

How GOP Megabill Would Hike ACA Marketplace Premiums in Alaska

If Congress ends marketplace premium tax credit improvements, eligible enrollees in Alaska would pay on average **\$1,836** more per year for marketplace health coverage—multiple times more per family.

27,500 residents had health insurance marketplace coverage in 2024, **51** percent more than in 2021. This includes:

- ~**6,591** residents ages 55-64

- ~**4,335** residents who are children

If Congress enacts the House-passed reconciliation bill, **5,886** enrollees would have to file new paperwork to stay covered.

Counties Hardest Hit:

Highest average loss of premium tax credits:

- Northwest Arctic Borough: \$3,792 more per year
- Bristol Bay Borough: \$3,420 more per year
- Lake and Peninsula Borough: \$3,276 more per year
- Kusilvak Census Area: \$3,108 more per year
- Nome Census Area: \$2,736 more per year

Highest number of enrollees that could be affected:

- Anchorage Municipality: 11,300
- Matanuska-Susitna Borough: 4,600
- Fairbanks North Star and Kenai Peninsula Boroughs: 3,100
- Juneau City and Borough: 1,200
- Kodiak Island Borough: 700

Rural Counties:

If Congress ends marketplace premium tax credit improvements, eligible enrollees in rural counties would pay on average **\$1,835** more per year for marketplace health coverage—multiple times more per family.

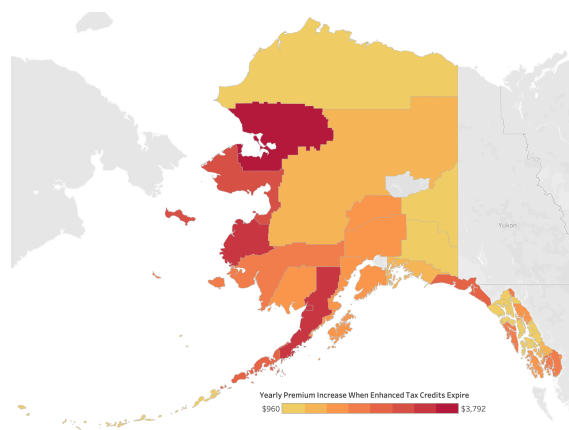
12,859 residents in rural counties had health insurance marketplace coverage in 2024, **55** percent more than in 2021.

This includes:

- ~**3,267** residents ages 55-64

- ~**2,052** residents who are children

If Congress enacts the House-passed reconciliation bill, **2,691** enrollees in rural counties would have to file new paperwork to stay covered.



High Uninsured Counties:

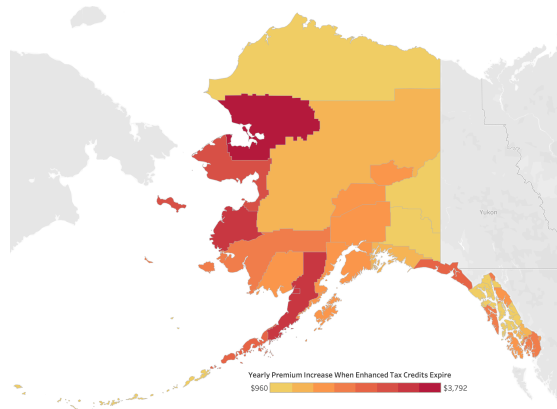
If Congress ends marketplace premium tax credit improvements, eligible enrollees in high uninsured counties would pay on average **\$1,840** more per year for marketplace health coverage—multiple times more per family.

27,259 residents in high uninsured counties had health insurance marketplace coverage in 2024, **53** percent more than in 2021. This includes:

- ~**6,570** residents ages 55-64

- ~**4,277** residents who are children

If Congress enacts the House-passed reconciliation bill, **5,842** enrollees in high uninsured counties would have to file new paperwork to stay covered.



High Diabetes Counties:

If Congress ends marketplace premium tax credit improvements, eligible enrollees in high diabetes counties would pay on average **\$2,136** more per year for marketplace health coverage—multiple times more per family.

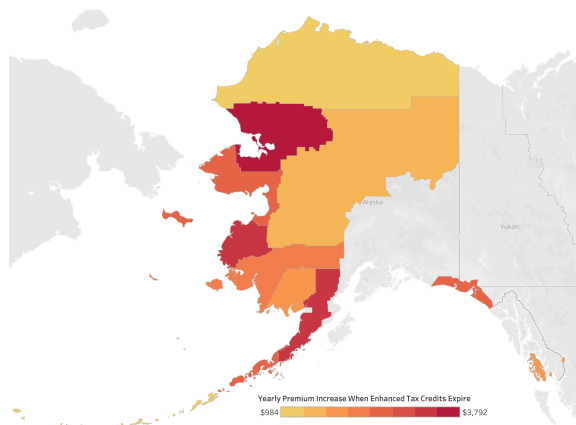
637 residents in high diabetes counties had health insurance marketplace coverage in 2024, **67** percent more than in 2021.

This includes:

- ~**182** residents ages 55-64

- ~**67** residents who are children

If Congress enacts the House-passed reconciliation bill, **115** enrollees in high diabetes counties would have to file new paperwork to stay covered.

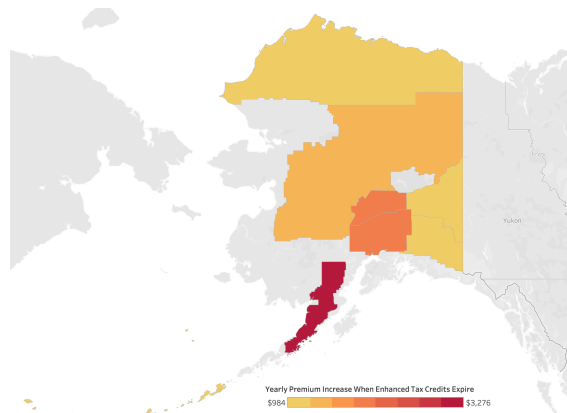


High Primary Care Ratio Counties:

If Congress ends marketplace premium tax credit improvements, eligible enrollees in high primary care ratio counties would pay on average **\$1,864** more per year for marketplace health coverage—multiple times more per family. **5,222** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **61** percent more than in 2021. This includes:

- ~**1,263** residents ages 55-64
- ~**938** residents who are children

If Congress enacts the House-passed reconciliation bill, **1,071** enrollees in high primary care ratio counties would have to file new paperwork to stay covered.



County Characteristics Definitions:

- **Rural:** Counties are classified as rural if they meet the definition of “Fully FORHP Rural Counties” by the Health Resources and Services Administration (HRSA) [Federal Office of Rural Health Policy](#).
- **High Uninsured:** Counties are classified as a high uninsured county if the number of people without health insurance is above the national average.
- **High Diabetes:** Counties are classified as a high diabetes county if their diabetes rate is above the national average.
- **High Primary Care Physician Ratio:** Counties are classified as a high primary care physician ratio county if the ratio of the county’s population to primary care physicians is above the national average.