# FAMIS Select

# **Policy and Procedure Manual**



Department of Medical Assistance Services Commonwealth of Virginia

Revised 03/2020

# **FAMIS Select Policy and Procedure**

# **Table of Contents**

# Section 1 FAMIS Select Program

- Program Overview
- FAMIS Select Brochure
- Reference Materials
- FAMIS Select General Policies and Coverage

# Section 2 Application Processing and Enrollment

- FS Application and instruction
- Approval information
- Enrollment Policy
- Renewals
- Enrollment Changes

# **FAMIS Select Program**

# **FAMIS Select Program Overview**

FAMIS *Select* is a premium assistance program that gives parents of FAMIS approved children the freedom to choose between covering their children with the FAMIS health plan or with their own private or employer's health insurance plan. FAMIS *Select* gives most parents that choose to purchase private or employer-sponsored health insurance and receive up to \$100 per child per month to help pay the family premium.

For some families, the FAMIS *Select* payment may make health coverage affordable for the entire family. In other cases, it may allow a child to continue to see a doctor or dentist that may not accept FAMIS and give a family greater choice of providers.

FAMIS *Select* replaced Virginia's former SCHIP premium assistance program, Employer Sponsored Health Insurance (ESHI). The Virginia Department of Medical Assistance Services (DMAS), Division of Maternal and Child Health manages the operations of the FAMIS *Select* program.

## <u>Duration of Coverage</u> –

Children enrolled in FAMIS are guaranteed 12 months of coverage. Children receiving premium assistance may be enrolled in an employer's health plan or a private insurance plan purchased independently by the family and will likewise be guaranteed 12 months of coverage.

The premium assistance will continue as long as the child remains enrolled in the private/employer plan, the family chooses to participate in FAMIS *Select*, the child resides in the Commonwealth of Virginia, and the family income remains below 200% FPL.

If the family chooses to drop participation in FAMIS *Select* for the child and requests coverage through FAMIS, the child will be enrolled in the direct coverage program FAMIS for the remaining months of the 12-month coverage period. Eligibility for FAMIS is re-determined every 12 months.

# **FAMIS Select brochure**

## What is FAMIS Select?

FAMIS Select is a program that gives parents of FAMIS enrolled children the freedom to choose between covering their children with the FAMIS health insurance plan or with a private or employer's health plan. FAMIS Select gives most parents that choose to purchase private or

employer sponsored health insurance a premium assistance payment of \$100 per child per month to help pay the child's part of the family premium.

# Who qualifies for FAMIS Select?

A child is eligible for **FAMIS** *Select* if they have access to a private or employer sponsored health plan and have been approved for **FAMIS**. To be eligible for **FAMIS**, the child must not be covered by any other health plan when they apply.

## How long will my child be enrolled in FAMIS Select?

A child will stay in FAMIS Select as long as that child is still eligible for FAMIS and enrolled in a private or employer sponsored health plan. A child's FAMIS coverage must be renewed each year. If a renewal is not completed the child will lose FAMIS eligibility and can no longer be enrolled in FAMIS Select.

At any time during a child's twelve-month coverage period in FAMIS, a parent may enroll their child in FAMIS Select or drop FAMIS Select and go back to FAMIS. No additional FAMIS application is needed until it is time for the child's annual FAMIS renewal.

## What are the benefits of FAMIS Select?

FAMIS Select may allow your child to see a special health care provider. In some cases a private or employer plan may offer different local providers in their network so a child can continue to see a doctor or dentist who does not take FAMIS.

For some families, the FAMIS Select premium assistance payment will be enough to make health coverage affordable for the entire family.

Remember, children in FAMIS Select get the health benefits through the private health plan their parents choose. It is important to compare health plans and choose the best plan for your family.



#### What will my costs be?

The parents of a child enrolled in FAMIS Select must make their monthly payment for their private or employer health plan. The parents are also responsible for paying any deductibles, co-payments, and co-insurance required by the private or employer health plan. In return, FAMIS Select will send the parents a premium assistance payment of \$100 per child per month up to the total cost of the family premium.

