

## Recent Changes Will Increase Health Costs and Decrease Coverage in Michigan

Without Congressional action, eligible enrollees in Michigan will pay on average **\$828** more per year for marketplace health coverage—and multiple times more per family. These costs could be even higher, given preliminary [projected increases in Michigan premiums](#) for 2026 of **16.8 percent**.

**418,100** residents had health insurance marketplace coverage in 2024, **57 percent** more than in 2021. This includes:

- ~**124,886** residents ages 55-64
- ~**47,262** residents who are children

Additionally, the new reconciliation law will require **112,285** enrollees to file new paperwork to stay covered.

### Counties Hardest Hit:

Highest average loss of premium tax credits:

- Delta County: \$1,800 more per year
- Dickinson County: \$1,740 more per year
- Iron County: \$1,680 more per year
- Schoolcraft County: \$1,560 more per year
- Alger County: \$1,416 more per year

Highest number of enrollees that could be affected:

- Wayne County: 78,600
- Oakland County: 58,300
- Macomb County: 43,500
- Kent County: 26,700
- Genesee County: 13,900

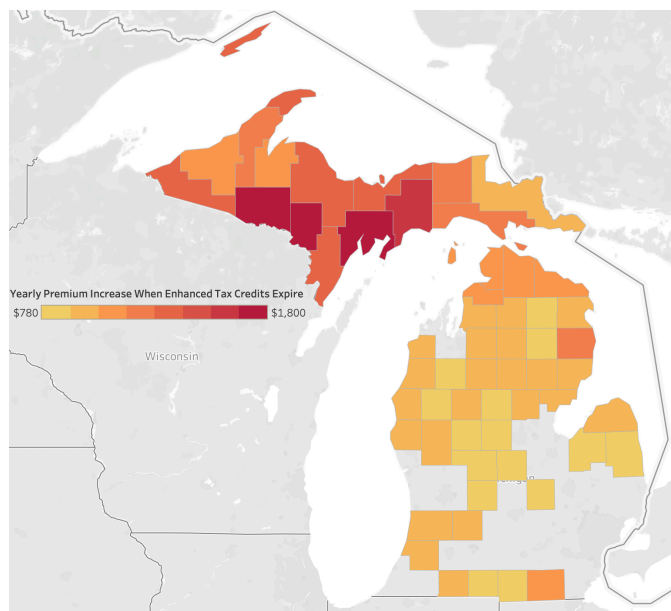
### Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$1,039** more per year for marketplace health coverage—and multiple times more per family.

**79,900** residents in rural counties had health insurance marketplace coverage in 2024, **46 percent** more than in 2021. This includes:

- ~**30,710** residents ages 55-64
- ~**8,486** residents who are children

Additionally, the new reconciliation law will require **22,406** enrollees in rural counties to file new paperwork to stay covered.



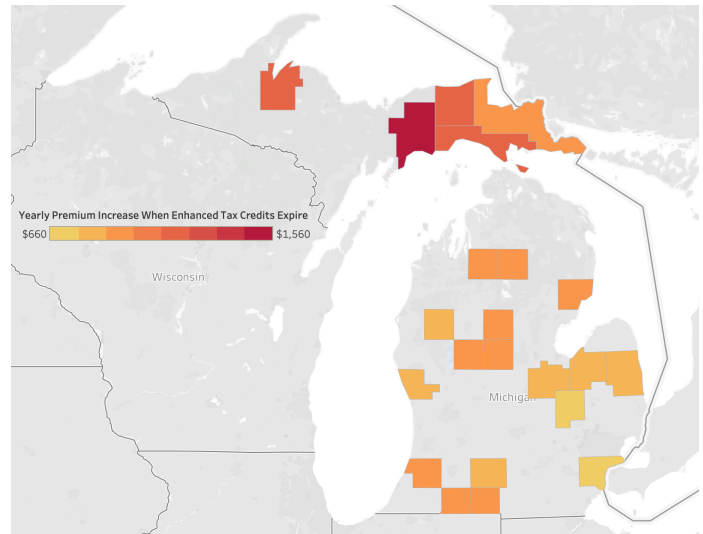
## High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average **\$735** more per year for marketplace health coverage—and multiple times more per family.

**130,300** residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **100** percent more than in 2021. This includes:

- ~**35,854** residents ages 55-64
- ~**12,132** residents who are children

Additionally, the new reconciliation law will require **34,142** enrollees in high diabetes rate counties to file new paperwork to stay covered.



