

Recent Changes Will Increase Health Costs and Decrease Coverage in Iowa

Without Congressional action, eligible enrollees will pay on average **\$1,080** more per year for marketplace health coverage—and multiple times more per family. These costs could be even higher, given [preliminary projected increases](#) in Iowa premiums for 2026 of **14 percent**.

111,400 residents had health insurance marketplace coverage in 2024, **88 percent** more than in 2021. This includes:

- ~**37,081** residents ages 55-64
- ~**8,525** residents who are children

Additionally, the new reconciliation law will require **33,404** enrollees to file new paperwork to stay covered.

Counties Hardest Hit:

Highest average loss of premium tax credits:

- Pocahontas County: \$1,632 more per year
- Dickinson County: \$1,584 more per year
- Adams County: \$1,440 more per year
- Grundy County: \$1,416 more per year
- Palo Alto and O'Brien Counties: \$1,404 more per year

Highest number of enrollees that could be affected:

- Polk County: 16,900
- Linn County: 7,400
- Scott County: 5,800
- Johnson County: 4,700
- Black Hawk County: 4,400

Rural Counties:

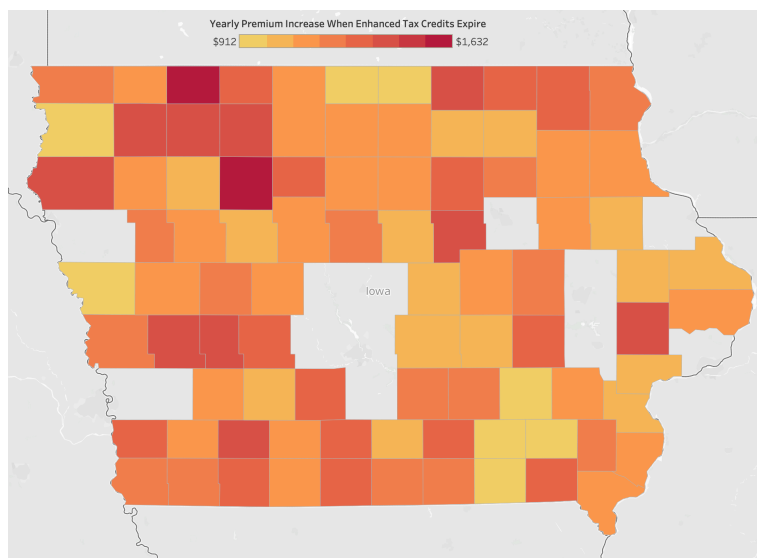
Without Congressional action, eligible enrollees in rural counties will pay on average **\$1,170** more per year for marketplace health coverage—and multiple times more per family.

54,100 residents in rural counties had health insurance marketplace coverage in 2024, **84 percent** more than in 2021.

This includes:

- ~**20,234** residents ages 55-64
- ~**2,747** residents who are children

Additionally, the new reconciliation law will require **16,412** enrollees in rural counties to file new paperwork to stay covered.



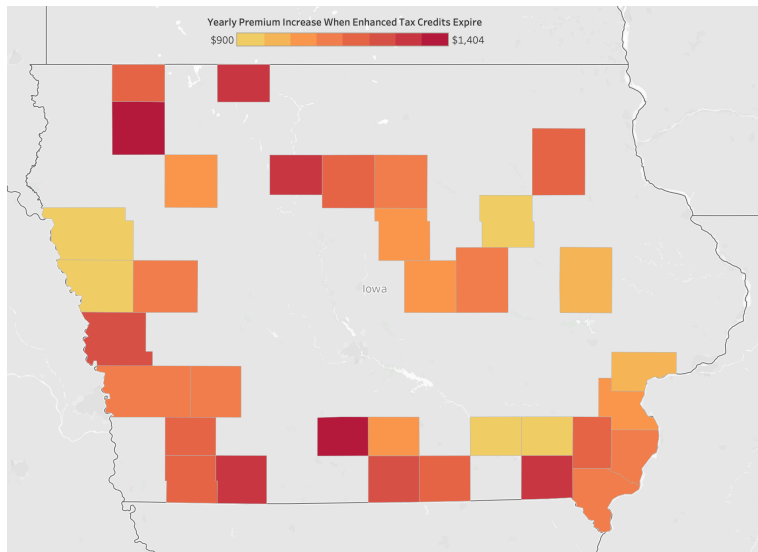
High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average **\$1,060** more per year for marketplace health coverage—and multiple times more per family.

36,700 residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **96** percent more than in 2021. This includes:

- ~**12,451** residents ages 55-64
- ~**2,157** residents who are children

Additionally, the new reconciliation law will require **11,415** enrollees in high diabetes rate counties to file new paperwork to stay covered.



