

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

Without Congressional action, eligible enrollees in Tennessee will pay on average **\$540** 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**.

**555,100** residents had health insurance marketplace coverage in 2024, **162** percent more than in 2021. This includes:

- ~**129,103** residents ages 55-64
- ~**38,502** residents who are children

Additionally, the new reconciliation law will require **127,243** enrollees to file new paperwork to stay covered.

### Counties Hardest Hit:

Highest average loss of premium tax credits:

- Williamson County: \$1,020 more per year
- Sumner County: \$744 more per year
- Wilson County: \$720 more per year
- Putnam County: \$708 more per year
- Loudon and Washington County: \$696 more per year

Highest number of enrollees that could be affected:

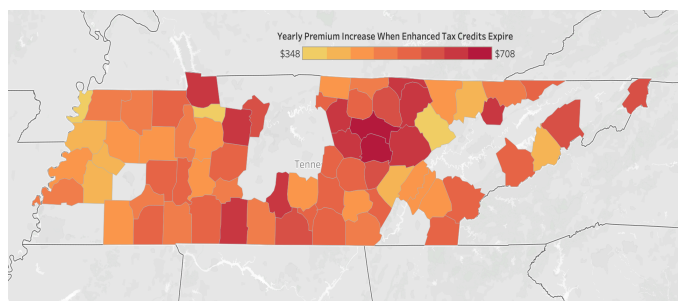
- Shelby County: 93,800
- Davidson County: 79,600
- Knox County: 34,600
- Hamilton County: 29,400
- Rutherford County: 28,800

### Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$538** more per year for marketplace health coverage—and multiple times more per family.

**146,300** residents in rural counties had health insurance marketplace coverage in 2024, **148** percent more than in 2021. This includes:

- ~**42,068** residents ages 55-64
- ~**4,859** residents who are children



Additionally, the new reconciliation law will require **34,276** enrollees in rural counties to file new paperwork to stay covered.

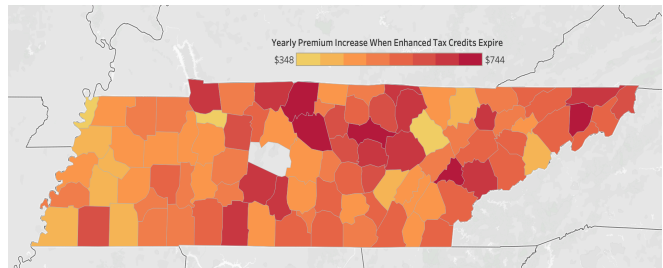
## High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average **\$528** more per year for marketplace health coverage—and multiple times more per family.

**541,000** residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **166** percent more than in 2021. This includes:

- ~**125,730** residents ages 55-64
- ~**34,866** residents who are children

Additionally, the new reconciliation law will require **124,102** enrollees in high diabetes rate counties to file new paperwork to stay covered.



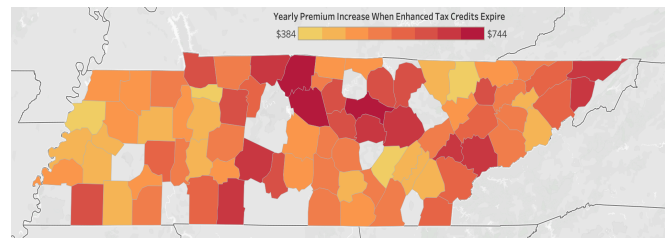
## High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$572** more per year for marketplace health coverage—and multiple times more per family.

**333,000** residents in high cancer rate counties had health insurance marketplace coverage in 2024, **150** percent more than in 2021. This includes:

- ~**85,107** residents ages 55-64
- ~**19,705** residents who are children

Additionally, the new reconciliation law will require **76,553** enrollees in high cancer rate counties to file new paperwork to stay covered.

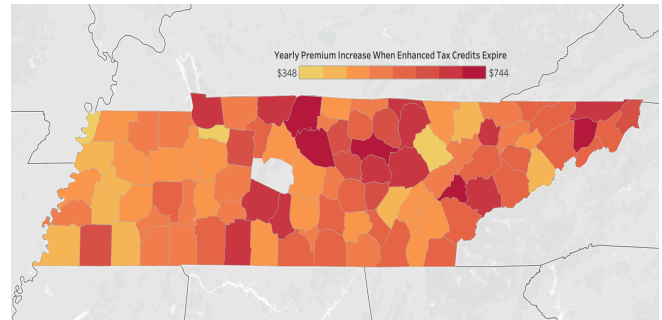


## High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$528** more per year for marketplace health coverage—and multiple times more per family.

**541,000** residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **166** percent more than in 2021. This includes:

- ~**125,730** residents ages 55-64
- ~**34,866** residents who are children



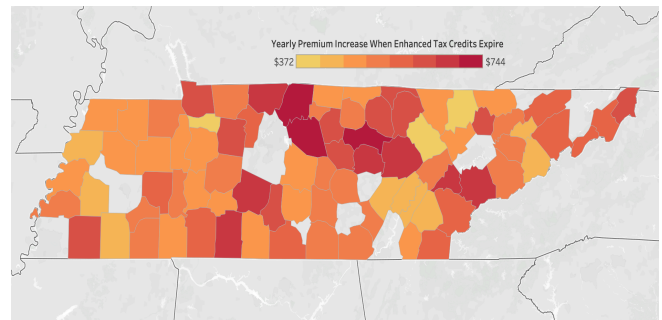
Additionally, the new reconciliation law will require **124,102** enrollees in high uninsured rate counties to file new paperwork to stay covered.

## High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$559** more per year for marketplace health coverage—and multiple times more per family.

**271,700** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **157** percent more than in 2021. This includes:

- ~**71,479** residents ages 55-64
- ~**15,137** residents who are children



Additionally, the new reconciliation law will require **62,405** 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.