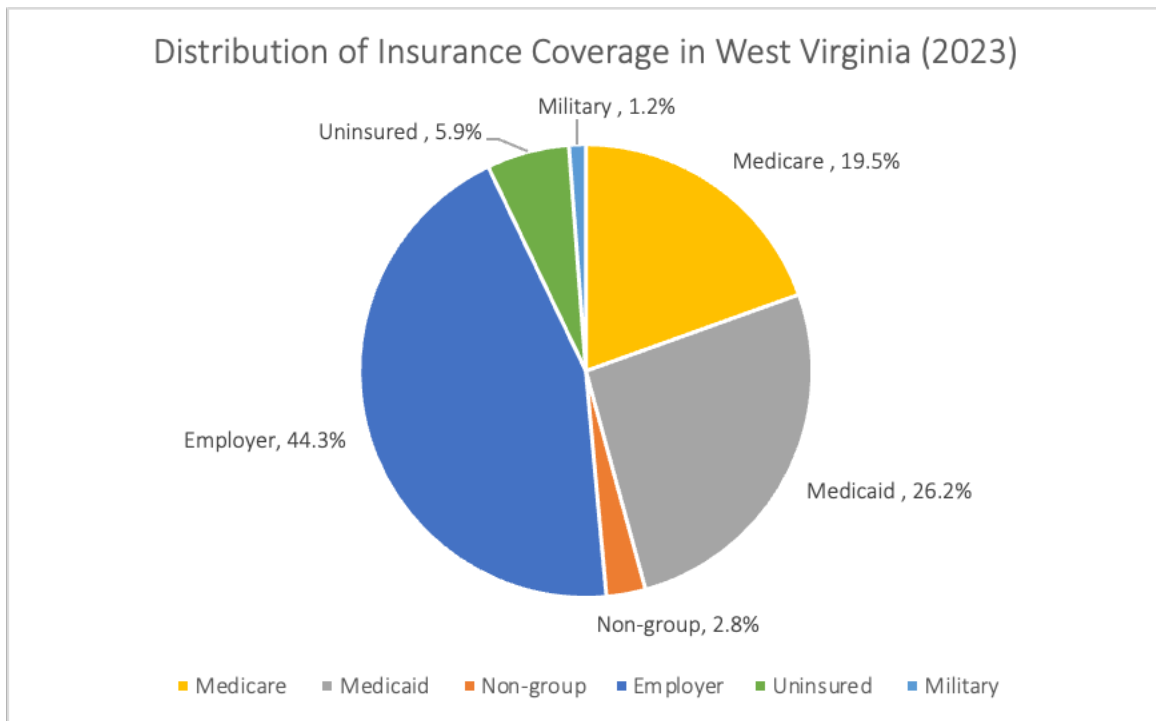


West Virginia

Sources of Insurance Coverage



**Source: KFF, Health Insurance Coverage of the Total Population, 2023*

Medicare

In West Virginia, [333,900](#) residents are enrolled in Medicare, 19.5% of the population (2023 data). Of those, [52%](#) are enrolled in Medicare Advantage. For West Virginians in the traditional Medicare program, the West Virginia Offices of the Insurance Commissioner regulates Medicare Supplemental insurance policies and provides [consumer-facing](#) information about plan options.

Medicaid and the Children's Health Insurance Program (CHIP)

In West Virginia, approximately [449,500](#) people are enrolled in Medicaid or CHIP, 26.2% of the state population (2023 data). In 2014, West Virginia adopted Medicaid expansion under the Affordable Care Act, which covers [234,000 adults](#).

In [West Virginia](#), pregnant individuals with family income up to 185% FPL, children under the age 1 in households up to [163%](#) FPL, children ages 1-5 in households up to 146% of the FPL, children ages 6-18 in households up to 138% FPL, and adults with children with an income up to 133% FPL are eligible to enroll in Medicaid. Approximately 48% of all births in WV are covered by Medicaid. The [Bureau for Medical Services](#) (BMS), within the West Virginia Department of

Health and Human Services oversees the Medicaid Program, and contracts with [three](#) managed care organizations (MCOs) to provide coverage for most West Virginia Medicaid recipients. The BMS also provides oversight of MCOs claims processing and disease and medical management.

Employer-sponsored Insurance (ESI)

In West Virginia, approximately [759,200](#) people are covered by employer-sponsored insurance (ESI), or 44.3% of West Virginia's population. As of 2024, approximately [49.3%](#) of West Virginia's private employers offer ESI. However, offer rates vary significantly by size of firm. In West Virginia, 96.7% of large firms (50 or more employees) offer ESI, while only 25.1% of small employers offer ESI.

