

## FY 2024 PERFORMANCE PLAN

Medical Assistance		EID/PAB	Jessica Crothers x1332, LaNette Anderson x1343, Julie Powell x1340, Maria Diaz x1033, LaTonya Harris X1329, Sergio Deleon x4943
Program Purpose	Enroll Virginia residents who meet income and other eligibility requirements in Medical Assistance, a government healthcare insurance program.		
Program Information	<ul style="list-style-type: none"> <li>• Virginia has two medical assistance programs: Medicaid and the Family Access to Medical Insurance Security Plan (FAMIS). Collectively, these programs are referred to as Medical Assistance (MA).</li> <li>• The MA programs pay medical service providers for medical services rendered to eligible individuals.</li> <li>• When an individual applies for MA, their eligibility is determined for Medicaid first. If they are not eligible for Medicaid due to excess income, their eligibility is determined for FAMIS.</li> <li>• Participants are Virginia residents, ages 0 to death, prenatal to nursing home care, who meet the eligibility guidelines. Covered Groups include applicants who are age 65 or older, blind, disabled, under age 19, pregnant women, Modified Adjusted Gross Income (MAGI) adults ages 19-64, and the parent(s) or caretaker-relative of a dependent child.</li> <li>• Medical Assistance recipients must meet financial and nonfinancial requirements. <ul style="list-style-type: none"> <li>○ Nonfinancial requirements include but are not limited to citizenship/immigration status, assignment of rights to medical benefits, and pursuit of support from the absent parent.</li> <li>○ Financial eligibility requirements vary depending upon the covered group. Financial requirements include but are not limited to meeting asset transfer guidelines for individuals needing long-term care, and resources must be within resource limits appropriate to the covered group. Not all covered groups have resource limits. All taxable income and some nontaxable incomes are countable in the eligibility determination.</li> </ul> </li> <li>• Program components include initial eligibility determination, review/renewals, and processing changes. The Virginia Hospital Center supports an Eligibility Worker stationed at the hospital to provide Medicaid services to patients admitted without health insurance.</li> <li>• The Medicaid program is established under Title XIX of the Federal Social Security Act and is financed by state and federal funds. The State Plan for Medical Assistance (State Plan) is the official body of regulations covering the operation of the Medicaid program in Virginia. The FAMIS program is established under Title XXI of the Social Security Act.</li> <li>• Virginia law provides that the MA programs be administered by the Department of Medical Assistance Services (DMAS). Statistics provided are based on the State Fiscal Year (SFY), which runs from June 1 to May 31.</li> <li>• Congress delinked the continuous Medicaid enrollment on March 31, 2023, and the COVID-19 Public Health Emergency (PHE) ended May 11, 2023, requiring that all active cases with no review in the past three years be reviewed by May 31, 2024.</li> </ul>		

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	<ul style="list-style-type: none"> <li>With the end of continuous enrollment, states were required to complete an eligibility renewal for all Medicaid and CHIP enrollees by May 2024, commonly referred to as “unwinding”. Arlington had over 15,000 cases that needed to be renewed/reviewed.</li> </ul>
Service Delivery Model	<ul style="list-style-type: none"> <li>The Medical Assistance program was delivered in a hybrid format in SFY 2024. The Public Assistance Bureau staff most often teleworked four days a week and provided customer services in the office one day per week.</li> <li>Service delivery in SFY 2025 should remain the same.</li> </ul>

### PM1: How much did we do?

Staff	Total 23.25 FTEs: <ul style="list-style-type: none"> <li>2.25 FTE Benefit Programs Supervisors (50% of 4 BP Supervisors &amp; 25% of 1 Supervisor)</li> <li>19.5 FTE Benefit Programs Specialists (50% of 39 FTEs)</li> <li>1.5 FTE Case Aides (50% of 3 FTEs)</li> </ul>				
Customers and Service Data		<b>SFY 2021</b>	<b>SFY 2022</b>	<b>SFY 2023</b>	<b>SFY 2024</b>
	Total Applications received	4,463	3,853	4,388	5,352
	Total Medical Assistance recipients	25,346	28,597	31,274	29,307
	Total Medical Assistance households	20,973	23,853	25,922	23,941

