Prenatal-to-3 State Policy Roadmap 2026

EXPANDED INCOME ELIGIBILITY FOR HEALTH INSURANCE

What progress have states made in the last year to adopt and fully implement Medicaid expansion?

State	State Context and Policy Progress
Alabama	Alabama is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act. Although the governor can take executive action to expand Medicaid, the legislature must include funding in the budget to cover program expenses not covered by federal funding. In 2023, Alabama implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced S.B. 61, which would have gone beyond the One Big Beautiful Bill Act's eligibility verification requirements by directing the state to review a broader range of data sources every month beginning in October 2026, rather than following the narrower requirements and later implementation deadlines of the federal law. The bill did not pass this session.
Alaska	Alaska has expanded Medicaid eligibility under the Affordable Care Act. The state adopted Medicaid expansion in July 2015 after then-Governor Walker used a fiscal maneuver to submit the proposal through Alaska's Legislative Budget and Audit Committee and enacted the policy without the full legislature's approval. Coverage became effective on September 1, 2015. In 2024, Alaska implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators did not introduce any bills to modify Medicaid eligibility requirements.
Arizona	Arizona has expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on January 1, 2014. In 2015, the legislature passed S.B. 1092, requiring the state to submit a Section 1115 waiver request to the Centers for Medicare and Medicaid Services (CMS) to impose a work requirement. In 2016, CMS granted a waiver that required individuals earning between 100% and 138% of the federal poverty level to contribute a modest amount to a Health Savings Account, and to offer, but not mandate, a job search program. In 2019, the Trump administration allowed the state to make the work requirement mandatory, but the state never implemented it due to legal concerns. In 2021, the Biden administration rescinded approved Section 1115 waivers that included a work requirement. In 2023, Arizona implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators passed H.B. 4145 and H.B. 2796, which would have required more frequent Medicaid eligibility checks, prohibited the state from accepting most self-attested eligibility information without additional verification, and sought federal approval to limit presumptive eligibility to pregnant women and children. The bills go beyond the One Big Beautiful Bill Act's administrative requirements by requiring redeterminations on quarterly basis rather than every 6 months. Both bills were vetoed by Governor Hobbs.

Arkansas	Arkansas has 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 waiver allowed the state to use Medicaid expansion funds to subsidize premiums for beneficiaries who purchased private health insurance through the marketplace. The legislature must reauthorize the program each year with a 75% majority in both the House and Senate. In 2018, the Centers for Medicare and Medicaid Services (CMS) approved a waiver to impose a work requirement, which became effective in June of that year. Until 2023 of the 13 states that previously received approval to impose work requirements, Arkansas was the only state that had ever implemented penalties for noncompliance. By the end of 2018, an estimated 18,000 people had lost coverage. A federal judge overturned the work requirement rule in March 2019. In September 2021, following the Biden administration's rescindment of waivers that included work requirements, Arkansas submitted a Section 1115 waiver request to CMS to seek approval of its new Medicaid program, which removed the work requirement and eliminated premiums for the expansion population. CMS approved the new program in December 2021. However, in early 2025, the state submitted a new waiver that would have required certain expansion enrollees to participate in work requirements to remain enrolled in private Marketplace plans. The waiver amendment has not been formally approved. Arkansas is the only state that has not extended postpartum Medicaid coverage to 12 months. In the last year, legislators did not introduce any bills to modify Medicaid eligibility requirements. However, administratively, Arkansas began implementation of the work requirements outlined in the One Big Beautiful Bill Act (OBBBA). In July 2026, the state began using automated data checks to determine whether enrollees appear to meet the requirement or qualify for an exemption. The state will not terminate coverage for noncompliance until January 2027, when OBBBA's work requirements formally take effect. The state also plans to verify compliance over a 3-month lookback period at renewal rather than the 1-month minimum required by OBBBA.
California	California has 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. California used this early option to provide coverage for childless adults with incomes at or below 200% of the federal poverty level. 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 to 25) who are eligible based on income, regardless of their immigration status. Building on this progress, California enacted S.B. 184, effective July 1, 2022, to further expand coverage to lower-income Californians ages 26 to 49 who were previously ineligible due to immigration status. However, effective January 1, 2026, California froze new Medicaid enrollment for adults age 19 and older who do not have satisfactory immigration status, retaining full-scope coverage only for existing enrollees who remain continuously enrolled. In 2022, California implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted A.B. 2161, which implements the One Big Beautiful Bill Act's 6-month redetermination and work requirements with safeguards intended to reduce administrative burden for Medicaid enrollees, including a requirement that the state use available data before requesting information from applicants or enrollees. Legislators introduced S.B. 1054, which would have required larger employers to report employee wage and hours-worked data to state agencies directly, in an effort to streamline verification of work requirements. Legislators also introduced S.B. 1422, which would have gradually reopened full-scope Medicaid enrollment to income-eligible adults who do not meet federal immigration status requirements, when the state can determine that doing so would not result in a projected state budget deficit. These bills did not pass this session.

