

How GOP Megabill Would Hike ACA Marketplace Premiums in Ohio

If Congress ends marketplace premium tax credit improvements, eligible enrollees in Ohio would pay on average \$804 more per year for marketplace health coverage—multiple times more per family.

477,800 residents had health insurance marketplace coverage in 2024, **138** percent more than in 2021. This includes:

~139,058 residents ages 55-64

~44,881 residents who are children

If Congress enacts the House-passed reconciliation bill, **116,533** enrollees would have to file new paperwork to stay covered.

Counties Hardest Hit:

Highest average loss of premium tax credits:

- Putnam County: \$1,188 more per year
- Ottawa County: \$1,104 more per year
- Geauga County: \$1,068 more per year
- Auglaize and Monroe Counties: \$1,044 more per year
- Tuscarawas County: \$1,032 more per year

Highest number of enrollees that could be affected:

- Franklin County: 64,900
- Cuyahoga County: 56,800
- Hamilton County: 38,800
- Montgomery County: 23,800
- Summit County: 22,200

Rural Counties:

If Congress ends marketplace premium tax credit improvements, eligible enrollees in rural counties would pay on average **\$870** more per year for marketplace health coverage—multiple times more per family.

86,200 residents in rural counties had health insurance marketplace coverage in 2024, 136 percent more than in 2021. This includes:

- ~29,856 residents ages 55-64
- ~7,636 residents who are children

If Congress enacts the House-passed reconciliation bill, 20,929

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 \$836 more per year for marketplace health coverage—multiple times more per family.

15,300 residents in high uninsured counties had health insurance marketplace coverage in 2024, 143 percent more than in 2021.This includes:

~5,320 residents ages 55-64

~1,138 residents who are children

If Congress enacts the House-passed reconciliation bill, 4,036

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 **\$794** more per year for marketplace health coverage—multiple times more per family.

452,900 residents in high diabetes counties had health insurance marketplace coverage in 2024, **142** percent more than in 2021. This includes:

~131,626 residents ages 55-64

~40,477 residents who are children

If Congress enacts the House-passed reconciliation bill, 110,512

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 **\$868** more per year for marketplace health coverage—multiple times more per family. **201,100** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **124** percent more than in 2021. This includes:

~66,453 residents ages 55-64

~19,073 residents who are children

If Congress enacts the House-passed reconciliation bill, 50,009



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.