

2021 Prenatal-to-3 State Policy Roadmap

EXPANDED INCOME ELIGIBILITY FOR HEALTH INSURANCE

What progress have states made to adopt and fully implement Medicaid expansion?

State	Policy Progress
Alabama	Alabama has not expanded Medicaid eligibility under the Affordable Care Act. Although the governor can take executive action to expand Medicaid in Alabama, the legislature must include funding in the budget to cover program expenses not covered by federal funding. After the passage of the American Rescue Plan Act in March 2021, which included federal funding to cover a state's share of expanding Medicaid over the next six years, legislators discussed the possibility of expanding eligibility for Medicaid coverage. However, legislators only proposed one bill, H.B. 432, to expand Medicaid, and the bill died in committee when the legislative session ended in May. An estimated 204,100 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 49% of the state's total uninsured population.
Alaska	Alaska expanded Medicaid eligibility under the Affordable Care Act. The state adopted Medicaid expansion in July 2015 through then-Governor Walker's Revised Program Legislative request for funding. Coverage became effective on September 1, 2015. Legislators proposed no bills in the last year to modify eligibility requirements.
Arizona	Arizona expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on January 1, 2014. The Legislature passed S.B. 1092 in 2015, which requires the state to submit a Section 1115 waiver request to CMS each year to seek approval of a work requirement and 5-year lifetime limit on coverage for able-bodied adults. In 2016, after a back and forth to reach an agreement, CMS approved an 1115 waiver that required enrollees with incomes between 100%-138% of FPL to contribute to a health savings account and participate in an optional job search program. The 1115 waiver ran through September 2021. Under the Obama administration, CMS rejected the work requirement and lifetime coverage limit, but under the Trump administration in 2019, Arizona submitted an amendment to the approved waiver, which sought and received approval of the work requirement. The state never implemented the work requirement provision. In the last year and prior to the Biden administration withdrawing approved 1115 waivers in June 2021 that included a work requirement, legislators proposed one bill, H.B. 2608, which aimed to amend the act created by S.B. 1902 by eliminating the work requirement clause. The bill did not pass.
Arkansas	Arkansas expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on January 1, 2014 after the state received approval of a Section 1115 waiver to implement a modified expansion program. The approved 1115 waiver allows the state to use Medicaid expansion funds to subsidize premiums for beneficiaries who purchase private health insurance through the health insurance marketplace. The legislature must reauthorize the program each year with a 75% majority in both the House and Senate. In 2018, CMS approved an 1115 waiver to impose a work requirement. The requirement became effective in June 2018, and an estimated 18,000 people lost coverage by the end of 2018. A federal judge overturned the work requirement rule in March 2019, so enrollees no longer need to report work activities. In February 2021 under the guidance of the Biden administration, CMS sent letters to states with approved work requirements notifying them to begin the process of

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	withdrawing these waiver authorities. In the last year, legislators passed a bill, S.B. 410, to create a replacement Medicaid program (the current program is set to expire at the end of 2021). As of August 1, 2021, Arkansas hasn't submitted a 1115 waiver to CMS to seek approval of the new program. In the last year, legislators proposed no bills to modify eligibility requirements.
California	California expanded Medicaid eligibility under the Affordable Care Act. In 2010, California was one of six states to sign up for the early Medicaid expansion option. These six states used state plan amendments and/or Section 1115 waiver authority to expand Medicaid prior to January 1, 2014 and obtain federal matching funds to provide coverage for enrollees with incomes not otherwise eligible for coverage. By doing this, California took advantage of federal funding to help cover care that counties were already covering, but receiving no federal funding to do so. California used this early option to provide coverage for childless adults with incomes up to 200% of FPL. In 2013, then-Governor Brown signed H.B. X1-1 to expand Medicaid. The full expansion went into effect in 2014. In January 2020, California extended Medicaid coverage to young adults (ages 19-25) who are eligible based on their income, regardless of their immigration status. In the last year, legislators proposed no bills to modify eligibility requirements.
Colorado	Colorado expanded Medicaid eligibility under the Affordable Care Act. Then-Governor Hickenlooper signed legislation authorizing the expansion of coverage in 2013. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Connecticut	Connecticut expanded Medicaid eligibility under the Affordable Care Act. In 2010, Connecticut was the first among six states to sign up for the early Medicaid expansion option. These six states used state plan amendments and/or Section 1115 waiver authority to expand Medicaid prior to January 1, 2014 and obtain federal matching funds to provide coverage for enrollees with incomes up to 138% of the federal poverty level (FPL). By doing this, Connecticut took advantage of federal funding to help cover care that the state was already covering, but receiving no federal funding to do so. In 2010, Connecticut transitioned adults with very low-income (up to 56% of FPL) from the State Administered General Assistance program into HUSKY D, the state's Medicaid program for childless adults. Then in 2014, the state fully expanded coverage by raising the income limit up to 138% of FPL. In the last year, legislators proposed three bills to modify eligibility requirements. S.B. 195 and S.B. 1056 each proposed increasing the income eligibility threshold for childless adults from 138% to 200% of FPL, and S.B. 956 proposed the extension of HUSKY D coverage to all who are eligible based on their income, regardless of their immigration status. The three bills failed.
Delaware	Delaware expanded Medicaid eligibility under the Affordable Care Act. In 2013, then-Governor Markell signed the budget for the following year, which included funding to expand Medicaid. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
District of Columbia	The District of Columbia expanded Medicaid eligibility under the Affordable Care Act. In 2010, the District of Columbia was one of six states to sign up for the early Medicaid expansion option. These six states used state plan amendments and/or Section 1115 waiver authority to expand Medicaid prior to January 1, 2014 and obtain federal matching funds to provide coverage for enrollees with incomes up to 138% of the federal poverty level (FPL). By doing this, the District of Columbia took advantage of federal funding to help cover care that the state was already covering in a DC-based program, but receiving no federal funding to do so. The District of Columbia used this early option to provide coverage for childless adults with incomes up to 200% of FPL. Currently, the District of Columbia