Colorado	Colorado has expanded Medicaid eligibility under the Affordable Care Act. In 2013, then-Governor Hickenlooper signed legislation authorizing the expansion of coverage. Coverage became effective on January 1, 2014. In 2022, the legislature enacted H.B. 1289, which established comprehensive health coverage for children and pregnant individuals who would otherwise qualify for Medicaid or CHIP if not for their immigration status, effective January 1, 2025. In 2023, Colorado implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 1411, which scaled back the coverage established under H.B. 1289 by limiting benefits for pregnant individuals and children who do not meet federal immigration status requirements and, beginning in January 2027, capping enrollment of children at 25,000 if enrollment or spending exceeds specified thresholds. Legislators also enacted H.B. 1235, which requires the state to adopt rules by January 2027 to implement the One Big Beautiful Bill Act's work requirements and publicly report their impact on Medicaid enrollment. Finally, legislators enacted H.B. 1429, which will modernize the state's public benefits system by aligning county and state performance requirements across programs including SNAP, Medicaid, TANF, and child care assistance, while also requiring continuous quality improvement, public performance reporting, and a more coordinated benefits delivery model. Implementation will occur in phases beginning in September 2026.
Connecticut	Connecticut has 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. Under the early expansion, Connecticut transitioned adults with very low incomes (up to 56% of the federal poverty level (FPL)) from the State Administered General Assistance program into HUSKY D, the state's Medicaid program for childless adults. In 2014, the state fully expanded coverage by raising the income limit to 138% of the FPL. In 2022, Connecticut implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced S.B. 3, which would have established a Basic Health Program for more residents with incomes up to 200% of the FPL and included measures to use self-attestation, data matching, and automatic renewals to reduce coverage losses during implementation of the One Big Beautiful Bill Act (OBBBA). Legislators also introduced S.B. 401, which would have required the state to develop a plan for a state-funded bridge program to support certain populations at risk of losing federal food, health care, and housing assistance, including those impacted by OBBBA's changes to SNAP and Medicaid work requirements. These bills did not pass this session.
Delaware	Delaware has 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. In 2023, Delaware implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators did not introduce any bills to modify Medicaid eligibility requirements.

District of Columbia	The District of Columbia has 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. The District of Columbia initially used this authority and a Section 1115 waiver to extend Medicaid coverage to childless, non-pregnant adults with incomes up to 200% of the federal poverty level (FPL). In 2022, the District of Columbia implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, the District of Columbia significantly reduced Medicaid eligibility for adults through its Fiscal Year 2026 budget. Effective January 2026, the income limit for childless adults decreased from 215% to 138% of the FPL, and the limit for parents and caretaker relatives decreased from 221% to 138% of the FPL. Alongside this change, the District established the Healthy DC Plan, a separate, no-cost health coverage program designed to provide coverage to many adults losing Medicaid who have incomes between 138% and 200% of the FPL. District officials estimated that more than 18,000 Medicaid enrollees with incomes above the new limit would transition out of Medicaid, with most expected to qualify for Healthy DC or Marketplace coverage. By January 8, 2026, over 14,700 former Medicaid enrollees had moved to the Healthy DC Plan. Additionally, in the last year, councilmembers enacted B26-463, which will establish a Medicaid buy-in program for employed residents with disabilities, allowing eligible individuals age 16 and older to enroll in Medicaid without an income or asset limit, with monthly premiums based on income. The program is set to take effect in October 2027.
Florida	Florida is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act. In 2022, Florida implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. Legislators introduced H.B. 1453 and S.B. 1758, which would have required the state to seek federal approval to impose work requirements on certain Medicaid recipients ages 19 to 64, modeled on the One Big Beautiful Bill Act's requirements despite the fact that the law only applies to adults covered through Medicaid expansion programs. Legislators also introduced H.B. 1351 and S.B. 368, which would have expanded presumptive eligibility for pregnant women. These bills did not pass this session.

Georgia	Georgia is one of 10 states that 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. In 2020, under Section 1115 waiver authority, the Trump administration approved a new, limited Medicaid coverage program in Georgia known as Pathways to Coverage. Through Pathways to Coverage, Georgia extended Medicaid eligibility to childless adults with incomes at or below 100% of the federal poverty level (FPL) who meet a work requirement. Georgia planned to implement the coverage extension on July 1, 2021, but postponed its start date when, that year, the Biden administration rescinded approval of Section 1115 waivers that included a work requirement. Following litigation, Pathways to Coverage began enrollment on July 1, 2023, with coverage beginning in September 2023. Before states began implementing the One Big Beautiful Bill Act's (OBBBA) work requirements early in 2026, Georgia was one of only two states to ever implement such a policy. The policy did not allow any exceptions for caregiving or high child care costs until a temporary waiver extension was approved in September 2025. As of May 2026, Pathways to Coverage had enrolled approximately 17,700 individuals, still below the state's initial projection of 25,000 enrollees in the program's first year. Pathways to Coverage's waiver is set to expire in December 2026 when the state must transition the program to OBBBA's federal requirements. In 2022, Georgia implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.B. 1151 and S.B. 380 which would have expanded the state's Medicaid program. H.B. 1151 would have extended eligibility to adults with incomes at or below 138% of the FPL who meet OBBBA's work requirements, whereas S.B. 380 would have authorized funding for Medicaid expansion only if the federal matching rate remained above 90%. Legislators also introduced H.B. 1276, which would have implemented several of OBBBA's Medicaid provisions, including its 2-month limit on retroactive eligibility, but also would have gone beyond what OBBBA requires by prohibiting the state from accepting most self-attested eligibility information without additional verification and requiring monthly reviews of a broader range of state and federal data sources. These bills did not pass this session.
Hawaii	Hawaii has expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on January 1, 2014. In 2022, Hawaii implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.R. 49, which creates the Hawaii Health Plan Working Group to recommend a basic, affordable health plan for residents who may become uninsured because of the One Big Beautiful Bill Act's (OBBBA) changes to Medicaid. The working group must submit its recommendations before the 2027 legislative session. Legislators introduced H.B. 1546 and S.B. 2087, which would have directly established a temporary health coverage program to provide state-funded assistance to certain residents who lose Medicaid coverage because of OBBBA's eligibility changes. Legislators also introduced H.B. 2116 and S.B. 2670, which would have appropriated $3 million in grant funding for nonprofit organizations that expand or create new community engagement opportunities for residents needing to meet OBBBA's work requirements. These bills did not pass this session.

