

Recent Changes Will Increase Health Costs and Decrease Coverage in Arkansas

Without Congressional action, eligible enrollees in Arkansas will pay on average **\$828** more per year for marketplace health coverage—and multiple times more per family. These costs could even be higher, given [preliminary projected increases](#) in premiums for 2026 of **15 percent**.

156,600 residents had health insurance marketplace coverage in 2024, **137** percent more than in 2021. This includes:

- ~**37,558** residents ages 55-64
- ~**19,082** residents who are children

Additionally, the new reconciliation law will require **46,955** enrollees to file new paperwork to stay covered.

Counties Hardest Hit

Highest average loss of premium tax credits:

- Montgomery County: \$972 more per year
- Van Buren County: \$960 more per year
- Stone County: \$948 more per year
- Columbia County: \$936 more per year
- Woodruff County: \$924 more per year

Highest number of enrollees that could be affected:

- Pulaski County: 21,300
- Benton County: 15,600
- Washington County: 12,500
- Faulkner County: 7,400
- Garland County: 6,600

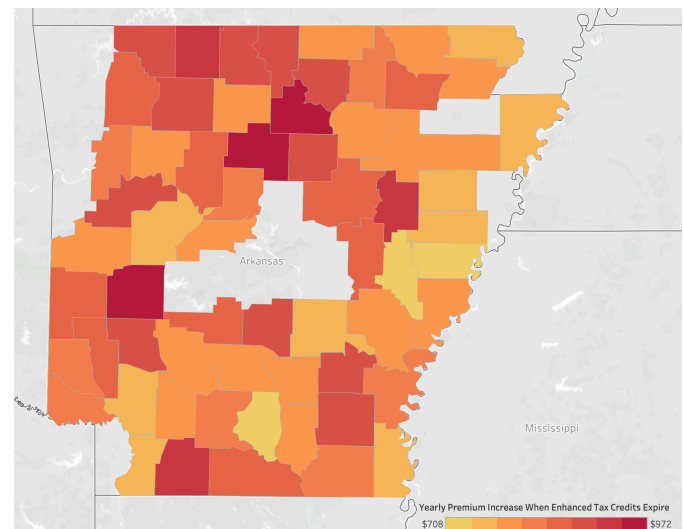
Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$829** more per year for marketplace health coverage—and multiple times more per family.

64,000 residents in rural counties had health insurance marketplace coverage in 2024, **146** percent more than in 2021. This includes:

- ~**17,509** residents ages 55-64
- ~**6,273** residents who are children

Additionally, the new reconciliation law will require **19,775** enrollees in rural counties to file new paperwork to stay covered.



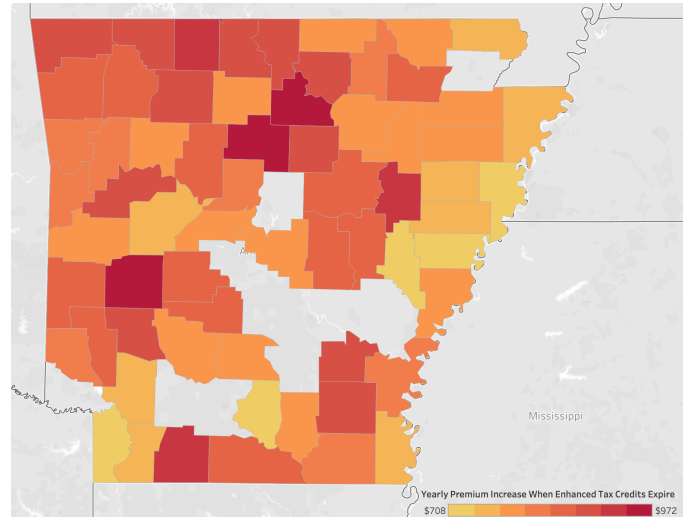
High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average **\$829** more per year for marketplace health coverage—and multiple times more per family.

156,300 residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **138** percent more than in 2021. This includes:

- ~**37,558** residents ages 55-64
- ~**18,451** residents who are children

Additionally, the new reconciliation law will require **46,955** enrollees in high diabetes rate counties to file new paperwork to stay covered.