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	provides coverage to applicants with incomes up to 215% of FPL, which is the highest income eligibility threshold of any state. Legislators proposed no bills in the last year to modify eligibility requirements.
Florida	Florida has not expanded Medicaid eligibility under the Affordable Care Act. Legislators proposed five bills in the last year to expand Medicaid, but all bills died in committee. In 2020, two bills, H.J.R. 247 and S.J.R. 224, were proposed that would have allowed a statewide vote on a constitutional amendment to expand Medicaid, but both measures failed. Another initiative is currently underway to put Medicaid expansion on the 2022 ballot. An estimated 789,800 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 33% of the state's total uninsured population.
Georgia	Georgia has not expanded Medicaid eligibility under the Affordable Care Act. In 2014, the Georgia legislature passed H.B. 990, which requires legislative approval before the state can adopt and implement Medicaid expansion. Late 2015, CMS approved the state's Section 1115 waiver to extend Medicaid eligibility to childless adults with incomes up to 100% of FPL who meet a work requirement. Georgia planned to implement the coverage extension on July 1, 2021, but the state has postponed a start date due to the Biden administration rescinding approval of 1115 waivers that included a work requirement. In the last year, legislators proposed four bills, H.B. 630, H.B. 187, H.B. 209, and S.B. 172, to expand Medicaid, but all bills died in committee. An estimated 452,600 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 39% of the state's total uninsured population.
Hawaii	Hawaii expanded Medicaid eligibility under the Affordable Care Act (ACA). In June 2012, then-Governor Abercrombie voiced support for the ACA after the Supreme Court ruled that states can opt out of the law's Medicaid expansion provision. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Idaho	Idaho expanded Medicaid eligibility under the Affordable Care Act. Voters approved a ballot initiative in 2018 to expand Medicaid. Governor Little then signed legislation to expand Medicaid, but the bill also included provisions to impose work requirements. The state submitted a Section 1115 waiver to CMS in September 2019 to gain approval for the work requirements. Enrollment began November 1, 2019, and expansion was effective starting January 1, 2020. As of August 1, 2021, the Section 1115 waiver is still pending with CMS. Under the guidance of the Biden administration, CMS is expected to reject all pending work requirement waivers. Legislators proposed no bills in the last year to modify eligibility requirements.
Illinois	Illinois expanded Medicaid eligibility under the Affordable Care Act. In 2013, then-Governor Quinn signed S.B. 26, which amended the Medical Assistance Article of the Illinois Public Aid Code. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Indiana	Indiana expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on February 1, 2015 after the state received approval of a Section 1115 waiver to implement a modified expansion program. In 2018, CMS approved an additional Section 1115 waiver to mandate a work requirement. The state scheduled the requirement to be phased in throughout 2019; however, in September 2019, a lawsuit was filed against the work requirement. On October 31, 2019, the Indiana Family and Social Services Administration announced that it would temporarily suspend the enforcement of its work requirement due to the pending outcome of the state's legal challenge. In

