

## Covering our Children Reaching More Children through Medicaid and FAMIS

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### Importance to Virginia

Early attention to wellness is crucial to ensuring that Virginia's children have the opportunity to become successful as adults. The promotion of good health enables parents and providers to identify medical conditions and developmental delays and seek interventions before those conditions hinder physical, social, emotional, and cognitive growth.

A lack of emphasis on health at an early age continues to impact individuals, families, and communities throughout a person's life. Lack of access to routine preventive care can contribute to missed school days and reduced academic proficiency. In addition to their effect on educational achievement, undetected medical conditions can lead to chronic diseases and ultimately, reduced productivity in the workplace. The negative consequences affect not only a community's economy, but its overall health. The failure to immunize children at the appropriate age, for example, can lead to the spread of infectious diseases.

We know the terrible consequences of neglecting children's health, yet Virginia is falling behind in providing insurance coverage for our youth.

Based on 2012 data, the Urban Institute reports that 87.5 percent of eligible children in Virginia are enrolled in the Family Access to Medical Insurance Security (FAMIS) plan or Medicaid (also referred to as FAMIS Plus). This is just below the national average of 88.1 percent and substantially below the level of many neighboring states with participation rates of 90 percent and higher, including: West Virginia (91.1 percent), Maryland (91.9 percent), Kentucky (90.2 percent), Tennessee (90.3 percent), and Washington D.C. (97.1 percent). Data for 2014 are already demonstrating that in states that have expanded Medicaid, the number of already eligible children who are being enrolled is growing faster than in states that did not expand. Unless we act, more and more children eligible for FAMIS and Medicaid today will go without health care.

### Goal

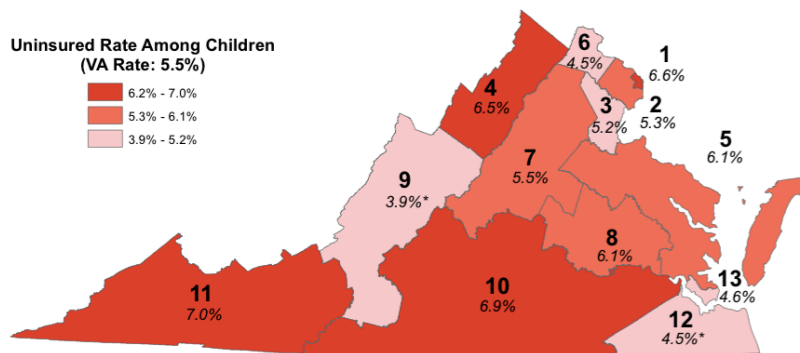
Virginia needs to turn this disturbing trend around. In the next two years, we will enroll an additional 35,000 eligible children into these programs. While that will not mean every eligible child in Virginia will be enrolled, it will halt the recent decline, and by the end of 2016, Virginia should have more than 90 percent of our eligible children enrolled, as many neighboring states do today.

# A Healthy Virginia

## Issue Background

Virginia currently covers approximately 580,000 children each month in FAMIS or Medicaid, but there are still more than 100,000 uninsured children across the Commonwealth. The majority of

**Map 3: Uninsured Rate Among Children (0-18) in Virginia by Area<sup>1</sup>, 2012**



Source: Urban Institute, May 2014. Based on the 2012 American Community Survey (ACS) data from the Integrated Public Use Microdata Series (IPUMS) of the Minnesota Population Center.  
1 Shaded areas represent regions of Virginia which are defined in terms of counties or a combination of counties (see "Guide to Regions in Virginia").  
Notes: The estimates reflect Urban Institute adjustments for potential misreporting of coverage, based on a simulation model developed by Victoria Lynch under a grant from the Robert Wood Johnson Foundation.  
\* indicates that the uninsured rate for the region is statistically different from the uninsured rate for the areas in the rest of the state at the 0.1 level.

these uninsured children are likely to already qualify for coverage in FAMIS or Medicaid, but their parents are unaware, believe the application process is too difficult, or are reluctant to apply.

When former Governor Mark Warner made enrollment of eligible children a high priority, Virginia was able to simplify the program,

conduct an effective public outreach campaign, and train and support local outreach workers. As a result, we saw dramatic improvement in the number of Virginia's children with coverage.

In recent years, support for outreach and marketing of FAMIS and Medicaid in Virginia has been significantly curtailed, and we are seeing the negative effect as growth has slowed and now reversed.

Following years of almost uninterrupted growth since the FAMIS program was created in 1998, the average monthly enrollment of children in FAMIS and Medicaid has declined. The number of children eligible for these programs, however, has not. On average, almost 4,000 fewer children were receiving health care coverage through these programs each month in FY 2014 compared to FY 2013. This means too many children who could get coverage today are going without.

## Strategies for Success

Virginia will mount an aggressive campaign to reach the parents of children who are eligible but not yet enrolled and help get them covered. Marketing research shows that reaching the parents of the remaining uninsured children will require aggressive and varied strategies. Virginia can get many more of our children covered by combining traditional media advertising with social media, additional outreach workers, and attendance at community events and health fairs. Virginia will also

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place more emphasis on contacts with hard-to-reach populations, in addition to making policy and systems improvements.

Investments will be made in new materials, TV and radio advertisements, and people in the community who can directly help families enroll. We will place a special emphasis on outreach to non-English speaking parents, as children in these families have a lower rate of insurance even when they are eligible. In addition to doing a better job of informing parents, the Commonwealth will be examining our policies and improving our systems to continue making it easier for the families of these eligible children to apply and be approved.

## Timeline

Virginia launched its marketing and outreach efforts during this year's back-to-school season. We will continue to ramp up marketing and media during the coming months.

## Measures of Achievement

By the end of 2016, 35,000 more of Virginia's children will have access to vital wellness and health care services. DMAS will provide a monthly enrollment update to track the progress of this initiative.