Idaho	Idaho has expanded Medicaid eligibility under the Affordable Care Act. Voters approved a ballot initiative in 2018 to expand Medicaid. Governor Little signed S. 1204 in April 2019 to legislatively alter the Medicaid expansion program by imposing a work requirement. The state submitted a Section 1115 waiver request to the Centers for Medicare and Medicaid Services (CMS) in September 2019 to gain approval for the work requirement. Enrollment began November 1, 2019, and expansion became effective on January 1, 2020. In 2021, the Biden administration rescinded previously approved work requirement waivers and did not approve pending waiver requests. In 2025, legislators enacted H. 345, which directed the state to seek federal approval to impose work requirements and allow Medicaid expansion adults with incomes between 100% and 138% of the federal poverty level (FPL) to choose federally subsidized Marketplace coverage instead of Medicaid. Idaho submitted the resulting waiver in January 2026, and the request remains pending. In January 2025, Idaho implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H. 913, which goes beyond implementing One Big Beautiful Bill Act's (OBBBA) work requirements by requiring new Medicaid applicants to demonstrate work compliance in the 3 consecutive months before applying, rather than OBBBA's minimum 1-month lookback period. The changes take effect January 1, 2027. Legislators introduced H. 850, which would have repealed Medicaid expansion effective January 1, 2028. Legislators also introduced H. 912, which would have implemented several of OBBBA's Medicaid provisions, including limits on retroactive eligibility and checks for duplicate or deceased enrollees, but also would have gone beyond what OBBBA requires by extending 6-month redeterminations to some adults, further limiting self-attestation, and conducting quarterly work requirement checks. These bills did not pass this session.
Illinois	Illinois has 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. In 2021, Illinois implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.B. 3365, which codifies several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, including 6-month redeterminations for adults in the Medicaid expansion population, new limits on retroactive eligibility, and restrictions on federally funded Medicaid eligibility for certain immigrants. The changes will be implemented by OBBBA's deadline of January 1, 2027. Legislators introduced S.B. 3882 and S.B. 3883 in response to OBBBA's work requirements. S.B. 3882 would have prohibited work requirements for former foster youth, veterans, and people experiencing homelessness, whereas S.B. 3883 would have attempted to prohibit Medicaid work requirements for all recipients. Legislators also introduced S.B. 3047, which would have excluded veterans' disability benefits from income when determining eligibility for Medicaid and other public benefit programs. Finally, legislators introduced H.B. 4784 and S.B. 3294, which would have allowed individuals receiving institutional or home- and community-based services to retain Medicaid coverage during the redetermination process and directed the state to seek federal approval to conduct full redeterminations for people with disabilities only once every 5 years. These bills did not pass this session.

Indiana	Indiana has expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on February 1, 2015, after the state received approval for a Section 1115 waiver to implement a modified expansion program. In 2018, the Centers for Medicare and Medicaid Services approved an additional Section 1115 waiver to mandate a work requirement; however, the work requirement was temporarily suspended in October 2019 due to a state legal challenge. In 2021, the Biden administration rescinded approved Section 1115 waivers that included a work requirement. In 2025, legislators enacted S.B. 2, which prohibited the state from accepting most self-attested eligibility information without additional verification, limited the use of presumptive eligibility, and directed the state to impose work requirements on individuals in the expansion population. Although S.B. 2 predated the One Big Beautiful Bill Act (OBBBA), the federal law subsequently made work requirements mandatory for Medicaid expansion adults beginning in January 2027. In 2022, Indiana implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.B. 1, which implements several of OBBBA's Medicaid provisions, but goes beyond what OBBBA requires by imposing a 3-month lookback period at application for work compliance and requiring quarterly work requirement checks. The changes will be implemented by OBBBA's deadline of January 1, 2027. Legislators also enacted S.B. 222, which extends performance standards for presumptive eligibility determinations from hospitals to all qualified providers, so more providers may be required to complete additional training or lose their authority to make presumptive eligibility determinations. This bill is now in effect.
Iowa	Iowa has expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed S.F. 446, which appropriated funding for the expansion. In 2025, legislators enacted S.F. 615, which directed the state to seek federal approval to impose work requirements on Medicaid enrollees. Although S.F. 615 predated the One Big Beautiful Bill Act (OBBBA), the federal law subsequently made work requirements mandatory for Medicaid expansion adults beginning in January 2027. In April 2025, Iowa implemented an extension of pregnancy Medicaid coverage to 12 months postpartum and reduced its income eligibility threshold for pregnant individuals from 380% to 220% of the FPL. In the last year, legislators enacted S.F. 2422, which will implement OBBBA's 2-month limit on retroactive eligibility for pregnant women, children, and nursing facility residents, but will also go beyond what OBBBA requires by eliminating retroactive eligibility for all other adults, pending federal approval. S.F. 2422 also requires the state to receive legislative approval before pursuing any efforts to expand coverage or increase state Medicaid spending and directs the state to use more extensive citizenship and immigration checks when determining Medicaid eligibility. Legislators also enacted S.F. 2484 and H.F. 2800, which appropriate funding to modernize the state's Medicaid eligibility and information technology systems. Additionally, administratively, Iowa plans to begin implementing OBBBA's requirements 1 month early, on December 1, 2026. Legislators introduced H.F. 2716, which would have expanded Medicaid eligibility for employed individuals with disabilities by increasing the program's income limit from 250% of the federal poverty level (FPL) to 300% of the FPL and disregarding unearned income and certain assets when determining eligibility. The bill did not pass this session.