### PM2: How well did we do it?

2.1	Applications processed on time
2.2	Reviews processed on time
2.3	Accuracy of eligibility determination for applications and reviews

### PM3: Is anyone better off?

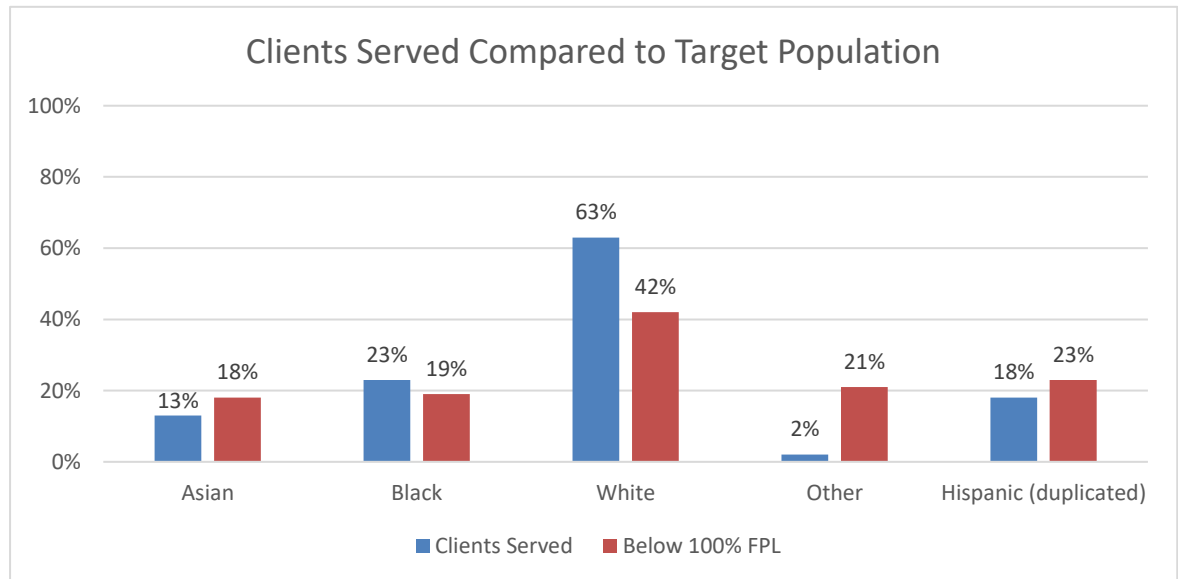
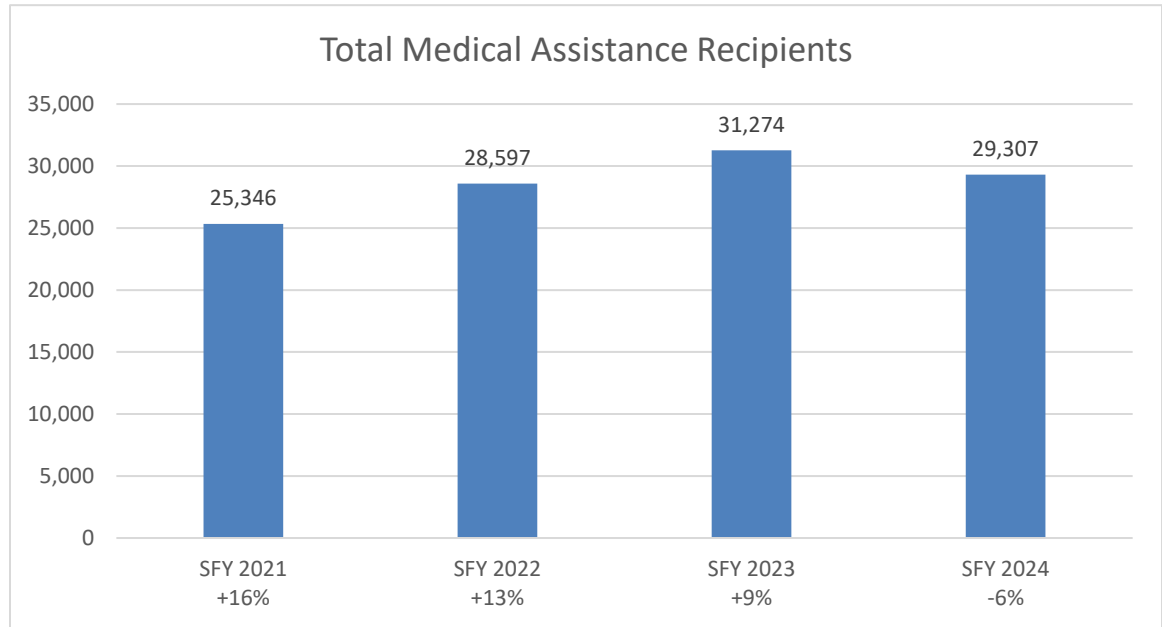
3.1	Enrollments in Medical Assistance at Virginia Hospital Center for patients that do not have insurance upon admission
3.2	Impact of Arlington Medical Assistance program

