

**Your client has been
APPROVED...**

What happens next?

85

**Term of Coverage:
MedEx, FAMIS Plus, LIFC,
FFC & Plan First**

- ☛ Coverage begins on the **1st 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.
- ☛ Adult enrollees are typically covered **for 12 months, unless their financial or household circumstances change.**
- ☛ **Children enrolled in FAMIS Plus are entitled to 1 full year of continuous coverage***, unless they turn 19, move out of Virginia, or request their coverage be terminated.
- ☛ The family must **report changes** in income, family size, or address within 10 calendar days to their local DSS.

*If a FAMIS Plus teen becomes pregnant, this should be reported.

Section 3

86

Term of Coverage: FAMIS

- ☛ Coverage goes back to the **1st day of the month** that the **application was received** for most children
 - **A newborn** applying for FAMIS can have coverage back to his/her date of birth, so long as the application is submitted within 3 months of the birth
- ☛ **Covered for 12 months, unless** child turns 19, moves out of Virginia, or family requests that coverage be terminated.
- ☛ If the family has an increase in income or decrease in family members, eligibility may be impacted. The family must report changes in **income, family size, or address** within 10 calendar days to their LDSS or Cover Virginia.

*If a FAMIS teen becomes pregnant, this should be reported. Coverage will be changed to FAMIS MOMS instead.

Section 3, Part III

87

Term of Coverage: MPW, FAMIS MOMS & FAMIS Prenatal

- ☛ For all, coverage begins on the **1st day of the month** the signed Application was received, if eligible.
 - For MPW only, coverage **may be retroactive up to 3 months** prior to application if all eligibility requirements were met during those 3 months.
- ☛ Covered for the **duration of pregnancy and the postpartum period, regardless of changes in income/insurance.**
 - **MPW and FAMIS MOMS – 12 Months postpartum coverage;**
 - **FAMIS Prenatal – 60 days postpartum coverage**
- ☛ Moving **out of state** makes a pregnant/postpartum enrollee lose eligibility.
- ☛ If a pregnant person **becomes incarcerated**, benefits become limited to **inpatient hospitalization only**.

Section 3, Part IV

88

Enrollment of a Newborn

- ☛ A newborn born to a mother enrolled in Medicaid/FAMIS, is “deemed” eligible for FAMIS Plus/FAMIS for **1 year**.
 - DSS or Cover Virginia needs: **child’s name, date of birth, sex** to enroll the child.
- ☛ **For moms enrolled in FAMIS Prenatal:** newborn is enrolled via a “Report a Change” rather than “deemed,” but follow same process (below)
- ☛ It is very important to **report** the baby’s birth:
 - **Call** the Cover Virginia Call Center, or Local DSS
 - **Update** CommonHelp account
 - The hospital or MCO electronically reports the birth via online Medicaid portal (DMAS Form 213)

Section 3, Part IV

89

If Circumstances Change

- ☛ Virginians who are enrolled in either Medicaid/FAMIS or Marketplace coverage **must report changes** in income or household size in a timely fashion (10 calendar days).
- ☛ Changes in income or household size may result in eligibility shifting between programs
 - **Marketplace to Medicaid/FAMIS**
 - **Medicaid/FAMIS to Marketplace**
- ☛ **If an adult is no longer eligible for Medicaid** because their household exceeds the income limit when they report changes, **their case should be automatically forwarded to the Marketplace** to see if they are eligible for coverage.

90

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 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, paper renewal form...**



Section 3

91

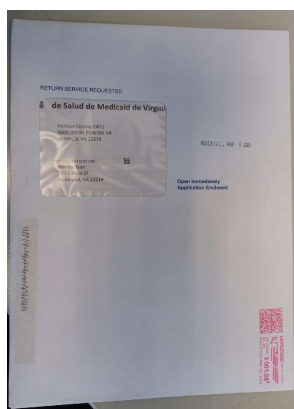
Pre-Populated Renewal Form

- Can be lengthy! Upwards of 20+ pages.
- Enrollee should review the information on the form, and **respond by the date in the form (~ 30 days)** by:
 - Calling the Cover Virginia Call Center to give requested information and any other updates to complete the renewal, or
 - Going online to complete the renewal via CommonHelp, or
 - Providing the requested information, fixing any errors on the form, signing it, and returning 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**.

Section 3

92

The Renewal Envelope



93

First Page of the Renewal Form

~*~ Demonstration Provided by OpenText Extensium 10/15/2023, Version 20.4.0 04:30 (BMCN) ~*~

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

Commonwealth of Virginia
Department of Social Services
Questions? Call: 800-999-9999

Arden County (000)
PO Box 610
215 Street 2
Arden, VA 24212-4212

Letter Date: February 13, 2023
Response Due: March 15, 2023
Case Number: 114801089
Case Worker Name: S. JARA
Worker User ID: xss002

Send Mail
4122 Postal Road
Lynchburg, VA 24505

Please complete
your renewal by:
March 15, 2023

Completing your renewal online (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 in
any one of
these ways:

- Online:
 - Go to CommonHelp.Virginia.gov
 - Click "Renew My Benefits"
 - To link your case to your
- By Phone:
 - Call 1-855-242-8282 / TTY: 1-888-225-5595. This call is free.
- By Mail or Fax:
 - Arden County (000)
 - PO Box 1000
 - 215 Street 2
 - Arden, VA 24212-4212
 - Fax: (804) 561-0045
- In Person:
 - Bring the completed form to:
 - Arden County (000)
 - PO Box 1000
 - 215 Street 2
 - Arden, VA 24212-4212

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

Case Number: 114801089
Client ID: 223538469

You can get this letter in another language, in large print, or in another way that's best for you. Call us at 1-800-999-9999 (TTY: 1-888-225-5595).

Case #: 114801089 Page 1 of 22 Correspondence #: 713704194

94

How to Know When A Renewal Will Be Mailed?

- 👉 Paper renewals are usually mailed the 4th week of the month and are due the following month.
 - For example, a June 2024 renewal would be mailed out in late April and would be due back in late May.
- 👉 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 their MCO

95