Kansas	Kansas is one of 10 states that 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 2025, legislators enacted H.B. 2240, which further requires legislative approval before the state can adopt changes to Medicaid that expand coverage or increase state costs. In 2022, Kansas implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 2731, which implements several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, including quarterly checks for deceased enrollees and a 2-month limit on retroactive eligibility. However, it also goes beyond what OBBBA requires by prohibiting the state from accepting most self-attested eligibility information without additional verification and requiring monthly or quarterly reviews of a broader range of state data sources. It will also require the state to begin submitting monthly enrollment information to the Centers for Medicare and Medicaid Services in January 2027, nearly 3 years before OBBBA's October 2029 deadline. The legislature enacted the bill after overriding Governor Kelly's veto. Legislators also enacted S.B. 271, which updates the state's Children's Health Insurance Program income eligibility stardards from 250% of the 2008 federal povertly level (FPL) to 250% of the current FPL. This bill is now in effect.
Kentucky	Kentucky has 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. In 2025, legislators enacted H.B. 695, which requires legislative approval before the state can make changes to Medicaid eligibility, coverage, or benefits and directed the state to seek federal approval to impose work requirements. Kentucky submitted the waiver request in June 2025, but the One Big Beautiful Bill Act (OBBBA) subsequently made work requirements mandatory for Medicaid expansion adults beginning in January 2027. In 2022, Kentucky implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 2, which implements several of OBBBA's Medicaid provisions, including work requirements and 6-month eligibility redeterminations for Medicaid expansion adults beginning January 1, 2027. The law adopts OBBBA's minimum 1-month work compliance lookback period at application but goes beyond what OBBBA requires by requiring enrollees to demonstrate work compliance over a longer period than OBBBA requires. It also limits the use of self-attested eligibility information and prohibits the state from seeking federal implementation exemptions, waivers, or delays without legislative approval. The legislature overrode Governor Beshear's partial veto of the bill. Legislators introduced H.B. 15, H.B. 165, and S.B. 93, which would have placed a constitutional amendment before voters to protect Medicaid expansion and prohibit the state from imposing eligibility or enrollment restrictions beyond those required under federal law. Legislators also introduced H.B. 16, which would have established a state policy of providing Medicaid coverage to all Kentucky residents eligible under federal law and required an independent analysis of the state's expansion program. These bills did not pass this session.

Louisiana	Louisiana has expanded Medicaid eligibility under the Affordable Care Act. In 2016, then-Governor Edwards signed Executive Order No. JBE 16-01 to expand Medicaid. Coverage became effective on July 1, 2016. In 2022, Louisiana implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.B. 194, which implements the One Big Beautiful Bill Act's (OBBBA) immigrant eligibility restrictions 2 months before the federal effective date and imposes strict enforcement rules and more extensive immigration checks beginning in August 2026. Legislators also enacted H.B. 181, which authorizes the legislative auditor to access individual state income tax data to review the accuracy of Medicaid eligibility determinations and detect fraud.
Maine	Maine has 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. After delays in implementation, Governor Mills issued Executive Order 1 to enact the expansion, which became effective on January 10, 2019, with coverage retroactive to July 2, 2018. In 2022, Maine implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators did not introduce any bills to modify Medicaid eligibility requirements.
Maryland	Maryland has 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. In 2022, Maryland implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.B. 742, which strengthens renewal protections for Medicaid enrollees receiving home- and community-based services by requiring ex parte (automatic) redeterminations, limiting procedural disenrollment, and requiring retroactive reinstatement when coverage is improperly terminated. Legislators introduced H.B. 1331, which would have implemented the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, including limits on retroactive eligibility and checks for deceased and duplicate enrollees, but also gone beyond what OBBBA requires by extending 6-month redeterminations to some adults, further limiting self-attestation, and conducting quarterly work requirement checks. The bill would have also required documentary proof of work compliance, narrowed available exemptions, imposed a 6-month lockout period for certain enrollees who failed to report eligibility changes, and established more restrictive immigrant eligibility and verification provisions. The bill did not pass this session.
Massachusetts	Massachusetts has expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed H.B. 3452 to expand Medicaid, and coverage became effective on January 1, 2014. In 2024, Massachusetts implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H. 1403, which would provide state-funded coverage equivalent to Medicaid or the Children's Health Insurance Program for children and young adults under age 21 who meet the program's financial and categorical eligibility requirements but are otherwise ineligible because of their immigration status. As of September 2026, this bill had not passed.