In West Virginia, approximately [40%](#) of private sector businesses that offer health insurance self-fund at least one health plan. For large private firms (50 or more employees) that offer health insurance, 55.5% self-fund at least one health plan.

Individual Market Insurance

Approximately [2.8%](#) of West Virginia residents are enrolled in the individual market (2023 data). In 2024, [51,046](#) West Virginia selected a plan through the Affordable Care Act Marketplace, which in West Virginia is run by the federal government. It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

Individual market health insurance (both on- and off-Marketplace) is regulated in West Virginia by the Offices of the Insurance Commissioner, which conducts oversight to ensure compliance with both state and federal health insurance laws.

Military Coverage

Some West Virginia residents are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 1.2%, or [20,500 residents](#).

The Uninsured

Approximately [5.9%](#), or 101,800 West Virginia residents are uninsured (2023 data). West Virginia has the 13th lowest uninsured rate in the country. Among non-elderly populations, people of color in West Virginia generally are [more likely to be uninsured](#) than White West Virginians. Black West Virginians had the highest uninsured rates (12%). Hispanic West Virginians had an uninsured rate of 6.3%.

Lack of insurance is also highly correlated with income. Of the nonelderly population, approximately [8.8%](#) of people under 100% FPL are uninsured, while only 3.6% of people at or above 400% is uninsured.

State Regulators: West Virginia

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for West Virginia is based in Philadelphia. Media inquiries may be submitted [here](#).

West Virginia Offices of the Insurance Commissioner (OIC)

The West Virginia Offices of the Insurance Commissioner regulates the business of insurance in the state of West Virginia. The OIC is responsible for:

- **Licensure:** Insurers operating in the state must demonstrate that they are financially solvent and capable of paying claims. After initial certification, companies must file financial information with the West Virginia OIC [biennially](#). Annual reports summarizing insurers' financial statements are available [here](#).
- **Form review:** The OIC reviews health insurers' contracts and covered benefits to ensure that they comport with state and federal law, including the Affordable Care Act (ACA), Mental Health Parity and Addiction Equity Act (MHPAEA), Health Insurance Portability & Accountability Act (HIPAA), No Surprises Act, as well as state benefit mandates and network adequacy standards.
- **Rate review:** Health insurers offering plans to individuals and small employers (with fewer than 50 employees) must submit proposed premium rates to the OIC, and the agency has the authority to review and require adjustments before rates can be used. Information about insurers' proposed rates is available [here](#).
- **Marketing:** The West Virginia Offices of the Insurance Commissioner is responsible for oversight of insurers' marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses and provides oversight of insurance agents and brokers.
- **Enforcement:** The West Virginia OIC has authority to enforce state and federal insurance laws. Enforcement tools can range from requesting a corrective action, issuing a cease-and-desist order, imposing fines, or seeking an injunction. The insurance department reports the results of company market conduct examinations [here](#). Consumers can file complaints against insurers [here](#).
- **Appeals:** Under the Affordable Care Act, health insurers must provide enrollees with an internal review of adverse benefit determination, and enrollees have the right to an external and independent appeal. The West Virginia OIC operates the states external review system and provides information to consumers seeking external review [here](#).

West Virginia Bureau for Medical Services

West Virginia's Bureau for Medical Services (BMS) run the state's Medicaid and CHIP programs and manage the contracts with the managed care organizations (MCOs) that deliver Medicaid and CHIP benefits. The three participating MCOs in West Virginia are listed [here](#). Enrollment reports by county are available [here](#).

BMS also conducts quality reviews of MCOs, including assessments of quality and parity. The results of these reviews are provided in annual reports published [here](#). BMS can conduct an

enforcement action against an MCO if it fails to meet its contract obligations. Enforcement actions can include requiring the MCO to pay damages or to implement a corrective action plan. The agency can also suspend all or part of new member enrollments or suspend or terminate the MCO's contract.

West Virginia Attorney General's Office

The West Virginia Attorney General represents the state in court when there is an action against an insurance company, entity, or individuals engaged in potentially fraudulent activity. The Attorney General's office accepts complaints from consumers about deceptive or unlawful business practices. Information about the consumer complaint process can be found [here](#).

Other Sources of Information

Health Insurance Navigators, Agents and Brokers (collectively, "consumer assisters")

Although West Virginia's health insurance Marketplace is run by the federal government, CMS provides grants to local organizations called "Navigators" that are tasked with assisting consumers determine eligibility for subsidized coverage programs and helping them with post-enrollment questions. West Virginia-based health insurance agents and brokers perform similar consumer assistance functions, and are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through the "[Find Local Help](#)" search portal on HealthCare.gov.

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