

Recent Changes Will Increase Health Costs and Decrease Coverage in Georgia

Without Congressional action, eligible enrollees will pay on average \$528 more per year for marketplace health coverage—and multiple times more per family. These costs could be even higher, given <u>preliminary projected increases</u> for most Georgia premiums for 2026 of **26** percent. Georgia starting running its own Marketplace in 2025.

1,305,100 residents had health insurance marketplace coverage in 2024, **152** percent more than in 2021. This includes:

- ~259,955 residents ages 55-64
- ~111,200 residents who are children

Additionally, the new reconciliation law will require **278,876** enrollees to file new paperwork to stay covered.

Counties Hardest Hit:

Highest average loss of premium tax credits:

- Oconee County: \$900 more per year
 - Greene County: \$840 more per year
- Union County: \$792 more per year
- Morgan County: \$768 more per year
- Forsyth County: \$744 more per year

Highest number of enrollees that could be affected:

• Gwinnett County: 186,500

Fulton County: 130,900

DeKalb County: 111,200

• Cobb County: 90,400

Clayton County: 53,300

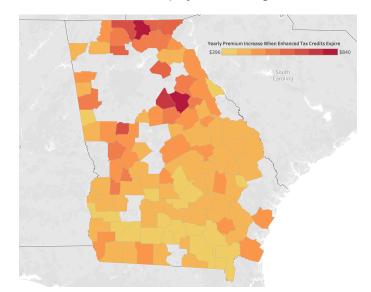
Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average \$512

more per year for marketplace health coverage—and multiple times more per family.

269,100 residents in rural counties had health insurance marketplace coverage in 2024, **222** percent more than in 2021. This includes:

- ~62,487 residents ages 55-64
- ~14,367 residents who are children



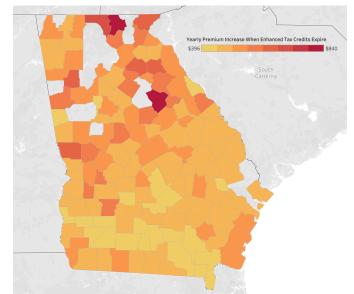
Additionally, the new reconciliation law will require **60,475** enrollees in rural counties to file new paperwork to stay covered.

High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average \$504 more per year for marketplace health coverage—and multiple times more per family.

- **1,104,700** residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **163** percent more than in 2021. This includes:
 - ~216,953 residents ages 55-64
 - ~87,502 residents who are children

Additionally, the new reconciliation law will require 238,381 enrollees in high diabetes rate counties to file new paperwork to stay covered.

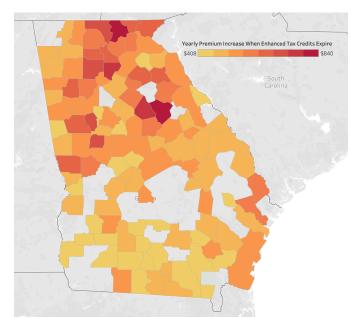


High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average \$529 more per year for marketplace health coverage—and multiple times more per family.

- **1,069,300** residents in high cancer rate counties had health insurance marketplace coverage in 2024, **152** percent more than in 2021. This includes:
 - ~214,571 residents ages 55-64
 - ~91,265 residents who are children

Additionally, the new reconciliation law will require **222,730** enrollees in high cancer rate counties to file new paperwork to stay covered.



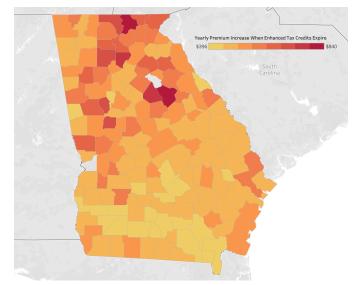
High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average \$524 more per year for marketplace health coverage—and multiple times more per family.

1,302,900 residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **153** percent more than in 2021. This includes:

- ~259,335 residents ages 55-64
- ~107,861 residents who are children

Additionally, the new reconciliation law will require **278,294** enrollees in high uninsured rate counties to file new paperwork to stay covered.



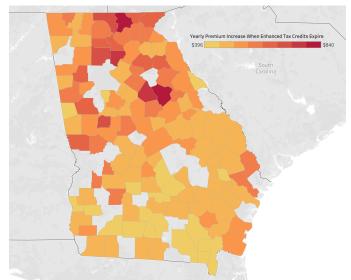
High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average \$521 more per year for marketplace health coverage—and multiple times more per family.

788,100 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **154** percent more than in 2021. This includes:

- ~162,362 residents ages 55-64
- ~67,850 residents who are children

Additionally, the new reconciliation law will require **161,353** 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) <u>Federal Office of Rural Health Policy</u>.
- **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.