS enrollee re: how to choose a Managed Care Organization (MCO). Gives the phone number and website to choose/change MCO.
Welcome Packet from MCO	Medicaid Managed Care Organization (MCO)	Information for the enrollees regarding how to access services via the family/individual’s selected MCO. <i>Aetna Better Health; Anthem Healthkeepers Plus; Molina Healthcare; Sentara Community Plan; UnitedHealthCare Community Plan*</i> Will include letter, ID Card(s), provider directories, etc. <i>*This selection of MCOs may change later in the year.</i>
<i>Cardinal Care Smiles**</i> Welcome Letter <i>Note: the return address is Milwaukee, WI.</i>	DentaQuest	Enrollees will receive a welcome letter from <i>Cardinal Care Smiles**</i> . It provides the toll-free number; instructions on how to download the member handbook; and instructions about establishing a dental home. <i>**Formerly known as Smiles For Children</i>
Renewal Notice (18+ pages)	Local DSS or State DSS Central Printing	~45 days prior to the renewal month, the family/individual may receive a renewal form to complete and return by the due date provided to continue coverage. The envelope is marked with the words “Open Immediately Application Enclosed” and will come from the Local DSS or state DSS central printing. A prepaid return envelope is provided with the application.
“Advanced Notice of Proposed Action”	Local DSS	If a family/individual fails to renew, or if the renewal is denied, they will receive this document giving date of cancellation and reason for it. Also includes information on the right to appeal.