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	February 2021, under the guidance of the Biden administration, CMS sent letters to states with approved work requirements notifying them to begin the process of withdrawing these waiver authorities. Legislators proposed no bills in the last year to modify eligibility requirements.
Iowa	Iowa expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed S.B. 446, which appropriated funding for the expansion. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Kansas	Kansas has not expanded Medicaid eligibility under the Affordable Care Act. In 2014, the Kansas legislature passed H.B. 2552, which requires legislative approval before the state can adopt and implement Medicaid expansion. In the last year, Governor Kelly and the legislature put forth legislation, H.B. 2436 and S.B.287, to fund Medicaid expansion through medical marijuana regulation. Neither bill moved forward after being referred to committee. An estimated 82,700 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 38% of the state's total uninsured population.
Kentucky	Kentucky expanded Medicaid eligibility under the Affordable Care Act. The state expanded Medicaid under the authority of KRS 205.520(3), which provides legislative authorization for the executive branch to “take advantage of all federal funds that may be available for medical assistance.” Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Louisiana	Louisiana expanded Medicaid eligibility under the Affordable Care Act. In 2016, Governor Edwards signed Executive Order No. JBE 16-01 to expand Medicaid. Coverage became effective on July 1, 2016. Legislators proposed no bills in the last year to modify eligibility requirements.
Maine	Maine expanded Medicaid eligibility under the Affordable Care Act. In 2017, Maine voters approved a ballot initiative to expand Medicaid. This was the first citizen-initiated measure to expand Medicaid. The act required the Department of Health and Human Services to submit state plan amendments (SPA) by April 3, 2018, with coverage to begin no later than July 2, 2018. However, the SPAs were not submitted, and coverage did not start on time. On January 3, 2019, Governor Mills issued Executive Order 1 to enact the expansion. The expansion became effective on January 10, 2019, with coverage retroactive to July 2, 2018. Legislators proposed no bills in the last year to modify eligibility requirements.
Maryland	Maryland expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed H.B. 228 to expand Medicaid. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Massachusetts	Massachusetts expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed H.B. 3452 to expand Medicaid. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.

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Michigan	Michigan expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed H.B. 4714 to expand Medicaid. Coverage became effective on April 1, 2014. In December 2018, the state received CMS approval of a Section 1115 waiver, which allows the state to charge a premium to adults with incomes above 100% of FPL and who have been enrolled in Medicaid for at least 48 months. As of August 1, 2021, these waiver provisions have not been implemented. Legislators proposed no bills in the last year to modify eligibility requirements.
Minnesota	Minnesota expanded Medicaid eligibility under the Affordable Care Act (ACA). In 2010, Minnesota was one of six states to sign up for the early Medicaid expansion option. These six states used state plan amendments and/or Section 1115 waiver authority to expand Medicaid prior to January 1, 2014 and obtain federal matching funds to provide coverage for enrollees with incomes up to 138% of the federal poverty level (FPL). By doing this, Minnesota took advantage of federal funding to help cover care that the state was already covering, but receiving no federal funding to do so. The state was one of the most generous prior to the expansion of Medicaid under the ACA. In 2010, this included coverage for parents with dependent children with incomes up to 100% of FPL, and for childless adults with incomes up to 75% of FPL. In 2013, the legislature passed H.B. 9 to expand Medicaid coverage under the ACA. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Mississippi	Mississippi has not expanded Medicaid eligibility under the Affordable Care Act. Legislators proposed nine bills in the last year to expand Medicaid, but all bills died in committee. An initiative to put Medicaid expansion on the 2022 ballot ended in May 2021 after the Mississippi Supreme Court ruled the state's entire ballot initiative process is "unworkable and inoperative" due to outdated language in the state's constitution. An estimated 166,600 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 51% of the state's total uninsured population.
Missouri	Missouri is one of two states that expanded Medicaid eligibility under the Affordable Care Act this year. In August 2020, voters approved a ballot initiative to expand Medicaid, which made Missouri the sixth state to bypass governors and legislatures and expand Medicaid by public referendum. Coverage was expected to become effective on July 1, 2021, but in May 2021, Governor Parson declared that the state was withdrawing its state plan amendment (SPA) to expand coverage due to a lack of funding. Later that month, advocates filed a lawsuit against the state arguing that it was unlawful to refuse to expand coverage. In June, a circuit court judge ruled in favor of the state, but in July, the Missouri Supreme Court overturned the lower court's decision. The expansion became effective on August 10, 2021, with coverage retroactive to July 1, 2021. Legislators proposed no bills in the last year to modify eligibility requirements.
Montana	Montana expanded Medicaid eligibility under the Affordable Care Act. In 2015, the legislature passed S.B. 405 to expand Medicaid. Coverage became effective on January 1, 2016, but was set to expire on June 30, 2019. On November 6, 2018, voters rejected a ballot measure to continue the state's expansion through funding from a higher tax on tobacco. Subsequently, then-Governor Bullock signed into law a bill extending the state's Medicaid expansion for an additional 6 years on the condition that state officials seek federal approval to impose work requirements. As of August 1, 2021, the Section 1115 waiver, which included the work requirement proposal, is still pending with CMS. Under the guidance of the Biden administration, CMS is expected to reject all pending work requirement waivers. Legislators proposed no bills in the last year to modify eligibility requirements.

