



Commonwealth of Virginia

Virginia Department of Medical Assistance Services

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Virginia Department of Medical Assistance Services

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Virginia Medicaid Agency Launches New Expansion Access Dashboard

*~Health access data and survey of new members released to celebrate
one-year anniversary of historic initiative~*

Richmond – The Virginia Department of Medical Assistance Services (DMAS) today announced a new dashboard documenting how newly eligible Virginia adults are using their Medicaid coverage to visit their doctors, fill prescriptions, and treat chronic and life-threatening conditions, including diabetes and cancer.

The release of the dashboard and a survey of new Medicaid members marks the one-year anniversary of the expanded health program. More than 370,000 Virginia adults are now enrolled and receiving health services through a bipartisan plan that qualified Virginia for billions of dollars in federal funds to support medical care for new Medicaid members.

“Our successful work to expand health coverage is giving hundreds of thousands of Virginians access to lifesaving treatment for chronic diseases and preventive care, and relief from burdensome medical debt,” said **Karen Kimsey, DMAS Director**. “In just one year, this historic initiative has yielded tremendous benefits for eligible men and women who are now proactively seeking the care they need to lead healthier, more productive lives.”

Health coverage under expanded eligibility rules became available to qualified Virginians on January 1, 2019. DMAS is executing a comprehensive evaluation of the initiative that includes

analysis of data on health services used by newly eligible adults as well as a survey of 1,505 new members conducted by the Virginia Commonwealth University School of Medicine.

Analysis of medical claims reveals that new Medicaid members are actively engaged in their health care, using their new coverage to obtain critical services. More than 80 percent of new members have used at least one medical service, more than 60 percent have had doctor appointments, and about two-thirds have filled prescriptions. Many newly eligible individuals are receiving treatment for chronic diseases, including 45,000 with high blood pressure, 25,000 with diabetes, 22,000 receiving addiction services and more than 5,000 with cancer.

The survey of newly eligible Medicaid members indicates that before the program expanded coverage, nearly two-thirds went without needed medical care, primarily due to costs. In the year before they gained health coverage, 66 percent of respondents said they struggled to pay medical bills, compared to 14 percent nationally. One in four of the respondents reported paying more than \$500 in out-of-pocket medical costs in the year before they entered the Medicaid program.

“Behind these statistics are the faces of individuals whose lives have been touched by health coverage,” said **Virginia Secretary of Health and Human Resources Daniel Carey, MD**. “I am incredibly proud of the work of our agency staff and the thousands of providers who serve our members with high-quality care and the respect they deserve.”

“Virginia is the first state to conduct a baseline survey of new members during its implementation of Medicaid expansion,” said **Ellen Montz, DMAS Chief Deputy and Chief Health Economist**. “These new oversight tools will serve as a model guiding future initiatives to improve the health and well-being of all Virginians.”

Other findings from the member survey include:

- More than two-thirds of respondents are either working, in school or retired; 37 percent reported having a health condition that prevents part- or full-time employment.
- Prior to enrolling in Medicaid, respondents reported going without needed health services, including 57 percent who went without primary care, 56 percent who were unable to afford prescriptions and 22 percent who went without mental health services.
- Prior to enrolling in Medicaid, survey respondents had a lower rate of reporting a doctor’s office as their usual source of care (47 percent versus 65 percent nationally) and a higher rate of reporting the emergency department as their usual source of care (25 percent versus 1 percent nationally).

The new [dashboard on health care access](#), an existing [enrollment dashboard](#) and the [full survey](#) are available on the [DMAS agency website](#). More information about the new health coverage and eligibility rules is available at www.coverva.org and www.cubrevirginia.org.