Michigan	Michigan has 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 Centers for Medicare and Medicaid Services under the Trump administration approved a Section 1115 waiver which allowed the state to impose a work requirement. The waiver also allowed the state to charge a premium for adults with incomes above 100% of the federal poverty level who had been enrolled in Medicaid for at least 48 months. The Biden administration rescinded the authority to impose a work requirement in April 2021. In 2022, Michigan implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.B. 5814, which would codify the One Big Beautiful Bill Act's limits on retroactive eligibility. As of September 2026, this bill had not passed.
Minnesota	Minnesota has 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. In 2010, the state provided Medicaid coverage for parents with dependent children with incomes at or below 100% of the federal poverty level (FPL), and for childless adults with incomes at or below 75% of the FPL. In 2013, the legislature passed H.F. 9 to expand Medicaid coverage under the ACA. Coverage became effective on January 1, 2014. In 2022, Minnesota implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.F. 4612, which implements several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, including work requirements and 6-month eligibility redeterminations for Medicaid expansion adults beginning January 1, 2027. It also directs the state to interpret ambiguities in the federal work requirement provisions in the manner most favorable to applicants and enrollees, including those related to self-attestation, exemptions, notices, and eligibility determinations. The bill also establishes a health care eligibility oversight unit to promote consistent Medicaid eligibility processing across the state. Finally, it aligns state immigration eligibility rules with OBBBA but preserves state-funded Medicaid coverage during pregnancy and through 12 months postpartum for pregnant noncitizens who are ineligible for federally funded Medicaid because of their immigration status. Alternative proposals, H.F. 4969 and S.F. 5019, would have eliminated this state-funded coverage, but these bills did not pass this session. Legislators also enacted S.F. 334, which will appropriate $90 million over 3 years to modernize MAXIS, the IT system used by counties, state agencies, and Tribal Nations to administer assistance programs including Medicaid. This bill is now in effect. Legislators introduced H.F. 3763 and H.F. 4428, which would have gone beyond OBBBA's minimum work requirements by ordering applicants and enrollees to verify their compliance more than required. These bills did not pass this session.

Mississippi	Mississippi is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act (ACA). In May 2021, an initiative to put Medicaid expansion on the 2022 ballot ended after the Mississippi Supreme Court ruled the state's entire ballot initiative process as "unworkable and inoperative" due to outdated language in the state constitution. In 2023, Mississippi implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced several bills to expand Medicaid coverage to individuals with incomes at or below 138% of the federal poverty level (FPL). Eight bills (H.B. 123, H.B. 224, H.B. 226, H.B. 252, H.B. 374, H.B. 409, H.B. 509, and S.B. 2389) would have expanded Medicaid under the ACA. H.B. 224 would have provided Medicaid, rather than separate Children's Health Insurance Program coverage, to children under age 19 with family incomes between 133% and 200% of the FPL. H.B. 114 would have provided Medicaid to adults with incomes at or below 100% of the FPL and subsidized private or employer coverage for adults with higher incomes. H.B. 256 would have used Medicaid funds to purchase private Marketplace coverage for adults with incomes at or below 138% of the FPL and required income-based cost-sharing. S.B. 2122 would have expanded Medicaid eligibility for certain children with disabilities living at home by allowing eligibility to be based on functional need rather than medical complexity. S.B. 2735 would have extended Medicaid coverage to children aging out of foster care until age 26. None of these bills passed this session. Legislators also introduced H.B. 1387 and S.B. 2451, which would have implemented several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, including its 2-month limit on retroactive eligibility, but also gone beyond what OBBBA requires by extending 6-month redeterminations to some adults and further limiting self-attestation. Finally, legislators introduced H.B. 50, which would have required the state to evaluate the effects of any mandatory work requirements adopted as part of a future Medicaid expansion program. These bills did not pass this session.
Missouri	Missouri has expanded Medicaid eligibility under the Affordable Care Act. Voters approved a ballot initiative to expand Medicaid in August 2020, which made Missouri the sixth state to bypass governors and legislatures to expand Medicaid by public referendum. Coverage was expected to become effective on July 1, 2021, but in May 2021, then-Governor Parson declared that the state was withdrawing its state plan amendment 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 2021, 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. In 2023, Missouri implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 2011, the Fiscal Year 2027 social services budget, which appropriates approximately $49.6 million for eligibility system updates and additional resources to implement the One Big Beautiful Bill Act (OBBBA). It also funds the operation and modernization of the state's Medicaid and Children's Health Insurance Program eligibility system. Legislators introduced S.J.R. 108, which would have gone beyond OBBBA's minimum requirement by requiring Medicaid expansion applicants to demonstrate work compliance during the 3 consecutive months before application. Legislators also introduced H.B. 2468, S.B. 1616, S.B. 1772, and S.B. 1070, which included the same or similar provisions imposing more extensive citizenship and immigration verification requirements for Medicaid and other public benefits than OBBBA requires. These bills did not pass this session.

Montana	Montana has expanded Medicaid eligibility under the Affordable Care Act. In 2015, the legislature passed S.B. 405 to expand Medicaid. Coverage became effective January 1, 2016, but was set to expire on June 30, 2019. After a failed ballot initiative in 2018 to fund the expansion, Montana enacted legislation during the 2019 session to extend Medicaid expansion through 2025, but with a work requirement. The state submitted a Section 1115 waiver request to gain approval for the work requirement in August 2019. In 2021, the Biden administration rescinded previously approved work requirement waivers and did not approve pending waiver requests. In 2025, the legislature enacted H.B. 245, which permanently reauthorized the state's Medicaid expansion program and directed the state to seek federal approval to impose work requirements. The One Big Beautiful Bill Act (OBBBA) subsequently made work requirements mandatory for Medicaid expansion adults beginning in January 2027. In 2023, Montana implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. Montana did not hold a regular legislative session this year. However, administratively, Montana began implementation of OBBBA's work requirements in July 2026 by reviewing new applications and scheduled renewals to determine whether individuals meet the requirement or qualify for an exclusion. The state will begin denying or terminating coverage for noncompliance in October 2026, 3 months before states are required to implement the work requirements. The state will also require enrollees to demonstrate compliance over a longer period than OBBBA requires.
Nebraska	Nebraska has expanded Medicaid eligibility under the Affordable Care Act. After several years of legislative roadblocks and opposition, voters approved a ballot initiative to expand Medicaid in 2018. Coverage became effective on October 1, 2020. In 2020, the Trump administration approved Nebraska's proposal to create a tiered benefit package that required participants to meet a work requirement for the "prime" benefit tier under Section 1115 waiver authority. In February 2021, the Biden administration rescinded authority to impose work requirements, and Nebraska withdrew its waiver in August 2021. Beginning October 1, 2021, all beneficiaries had access to the "prime" benefit tier. In 2023, Nebraska implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted L.B. 958, which preserves retroactive coverage for Medicaid enrollees by requiring the state to provide the maximum periods allowed under the One Big Beautiful Bill Act (OBBBA). It also expands annual reporting on Medicaid and Children's Health Insurance Program applications, eligibility determinations, case closures, coverage losses, and work requirement implementation. Legislators introduced L.B. 812, which would have prohibited the state from implementing OBBBA's work requirements before the federal deadline of January 1, 2027, and prohibited work compliance checks more frequently than once every 6 months or outside regularly scheduled intervals. This bill did not pass this session. Administratively, on May 1, 2026, Nebraska became the first state to begin enforcing OBBBA's work requirements. The state assesses new applicants during the application process and existing expansion enrollees at their scheduled renewals.
Nevada	Nevada has expanded Medicaid eligibility under the Affordable Care Act. Coverage became effective on January 1, 2014. In June 2021, then-Governor Sisolak signed S.B.420 into law to create a public option program that requires insurers to submit bids for both the public option plan and the state's Medicaid managed care program. In 2024, Nevada implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. Nevada did not hold a regular legislative session this year.

