

Recent Changes Will Increase Health Costs and Decrease Coverage in Texas

Without Congressional action, eligible enrollees in Texas will pay on average **\$456** more per year for marketplace health coverage—and multiple times more per family. These costs could be even higher, given [preliminary projected increases](#) in most Texas premiums for 2026 of **13 percent**.

3,484,600 residents had health insurance marketplace coverage in 2024, **170** percent more than in 2021. This includes:

- ~**679,353** residents ages 55-64
- ~**428,818** residents who are children

Additionally, the new reconciliation law will require **705,873** enrollees to file new paperwork to stay covered.

Counties Hardest Hit:

Highest average loss of premium tax credits:

- King County: \$1,404 more per year
- Archer County: \$828 more per year
- Baylor County: \$816 more per year
- Kendall County: \$792 more per year
- Schleicher County: \$780 more per year

Highest number of enrollees that could be affected:

- Harris County: 689,600
- Dallas County: 319,000
- Bexar County: 234,500
- Tarrant County: 216,400
- Hidalgo County: 186,000

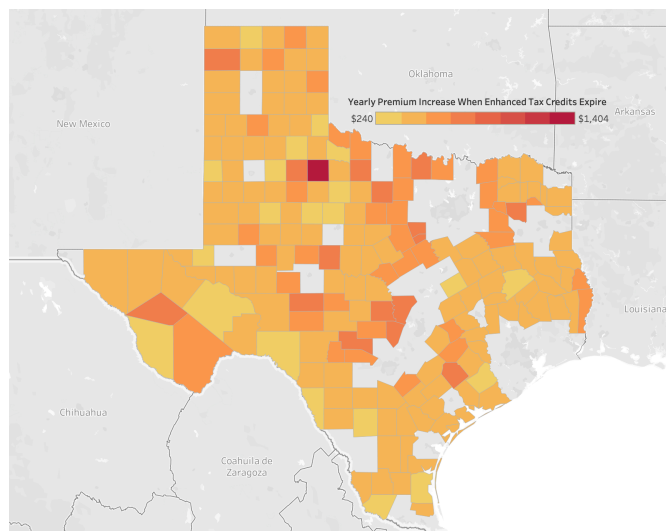
Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$497** more per year for marketplace health coverage—and multiple times more per family.

413,094 residents in rural counties had health insurance marketplace coverage in 2024, **190** percent more than in 2021. This includes:

- ~**100,825** residents ages 55-64
- ~**43,426** residents who are children

Additionally, the new reconciliation law will require **88,780** enrollees in rural counties to file new paperwork to stay covered.



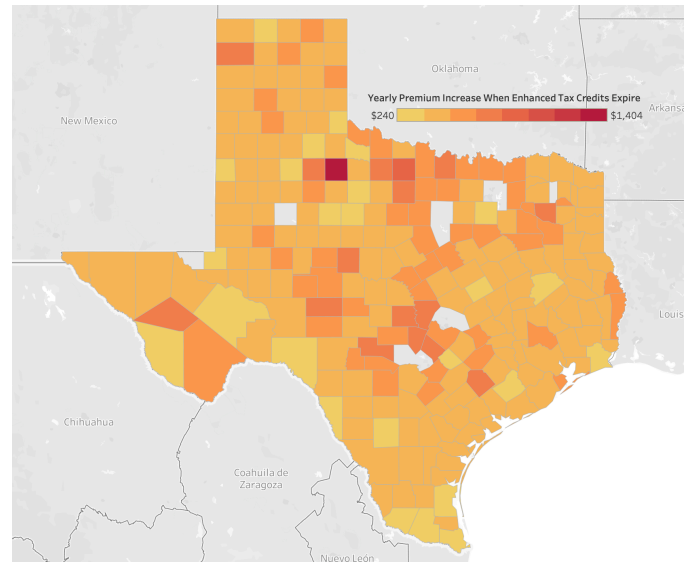
High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes rate counties will pay on average **\$446** more per year for marketplace health coverage—and multiple times more per family.

3,274,194 residents in high diabetes rate counties had health insurance marketplace coverage in 2024, **174** percent more than in 2021. This includes:

- ~**638,416** residents ages 55-64
- ~**393,876** residents who are children

Additionally, the new reconciliation law will require **664,279** enrollees in high diabetes rate counties to file new paperwork to stay covered.



