

## Recent Changes Will Increase Health Costs and Decrease Coverage in North Dakota

Without Congressional action, eligible enrollees in North Dakota 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 premiums for 2026 of **15 percent**.

**38,500** residents had health insurance marketplace coverage in 2024, **70 percent** more than in 2021. This includes:

- ~**9,243** residents ages 55-64
- ~**9,169** residents who are children

Additionally, the new reconciliation law will require **10,502** enrollees to file new paperwork to stay covered.

### Counties Hardest Hit:

Highest average loss of premium tax credits:

- Mercer County: \$2,100 more per year
- Oliver County: \$1,716 more per year
- Steele County: \$1,584 more per year
- Hettinger County: \$1,428 more per year
- Renville County: \$1,416 more per year

Highest number of enrollees that could be affected:

- Cass County: 6,500
- Burleigh County: 4,300
- Grand Forks County: 3,200
- Ward County: 2,700
- Stark and Morton Counties each: 1,700

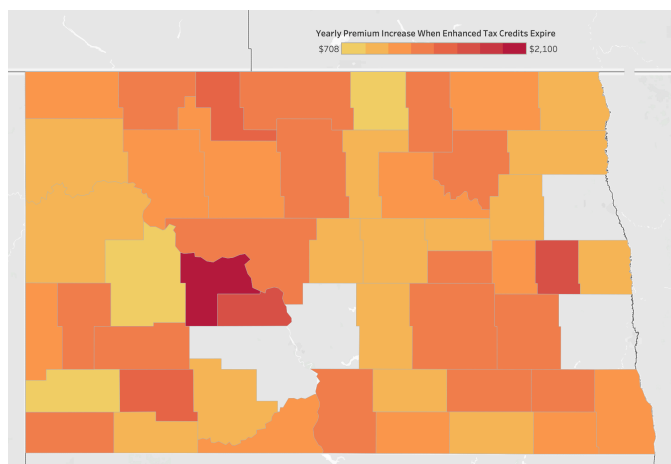
### Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$1,167** more per year for marketplace health coverage—and multiple times more per family.

**22,649** residents in rural counties had health insurance marketplace coverage in 2024, **67 percent** more than in 2021. This includes:

- ~**5,721** residents ages 55-64
- ~**5,897** residents who are children

Additionally, the new reconciliation law will require **6,300** enrollees in rural counties to file new paperwork to stay covered.



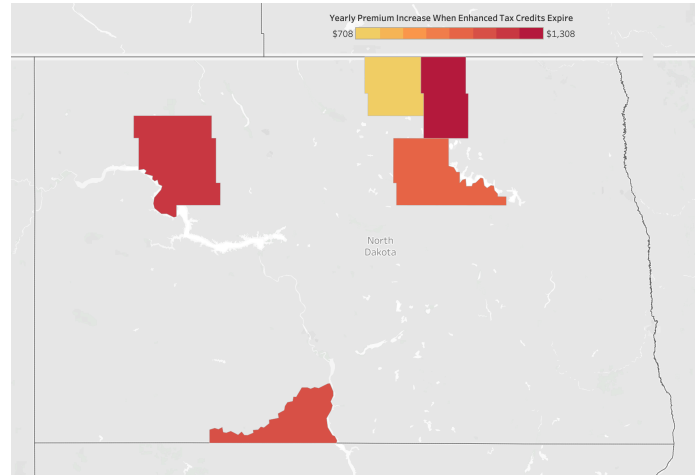
## High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes counties will pay on average **\$1,025** more per year for marketplace health coverage—and multiple times more per family.

**1,591** residents in high diabetes counties had health insurance marketplace coverage in 2024, **52** percent more than in 2021. This includes:

- ~**382** residents ages 55-64
- ~**404** residents who are children

Additionally, the new reconciliation law will require **647** enrollees in high diabetes counties to file new paperwork to stay covered.