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Nebraska	Nebraska expanded Medicaid eligibility under the Affordable Care Act. In 2018, voters approved a ballot initiative to expand Medicaid. The Nebraska Department of Health and Human Services submitted their state plan amendments and a Section 1115 waiver to CMS in 2019. Enrollment opened in July 2020, and coverage became effective on October 1, 2020. Legislators proposed no bills in the last year to modify eligibility requirements.
Nevada	Nevada expanded Medicaid eligibility under the Affordable Care Act. The legislature included funding for the expansion in the FY13-15 legislatively approved budget. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
New Hampshire	New Hampshire expanded income eligibility for Medicaid under the Affordable Care Act (ACA). Coverage became effective on August 15, 2014. The state implemented the expansion through a state plan amendment (SPA) authority; however, the authorizing legislation required the state to obtain Section 1115 waiver authority to operate the program differently from the standard approach permitted under the ACA, and it also initially only approved the expansion for two years. CMS approved the waiver in March 2015, and the state transitioned the program to a marketplace premium assistance model in January 2016. New Hampshire enacted S.B. 313 in 2018, which required the state to submit new 1115 waivers to extend coverage for another 5 years (through 2023), abandon the premium assistance model, and switch to a managed care model. CMS approved the proposals, and changes took effect in January 2019. New Hampshire also received waiver approval in 2018 to impose a work requirement, but in July 2019 a federal court ruling blocked the state from moving forward with the work requirement. Legislators proposed no bills in the last year to modify eligibility requirements.
New Jersey	New Jersey expanded Medicaid eligibility under the Affordable Care Act. In 2010, New Jersey was one of six states to sign up for the early Medicaid expansion option. These six states used state plan amendments and/or Section 1115 waiver authority to expand Medicaid prior to January 1, 2014 and obtain federal matching funds to provide coverage for enrollees with incomes not otherwise eligible for coverage. By doing this, New Jersey took advantage of federal funding to help cover care that the state was already covering, but receiving no federal funding to do so. New Jersey used this early option to provide coverage for childless adults with incomes up to 23% of FPL. Then in 2013, the legislature passed the FY14 Appropriations Act to implement the full expansion. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
New Mexico	New Mexico expanded Medicaid eligibility under the Affordable Care Act. In 2013, then-Governor Martinez announced that the state would expand Medicaid. The legislature passed H.B. 2, an appropriations act that included funding for the expansion. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
New York	New York expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed S.B. 02606 to expand Medicaid. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
North Carolina	North Carolina has not expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed S.B. 4, which requires legislative approval before the state can adopt and implement Medicaid expansion. In the last year, legislators proposed three bills, H.B. 809, H.B. 470, and S.B. 402, to expand Medicaid. Additionally, Governor Cooper included adopting Medicaid expansion in his biennial state budget proposal for FY22-23, which included drawing down \$1.7 billion in federal COVID-19 relief funding to cover the state's share of the program over the next six years. The current