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## Medical Assistance

Measure 1 Total Clients Served

Data



Data Summary

- In SFY 2024, there were 29,307 total medical assistance recipients.
- The number of medical assistance recipients increased 16% between SFY 2021 and SFY 2024.
- Asian and Hispanic families continue to be underserved in Medicaid enrollment; more White and Black families with income below 100% FPL were served in SFY 2024.
- Data is reported from the VaCMS data system. VaCMS does not have an option for clients to identify as "Other", so clients who may have identified as "Other" on the census would have needed to choose a different option in VaCMS.

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- Race data was missing/unknown for 1914 clients. These clients are excluded from the racial equity analysis.

### What is the story behind the data?

- The number of recipients increased by over 7,500 since the beginning of the pandemic in SFY 2020 despite the unwinding or reinstatement of Medicaid renewals.
- Medical Assistance renewals had been waived since SFY 2019. Any recipient enrolled during this period remained enrolled unless they requested closure or moved out of state. Effective May 2023, Medicaid renewals were required for continued eligibility.
- In comparison to the population of Arlington residents with incomes less than the federal poverty level, the program served a higher proportion of White and Black residents. In addition to income requirements, Medical Assistance recipients must meet additional non-financial eligibility guidelines which many non-citizens may not meet.
- Emergency Medicaid policy continues to provide emergency hospital coverage for qualifying immigrants on an annual basis as opposed to one-time services as in the past. This is a permanent policy change.
- In SFY 2024, we processed 29,692 Medicaid renewals (current and past due; manual and exparte). Of these cases, 20,900 were continued as eligible, and 8,792 cases were closed.

### Recommendations

- Continue to enroll all eligible applicants in the Medical Assistance programs.
- Local agencies will continue processing enrollments for emergency hospital coverage for residents who are not otherwise eligible due to immigration status. Rather than covering a single hospitalization episode, this emergency coverage will be renewable annually.

### Target Dates

- Ongoing
- Ongoing

### Forecast

- In SFY 2025, the number of Medical Assistance recipients will likely remain steady. Although the PHE ended May 2023 and all Medicaid cases were reviewed for continued eligibility, enrollment remains high.

