CardinalCare
Virginia's Medicaid Program

VIRGINIA'S MEDICAID PROGRAM
DMAS

<DATE>
Case Numbers: <Case#)
Client ID: <Client ID>

<Member Name>
<Address 1>
<Address 2>

Important Information About Changes to Medicaid Eligibility

You are getting this letter because you are enrolled in Medicaid Expansion, and federal changes made by *H.R. 1* (also called the "One Big Beautiful Bill") may affect your coverage.

Starting in January 2027, Medicaid Expansion members will be subject to a new **Medicaid Work Requirement** and have their eligibility for coverage reviewed every 6 months. Medicaid Expansion covers adults aged 19 to 64 who are not eligible for Medicare and have income below 138% of the federal poverty level. All states are federally required to make these changes.

The new Medicaid Work Requirement DOES NOT apply to other types of Medicaid, such as coverage for children, pregnant and postpartum individuals, or adults with a disability or who are over age 64.

The work requirement will be used to determine your eligibility **beginning with your first renewal in 2027.** The state will first determine if you meet an exclusion and are a "specified excluded individual." If you are, you will not need to meet the new requirement. If you do not meet an exclusion and are an "applicable individual," you will be subject to the requirement. Applicable individuals will need to engage in qualifying activities or meet an exception to remain eligible for Medicaid Expansion. Exclusion, exception, and qualifying activity details are on the next page.

If you are no longer eligible for Medicaid Expansion, the state will check your eligibility for other types of Medicaid before ending your coverage. You will be sent a notice each time your Medicaid coverage is renewed, changed, or ended, and you have the right to appeal if you disagree with the decision. If you lose Medicaid because you do not meet the work requirement, you will also be ineligible for financial assistance to purchase private health insurance from Virginia's Insurance Marketplace.

Changes to your contact information and changes that may impact your Medicaid eligibility, including meeting or no longer meeting work requirement exclusions and exceptions, should be reported within 10 days of the change. Changes can be reported by calling the Cover Virginia Call Center, 855-242-8282 (TDD: 1-888-221-1590), at commonhelp.virginia.gov, or at your local Department of Social Services.

You can get information about your current Medicaid coverage and your next renewal date by calling the Cover Virginia Call Center, chatting with a live customer service agent at www.coverva.dmas.virginia.gov, or by contacting your local Department of Social Services.

Learn More and Stay Connected!
Scan or visit dmas.virginia.gov/news-updates/new-federal-requirements/ to learn more about these changes, find resources, and stay up-to-date

Exclusions

A person must meet one of the exclusions listed below in the month that they apply or in the month that their renewal is processed to be a "specified-excluded individual."

- Being a former foster care child who is under age 26
- Being an American Indian or Alaskan Native
- Being a veteran with a total (100%) disability rating
- Being pregnant or having been pregnant within the past 12 months
- Being a parent, caretaker relative, guardian, or family caregiver of a dependent child under 14, or an individual with a disability of any age
- Complying with Supplemental Nutrition Assistance Program (SNAP) or Temporary Assistance for Needy Families (TANF) work requirements
- Participating in a substance use disorder (SUD) treatment program
- Being incarcerated or having been incarcerated in the past 3 months
- Having a physical, intellectual, or developmental disability, blindness, a disabling mental disorder, a serious or complex medical condition, or a substance use disorder that significantly impacts the person's ability to work, attend school or training, or volunteer

Exceptions & Qualifying Activities

At application, an 'applicable individual' must meet an exception or be compliant in the month before they apply. At renewal, a person must meet an exception or be compliant in at least one month since their most recent enrollment or renewal. when their coverage is being renewed.

Exceptions

- Transitioning into Medicaid Expansion from certain other types of Medicaid coverage, such as children's coverage, coverage for pregnant individuals, or coverage for SSI recipients.
- Receiving in-patient hospital care, institutional care, or care of a similar level.
- Needing to travel outside of community to get necessary medical care for self or a dependent because care is not available in your community.
- Living in a county or city that has a high unemployment rate or where a federal emergency or disaster has been declared.

Compliance Activities

1. Completing at least 80 hours of one or more of the following:

   Work: Includes paid work, self-employment, contract work, and in-kind (work done for goods and services) and unpaid (ex: internships and trial-work periods) work.*

   Work Program: Employment and training programs, such as those offered by Virginia Works and the U.S. Department of Veteran's Affairs.

   Community Service: Unpaid, non-partisan work for the direct benefit of the community done with a public or nonprofit organization that supervises and tracks the work.

   Education: High school, high school completion or equivalency program, higher education (ex: associate degree or college), or technical/career education program.

2. Being enrolled in an education program at least half time, as defined by the educational institution.
3. Having a household income of at least $580 per month.*

*Hours worked and income can be averaged over a 6-month period for seasonal workers.