

Recent Changes Will Increase Health Costs and Decrease Coverage in Ohio

Without Congressional action, eligible enrollees in Ohio will pay on average **\$804** 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**.

477,800 residents had health insurance marketplace coverage in 2024, **138** percent more than in 2021. This includes:

- ~**139,058** residents ages 55-64
- ~**44,881** residents who are children

Additionally, the new reconciliation law will require **116,533** enrollees to file new paperwork to stay covered.

Counties Hardest Hit

Highest average loss of premium tax credits:

- Putnam County: \$1,188 more per year
- Ottawa County: \$1,104 more per year
- Geauga County: \$1,068 more per year
- Auglaize and Monroe Counties: \$1,044 more per year
- Tuscarawas County: \$1,032 more per year

Highest number of enrollees that could be affected:

- Franklin County: 64,900
- Cuyahoga County: 56,800
- Hamilton County: 38,800
- Montgomery County: 23,800
- Summit County: 22,200

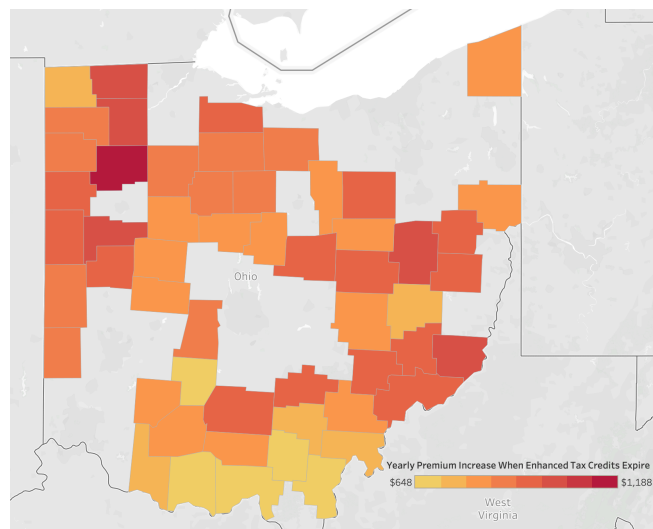
Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$870** more per year for marketplace health coverage—and multiple times more per family.

86,200 residents in rural counties had health insurance marketplace coverage in 2024, **136** percent more than in 2021. This includes:

- ~**29,856** residents ages 55-64
- ~**7,636** residents who are children

Additionally, the new reconciliation law will require **20,929** enrollees in rural counties to file new paperwork to stay covered.



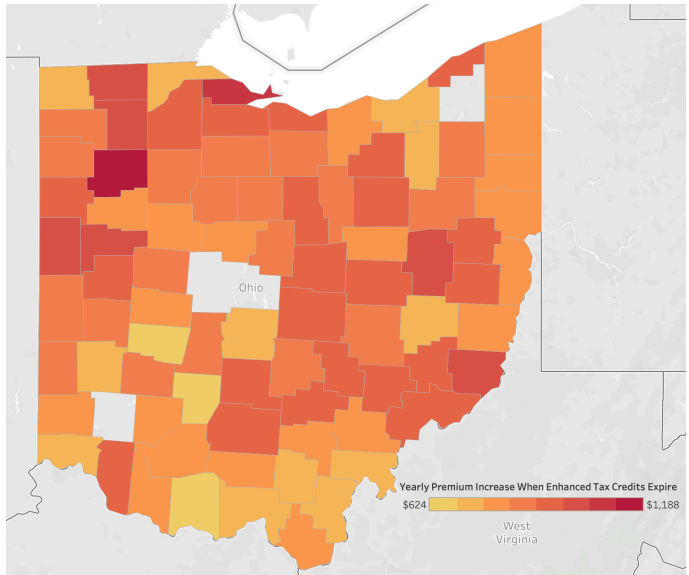
High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average **\$794** more per year for marketplace health coverage—and multiple times more per family.

452,900 residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **142** percent more than in 2021. This includes:

- ~**131,626** residents ages 55-64
- ~**40,477** residents who are children

Additionally, the new reconciliation law will require **110,512** enrollees in high diabetes rate counties to file new paperwork to stay covered.