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Medical Assistance																	
Measure	2.1	Applications processed on time															
Data	<div><p>Applications processed on time</p><table><thead><tr><th>SFY</th><th>Count</th><th>Percentage</th></tr></thead><tbody><tr><td>SFY 2021</td><td>4,330/4,463</td><td>97%</td></tr><tr><td>SFY 2022</td><td>3,542/3,853</td><td>92%</td></tr><tr><td>SFY 2023</td><td>4,138/4,388</td><td>94%</td></tr><tr><td>SFY 2024</td><td>4,690/5,352</td><td>88%</td></tr></tbody></table></div>		SFY	Count	Percentage	SFY 2021	4,330/4,463	97%	SFY 2022	3,542/3,853	92%	SFY 2023	4,138/4,388	94%	SFY 2024	4,690/5,352	88%
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Data Summary	<ul style="list-style-type: none"><li>In SFY 2024, 88%% of applications were processed in a timely manner.</li><li>Monthly data is obtained from Virginia Department of Social Services (VDSS) Data Warehouse and <a href="#">Performance Indicator Monthly Report (virginia.gov)</a>. Data for years prior to SFY 2024 was self-reported.</li></ul>																
What is the story behind the data?																	
<ul style="list-style-type: none"><li>In SFY 2024, program staff did not meet the federal target for Medical Assistance compliance of 97%. The average Virginia statewide compliance rate was 92.7%.</li><li>Federal policy requires pregnant woman applications provided with complete documentation be processed within 7 days and 45 days for all other applications. Arlington continued to experience high turnover, high training needs, and an increased number of applications which all delayed Medicaid processing. Arlington was also tasked with processing over 15,000 unwinding Medicaid households in SFY 2024.</li><li>Arlington’s Medicaid applications increased by 22% in SFY 2024. Households were unaccustomed to an annual review during the PHE, which was reinstated last year. Because renewals mailed from the state office took up to 3-4 weeks to get to clients, more cases were closed and required to reapply.</li></ul>																	
Recommendations		Target Dates															
<ul style="list-style-type: none"><li>Continue prioritizing tasks and reallocating resources to ensure timeliness standards are met.</li><li>Continue to provide weekly pending reports of applications approaching processing deadlines to workers.</li><li>Workers will continue to monitor the tasks and reminders to complete each action timely as they appear on the VACMS dashboard.</li><li>Utilize new staff allocated to the bureau effective SFY 2025.</li></ul>		<ul style="list-style-type: none"><li>Ongoing</li><li>Ongoing</li><li>Ongoing</li><li>SFY 2025 Q2</li></ul>															

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### Forecast

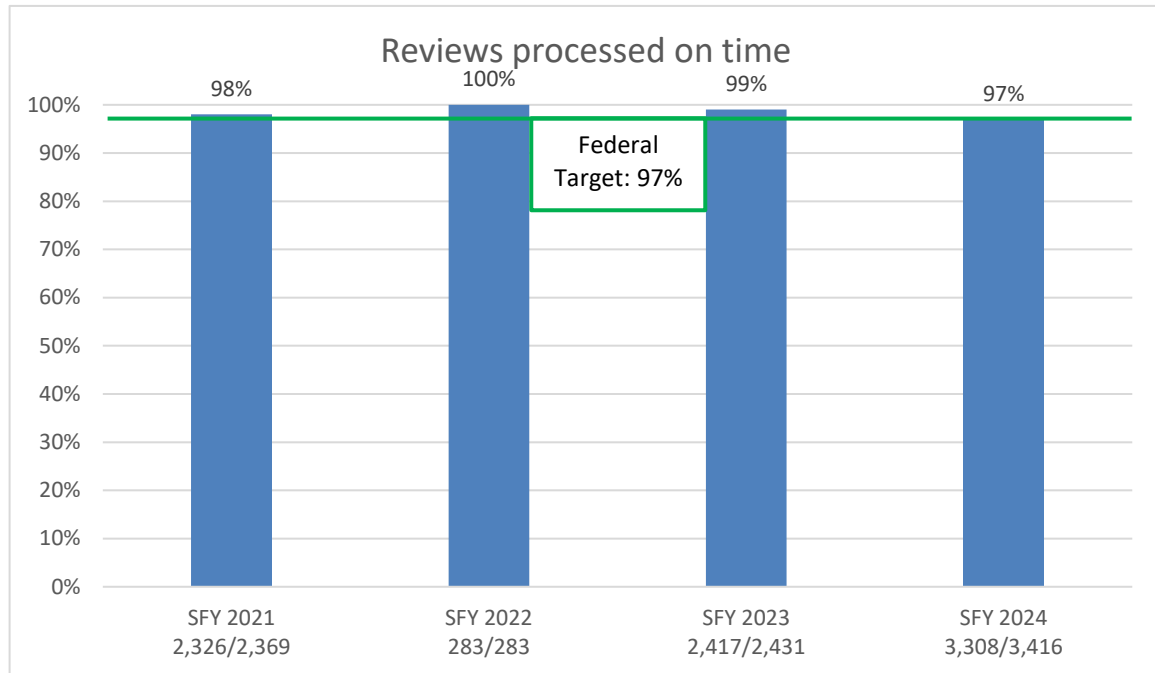
- In SFY 2025, Medical Assistance applications will be at or above 97% timeliness with increased staff and quality training.