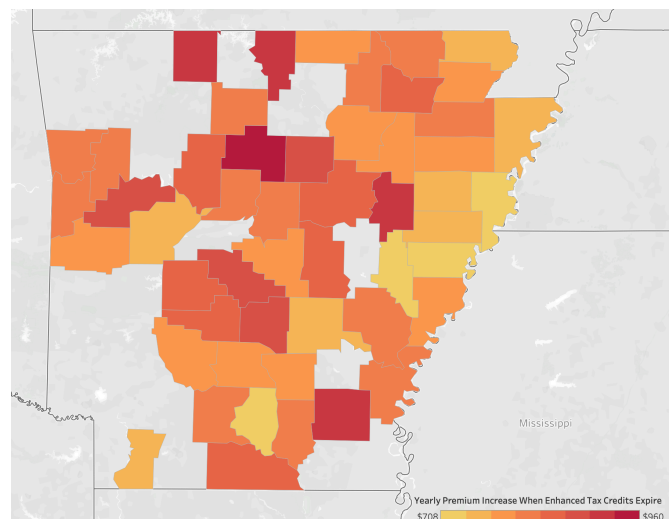
High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$817** more per year for marketplace health coverage—and multiple times more per family.

110,300 residents in high cancer rate counties had health insurance marketplace coverage in 2024, **145** percent more than in 2021. This includes:

- ~**26,032** residents ages 55-64
- ~**12,540** residents who are children

Additionally, the new reconciliation law will require **33,891** enrollees in high cancer rate counties to file new paperwork to stay covered.



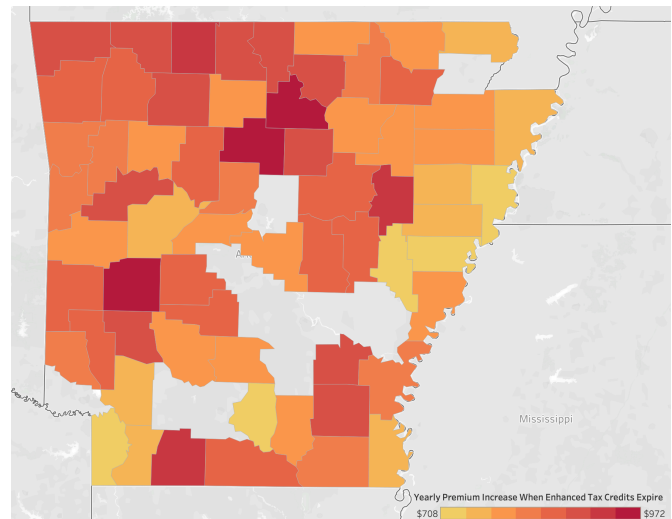
High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$829** more per year for marketplace health coverage—and multiple times more per family.

133,600 residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **136** percent more than in 2021. This includes:

- ~**32,558** residents ages 55-64
- ~**15,703** residents who are children

Additionally, the new reconciliation law will require **39,786** enrollees in high uninsured rate counties to file new paperwork to stay covered.



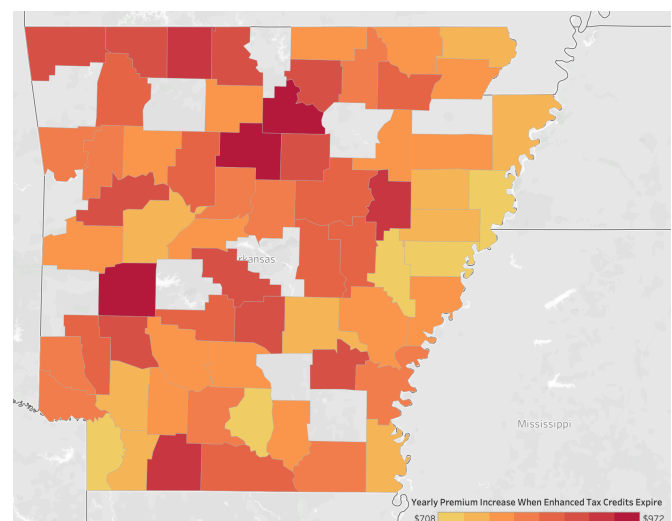
High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$835** more per year for marketplace health coverage—and multiple times more per family.

96,900 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **142** percent more than in 2021. This includes:

- ~**24,505** residents ages 55-64
- ~**11,266** residents who are children

Additionally, the new reconciliation law will require **29,256** enrollees in high primary care ratio counties 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 Diabetes:** Counties with higher than the national average rates of diabetes.
- **Higher Cancer Prevalence:** Counties with higher than the national average prevalence rate of cancer.
- **High Uninsured:** Counties with a rate of people without health insurance above the national average.
- **High Primary Care Ratio:** Counties whose population to primary care physician ratio is above the national average, meaning fewer primary care providers per capita.