**622,788** enrolled in WV Medicaid

37% of WV population is low-income (<200% FPL*)

28% of WV population is covered by Medicaid/CHIP

**Uninsured Rates in WV**

<table>
<thead>
<tr>
<th>Year</th>
<th>WV</th>
<th>US</th>
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**WV Expansion Status:**

**Adopted**

**Adults in Expansion Group:**

215,000

**Eligibility Levels**

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<th>US</th>
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<tr>
<td>Children</td>
<td>305%</td>
<td>305%</td>
</tr>
<tr>
<td>Pregnant Women</td>
<td>138%</td>
<td>74%</td>
</tr>
<tr>
<td>Parents</td>
<td>138%</td>
<td>74%</td>
</tr>
<tr>
<td>Childless Adults</td>
<td>138%</td>
<td>74%</td>
</tr>
<tr>
<td>Seniors &amp; People w/ Disabilities</td>
<td>138%</td>
<td>74%</td>
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*100% of Federal Poverty Level (FPL): $23,030 for a family of three; $13,590 for an individual

**In WV, Medicaid Covers:**

1 in 4 adults ages 19-64

4 in 9 children

3 in 4 nursing home residents

1 in 5 Medicare beneficiaries

2 in 5 people with disabilities

11% of non-elderly Medicaid enrollees in WV are people of color

60% of adults in WV on Medicaid are working
Medicaid Enrollees & Expenditures in WV

- **Analysts:** Adults & Children 76%, Elderly & Disabled 24%
- **Expenditures:** Adults & Children 44%, Elderly & Disabled 56%

In WV, the federal government pays 74% of the cost of traditional Medicaid plus a 6.2 percentage point increase during the public health emergency.

Total WV Medicaid Spending by Service: $4.6 billion

- Managed Care: 50%
- Acute Care*: 14%
- Long-Term Care*: 30%
- Payments to Medicare: 4%
- DSH Payments: 1%

The federal government pays 90% of the cost of the Medicaid expansion.

48% of births in WV were covered by Medicaid.

West Virginia has adopted the Medicaid 12-month postpartum coverage extension.
West Virginia provides 12-months of continuous Medicaid eligibility for children.

Medicaid Coverage of Women Ages 15–49

- WV: 23%
- US: 16%

National Share of Those that Hold Favorable Views of Medicaid

- Total: 75%
- Democrats: 84%
- Independents: 76%
- Republicans: 65%

National Access Measures

- Doctor Visit Among Adults in Past Year:
  - Medicaid: 85%
  - Private: 81%
  - Uninsured: 53%
- Delayed or Went Without Care Due to Cost:
  - Medicaid: 7%
  - Private: 8%
  - Uninsured: 26%