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### Medical Assistance

**Measure**      2.2      Reviews processed on time

**Data**



**Data Summary**

- Weekly data is obtained from VDSS Weekly Medical Assistance (MA) Status report; monthly data is obtained from VDSS Case Renewals by Number of Months Overdue report, [Performance Indicator Monthly Report \(virginia.gov\)](https://www.virginia.gov/pimr) (PIMR) and annual statistics are compiled by program staff. Timeliness statics were self-reported because the PIMR reports were drastically different due to the unwinding process.
- Federal policy requires reviews be initiated in the 11<sup>th</sup> month of eligibility to ensure timely completion of the review. Likewise, the timeframe for acting on a review is 30 calendar days from the receipt of the completed review form.
- In SFY 2018, the Virginia Case Management System began doing exparte or automated Medicaid review of certain cases. When the automated exparte run operates properly, the worker has no responsibility for the case; however, there are many instances when the worker must review these cases as well to ensure accuracy and timeliness.
- The PHE ended on May 11, 2023, and the requirement to complete all Medicaid renewals was reinstated allowing a term of 12 months to complete the renewal process of over 15,000 cases which was suspended for the past three years. With approved overtime, staff processed almost 6,000 overdue Medicaid reviews last year. These cases are excluded from this measure.
- Program staff continue to meet or exceed the federal timeliness standards.

### What is the story behind the data?

- The Public Health Emergency was issued March 25, 2020, and was extended through May 11, 2023, stating local agencies are going to continue completing Medicaid renewals and partial reviews, but cases cannot be closed except for select reasons. All submitted renewals had to be reviewed for eligibility, but many of them could not be completed due to the

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mandate of no closures or reduction in benefits. On March 26, 2021, all renewals were suspended. Policy was later changed to complete renewals that do not reduce recipients' benefits. Requirements to complete Medicaid renewals resumed in April 2023.

- Staff have continued processing annual Medical Assistance reviews in a timely manner, meeting or exceeding the federal target of 97%. Ninety-seven percent of Medicaid reviews were completed on time in SFY 2024.
- Numerous special reviews were processed during the year but are not captured in these numbers. A special review is initiated when a client reports a change in the household situation. Some clients have been erroneously enrolled by CoverVA (the state).
- Caseloads have increased over 50% since SFY 2019. The program was required to review all Medicaid cases between May 2023 and May 2024. Since this requirement was instituted in SFY 2023, staff have been working overtime hours and the program has been allocated temporary staff.
- Turnover among staff remained high over the past year, and the program is hiring five new Overstrength Benefit Programs Specialists (BPS's) in SFY 2025.

Recommendations	Target Dates
<ul style="list-style-type: none"> <li>• Continue to provide weekly pending reports of outstanding reviews approaching processing deadlines to workers.</li> <li>• Continue to make regular referrals to Neighborhood Health and other facilities/programs when members do not qualify for Medicaid.</li> <li>• Respond to requests from community partners (Clarendon House, Behavioral Health, Reentry Program and Refugee Assistance) regarding continued eligibility and enrollment concerns.</li> <li>• Recruit a trainer and overstrength positions; and develop a structured program for inexperienced new staff.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> <li>• Ongoing</li> <li>• SFY 2025, Q4</li> <li>• SFY 2025, Q2</li> </ul>
Forecast	
<ul style="list-style-type: none"> <li>• In SFY 2025, Medical Assistance reviews will remain at or above 97% timeliness.</li> </ul>	