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	FY22-23 budget proposal that was approved by the Senate excludes expanding Medicaid. As of August 1, 2021, the state legislature was still in session, all three bills were pending in committee, and a FY22-23 budget had not been approved. An estimated 372,400 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 37% of the state's total uninsured population.
North Dakota	North Dakota expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed H.B. 1362, which appropriated funding for the expansion but with a sunset clause that funding would only be through July 2017. Coverage became effective on January 1, 2014. Legislators passed H.B. 1012 in 2017 to extend coverage through July 2019, and S.B. 2012 in 2019 to further extend coverage through July 2021. In the last year, legislators passed H.B. 1012, which appropriated continued funding but without a sunset date. Legislators proposed no bills in the last year to modify eligibility requirements.
Ohio	Ohio expanded Medicaid eligibility under the Affordable Care Act. Then-Governor Kasich announced in 2013 that the state would accept federal funding to expand Medicaid. The Controlling Board approved the appropriation. Lawmakers opposed the move and filed a lawsuit to block it on the grounds that the legislature was not involved in the decision. The Ohio Supreme Court ruled in favor of the governor, and coverage became effective on January 1, 2014 as planned. CMS approved a Section 1115 waiver in 2019 which allows the state to impose a work requirement, but the state never implemented the requirement. In February 2021, under the guidance of the Biden administration, CMS sent letters to states with approved work requirements notifying them to begin the process of withdrawing these waiver authorities. Legislators proposed no bills in the last year to modify eligibility requirements.
Oklahoma	Oklahoma is one of two states that expanded Medicaid eligibility under the Affordable Care Act this year. In June 2020, voters approved a ballot initiative to expand Medicaid, which made Oklahoma the fifth state to bypass governors and legislatures and expand Medicaid by public referendum. The constitutional amendment said the state must implement Medicaid expansion within a year. Coverage became effective on July 1, 2021. Legislators proposed no bills in the last year to modify eligibility requirements.
Oregon	Oregon expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed H.B. 5201, which appropriated funding for the expansion. Coverage became effective on January 1, 2014. In the last year, legislators passed H.B. 3352, which dedicates \$100 million to expand Medicaid eligibility to all adults who are eligible based on their income, regardless of their immigration status.
Pennsylvania	Pennsylvania expanded Medicaid eligibility under the Affordable Care Act (ACA). In 2014, the state received approval of a Section 1115 waiver to implement a modified expansion program. Instead of enrolling eligible adults in Medicaid, the modified program used federal funds to subsidize private health insurance. Coverage for the modified program became effective on January 1, 2015. Then, in February 2015, newly elected Governor Wolf directed the Department of Human Services to withdraw the 2014 approved waiver, and to instead implement the traditional Medicaid expansion as outlined in the ACA. Legislators proposed no bills in the last year to modify eligibility requirements.
Rhode Island	Rhode Island expanded Medicaid eligibility under the Affordable Care Act. Then-Governor Chafee signed the FY14 budget in 2013, which appropriated the funding for the expansion. Enrollment began in October 2013, and expansion coverage went into effect on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.

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South Carolina	South Carolina has not expanded Medicaid eligibility under the Affordable Care Act. In the last year, legislators proposed a bill, H.B. 3226, to expand Medicaid, but it died in committee. Additionally, legislators proposed companion bills, S.J.R. 0083 and H.J.R. 3269, which proposed to have an advisory question be placed on the 2022 ballot to ask voters to voice their preference on expanding Medicaid. Both bills died in committee. An estimated 188,000 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 40% of the state's total uninsured population.
South Dakota	South Dakota has not expanded Medicaid eligibility under the Affordable Care Act. An initiative is currently underway to put Medicaid expansion on the 2022 November ballot. Organizers have until November 2021 to gather enough signatures to have the issue added to the 2022 ballot. An estimated 27,800 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 42% of the state's total uninsured population.
Tennessee	Tennessee has not expanded Medicaid eligibility under the Affordable Care Act. In 2014, the legislature passed H.B. 937, which requires legislative approval before the state can adopt and implement Medicaid expansion. Legislators did not propose legislation in the last year to adopt Medicaid expansion in Tennessee. An estimated 226,200 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 38% of the state's total uninsured population.
Texas	Texas has not expanded Medicaid eligibility under the Affordable Care Act. In the last year, legislators proposed nearly 25 bills to expand Medicaid, but all failed. One bill, S.B. 117 (companion bill H.B.3871), had bipartisan support in the House but not in the originating chamber. The bill died without a hearing. Additionally, the House proposed an amendment to the state budget, which would have allowed the state to draw down federal dollars to expand Medicaid, either traditionally or through an 1115 waiver. Legislators struck down the amendment. Texas has the highest uninsured rate among the nonelderly population. An estimated 1.4 million uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 34% of the state's total uninsured population.
Utah	Utah expanded Medicaid eligibility under the Affordable Care Act. In 2018, the legislature passed H.B. 472, which directed the state to submit a Section 1115 waiver to CMS to request approval to provide coverage for childless adults with incomes up to 100% of FPL and impose a work requirement. The state submitted the waiver in June 2018. Then, in November 2018, voters approved a ballot initiative to expand Medicaid coverage to adults with incomes up to 138% of FPL. Lawmakers intervened and passed S.B. 96 in February 2019, which again called for the limited expansion. In March 2019, CMS approved the 1115 waiver for the limited expansion, and the state implemented the coverage change in April 2019 and intended to impose the work requirement in 2020. The cost to provide limited coverage proved to be greater without the enhanced federal funding offered to states that provide coverage up to 138% of FPL, so the state submitted a new 1115 waiver in November 2019, which requested to expand eligibility to adults with incomes up to 138% of FPL, impose a work requirement, and require premiums from enrollees with incomes above 100% of FPL. CMS approved the new 1115 waiver, and expanded coverage became effective on January 1, 2020. The work requirement also went into effect, but in April 2020, the state suspended it due to the COVID-19 pandemic. In February 2021, under the guidance of the Biden administration, CMS sent letters to states with approved work requirements notifying them to begin the process of withdrawing these waiver authorities. Legislators proposed no bills in the last year to modify eligibility requirements.