New Hampshire	New Hampshire has 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 authority; however, the legislation required the state to obtain Section 1115 waiver authority to operate the program differently from the standard approach permitted under the ACA, and only initially approved the expansion for 2 years. The Centers for Medicare and Medicaid Services (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 Section 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. Under the Trump administration, New Hampshire received Section 1115 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 provision. In 2021, the Biden administration rescinded approved Section 1115 waivers that included a work requirement. In 2023, legislators enacted H.B. 2 to extend New Hampshire's Medicaid expansion program for another 7 years, to 2030. In 2023, New Hampshire also implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.B. 134, which implements the One Big Beautiful Bill Act's (OBBBA) Medicaid work requirements beginning January 1, 2027, but goes beyond what OBBBA requires by directing additional work compliance checks between eligibility redeterminations. It also limits self-attestation for both work compliance or exemptions and prohibits the state from adopting optional federal exemptions or waivers without legislative approval. Legislators introduced S.B. 484, which would have repealed premiums for Medicaid expansion adults and children enrolled in the Children's Health Insurance Program and limited cost-sharing under Medicaid expansion to no more than $5 per service. Legislators also introduced H.B. 1368, which would have required a legislative study committee to estimate decreases in Medicaid enrollment and increases in the uninsured population resulting from OBBBA's work requirements and upcoming state Medicaid premiums. These bills did not pass this session.
New Jersey	New Jersey has 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. New Jersey used this early option to provide coverage for childless adults with incomes at or below 23% of the federal poverty level (FPL). Then in 2013, the legislature passed the Fiscal Year 2014 Appropriations Act to implement the full expansion. Coverage became effective on January 1, 2014. In 2021, New Jersey implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted A. 3883 and S. 3811, which invest in developing web-based tools to connect Medicaid enrollees with volunteer opportunities that satisfy new federal work requirements. In the last year, legislators introduced A.2251, which would establish a limited state-funded medical relief program for certain individuals who lose Medicaid coverage because of the One Big Beautiful Bill Act's (OBBBA) work requirements, immigrant eligibility restrictions, or other eligibility changes. Legislators also introduced several bills which would all invest in online tools and data systems by updating the state's assistance portal, creating a common application for state-administered benefits, and using tax data to streamline enrollment. As of September 2026, none of these bills had passed.

New Mexico	New Mexico has 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. In 2022, New Mexico implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 2, the Fiscal Year 2027 state budget, which appropriates $40 million to maintain health coverage for lawfully present Medicaid enrollees who will lose federal Medicaid eligibility under the One Big Beautiful Bill Act's immigrant eligibility restrictions beginning October 1, 2026. It also provides $30 million for coverage of the Medicaid expansion population and requires the state to receive legislative approval before further expanding Medicaid eligibility.
New York	New York has expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature passed S. 02606 to expand Medicaid. Coverage became effective on January 1, 2014. In 2023, New York implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted A.10007-C and S.9007-C, the Fiscal Year 2027 health and mental hygiene budget, which repeal continuous Medicaid and Children's Health Insurance Program eligibility through age 6 and instead limit children to 12-month continuous eligibility periods beginning July 1, 2026. Legislators introduced S.710-A, which would extend Medicaid eligibility to certain noncitizens, as well as their spouses and unmarried children under age 21, while qualifying immigration applications are pending or for a limited period before an application is filed. Legislators also introduced S.9460 and A.11421, which would authorize the state to obtain current employment and income information through third-party databases or a federal data exchange for Medicaid eligibility assessments. As of September 2026, these bills had not passed this session.
North Carolina	North Carolina has expanded Medicaid eligibility under the Affordable Care Act. In March 2023, the legislature passed H.B. 76 to expand Medicaid. However, expansion was contingent on legislators passing the 2023-25 budget. The legislature passed the state budget in September 2023, and Medicaid coverage became effective on December 1, 2023. In 2022, North Carolina implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 696, which implements several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, including its work requirements and immigrant eligibility restrictions. The law goes beyond OBBBA's minimum work requirement rules by directing applicants to demonstrate compliance over a longer period than OBBBA requires. Beginning October 1, 2026, it also prohibits the state from accepting self-attested eligibility information without additional verification and increases reviews of eligibility information from quarterly to at least monthly. Legislators also introduced H.B. 1441, which would have eliminated the state's existing trigger law, which would repeal coverage for the Medicaid expansion population if the federal matching rate falls below 90%. This bill did not pass this session.
North Dakota	North Dakota has 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 appropriated through July 2017. Coverage became effective on January 1, 2014. Legislators twice extended coverage and in 2021, legislators passed H.B. 1012, which appropriated continued funding without a sunset date. In 2023, North Dakota implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. North Dakota did not hold a regular legislative session this year.