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### Medical Assistance

Measure	2.3	Accuracy of eligibility determination for applications and reviews															
Data	<div><p>Accurate Determinations</p><table><thead><tr><th>Fiscal Year</th><th>Count</th><th>Percentage</th></tr></thead><tbody><tr><td>SFY 2021</td><td>197/213</td><td>92%</td></tr><tr><td>SFY 2022</td><td>62/69</td><td>90%</td></tr><tr><td>SFY 2023</td><td>58/84</td><td>69%</td></tr><tr><td>SFY 2024</td><td>204/219</td><td>93%</td></tr></tbody></table></div>		Fiscal Year	Count	Percentage	SFY 2021	197/213	92%	SFY 2022	62/69	90%	SFY 2023	58/84	69%	SFY 2024	204/219	93%
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SFY 2024	204/219	93%															
Data Summary	<ul style="list-style-type: none"><li>Federal policy requires case accuracy meet a 90% standard. Program staff met this standard in SFY 2024.</li><li>Monthly data is obtained from supervisors and trainers who monitor up to three (3) Medical Assistance cases per worker (or more if there is a new worker in training) each month. Information is maintained in a shared network drive. Audits performed by the regional Department of Social Services (DSS) office are included in this measure as well. The number of Medical Assistance cases reviewed during the PHE declined with the cessation of Medical Assistance redeterminations.</li><li>In SFY 2024, the Regional office did not monitor cases until after the end of the fiscal year.</li></ul>																
What is the story behind the data?																	
<ul style="list-style-type: none"><li>Internal Medicaid audits correct inaccurate determinations prior to that information being shared with recipients in many cases. Accuracy of Eligibility Determination means that the customer receives the maximum coverage they are entitled to receive based on eligibility factors.</li><li>The number of Medicaid cases monitored increased in SFY 2024 due to training/monitoring of new staff. The state rarely monitors Medicaid cases, but Arlington maintains its own quality assurance plan. Internal case monitoring is a preemptive measure to prevent state and federal errors.</li><li>During the past few years, due to the numerous vacancies, supervisors and case readers have been forced to change their focus from case readings to Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), and Medicaid applications processing and new staff training. We have hired at least 15 new Benefit Programs Specialists in the past three years.</li></ul>																	

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Recommendations	Target Dates
<ul style="list-style-type: none"><li>• Continue to provide quarterly policy training and ensure that all new policy is reviewed at unit and Bureau meetings.</li><li>• Continue to provide supplemental monthly reviews for staff in need of additional guidance as determined by the supervisor.</li><li>• Continue to recruit and hire trainers/case readers who can monitor case actions to a great degree than our current capacity.</li><li>• Continue to try to recruit and retain experienced staff.</li></ul>	<ul style="list-style-type: none"><li>• Ongoing</li><li>• Ongoing</li><li>• Ongoing</li><li>• Ongoing</li></ul>
Forecast	
<ul style="list-style-type: none"><li>• In SFY 2025, the accuracy goal of eligibility determination for reviews will meet the federal standard of 90%.</li></ul>	

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### Medical Assistance

Measure	3.1	Enrollments in Medical Assistance at Virginia Hospital Center (VHC) for patients that do not have insurance upon admission															
Data	<div><p>Enrollments at VHC</p><table><thead><tr><th>SFY Year</th><th>Enrollments</th><th>Applications</th></tr></thead><tbody><tr><td>SFY 2021</td><td>295</td><td>360</td></tr><tr><td>SFY 2022</td><td>291</td><td>315</td></tr><tr><td>SFY 2023</td><td>400</td><td>455</td></tr><tr><td>SFY 2024</td><td>338</td><td>344</td></tr></tbody></table></div>		SFY Year	Enrollments	Applications	SFY 2021	295	360	SFY 2022	291	315	SFY 2023	400	455	SFY 2024	338	344
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SFY 2024	338	344															
Data Summary	<ul style="list-style-type: none"><li>Medical Assistance enrollments and applications at VHC in SFY 2024 are still up.</li><li>Data is generated from monthly reports provided by program staff working at Virginia Hospital Center (VHC).</li><li>The number of hospital applications decreased 24% in SFY 2024 compared to SFY 2023 but remained higher than any other year since SFY 2016. 98% of applicants were approved.</li></ul>																
What is the story behind the data?																	
<ul style="list-style-type: none"><li>In SFY 2023 and 2024, the number of applications and enrollments at VHC remain higher than SFY 2021 and 2022 due to changes in the eligibility policy for immigrants. Lawful Permanent Residents (LPRs, sometimes called “green-card holders”) no longer need 40 qualifying quarters of work to become eligible for Medicaid. There is no scheduled end date for this policy change.</li><li>When a patient has no health insurance and appears to meet financial guidelines, VHC refers them to the onsite Department of Human Services (DHS) Eligibility Worker to complete an application.</li><li>In SFY 2024, approval rates remained high. Denial reasons include financial ineligibility, lack of Virginia residency, not meeting a covered group, and applicants’ failure to follow through with required documentation. To increase the number of approved applications, VHC has staff to assist applicants in gathering and providing needed documentation to determine eligibility.</li><li>Due to a decrease in the number of hospital applications being received, in SFY 2016, VHC reduced the number of staff supporting this partnership from 2 to 1. This worker saw an increase in applications since SFY 2018. DHS Medicaid applications increased</li></ul>																	

