



# The Budget Bill Is Bad for West Virginia

The "One Big Beautiful Bill Act" will terminate health coverage, drive up costs and cut care across the country — eliminating health coverage for nearly 16 million people<sup>1</sup> and resulting in over 51,000 preventable deaths nationwide.<sup>2</sup> If Congress charges ahead with either the Senate or House version of the bill, at least 69,000 West Virginians will lose health coverage,<sup>3</sup> and West Virginia's uninsured rate will increase by 70%.<sup>4</sup>

#### The budget bill threatens the health and financial security of West Virginians in every community:

- Makes the largest cut to Medicaid in history, gutting a whopping \$859 billion from Medicaid<sup>5</sup> and the low-income families, workers, veterans and people with disabilities who rely on it for their care, including over 500,000 children and adults in West Virginia.<sup>6</sup>
- Drains \$349 billion from Marketplace coverage,<sup>7</sup> jeopardizing small businesses and entrepreneurs in West Virginia.
- Forces another \$500 billion in mandatory cuts to Medicare by triggering federal spending laws on top of the Medicaid cuts that will already impact seniors and people with disabilities who are also covered by Medicare (dual-eligibles).

# The budget bill will wreak havoc on West Virginia's health system and economy

West Virginia will be forced to offset budget holes caused by this bill by terminating coverage for families, eliminating essential health services, and cutting provider rates so drastically that doctors and hospitals are forced to close their doors — particularly in rural communities. **Hospitals like Grafton City Hospital and WVU Medicine Jackson General Hospital in Ripley will be at greater financial risk of closing due to Medicaid cuts in the bill.**<sup>8</sup>

> Congress should reject these harmful cuts and instead take steps to protect health coverage programs that serve as lifelines for West Virginians.

### The budget bill will roll back the last decade of improvements to West Virginia health coverage and care

West Virginia Medicaid will face major cuts, forcing the state to make tough decisions about rolling back the services it provides — including dental care, prescription drugs and substance use treatment. The bill would also raise costs for West Virginia's low-income seniors and people with disabilities who have Medicare coverage but also rely on Medicaid to help pay for out-of-pockets costs and access services not covered by Medicare. These cuts undermine the core financial backbone of West Virginia's health care system, as Medicaid pays for a significant portion of care and services at local clinics and hospitals and serves as a critical engine for the state's economy.

## West Virginia Medicaid covers over 500,000 children and adults:9



Nearly 1 in 3 West Virginia residents.<sup>10</sup>



**196,000 children** – 56% of all children in West Virginia.<sup>11</sup>



**135,000 seniors** and **people with disabilities** in West Virginia.<sup>12</sup>

**The Marketplace** will be undermined in its mission to provide access to health care for West Virginians who do not qualify for Medicaid and do not have affordable coverage through their employers. The bill would make it harder for West Virginians to buy their own health coverage through the Marketplace without preexisting condition exclusions. Marketplace coverage provides comprehensive health benefits, including cancer screenings and treatment for diabetes and high blood pressure. The bill was also written with the assumption that Congress will allow enhanced premium tax credits to expire, which will make coverage even more unaffordable for West Virginians.

## The Marketplace provides:



Coverage for 64,818 West Virginia residents.<sup>13</sup>

Coverage for 2,700 small-business owners in West Virginia and 4,200 selfemployed West Virginia residents.<sup>14</sup>



Premium tax credits to help **98% of West Virginia enrollees** pay their premiums.<sup>15</sup>

#### The budget bill will harm West Virginia families, workers, and small businesses by wrapping health coverage and care in red tape, undermining critical consumer protections, and making health care unaffordable.

#### Making public and private coverage more expensive, harder to get and keep

The bill will impose higher out-of-pocket costs and cumbersome verification procedures for both Medicaid and the Marketplace. It will also eliminate automatic enrollment and shorten the annual open enrollment period for the Marketplace, threatening coverage for the **33,000 people in West Virginia who will no longer be able to automatically reenroll** in their Marketplace plans from year to year.<sup>16</sup> Around 16,000 additional West Virginians will become uninsured if Congress fails to renew enhanced premium tax credits that help them afford plans offered through the Marketplace.<sup>17</sup>

#### Kicking working people off coverage by creating bureaucratic barriers

**The act will attack West Virginia's successful Medicaid expansion, which covers 171,000 West Virginians.**<sup>18</sup> In 2014, West Virginia expanded Medicaid coverage to residents who earn less than \$21,597 per year.<sup>19</sup> The act will make it hard for these West Virginians to keep their coverage, requiring them to reverify they are eligible every six months.

The act also will impose **the most onerous work reporting requirements ever attempted**, requiring workers to prove that they have one or more jobs that meet the hourly minimum or that they are exempted. Based on the experience of states that previously – and unsuccessfully – tried to implement work reporting requirements, an estimated 69,000 people are at risk of losing their coverage in West Virginia,<sup>20</sup> including seasonal farm and temporary oil and gas workers, caregivers, students, and people with disabilities. **An estimated 175 avoidable deaths will occur in West Virginia each year when adults lose coverage because of work reporting requirements.**<sup>21</sup>

#### Rolling back consumer protections for children

For children enrolled in the Children's Health Insurance Program (CHIP), the act will eliminate current bans on annual and lifetime caps, enrollment waiting periods, and lockout periods for families who miss a premium payment because they cannot keep up with the cost of coverage.