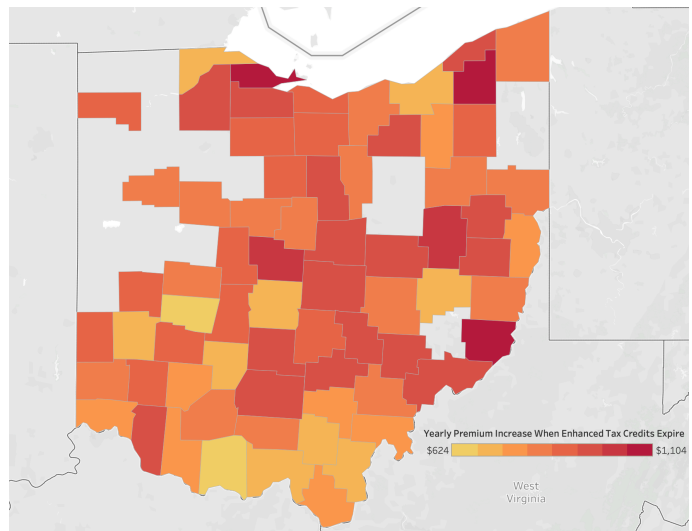
High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$795** more per year for marketplace health coverage—and multiple times more per family.

438,000 residents in high cancer rate counties had health insurance marketplace coverage in 2024, **138** percent more than in 2021. This includes:

- ~**125,975** residents ages 55-64
- ~**40,208** residents who are children

Additionally, the new reconciliation law will require **107,256** enrollees in high cancer rate counties to file new paperwork to stay covered.



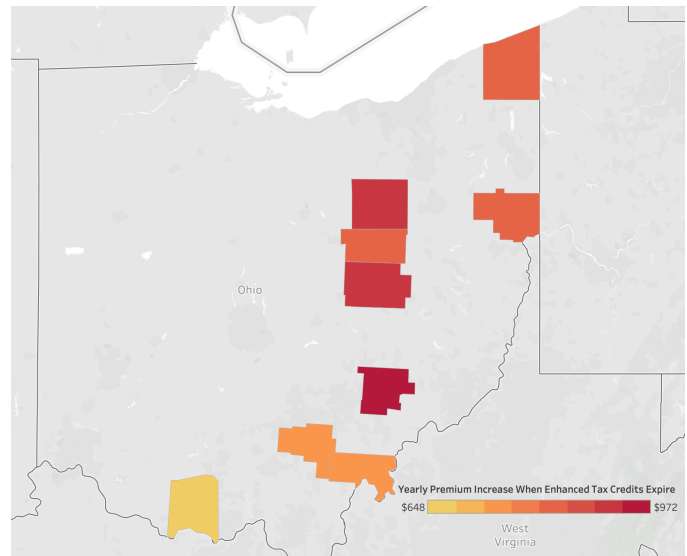
High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$836** more per year for marketplace health coverage—and multiple times more per family.

15,300 residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **143** percent more than in 2021. This includes:

- ~**5,320** residents ages 55-64
- ~**1,138** residents who are children

Additionally, the new reconciliation law will require **4,036** enrollees in high uninsured rate counties to file new paperwork to stay covered.



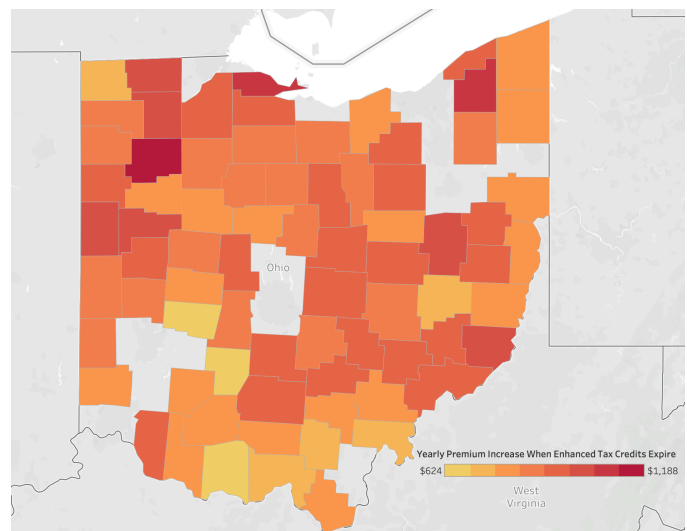
High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$868** more per year for marketplace health coverage—and multiple times more per family.

201,100 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **124** percent more than in 2021. This includes:

- ~**66,453** residents ages 55-64
- ~**19,073** residents who are children

Additionally, the new reconciliation law will require **50,009** 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.