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 can I apply?**
Virginia began accepting applications using the new eligibility rules on November 1, 2018. You can apply for Medicaid at any time.

**How can I apply?**
To apply for health coverage:
- Call the Cover Virginia Call Center at 1-855-242-8282 (TDD: 1-888-221-1590)
- Complete an online application at Common Help: [www.commonhelp.virginia.gov](http://www.commonhelp.virginia.gov)
- Complete an online application at The Health Insurance Marketplace: [www.healthcare.gov](http://www.healthcare.gov)
- Mail or drop off a [paper application](#) to your local Department of Social Services (Mailing may take longer than other methods of applying) Find your nearest local department of social services by visiting: [http://www.dss.virginia.gov/localagency/index.cgi](http://www.dss.virginia.gov/localagency/index.cgi)
- Call the Virginia Department of Social Services Enterprise Call Center at 1-855-635-4370 (If you also want to apply for other benefits)

**When did the new health coverage start?**
This coverage began on 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 are 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?**
People enrolled in coverage will be mailed a health care card.

**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.