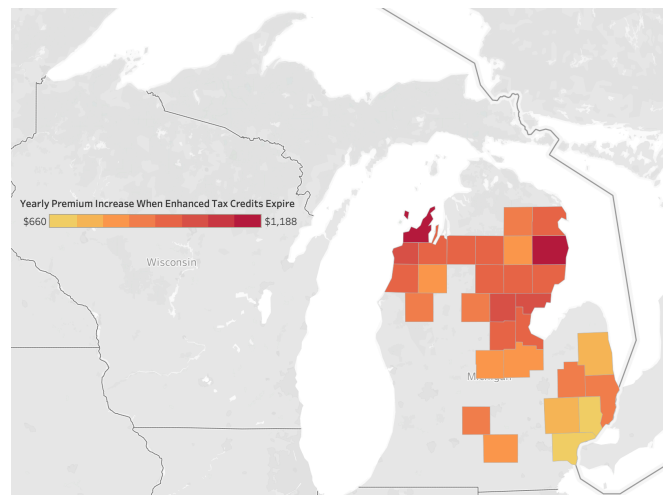
## High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$751** more per year for marketplace health coverage—and multiple times more per family.

**236,100** residents in high cancer rate counties had health insurance marketplace coverage in 2024, **61** percent more than in 2021. This includes:

- ~**66,479** residents ages 55-64
- ~**26,666** residents who are children

Additionally, the new reconciliation law will require **62,445** enrollees in high cancer rate counties to file new paperwork to stay covered.



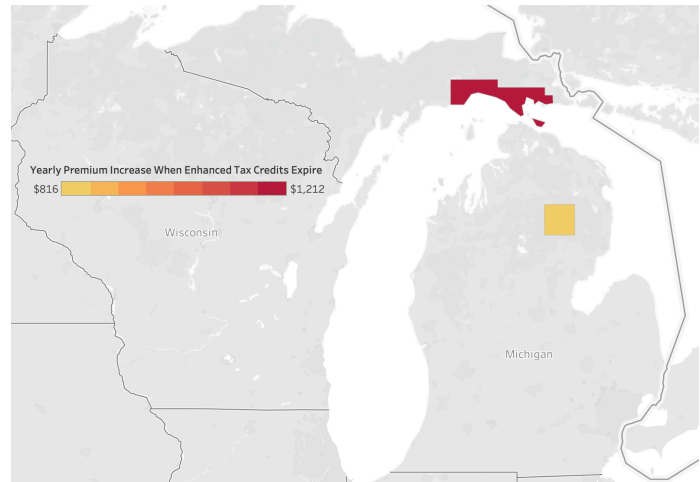
## High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$1,036** more per year for marketplace health coverage—and multiple times more per family.

**1,000** residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **43** percent more than in 2021. This includes:

- ~**401** residents ages 55-64
- ~**81** residents who are children

Additionally, the new reconciliation law will require **341** enrollees in high uninsured rate counties to file new paperwork to stay covered.



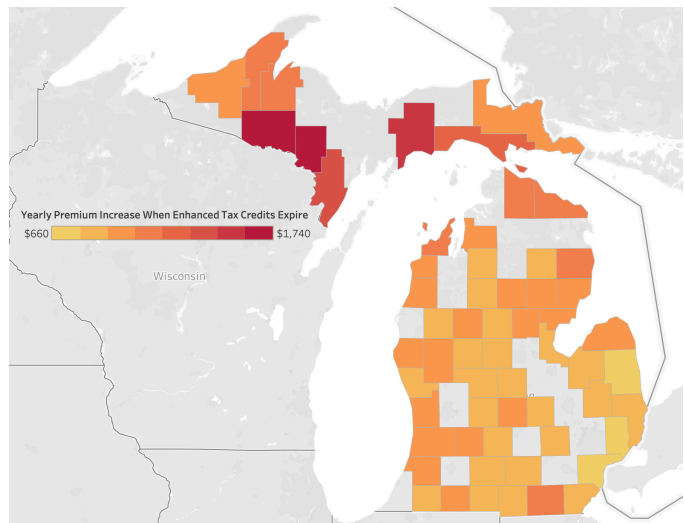
## High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$815** more per year for marketplace health coverage—and multiple times more per family.

**249,700** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **65** percent more than in 2021. This includes:

- ~**75,667** residents ages 55-64
- ~**27,125** residents who are children

Additionally, the new reconciliation law will require **66,528** 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.