

# How GOP Megabill Would Hike ACA Marketplace Premiums in Nebraska

If Congress ends marketplace premium tax credit improvements, eligible enrollees in Nebraska would pay on average \$1,092 more per year for marketplace health coverage—multiple times more per family. 117,900 residents had health insurance marketplace coverage in 2024, 33 percent more than in 2021. This includes:

~28,357 residents ages 55-64

~20,821 residents who are children

If Congress enacts the House-passed reconciliation bill, **20,710** enrollees would have to file new paperwork to stay covered.

#### **Counties Hardest Hit:**

Highest average loss of premium tax credits:

- McPherson County: \$2,280 more per year
- Chase County: \$1,608 more per year
- Hayes and Hitchcock Counties: \$1,560 more per year
- Gosper and Perkins Counties: \$1,500 more per year
- Thayer and Thomas Counties: \$1,452 more per year

#### Highest number of enrollees that could be affected:

- Douglas County: 30,300
- Lancaster County: 15,900
- Sarpy County: 7,000
- Hall County: 3,900
- Buffalo County: 3,700

#### **Rural Counties:**

If Congress ends marketplace premium tax credit improvements, eligible enrollees in rural counties would pay on average \$1,186 more per year for marketplace health coverage—multiple times more per family.

**59,829** residents in rural counties had health insurance marketplace coverage in 2024, **22** percent more than in 2021. This includes:

~15,717 residents ages 55-64

~11,707 residents who are children

If Congress enacts the House-passed reconciliation bill, **8,900** 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 \$1,114 more per year for marketplace health coverage—multiple times more per family.

**28,700** residents in high uninsured counties had health insurance marketplace coverage in 2024, **24** percent more than in 2021. This includes:

~7,288 residents ages 55-64

~5,720 residents who are children

If Congress enacts the House-passed reconciliation bill, **4,233** enrollees in counties with high rates of uninsurance 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 \$1,116 more per year for marketplace health coverage—multiple times more per family.

**24,100** residents in high diabetes counties had health insurance marketplace coverage in 2024, **29** percent more than in 2021. This includes:

~6,075 residents ages 55-64

~4,379 residents who are children

If Congress enacts the House-passed reconciliation bill, **3,826** enrollees in counties with high rates of diabetes 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 \$1,129 more per year for marketplace health coverage—multiple times more per family. 64,800 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, 26 percent more than in 2021. This includes:

- ~16,087 residents ages 55-64
- ~11,613 residents who are children



If Congress enacts the House-passed reconciliation bill, **11,271** enrollees in counties with a high primary care ratio 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) <u>Federal Office of Rural Health Policy</u>.
- **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.