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in SFY 2023 and 2024 likely due to customer need and possibly because of recipients failed to renew within their 90 day renewal grace period and would have to reapply after that date.

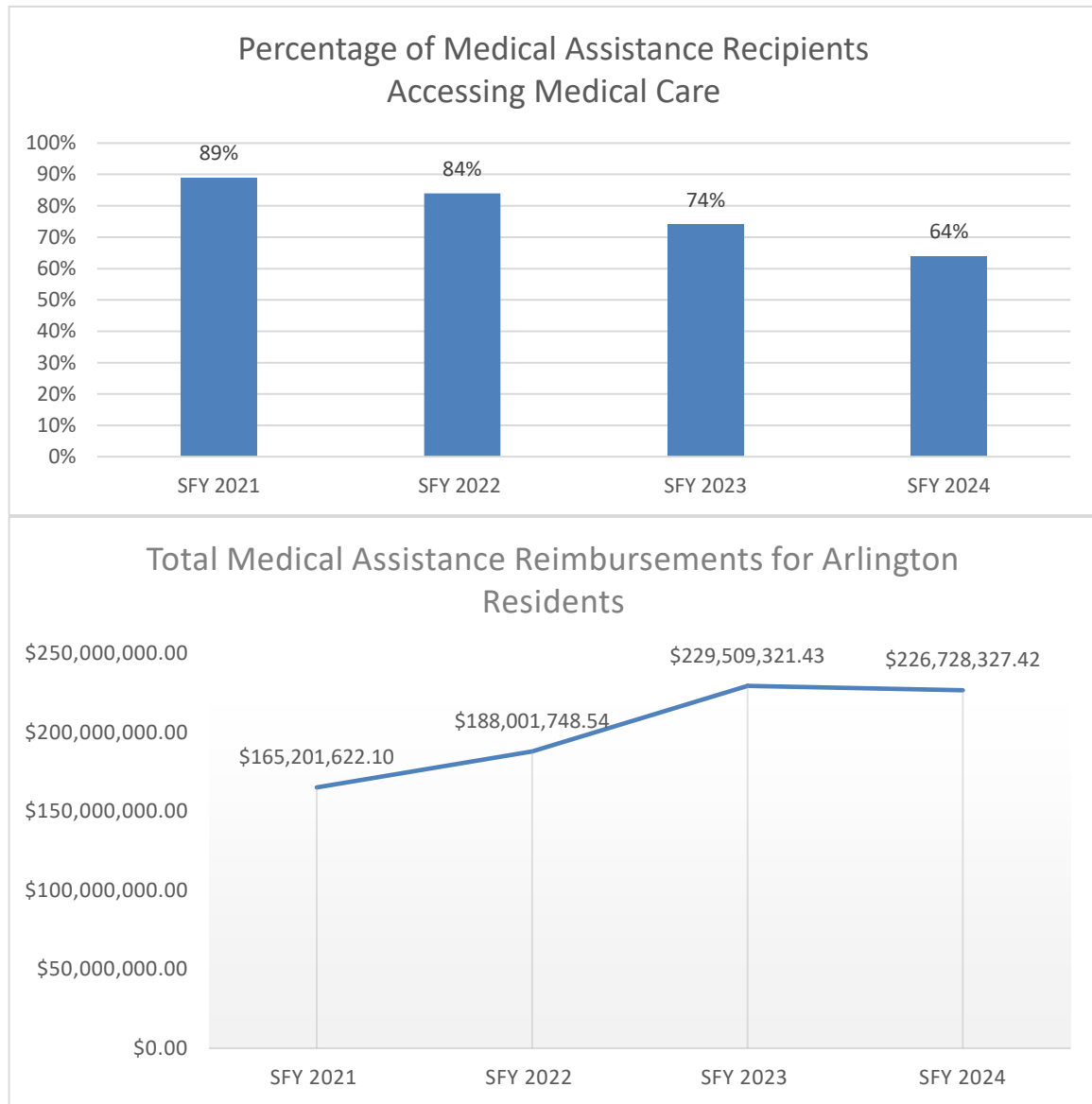
Recommendations	Target Dates
<ul style="list-style-type: none"><li>• Continue to meet with VHC staff regularly to maintain open conversations, providing feedback on what is working as well as possible setbacks and improvements.</li><li>• Continue to monitor the number of intake applications at VHC and provide additional support as needed.</li><li>• Continue to provide outreach/application assistance through the Public Health Division and Community Outreach Centers.</li><li>• Consider a race equity analysis for this measure.</li><li>• Implement a similar partnership with Neighborhood Health to further enhance access to Medical Assistance benefits.</li><li>• Consider developing a self-paced training for DHS and nonprofit case managers to help clients complete benefits applications.</li></ul>	<ul style="list-style-type: none"><li>• Ongoing</li><li>• Ongoing</li><li>• Ongoing</li><li>• SFY 2025, Q4</li><li>• SFY 2025, Q4</li><li>• SFY 2026</li></ul>
Forecast	
<ul style="list-style-type: none"><li>• In SFY 2025, at least 300 VHC patient applications will be approved.</li></ul>	