Ohio	Ohio has expanded Medicaid eligibility under the Affordable Care Act. In 2013, then-Governor Kasich took executive action to expand Medicaid, approved by the Controlling Board. Following a lawsuit filed by legislators, coverage became effective on January 1, 2014. The Centers for Medicare and Medicaid Services (CMS) approved a Section 1115 waiver in 2019, which allowed the state to impose a work requirement, but the state never implemented the requirement. In 2021, the Biden administration rescinded approved Section 1115 waivers that included a work requirement. In 2022, Ohio implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators did not introduce any bills to modify Medicaid eligibility requirements.
Oklahoma	Oklahoma has expanded Medicaid eligibility under the Affordable Care Act. In June 2020, voters approved a ballot initiative to expand Medicaid, which made Oklahoma the fifth state to bypass governors and legislatures to expand Medicaid by public referendum. Coverage became effective on July 1, 2021. In 2023, Oklahoma implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.J.R. 1067, H.B. 4440, and S.J.R. 50, all of which would have created a trigger to either weaken or end constitutional protections for the Medicaid expansion population if the federal matching rate fell below 90%. Legislators also introduced S.B. 1380, which would have gone beyond the One Big Beautiful Bill Act's eligibility verification requirements by requiring monthly data checks, limiting self-attestation, and shortening response timelines for applicants and enrollees. Legislators also introduced S.B. 1648, which would have established presumptive Medicaid eligibility for pregnant applicants. None of these bills passed this session.
Oregon	Oregon has expanded Medicaid eligibility under the Affordable Care Act. In 2013, the legislature enacted H.B. 5201, which appropriated funding for the expansion. Coverage became effective on January 1, 2014. In 2021, legislators enacted H.B. 3352, which dedicated $100 million to expand Medicaid eligibility to all adults who are eligible based on their income, regardless of immigration status. In 2022, Oregon implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 4040, which allows eligible individuals in correctional facilities to receive prerelease Medicaid benefits. Legislators also enacted H.B. 4127, which requires the state to use state funds to reimburse certain reproductive health care providers that are ineligible for federal Medicaid funding. Both bills are now in effect.
Pennsylvania	Pennsylvania has 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. In February 2015, then-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. In 2022, Pennsylvania implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.B. 1628, which would have codified Pennsylvania's existing 12-month postpartum Medicaid extension in state law. As of September 2026, this bill had not passed.

Rhode Island	Rhode Island has expanded Medicaid eligibility under the Affordable Care Act. Then-Governor Chafee signed the Fiscal Year 2014 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. In 2023, Rhode Island implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced S.B. 2554, which would have required Medicaid enrollment to be maintained or provided to individuals during the first and last 30 days of incarceration. The bill did not pass this session.
South Carolina	South Carolina is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act. In 2019, the Trump administration approved two Section 1115 waivers to impose work requirements in South Carolina. The Healthy Connections Works waiver imposed a work requirement on parents and caretakers with incomes up to 67% of the federal poverty level (FPL) who were already eligible for Medicaid coverage under the state plan. The Palmetto Pathways to Independence waiver extended Medicaid coverage to parents and caretakers, as well as a targeted adult population, with incomes up to 100% of the FPL, subject to a work requirement. The Biden administration rescinded the approvals of both of South Carolina's work requirements in August 2021, which allowed the partial expansion without the work requirement. In September 2021, however, South Carolina officials notified the Centers for Medicare and Medicaid Services that the state was withdrawing its Palmetto Pathways to Independence waiver, stating it had not implemented the coverage expansion nor enrolled any individuals. In June 2025, the state submitted a new Palmetto Pathways waiver application that would create a new Medicaid eligibility pathway for parents and caretaker relatives with incomes between 67% and 100% of the FPL who are otherwise ineligible for Medicaid, subject to work requirements. As of September 2026, the request was still pending federal approval. In 2022, South Carolina implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators did not introduce any bills to modify Medicaid eligibility requirements.
South Dakota	South Dakota has expanded Medicaid eligibility under the Affordable Care Act. In November 2022, voters approved a ballot initiative to expand Medicaid, which made South Dakota the seventh state to bypass governors and legislatures and expand Medicaid by public referendum. Coverage became effective on July 1, 2023. In 2023, South Dakota implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.J.R. 5002, which would have referred a ballot measure to voters that, if approved, would repeal the state constitution's Medicaid expansion requirement entirely. The bill did not pass this session. However, due to the passage of H.J.R. 5001 in 2025, voters will still consider a narrower proposal in the November 2026 general election that would, if approved, end Medicaid expansion if the federal matching rate falls below 90%.
Tennessee	Tennessee is one of 10 states that 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. In 2022, Tennessee implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators advanced H.B. 1101, which would have authorized the governor to expand Medicaid coverage to adults with incomes at or below 138% of the federal poverty level. The bill was initially introduced in 2025 but was deliberated in 2026, when it ultimately failed.