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Vermont	Vermont expanded Medicaid eligibility under the Affordable Care Act. Enrollment began in October 2013, and expansion coverage went into effect on January 1, 2014. In 2018, state legislators proposed H.B. 823 to impose work requirements on the Medicaid expansion population, but the bill failed. Legislators proposed no bills in the last year to modify eligibility requirements.
Virginia	Virginia expanded Medicaid eligibility under the Affordable Care Act. In 2018, two budget bills, H.B. 5001 and H.B. 5002, passed that called for the state to adopt Medicaid expansion with an additional work requirement provision. Enrollment began on November 1, 2018, and coverage became effective on January 1, 2019. The state withdrew the Section 1115 waiver to impose the work requirement on July 1, 2020. Legislators proposed no bills in the last year to modify eligibility requirements.
Washington	Washington expanded Medicaid eligibility under the Affordable Care Act. In 2010, Washington was one of six states to sign up for the early Medicaid expansion option. These six states used state plan amendments and/or Section 1115 waiver authority to expand Medicaid prior to January 1, 2014 and obtain federal matching funds to provide coverage for enrollees with incomes not otherwise eligible for coverage. By doing this, Washington took advantage of federal funding to help cover care that the state was already covering, but receiving no federal funding to do so. Washington used this early option to provide coverage for childless adults with incomes up to 133% of FPL. Later, state legislators included federal funding for Medicaid expansion in the 2013-2015 Omnibus Budget. Coverage became effective on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
West Virginia	West Virginia expanded Medicaid eligibility under the Affordable Care Act. Then-Governor Tomblin announced in 2013 that the state would expand Medicaid. Enrollment began in October 2013, and expansion coverage went into effect on January 1, 2014. Legislators proposed no bills in the last year to modify eligibility requirements.
Wisconsin	Wisconsin has not expanded Medicaid eligibility under the Affordable Care Act, but adults with incomes up to 100% of FPL are covered. In December 2018, then-Governor Walker signed a law that effectively prohibits the Wisconsin governor from expanding Medicaid without some involvement from the state legislature. Legislators proposed two bills in the last year during the regular session to expand Medicaid, but both bills died in committee. In May 2021, Governor Evers called a special session to pass a bill to expand Medicaid and draw down \$1 billion in federal COVID-19 relief funding. Both chambers gavelled in and adjourned the special session within seconds. An estimated 29,500 uninsured adults would become eligible for Medicaid if the state opted to expand coverage up to 138% of FPL, which is 11% of the state's total uninsured population.
Wyoming	Wyoming has not expanded Medicaid eligibility under the Affordable Care Act. In the last year, Wyoming legislators proposed two bills, H.B. 162 and S.F. 154, to expand Medicaid. In March 2021, H.B.162 passed the House but failed by one vote in the Senate Labor, Health, and Social Service Committee. Later, in May 2021, the Joint Revenue Committee voted to sponsor H.B.162 and bring the bill back for debate during a special session. Ultimately, the state did not hold a special session in July as expected. An estimated 15,200 uninsured adults would become eligible for Medicaid if the state opted to expand coverage, which is 28% of the state's total uninsured population.

Find additional information on the [methods and sources](#) used throughout the Roadmap and for each state.