



Medicaid Matters to Virginia's 1st Congressional District (VA-01)

Virginia's Medicaid program (Cardinal Care) is a lifeline for Tidewater and Central Virginia

Cardinal Care provides health coverage for children, working families, veterans, vulnerable seniors, people with disabilities and many others in Virginia.¹

Cardinal Care serves as the core financial backbone of the Tidewater and Central Virginia's health care system, paying for care and services at local clinics and hospitals and serving as a critical engine for the local economy.

In VA-01, Medicaid Serves:



A total of 100,900 people —
1 in 8 residents in the district.²



A total of 18,300 children —
1 in 11 children in the district.³



A total of **8,800 seniors** and
people with disabilities.⁴

Nearly 2 million Virginians are at risk of losing access to care if Congress cuts or caps Medicaid funding, forcing the state to offset budget holes by throwing people off coverage, cutting provider reimbursement and/or eliminating essential health services.⁵ Any cut to Medicaid is a direct attack on the health and financial security of people living in the Tidewater and Central Virginia and runs counter to the will of the vast majority of voters from across political parties who want Congress to continue to guarantee coverage for low-income people through Medicaid.⁶



A total of 82% of adults want Congress to maintain or increase Medicaid spending.⁷



A total of 67% of Republicans want Congress to maintain or increase Medicaid spending.⁸



A total of 71% of voters want Congress to guarantee coverage for low-income people through Medicaid.⁹

Protecting Medicaid Means:

CHILDREN IN VA-01

Have access to newborn care, checkups, care for diabetes and asthma, and more.

Stay healthy and ready to learn, miss fewer school days, are more likely to graduate, and earn more as adults.¹⁰



FAMILIES IN VA-01

Have access to cancer screenings, mental health and substance use disorder treatment, and diabetes and blood pressure medications.

Have less risk of medical debt and eviction and can better afford to buy groceries or pay rent.¹¹



SENIORS IN VA-01

Have access to nursing home care, transportation to medical appointments, and home health services.

Stay healthy and receive needed care in their homes and communities.



Medicaid keeps families in VA-01 healthy and working

Many low-wage jobs either do not offer health coverage or offer coverage that is unaffordable. Medicaid provides health coverage for workers at these jobs so they can remain healthy and earn income for their families.

- **At least 31,700 low-wage workers** in VA-01 are covered by Cardinal Care.¹²
- Nationwide, **92% of adults** covered by Medicaid either work, care for a family member, have an illness or disability, or attend school.¹³

Cutting Medicaid would make our country's affordability crisis much worse for families in Virginia who already face significant health care costs.

Medicaid is the bedrock of the health system in Tidewater and Central Virginia

Cardinal Care keeps hospitals in the district open. It pays for:

- **22% of all hospital services** provided at VCU Health Tappahannock Hospital.
- **17% of all hospital services** provided at St. Francis Medical Center in Midlothian.
- **16% of all hospital services** provided at Riverside Doctors' Hospital Williamsburg.¹⁴

If Medicaid is cut, hospitals will treat more uninsured people, and the amount of uncompensated care will increase. A total of 5% of the district's residents are already uninsured, and increased losses in patient revenue would put all Tidewater and Central Virginia hospitals at risk.¹⁵

Cardinal Care also plays important roles in providing access to behavioral health care and nursing home care. Medicaid is the largest payer for mental health care, substance use disorder treatment and other community services to curb the opioid epidemic and care for people with mental illness.¹⁶ **Cardinal Care also covers 5 in 8 nursing home residents in Virginia.**¹⁷

Medicaid stabilizes Virginia's state and local economies

Medicaid is the largest source of federal funding for Virginia, accounting for 60% of the federal funds received by the state.¹⁸ Medicaid dollars ensure Virginia can deliver essential health care without depleting resources reserved for other essential services, including public safety, transportation, housing and education.

Cutting Medicaid would make our country's affordability crisis much worse. Americans from all backgrounds just voted for economic security, imploring their representatives to lower costs on everyday needs, including health care. Cutting Medicaid would be a direct betrayal of constituents by making health care more unaffordable. **Families across Virginia already face significant health care costs:**

- **78% of people living in Virginia** are worried about affording health care.
- **36% of people living in Virginia** struggled to pay medical bills.
- **46% of people living in Virginia** skipped needed care due to cost.¹⁹

Congress has the responsibility to stand with families in Virginia and across the country by protecting Medicaid and opposing any attempts to weaken this essential program.