Texas	Texas is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act. Texas has the highest uninsured rate among the nonelderly population and has the lowest income eligibility threshold for parents of any state, at 15% of the federal poverty level. In 2024, Texas implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. Texas did not hold a regular legislative session this year.
Utah	Utah has 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 the Centers for Medicare and Medicaid Services (CMS) to request approval to provide coverage for childless adults with incomes at or below 100% of the federal poverty level (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 at or below 138% of the FPL. Lawmakers intervened and passed S.B. 96 in February 2019, which again called for the limited expansion and a work requirement. In March 2019, CMS approved the Section 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 to 138% of the FPL. As a result, the state submitted a new Section 1115 waiver in November 2019, which requested to expand eligibility to adults with incomes at or below 138% of the FPL, impose a work requirement, and require premiums from enrollees with incomes above 100% of the FPL. CMS approved the new Section 1115 waiver, and expanded coverage became effective on January 1, 2020. The state suspended the work requirement in April 2020 due to the COVID-19 pandemic. In 2021, the Biden administration rescinded approved Section 1115 waivers that included a work requirement. In 2024, Utah implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H.B. 15, which modified the state's existing trigger to end Medicaid expansion if the federal matching rate falls below 90%. The law delays the trigger's termination until after the subsequent general legislative session and requires the state to develop options for maintaining expansion within available funding for the legislature to consider. Legislators also enacted H.B. 471, which implements several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions but also goes beyond what OBBBA requires by prohibiting most self-attested eligibility information without additional verification and imposing more extensive immigration checks. Legislators introduced H.B. 88, which would have prohibited any state entity from providing state or locally funded public benefit assistance, including medical assistance, to applicants "without lawful presence." This bill did not pass this session.
Vermont	Vermont has expanded Medicaid eligibility under the Affordable Care Act. Enrollment began in October 2013, and expansion coverage became effective on January 1, 2014. In 2023, Vermont implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted H. 951, the state budget bill, which includes provisions requiring the state to assess and report on the implementation of the One Big Beautiful Bill Act, including the number of individuals subject to Medicaid work requirements and plans to automate data-matching for eligibility redeterminations and work compliance.

Virginia	Virginia has expanded Medicaid eligibility under the Affordable Care Act. In 2018, H.B. 5001 and H.B. 5002 passed, calling 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 that imposed the work requirement on July 1, 2020. In 2021, Virginia implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.B. 280, which would have established state-funded health coverage for uninsured children who are ineligible for Medicaid or the Children's Health Insurance Program. Legislators also introduced H.B. 66, which would have required the state to develop a plan to modernize its Medicaid eligibility systems, including upgrades needed to implement the One Big Beautiful Bill Act's 6-month redeterminations and work requirements. These bills did not pass this session.
Washington	Washington has 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. Washington used this early option to provide coverage for childless adults with incomes at or below 133% of the federal poverty level (FPL). Later, state legislators included federal funding for Medicaid expansion in the 2013-2015 Omnibus Budget. Coverage became effective on January 1, 2014. In 2022, Washington implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced S.B. 5946, which would have required the state to seek federal approval to expand Medicaid income eligibility to individuals with incomes at or below 300% of the FPL. Legislators also introduced H.B. 2100 and S.B. 6093, which would have created a financing pathway for a new Well Washington Fund to help mitigate anticipated funding reductions under the One Big Beautiful Bill Act. These bills did not pass this session.
West Virginia	West Virginia has expanded Medicaid eligibility under the Affordable Care Act. In 2013, then-Governor Tomblin announced that the state would expand Medicaid. Enrollment began in October 2013, and expansion coverage went into effect on January 1, 2014. In 2022, West Virginia implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators introduced H.B. 5645, which would have implemented several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, but also gone beyond what OBBBA requires by directing applicants and enrollees to demonstrate compliance over a longer period, ordering more frequent reviews for more adults, limiting self-attestation, and imposing stricter immigration verification rules. Legislators also introduced H.B. 4821 and H.B. 5122, which would have established a state-administered health coverage buy-in for residents who were ineligible for Medicaid and Medicare, with income-based assistance for residents with incomes below 200% of the federal poverty level. Finally, legislators introduced H.B. 4594, which would have directed the state to integrate and maintain a unified electronic system to track eligibility and work requirement compliance for SNAP, TANF, and Medicaid simultaneously. These bills did not pass this session.

Wisconsin	Wisconsin is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act, but all adults with incomes up to 100% of the federal poverty level (FPL) are covered. In December 2018, then-Governor Walker signed a law that effectively prohibits any governor from expanding Medicaid without some involvement from the state legislature. In 2026, Wisconsin became the 50th state to implement an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.B. 23, which required the state to seek federal approval to extend postpartum Medicaid coverage to 12 months. The extension took effect on June 1, 2026. Legislators also introduced A.B. 1236 and S.B. 1106, which would have expanded Medicaid eligibility for parents, caretaker relatives, and childless adults to 138% of the FPL, subject to federal approval. These bills did not pass this session.
Wyoming	Wyoming is one of 10 states that has not expanded Medicaid eligibility under the Affordable Care Act. In 2023, Wyoming implemented an extension of pregnancy Medicaid coverage to 12 months postpartum. In the last year, legislators enacted S.F. 0106, which implements several of the One Big Beautiful Bill Act's (OBBBA) Medicaid provisions, but goes beyond what OBBBA requires by prohibiting the state from relying on self-attested eligibility information unless federally required, requiring monthly residency and death record checks, and imposing stricter immigration verification and enforcement rules. The law will take effect January 1, 2027. Legislators also enacted S.F. 0006, which requires the state to seek legislative approval for any future Medicaid eligibility expansion and prohibits the state from renewing its family planning waiver after it expires on December 31, 2027.

Find additional information on the methods and sources used throughout the Roadmap and for each state.