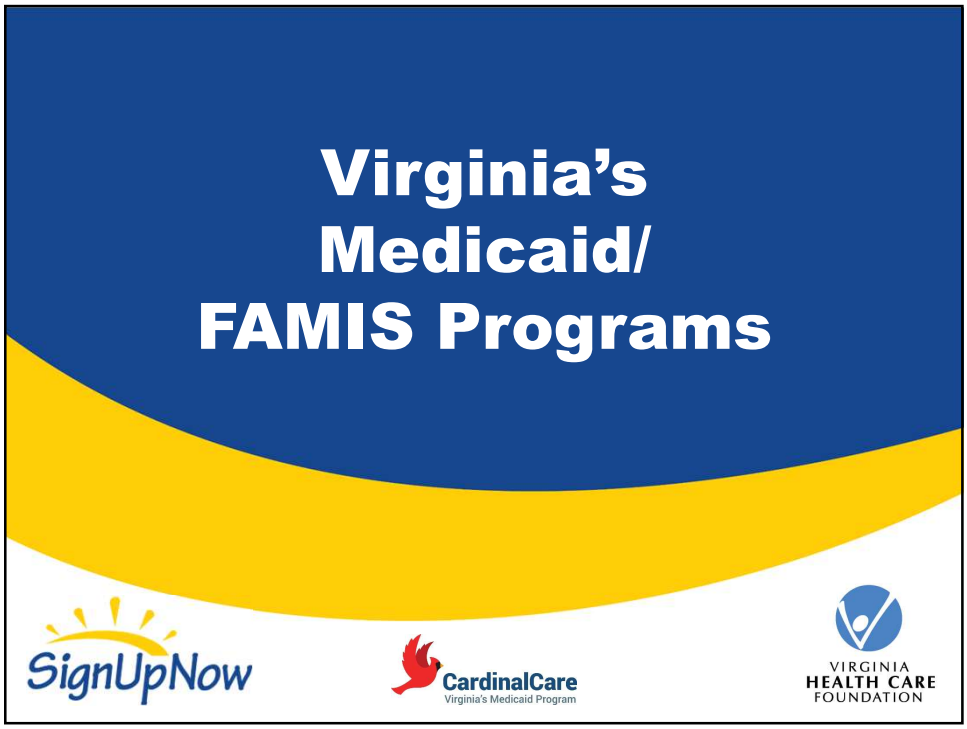
Virginia's Medicaid/ FAMIS Programs



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Thank You to Our Sponsor

- Today's training is sponsored by:

Virginia Department of Medical Assistance Services (*DMAS*)

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What is Cardinal Care?

- Cardinal Care is the name of Virginia's Medicaid/FAMIS program, which is administered by the Department of Medical Assistance Services (DMAS). Cardinal Care plays a critical role in the lives of **1.8 million Virginians** – over one-fifth of the state's population.
- Cardinal Care provides free health coverage to Virginians of all ages – from newborns to older adults.
- To get coverage, Virginians must apply. Applications are reviewed to see if the person meets certain requirements.

CardinalCare
Virginia's Medicaid Program

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Snapshot of the Cardinal Care Programs



Coverage Categories for Pregnant Individuals

- **Medicaid for Pregnant Women** for pregnant individuals with lower incomes
- **FAMIS MOMS** for pregnant individuals with slightly higher incomes
- **FAMIS Prenatal** for pregnant individuals who don't meet the citizenship/ immigration status requirements (are undocumented/DACA recipients)



Coverage Categories for Children under Age 19

- **Children's Medicaid (known as FAMIS Plus)** for children living in families with lower incomes
- **FAMIS** for children living in families with slightly higher incomes



Coverage Categories for Adults Who Aren't Pregnant

- **Medicaid Expansion** for adults ages 19–64 who don't have Medicare
- **Low Income Families with Children (LIFC)** for certain parents/caretakers with very low incomes
- **Medicaid for Former Foster Care Youth** for adults up to age 26 who aged out of foster care (regardless of their income)
- **Plan First** – limited-benefit family planning program for adults

Older Adults and People with Disabilities: *There are various special Medicaid programs for older adults and people with disabilities, including people who are receiving nursing home care. We have a separate SignUpNow training available about these programs!*

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What factors determine if someone is eligible for Cardinal Care?

To be eligible for Cardinal Care, **a person must meet all financial and non-financial requirements**, which generally include:

- ✓ Living in Virginia
- ✓ Meeting citizenship/immigration status requirements
- ✓ Having their household composition/size and income evaluated to ensure their family income is below the set limits*
- ✓ For certain categories of coverage, a person cannot have other types of health insurance already

- To ensure the person is eligible in **the correct category of coverage,** the state also looks at factors such as age (18-year-olds considered "kids"!), pregnancy status, disability status, if the person is living in an institution, and more

**For adults over age 65 and certain people with disabilities, the state also looks at assets/resources*

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Eligibility: Who makes the call?

"Screening" for Eligibility and Helping People Apply

- Seeing if someone *might* qualify and helping them through the process
- Anyone can do this

"Determining" Eligibility

- Deciding if someone *does* qualify
- **ONLY** done by:
  - Local Department of Social Services (LDSS)
  - Cover Virginia Central Processing Unit (CPU)
  - Virginia Insurance Marketplace

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Introduction: Federal Changes Impacting Coverage

A **new federal law** passed in July 2025 **that requires states to make major changes** to health and social services programs nationwide

Two of the biggest **programs impacted** by this new law are **Medicaid and the Supplemental Nutrition Assistance Program (SNAP**, or food stamps)

- **During today's training, we will cover changes to Medicaid**

The changes are required to be a **phased in from 2025 to 2029**, but the **biggest changes impacting Medicaid will begin between October 2026 and January 2027, impacting 550,000 people**

The state is working closely with community partners to help Virginia families **navigate these new changes and stay covered and connected to care.**

Our collective goal is to help eligible Virginians keep their health coverage. Thank you for taking the time today to learn more about how you can help!

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At a Glance: New Federal Medicaid Requirements

New Federal Requirement	Summary	Who Is Affected?	Implementation Date	When Members Must Take Action
Restricting eligibility for lawfully present immigrants	Ending Medicaid eligibility for certain lawfully present immigrant adults, such as refugees	**Non-pregnant adults** in certain immigration statuses	**October 1, 2026**	By October 1, 2026
Reducing Medicaid coverage of past bills (retroactive coverage)	Reduces coverage option for Medicaid payment of past medical bills to 1-2 months	**Everyone applying for Medicaid** (FAMIS doesn't have retroactive coverage now)	**January 1, 2027**	N/A

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At a Glance: New Federal Medicaid Requirements

New Federal Requirement	Summary	Who Is Affected?	Implementation Date	When Members Must Take Action
More frequent renewals in Medicaid	Increases renewals to twice/year (every six months) for Medicaid Expansion adults	**Medicaid Expansion adults (ages 19-64)**	**Phased in starting January 1, 2027**	At their first renewal date in 2027, then every six months (or at application for new applicants)
Work requirements	Requires all states to establish work/ community engagement reporting requirements for Medicaid Expansion adults	**Medicaid Expansion adults (ages 19-64)**	**Phased in starting January 1, 2027**	At their first renewal date in 2027 (or at application for new applicants)

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