

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

Without Congressional action, eligible enrollees in Nebraska will pay on average \$1,092 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> in premiums for 2026 of 15 percent.

**117,900** residents had health insurance marketplace coverage in 2024, **33** percent more than in 2021. This includes:

- ~28,357 residents ages 55-64
- ~20,821 residents who are children

Additionally, the new reconciliation law will require **20,710** enrollees to file new paperwork to stay covered.

#### **Counties Hardest Hit:**

Highest average loss of premium tax credits:

• McPherson County: \$2,280 more per year

• Chase County: \$1,608 more per year

Hayes and Hitchcock Counties: \$1,560

more per yearGosper and Perkins Counties: \$1,500

more per year

Highest number of enrollees that could be affected:

Douglas County: 30,300

Lancaster County: 15,900

Hall County: 3,900

Sarpy County: 7,000

Buffalo County: 3,700

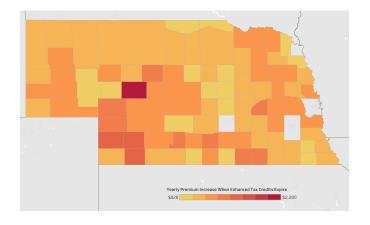
#### **Rural Counties:**

Without Congressional action, eligible enrollees in rural counties will pay on average \$1,186 more per year for marketplace health coverage—and multiple times more per family.

**59,829** residents in rural counties had health insurance marketplace coverage in 2024, **22** percent more than in 2021. This includes:

- ~15,717 residents ages 55-64
- ~11,707 residents who are children

Additionally, the new reconciliation law will require **8,900** enrollees in rural counties to file new paperwork to stay covered.



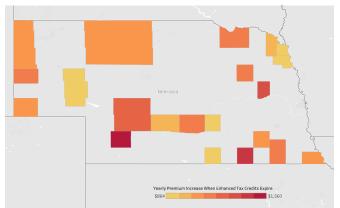
## **High Diabetes Rate Counties:**

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average \$1,116 more per year for marketplace health coverage—and multiple times more per family.

**24,100** residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **29** percent more than in 2021. This includes:

- ~6,075 residents ages 55-64
- ~4,379 residents who are children

Additionally, the new reconciliation law will require **3,826** enrollees in high diabetes rate counties to file new paperwork to stay covered.



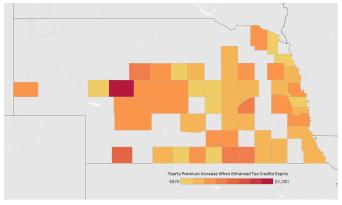
## **High Cancer Rate Counties:**

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

**75,129** residents in high cancer rate counties had health insurance marketplace coverage in 2024, **39** percent more than in 2021. This includes:

- ~17,920 residents ages 55-64
- ~13,315 residents who are children

Additionally, the new reconciliation law will require **13,556** enrollees in high cancer rate counties to file new paperwork to stay covered.



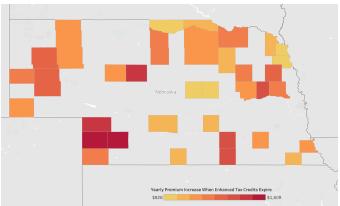
#### **High Uninsured Rate Counties:**

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average \$1,114 more per year for marketplace health coverage—and multiple times more per family.

**28,700** residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **24** percent more than in 2021. This includes:

- ~7,288 residents ages 55-64
- ~5,720 residents who are children

Additionally, the new reconciliation law will require **4,233** enrollees in high uninsured rate counties to file new paperwork to stay covered.



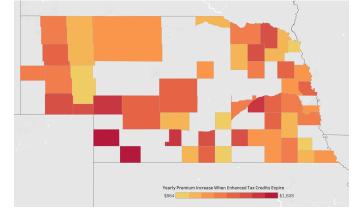
## **High Primary Care Ratio Counties:**

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average \$1,129 more per year for marketplace health coverage—and multiple times more per family.

**64,800** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **26** percent more than in 2021. This includes:

- ~16,087 residents ages 55-64
- ~11,613 residents who are children

Additionally, the new reconciliation law will require **11,271** 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.