# Raising costs for the poorest and most vulnerable West Virginians covered by Medicare

Medicaid helps about 53,000 seniors and people with disabilities afford their Medicare expenses,<sup>22</sup> including premiums and out-of-pocket costs when they see a doctor or need a hospital stay. The act will eliminate commonsense approaches like automatic data verification and streamlining applications, which will make it harder for these West Virginians to get the help they need to pay for their health care.



WEST VIRGINIA'S HEALTH CARE SYSTEM WILL LOSE AN ESTIMATED

# \$666 MILLION

PER YEAR IN FEDERAL FUNDING

# The budget bill will create a crisis for West Virginia's health system and state budget

With nearly 69,000 West Virginians set to lose access to their Medicaid and Marketplace coverage, **West Virginia's health care system will lose an estimated \$666 million per year in federal funding**, making it nearly impossible for the state to maintain current levels of coverage, benefits, and payments to providers.<sup>23</sup> West Virginia taxpayers will have to spend at least that much each year to cover additional uncompensated care costs at hospitals and clinics that provide health care services to newly uninsured residents who lack the ability to pay. **The loss of federal funding will cause at least 5,800 total job losses (including jobs outside the health care sector) and \$979 million in reduced economic output in the state.**<sup>24</sup>

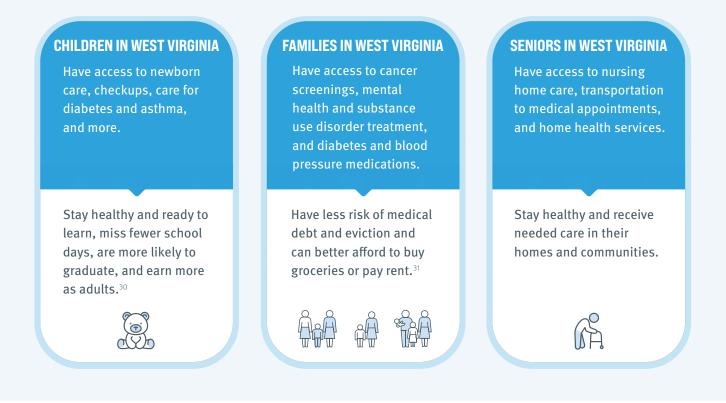
The act will eliminate West Virginia's flexibility to fund Medicaid in a way that works best for the state by freezing taxes on health care providers at current rates. This will leave West Virginia with few options to address budget shortfalls and meet future demands resulting from hardships caused by storms, public health emergencies and economic downturns.

- West Virginia recently increased taxes for many services provided by certain hospitals to beyond 3.5% of patient revenue.<sup>25</sup> The Senate version of the bill would freeze West Virginia's current provider tax rates and cap provider tax rates for many states at 3.5% of patient revenue.
- This will limit West Virginia's current and future flexibility to fund West Virginia Medicaid, as it will not be able to tax hospitals at the same rate and will have to consider income, sales and other taxes if it needs to raise revenue.

#### Cuts will make it much harder for West Virginia to fund:

- 1 in 2 births for West Virginia mothers.<sup>26</sup>
- 4 in 5 West Virginia nursing home residents.<sup>27</sup>
- Hospital services at 46 West Virginia hospitals.<sup>28</sup> For example, Medicaid pays for 24% of all hospital services at Charleston Area Medical Center and 21% of all hospital services at Jefferson Medical Center in Ranson.<sup>29</sup>

## The Senate should reject this ill-conceived proposal and instead vote to protect access to Medicaid, the Marketplace and Medicare so that:



The bill's proposed cuts to Medicaid, the Marketplace and Medicare are direct attacks on the health and financial security of West Virginia residents and run counter to the will of the vast majority of voters from across political parties.<sup>32</sup>

- 92% of West Virginia voters want a "strong, sustainable Medicaid program."33
- 68% of West Virginia voters oppose cutting funding for Medicaid.<sup>34</sup>
- 82% of adults nationwide including 67% of Republicans want Congress to maintain or increase Medicaid spending.<sup>35</sup>

Congress has the responsibility to stand with families in West Virginia and across the country by rejecting these cuts.

#### **Endnotes**

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<sup>7</sup> Families USA, "Harmful Impacts."

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<sup>11</sup> Families USA analysis of West Virginians for Affordable Health Care, "Gutting Medicaid," and U.S. Census Bureau, "Age and Sex."

<sup>12</sup> West Virginians for Affordable Health Care, "Gutting Medicaid."

<sup>13</sup> "Marketplace 2025 Open Enrollment Period Report: National Snapshot," U.S. Centers for Medicare & Medicaid Services, January 8, 2025, <u>https://www.cms.gov/newsroom/fact-sheets/marketplace-2025-open-enrollment-period-report-national-snapshot-1</u>.

<sup>14</sup> "Marketplace Coverage of Small Business Owners and Self-Employed Workers," Issue Brief No. HP-2024-23, Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services, November 1, 2024, <u>https://aspe.hhs.gov/sites/default/files/documents/f42b40313bb5fbce4952799bcd3dfee5/Marketplace%20</u> <u>Coverage%20Economic%20Benefits%20FINAL%2011-1-2024.pdf</u>.

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<sup>19</sup> "2025 Poverty Guidelines: 48 Contiguous States (All States Except Alaska and Hawaii)," U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, n.d., <u>https://aspe.hhs.gov/sites/default/files/documents/dd73d4f00d8a819d10b2fdb70d254f7b/detailed-guidelines-2025.pdf</u>.

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