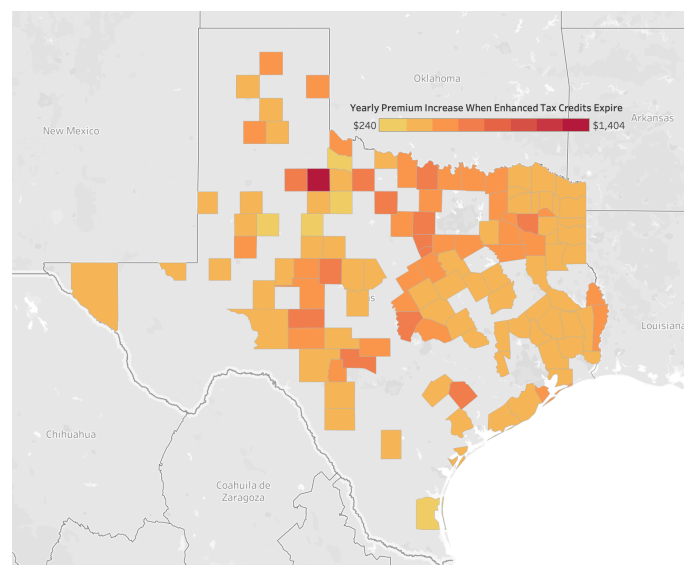
High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$526** more per year for marketplace health coverage—and multiple times more per family.

673,300 residents in high cancer rate counties had health insurance marketplace coverage in 2024, **193** percent more than in 2021. This includes:

- ~**146,877** residents ages 55-64
- ~**80,529** residents who are children

Additionally, the new reconciliation law will require **144,655** enrollees in high cancer rate counties to file new paperwork to stay covered.



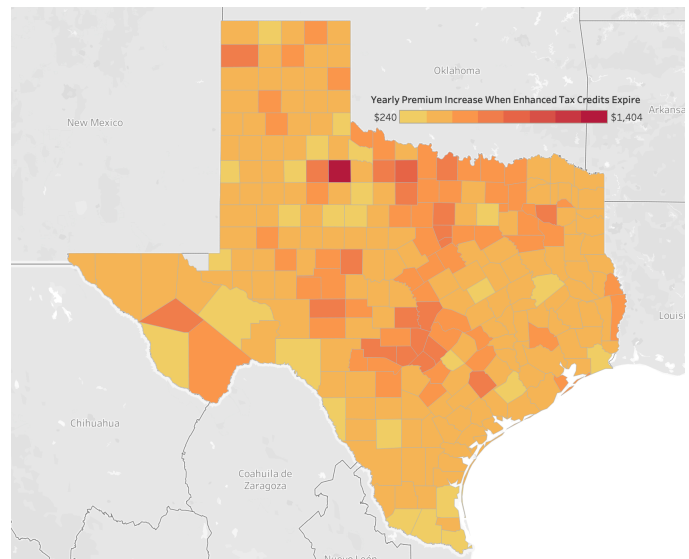
High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured counties will pay on average **\$455** more per year for marketplace health coverage—and multiple times more per family.

3,484,494 residents in high uninsured counties had health insurance marketplace coverage in 2024, **170** percent more than in 2021. This includes:

- ~**679,348** residents ages 55-64
- ~**427,794** residents who are children

Additionally, the new reconciliation law will require **705,859** enrollees in high uninsured counties to file new paperwork to stay covered.



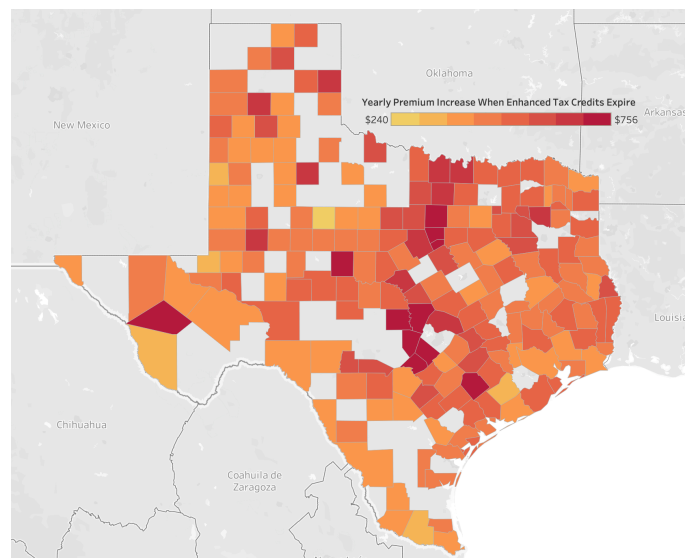
High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$443** more per year for marketplace health coverage—and multiple times more per family.

2,905,200 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **180** percent more than in 2021. This includes:

- ~**570,892** residents ages 55-64
- ~**351,529** residents who are children

Additionally, the new reconciliation law will require **590,142** 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.