



# Understanding Medicaid Managed Care In Virginia

Virginia's five (5) Medicaid managed care organizations (MCOs) serve nearly 2 million people.

Medicaid MCOs partner with the Department of Medical Assistance Services (DMAS) and assume the risk associated with managing health care costs for the Commonwealth's Medicaid population.



**Cardinal Care**

Virginia's Medicaid Program

- This partnership, called Cardinal Care, helps make Medicaid program costs more predictable and sustainable.
- Medicaid MCOs work with the state to ensure high quality provider networks offer the best care to Medicaid & FAMIS members.
- Medicaid MCOs work to improve health care outcomes by increasing primary care utilization, reducing hospital readmissions, providing care coordination, and supporting access to prenatal and perinatal care.

## MEDICAID MANAGED CARE BASICS

The majority of Medicaid enrollees receive their benefits through Medicaid managed care.

Medicaid covers many groups of individuals:

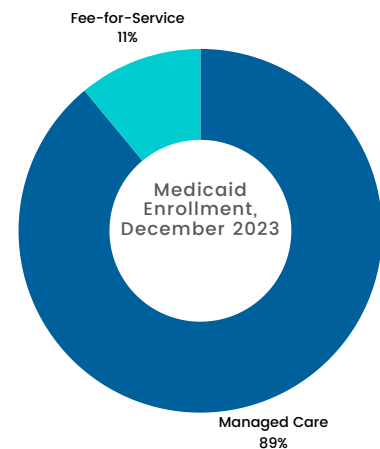
- Infants and children
- Pregnant individuals
- Caretaker adults
- Low-income adults
- Older adults
- Individuals and children with disabilities
- Dual eligibles: individuals with both Medicaid and Medicare

The MCOs are required to provide commercial-like benefits plus the following:

- Substance use disorder services (e.g. ARTS program)
- Non-emergency medical transportation
- Community mental health rehabilitation services
- Nursing facility and hospice care

Eligibility Categories	
Grand Total	2,135,985
Adults	853,239
Children	840,955
Limited Benefit Individuals	168,380
Persons with a Disability or Blindness	145,869
Aged (65 or older)	87,843
Pregnant Members	39,691
Other	8

Source: DMAS



Source: DMAS



# UNDERSTANDING MEDICAID MANAGED CARE IN VIRGINIA

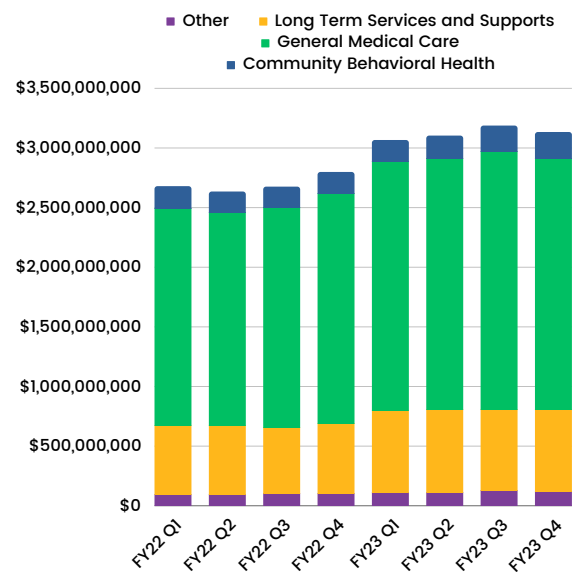
## FIVE MCOs OPERATING THE CARDINAL CARE PROGRAM



## WHAT'S NEXT FOR THE MEDICAID MANAGED CARE PROGRAM?

- DMAS launched Cardinal Care on November 1, 2023. Cardinal Care combines two previous programs -- Medallion 4.0 and CCC Plus program. Medicaid MCOs will be phasing in additional responsibilities associated with care coordination and care management under the combined program,
- The Administration and DMAS will re-procure the Medicaid MCO contract in FY2024. The new contract will be implemented on July 1, 2024. It is anticipated that the new contract will require MCOs to address maternal and child health outcomes, improve behavioral health care access, and streamline provider credentialing processes.
- DMAS and the MCOs are currently focused on "Return to Normal" efforts. These began April 1, 2023, when the federal Public Health Emergency (PHE) ended. Since April, DMAS, DSS, the MCOs, and many others have been working to redetermine Medicaid eligibility for more than 2 million individuals who were enrolled in the program during the pandemic. Federal regulations dictate the "Return to Normal" period end on April 1, 2024.

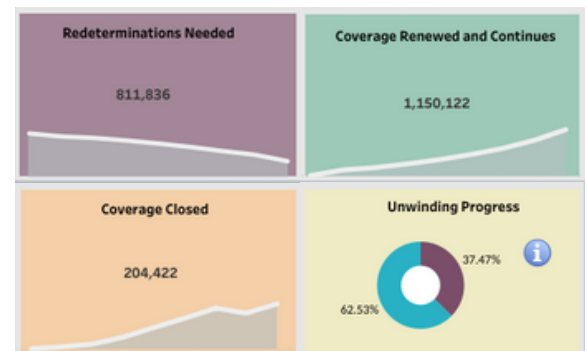
### MCO Expenditures



Source: DMAS

### Unwinding Status Overview as of 11/29/2023

Total Members at the start of unwinding:  
2,166,381



Source: DMAS