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### Medical Assistance

<b>Measure</b>	<b>3.2</b>	<b>Impact of Arlington Medical Assistance program</b>
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**Data**



**Data Summary**

- Statistics provided show the percentage of Medicaid and FAMIS enrollees who accessed medical services, and the total payments made for medical services year to date for Arlington County residents. This data from VDSS is available at <https://fusion.dss.virginia.gov/bp/BP-Home/Medical-Assistance/Reports>.

#### What is the story behind the data?

- In SFY 2024, 64% of Arlington Medicaid recipients accessed medical services, which is down 10 percentage points from the previous year. The decrease was driven by reduced utilization among adults – 56% accessed care in SFY 2024. Most other recipients – children and those eligible as Aged, Blind, or Disabled – accessed care at rates over 70%.

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- Medical Assistance recipients accessed over \$226M in care from community providers in SFY 2024. Providers include primary care physicians, urgent care centers, specialists, and hospitals.
- The SFY 2024 decrease in Medicaid spending may be due to the end to the PHE and the reinstatement of case reviews.
- According a 2022 report by the [Kaiser Family Foundation](#), 16.7% of Virginia residents are covered by Medicaid which has consistently trended up since 2008 when data was captured.
- According to a 2024 report by the [Department of Medical Assistance](#), Medicaid serves approximately 1 in 5 Virginians: 794,484 children, 789,989 adults, 184,029 with limited benefits, 139,683 individuals with disabilities, 88,798 older adults, and 37,857 pregnant persons. Medicaid plays a critical role in the lives of approximately 2 million Virginians.
- The July 2023 [American Community Survey](#) found that approximately 11,240 or 4.8% of Arlington residents under age 65 are uninsured; a decrease from 2022 of 5%, 2021 of 6.3%, 2020 of 6.1%, 2019 of 6.7% and 2017 study of 7.2%. Of this total, most are non-US citizens. These residents are typically ineligible for Medicaid coverage.

### Recommendations

- Continue to provide outreach and educational information about coverage available to Arlington residents.
- Provide informational sessions during non-traditional hours to assist with Medicaid application assistance as needed.
- Deliver information sessions electronically via Teams.

### Target Dates

- As needed
- As needed
- As needed

### Forecast

- Medical Assistance reimbursements will likely remain consistent in SFY 2025 as all Medicaid reviews that were postponed during the Public Health Emergency have been completed. The percentage of recipients accessing care will likely remain consistent for the same reason.