Example: A family with 3 children on FAMIS Select

- Health plan family premium = \$350/month
- · FAMIS Select
- premium assistance payment = \$300/month
- Cost to family = \$50/month
- + any co-pays, coinsurance, and deductibles

# Which program is right for my family, FAMIS or FAMIS Select?

#### FAMIS

- √ The child must be eligible for FAMIS.
- The child receives health benefits through FAMIS and the FAMIS network of providers.
- All FAMIS covered services are available. Visit www.famis.org for a list of covered services.
- $\checkmark$  Parents pay no monthly premiums.
- √ Parents pay \$2-\$5 co-pays for most services.
- √ Only eligible children under 19 are covered.

#### FAMIS Select

- v The child must be eligible for FAMIS and also be eligible to enroll in a private or employer health insurance plan.
- The child gets health benefits through a private health plan's providers.
- Only services covered under the private or employer plan are available. FAMIS Select will cover immunizations if your private plan does not.
- Parents pay monthly premiums for a private or employer's plan, but are reimbursed \$100 per month per child up to the total cost of the family premium.
- Parents pay any deductible, co-pay, or co-insurance amounts set by the private or employer health insurance plan.
- In some cases the FAMIS Select premium assistance payment may be enough to help families afford insurance for the entire family.

# **FAMIS Select brochure**

### FAMIS Select Checklist

- ☐ Find out if your children are eligible for FAMIS
- ☐ Apply for FAMIS by calling 1-866-87FAMIS, or on-line at www.famis.org, or by visiting your local Department of Social Services
- ☐ Find out if there is a private or employer sponsored health insurance plan that could cover your child.
- Compare the services covered by that health insurance plan with the services covered under FAMIS.

#### FAMIS Covers:

- Doctor visits Preson Hospital and emergency care Shots
- Mental health care
- Well-child checkups
   Vision and dental care
- Compare the costs of the private health plan with the cost of FAMIS. Remember, with FAMIS Select you will get \$100 per child per month up to the full amount of your family premium.
- ☐ Talk to your child's doctors about the health plans. They may take one but not the other.
- Review and understand when and how you can drop the private or employer sponsored health plan in the event that you want to switch back to FAMIS.
- Choose the plan that is best for your family.
- Complete a FAMIS Select application.
- ☐ Remember to renew your child's FAMIS coverage every year so that you will continue to get FAMIS Select assistance.

#### How do I apply?

To apply for the FAMIS Select program, call toll-free: 1-888-802-KIDS

(1-888-802-5437)



To apply for FAMIS, go on-line to www.famis.org

call toll-free: 1-866-87FAMIS

(1-866-873-2647)

Se habla español or

visit your local Department of Social Services

TTY for deaf and hearing impaired 1-888-221-1590

For more information about FAMIS and the services covered by FAMIS, go to www.famis.org.



FAMIS Select is a program of the Commonwealth of Virginia

FAMIS 5 RVSD 1108 PRT 1108

FAMIS Select Premium Payment Assista for FAMIS Families

# FAMIS Select

Premium payment assistance for FAMIS families



Giving parents the power to choose



# FAMIS Select General Policy and Coverage

#### **Covered Services -**

The specific benefit package and co-pay requirements will vary dependent on the employer/private plan and may or may not meet regulatory requirements for cost-sharing and benchmark-equivalency. However, it should be noted that Virginia insurance law, through a variety of mandated benefits requirements, provides for a fairly rich benefit package for all insurance plans licensed in the Commonwealth. Moreover, DMAS administrative records indicate that to date each of the employer sponsored health insurance plans submitted by families in conjunction with their application for its ESHI program met or exceeded regulatory requirements for benchmark equivalency.

Wrap-around or supplemental coverage will be offered by the state only as necessary for childhood immunizations.

Once enrolled in FAMIS Select, all benefits except for immunizations are through the other insurance

#### <u>Immunizations</u> –

Immunizations are the only wrap-around benefit to be included in FAMIS *Select*. Because of mandated benefits described above, it is anticipated that very few children in FAMIS *Select* will not have coverage for immunizations through private/employer plans.

