



Get the answers you need on new adult eligibility for health coverage:

Am I eligible?

- Yes, if you are a Virginia resident, between ages 19 to 64
- You cannot already be in or eligible for Medicare
- You must meet income requirements, which vary by household size

When will the new health coverage start?

Beginning January 1, 2019

What services are covered?

- Doctor, hospital and emergency services, including primary and specialty care
- Prescription drugs
- Laboratory and X-ray services
- Maternity and newborn care
- Home health services
- Behavioral health services, including addiction and recovery treatment services
- Rehabilitative services, including physical, occupational and speech therapies
- Family planning services
- Medical equipment and supplies
- Preventive and wellness services, including annual wellness exams, immunizations, smoking cessation and nutritional counseling
- And more!

Will I be able to get health coverage if I have a pre-existing condition?

Yes, this health coverage is available to you if you have a pre-existing condition as long as you meet other qualifications (see above).

Are dental services covered?

Dental services for most adults are limited to medically necessary emergency procedures. Comprehensive dental benefits, including preventive services, are available through age 20. Pregnant women also qualify for comprehensive dental services, except for orthodontics.

Will I be able to keep my current doctor?

With some limited exceptions, you will be asked to choose a health insurance company (called a “plan”) that will coordinate your care and reimburse doctors and other providers for services you receive. Check with your doctors and other health care providers to find out whether they participate in one or more of these plans.

What health plans will be available?

You will be able to choose from six plans. Information about your six choices will be shared with you once you are enrolled.

How do I select a plan?

New enrollees will be randomly assigned to a plan to ensure that their coverage is available as quickly as possible. Once enrolled, you will receive information on how to change plans and a side-by-side comparison of your six choices. You will have 90 days to change your plan if you would like to do so. We encourage you to compare plans and choose the one that is best for you.

How will my doctor know that I have coverage?

Once the program begins early next year, people enrolled in coverage will be mailed a health care card.

Will I be required to meet additional requirements for coverage?

Virginia is in the process of developing a new program that will include new employment supports and requirements. More information will be available to you as the details are completed. This program will not begin until after new coverage is available for Virginia adults. We encourage you to visit the coverva.org website regularly for updates on how to enroll for coverage, and we will provide additional information on employment supports and requirements as they are available.

What are the definitions for “family size” and “household”?

Family size means the number of persons counted as an individual's household. The family size of a pregnant woman includes the pregnant woman plus the number of children she is expected to deliver. When determining the family size of other individuals who have a pregnant woman in their household, the pregnant woman is counted as one person.

A household is determined by tax dependency. Parents, children and siblings are included in the same household. Children claimed on taxes by a noncustodial parent are evaluated for eligibility in the household in which they are living and are also counted in the family size of the parent claiming them as dependents. There can be multiple households living in the home.