Endnotes

- ¹ Rhiannon Euhus, Alice Burns, and Robin Rudowitz, “Congressional District Interactive Map: Medicaid Enrollment by Eligibility Group,” KFF, March 11, 2025, <https://www.kff.org/medicaid/issue-brief/congressional-district-interactive-map-medicaid-enrollment-by-eligibility-group/>.
- ² Euhus, Burns, and Rudowitz, “Congressional District Interactive Map.”
- ³ Families USA analysis of data from Euhus, Burns, and Rudowitz, “Congressional District Interactive Map” and U.S. Census Bureau, U.S. Department of Commerce, “Age and Sex,” American Community Survey, ACS 1-Year Estimates Subject Tables, Table S0101, 2023, accessed February 10, 2025, <https://data.census.gov/table/ACSST1Y2023.S0101?q=S0101&g=500XX00US5101>.
- ⁴ Euhus, Burns, and Rudowitz, “Congressional District Interactive Map.”
- ⁵ “Medicaid & CHIP in Virginia,” Medicaid.gov, U.S. Centers for Medicare & Medicaid Services, n.d., <https://www.medicaid.gov/state-overviews/stateprofile.html?state=virginia>.
- ⁶ Grace Sparks, Robin Rudowitz, and Ashley Kirzinger, “Public Opinion on the Future of Medicaid: Results From the KFF Medicaid Unwinding Survey and KFF Health Tracking Poll,” KFF, June 4, 2024, <https://www.kff.org/medicaid/poll-finding/public-opinion-on-the-future-of-medicaid-kff-medicaid-unwinding-kff-health-tracking-poll/>.
- ⁷ “7 Charts About Public Opinion on Medicaid,” KFF, March 7, 2025, <https://www.kff.org/medicaid/poll-finding/7-charts-about-public-opinion-on-medicaid/>.
- ⁸ KFF, “7 Charts.”
- ⁹ Sparks, Rudowitz, and Kirzinger, “Public Opinion.”
- ¹⁰ “How Medicaid Supports Student Success,” Georgetown University, Center for Children and Families, accessed March 11, 2025, <https://ccf.georgetown.edu/2025/01/09/how-medicaid-supports-student-success/>.
- ¹¹ David U. Himmelstein et al., “Prevalence and Risk Factors for Medical Debt and Subsequent Changes in Social Determinants of Health in the US,” *JAMA Network Open* 5, no. 9 (2022): e2231898, <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2796358>.
- ¹² U.S. Census Bureau, U.S. Department of Commerce, “Health Insurance Coverage Status and Type by Work Experience by Sex,” American Community Survey, ACS 1-Year Estimates Detailed Tables, Table B27012, 2023, accessed February 10, 2025, <https://data.census.gov/table/ACSDT1Y2023.B27012?q=b27012&g=500XX00US5101>.
- ¹³ Jennifer Tolbert et al., “Understanding the Intersection of Medicaid and Work: An Update,” KFF, February 4, 2025, <https://www.kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work-an-update/>.
- ¹⁴ “Hospital Cost Tool,” National Academy for State Health Policy, last updated February 7, 2025, <https://tool.nashp.org/>.
- ¹⁵ U.S. Census Bureau, U.S. Department of Commerce, “Selected Characteristics of Health Insurance Coverage in the United States,” American Community Survey, ACS 1-Year Estimates Subject Tables, Table S2701, 2023, accessed February 10, 2025, <https://data.census.gov/table/ACSST1Y2023.S2701?q=s2701&g=500XX00US5101>.
- ¹⁶ “Behavioral Health Services,” Medicaid.gov, U.S. Centers for Medicare & Medicaid Services, n.d., <https://www.medicaid.gov/medicaid/benefits/behavioral-health-services/index.html>; “How Medicaid Helps People With Substance Use Disorders,” Georgetown University, Center for Children and Families, accessed February, 29, 2025, <https://ccf.georgetown.edu/2025/02/19/how-medicaid-helps-people-with-substance-use-disorders/>; “Medicaid Is Vital to Virginia,” Georgetown University, Center for Children and Families, February 2025, <https://ccf.georgetown.edu/wp-content/uploads/2025/02/Medicaid-is-Vital-to-Virginia-2025-Fact-Sheet.pdf>.
- ¹⁷ “Medicaid in Virginia,” KFF, May 2025, <https://files.kff.org/attachment/fact-sheet-medicaid-state-VA>.
- ¹⁸ Georgetown University, “Medicaid Is Vital.”
- ¹⁹ “Virginians Struggle to Afford High Healthcare Costs; Support a Range of Government Solutions Across Party Lines,” Healthcare Value Hub, July 2019, https://healthcarevaluehub.org/wp-content/uploads/Hub-Altarum_Data_Brief_No._42_-_Virginia_Affordability.pdf.

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