However, as a fail-safe measure, children in FAMIS *Select* will be issued a FAMIS ID card to be used for any immunizations covered by FAMIS but not covered by their employer-sponsored or other health insurance plan. Use of this card will allow the State to use Title XXI funds to reimburse providers directly at the state rate for any immunizations provided to FAMIS *Select* children.

Like other children covered through SCHIP, children enrolled in FAMIS *Select* will not qualify for the Vaccines for Children Program.

#### <u>Service Delivery System</u> -

The service delivery system utilized by the employer's health plan will provide benefits to children enrolled in FAMIS *Select*. In this way, some children covered under Title XXI will have access to health care providers outside of the Medicaid provider network. In some cases families will choose FAMIS *Select* over FAMIS

#### FAMIS **Select** Program Policies & Procedures

because it will allow their child access to a particular specialist or health care network.

### **Other Information**

- Continued coverage through the private/employer's plan will be verified by regular submission of billing statements, pay stubs showing deductions for dependent care coverage or statements from an employer.
- The child will continue to be enrolled in FAMIS Select so long as they remain eligible for FAMIS, remain enrolled in the private/employer plan, and the family provides verification that the cost of the premium they are paying is not less than it was when the premium assistance amount was approved.
- Prior to the twelfth month of coverage, the family will be required to submit information to complete an annual re-determination of FAMIS eligibility and updated information regarding participation in FAMIS Select if needed.
- If a family requests that the a child be cancelled from FAMIS *Select* and enrolled in FAMIS, no new application will be required so long as they are within the 12 month coverage period.
- Pregnant women enrolled in the FAMIS MOMS program are not eligible to participate in the premium assistance program FAMIS *Select*.
- If a participant misses a payment they need to contact the FS Specialist.
- The CPU does not handle enrollment into FS. The CSR's at the CPU have been trained to handle general questions regarding FAMIS Select.

## **SECTION 2** Application Processing and Enrollment

### **Eligibility**

Each child applying for FAMIS *Select* will have completed a standard application for FAMIS containing all information necessary to appropriately screen for Medicaid eligibility and determine eligibility for FAMIS.

### FAMIS eligibility requirements:

- Applicant must live in Virginia
- Applicant must be under age 19
- Applicant is a United States citizens or qualified aliens
- Applicant must be uninsured for four months (some exceptions apply)
- Applicant is not eligible for the Virginia state employee health insurance plan
- Applicant is not eligible for FAMIS Plus (also known as Medicaid)
- Applicant's family income does not exceed FAMIS income guidelines (200% of the FPL)

Family Size	Yearly	Monthly
1	\$26,404	\$2,201
2	\$35,711	\$2,976
3	\$45,018	\$3,752
4	\$54,325	\$4,528
5	\$63,632	\$5,303
6	\$72,939	\$6,079
7	\$82,246	\$6,854
8	\$91,553	\$7,630
Additional person add	\$ 9,307	\$ 776

2021 Income Guidelines

Effective January 13, 2021

The FPL (Federal Poverty Limit) Income limits are adjusted annually

### **FAMIS Select Application**

An applicant may find out about FS in a variety of ways. The FAMIS CPU may tell the person, they may have reviewed information on the FAMIS website, or possibly had a contact if they requested more information.

The applicant must apply for FAMIS Select. Simultaneous to the FAMIS application or after being approved for FAMIS, a parent will complete the one-page application for FAMIS *Select*.

Once the applicant completes they need the application to:

# FAMIS **Select** Program Policies & Procedures Department of Medical Assistance Services 600 E Broad Street, Suite 1300 Richmond, VA 23219.

Applications can also be faxed to (804) 452-5447.

Applicant must also include a proof of their insurance payment (such as a pay stub or letter from the insurance company).

If they have other question, they can call and speak directly with the FAMIS Select Specialist. The current specialist is Diane Eason and she can be reached at (804) 786-7024 or toll free at 1-888-802-5437.