

Policy Round-Up

VDH's Ryan White HIV/AIDS Program Part B

September 15, 2025

Assist with Medicaid Transition by Working with Clients/ Patients to:

1. Check their eligibility for Medicaid enrollment at any time during the year. The eligibility criteria are:
 - between the ages of 19 to 64 years old
 - Virginia resident who meets U.S. citizenship requirements
 - Do not qualify for Medicare
 - Household income up to 138% of the federal poverty level
2. Refer them to the below resource for additional information on Medicaid and help to enroll:
 - Benalytics at their website or <https://myvamap.com> to set up an appointment or call 1-855-483-4647.

Hours are: Monday, Thursday 8A-6P; Tuesday, Wednesday 9A-5P; and Friday 8A-5P

Virginia Medication Assistance Program (VA MAP) Provider/Clinician Notice on Medicaid Transition

Dear Provider or Clinician:

To ensure sufficient resources for the Virginia Medication Assistance Program (VA MAP), the Virginia Department of Health (VDH) is making changes to its program. The Health Resources and Services Administration (HRSA) requires that the Ryan White Program be the payer of last resort. VDH must meet legislative requirements to vigorously pursue third-party coverage.

Effective September 1, 2025, VA MAP is now requiring that eligible uninsured patients in Direct MAP, and eligible insured patients in Affordable Care Act plans (HIMAP), apply for Medicaid. Financial eligibility for Medicaid is 138% of the federal poverty level. This change will:

- Ensure VA MAP can support uninsured and underinsured people who have no other option for medication coverage; and
- Help prevent a waiting list for medication.

For those now using Direct MAP, Medicaid offers greater access to health care as it provides full insurance coverage, rather than providing only HIV medication.

Notices were mailed on September 10, 2025 to clients believed to be Medicaid eligible based on their income data in PROVIDE. Benalytics will reach out to these clients to help them with enrollment. Clients not approved for Medicaid can remain on VA MAP if they send VA MAP their Medicaid denial letter. If they do not apply for Medicaid, they will be disenrolled from VA MAP after 60 days.

With a growing number of people enrolled in VA MAP and expected increases in both medication costs and insurance premiums, these steps are necessary to avoid funding shortfalls and waiting lists for medication.

Policy Round-Up

VDH's Ryan White HIV/AIDS Program Part B

Page 2

VDH is considering other actions to stabilize the VA MAP including:

- Enrollment of clients into Patient Assistance Programs;
- Suspension of services for Direct MAP clients who have not filled a prescription in 6 months;
- Suspension of services (premium payments) for HIMAP clients who have not filled a prescription in 12 months.

Please look for additional communication in the coming weeks. We understand that these changes can be upsetting for clients who have already faced uncertainty about their services in recent months. We remain committed to providing quality services for our shared clients and maximizing access to lifesaving medication. We appreciate your collaboration during this process.

The VA MAP Call Center is available at 1-855-362-0658 for your questions and clarifications.

Sincerest gratitude,

The Virginia RWHAP B Program.