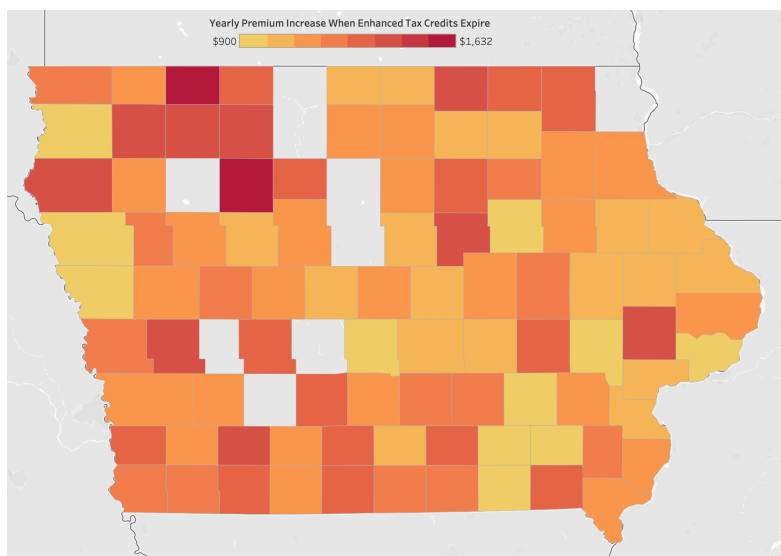
High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$1,078** more per year for marketplace health coverage—and multiple times more per family.

104,000 residents in high cancer rate counties had health insurance marketplace coverage in 2024, **88** percent more than in 2021. This includes:

- ~**34,760** residents ages 55-64
- ~**6,326** residents who are children

Additionally, the new reconciliation law will require **31,477** enrollees in high cancer rate counties to file new paperwork to stay covered.



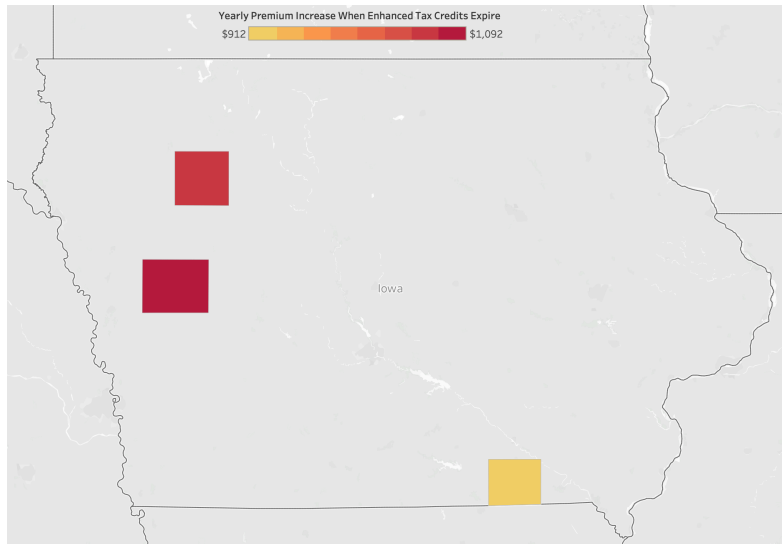
High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$1,046** more per year for marketplace health coverage—and multiple times more per family.

1,600 residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **129** percent more than in 2021. This includes:

- ~**553** residents ages 55-64
- ~**172** residents who are children

Additionally, the new reconciliation law will require **532** enrollees in high uninsured rate counties to file new paperwork to stay covered.



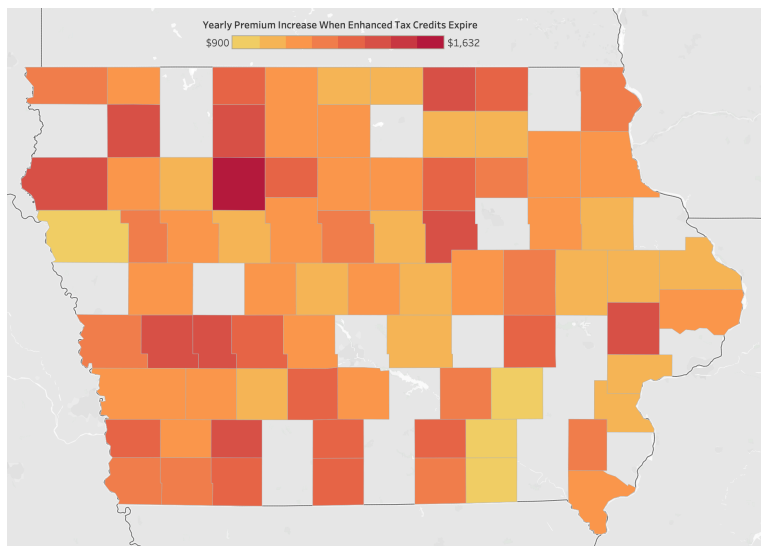
High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$1,128** more per year for marketplace health coverage—and multiple times more per family.

62,300 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **87** percent more than in 2021. This includes:

- ~**22,236** residents ages 55-64
- ~**3,683** residents who are children

Additionally, the new reconciliation law will require **18,988** 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.