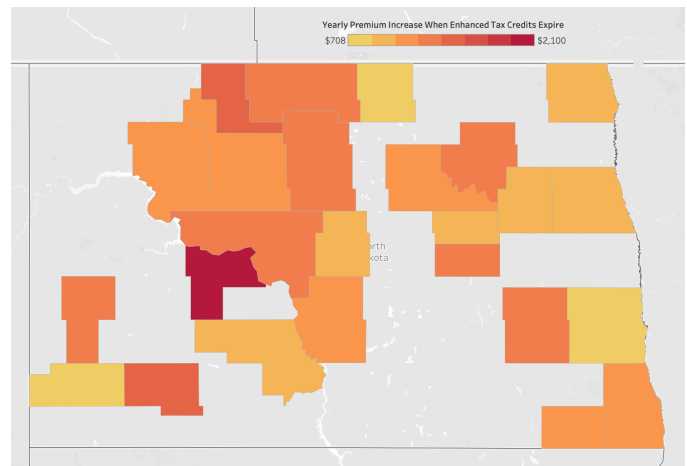
## High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$1,065** more per year for marketplace health coverage—and multiple times more per family.

**26,000** residents in high cancer rate counties had health insurance marketplace coverage in 2024, **74** percent more than in 2021. This includes:

- ~**6,271** residents ages 55-64
- ~**5,779** residents who are children

Additionally, the new reconciliation law will require **7,191** enrollees in high cancer rate counties to file new paperwork to stay covered.



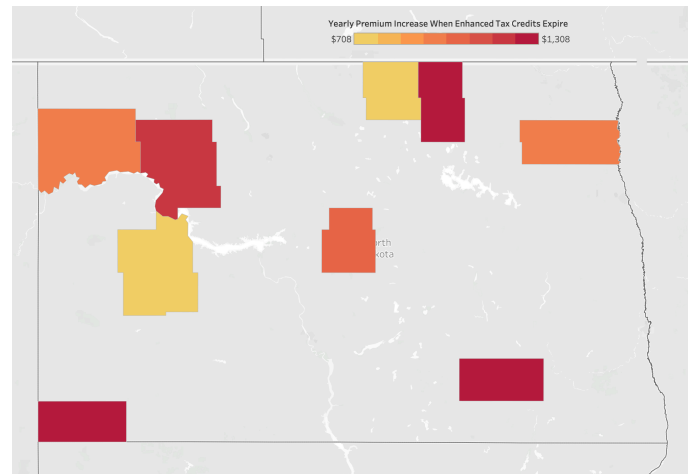
## High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$1,020** more per year for marketplace health coverage—and multiple times more per family.

**4,400** residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **63** percent more than in 2021. This includes:

- ~**918** residents ages 55-64
- ~**1,320** residents who are children

Additionally, the new reconciliation law will require **1,389** enrollees in high uninsured rate counties to file new paperwork to stay covered.



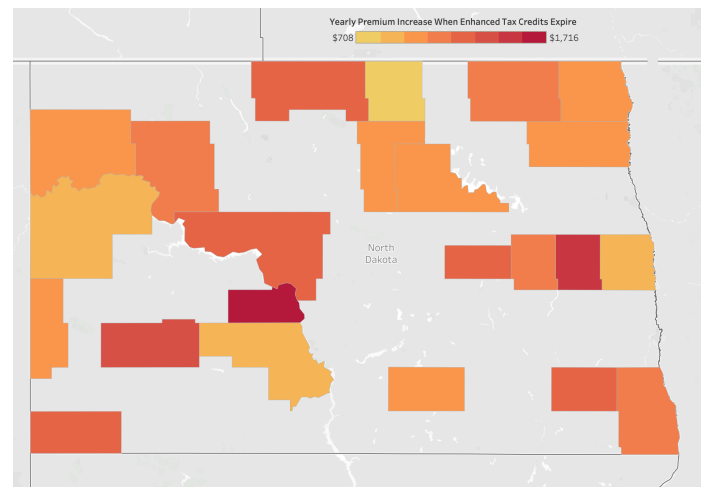
## High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$1,103** more per year for marketplace health coverage—and multiple times more per family.

**12,558** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **65** percent more than in 2021. This includes:

- ~**3,059** residents ages 55-64
- ~**3,302** residents who are children

Additionally, the new reconciliation law will require **3,636** 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.