

Recent Changes Will Increase Health Costs and Decrease Coverage in West Virginia

Without Congressional action, eligible enrollees in West Virginia will pay on average **\$1,404** 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**.

51,000 residents had health insurance marketplace coverage in 2024, **163** percent more than in 2021. This includes:

- ~**15,475** residents ages 55-64
- ~**2,603** residents who are children

Additionally, the new reconciliation law will require **13,375** enrollees to file new paperwork to stay covered.

Counties Hardest Hit:

Highest average loss of premium tax credits:

- Putnam County: \$2,316 more per year
- Tucker County: \$2,292 more per year
- Tyler County: \$2,256 more per year
- Pleasants County: \$2,016 more per year
- Wetzel Counties: \$1,896 more per year

Highest number of enrollees that could be affected:

- Kanawha County: 5,700
- Berkeley County: 3,800
- Cabell County: 3,100
- Monongalia County: 2,800
- Wood County: 2,200

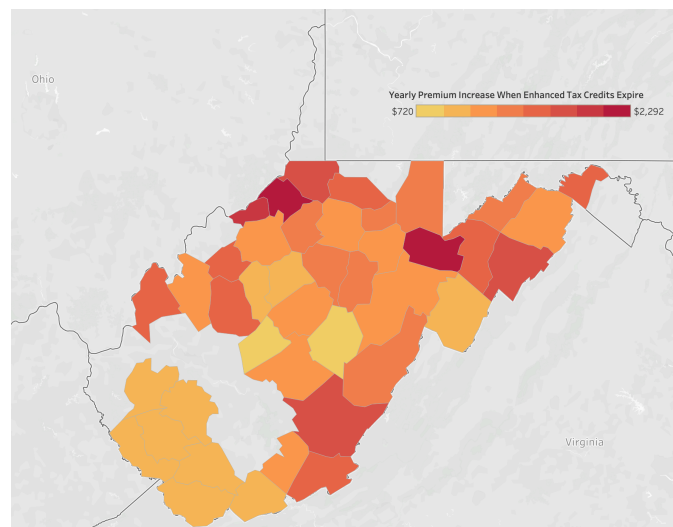
Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$1,345** more per year for marketplace health coverage—and multiple times more per family.

22,700 residents in rural counties had health insurance marketplace coverage in 2024, **152** percent more than in 2021. This includes:

- ~**7,416** residents ages 55-64
- ~**138** residents who are children

Additionally, the new reconciliation law will require **5,956** enrollees in rural counties to file new paperwork to stay covered.



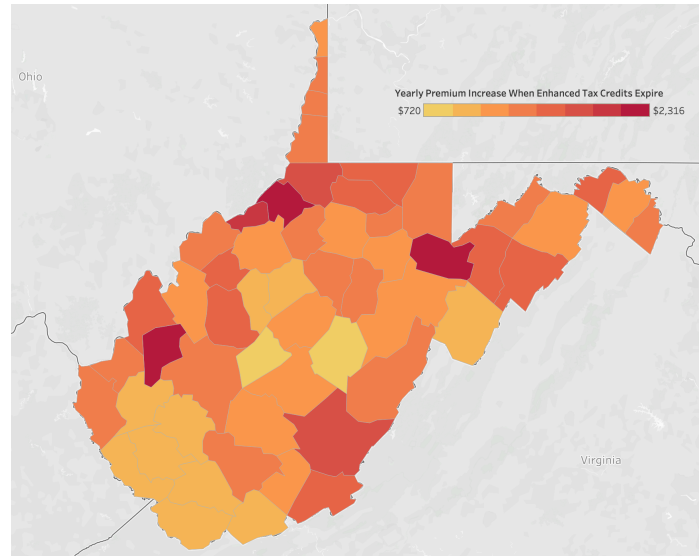
High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in West Virginia will pay on average **\$1,404** more per year for marketplace health coverage—and multiple times more per family. All of West Virginia's counties are above average.

51,000 residents had health insurance marketplace coverage in 2024, **163** percent more than in 2021. This includes:

- ~**15,475** residents ages 55-64
- ~**2,603** residents who are children

Additionally, the new reconciliation law will require **13,375** enrollees to file new paperwork to stay covered.



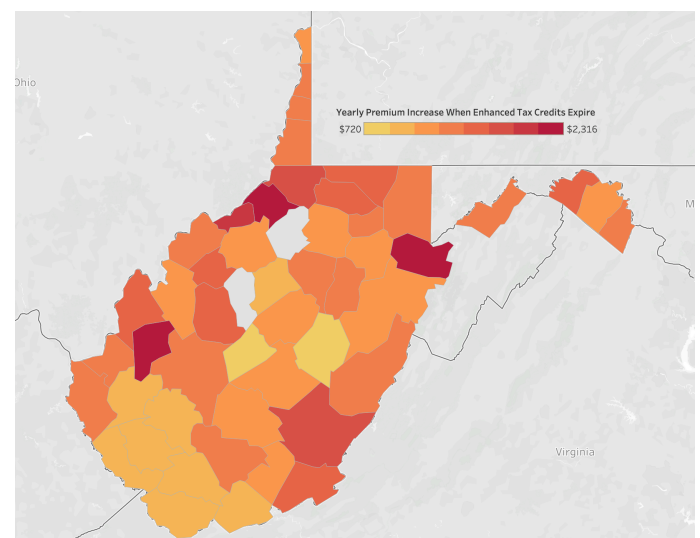
High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$1,404** more per year for marketplace health coverage—and multiple times more per family.

48,800 residents in high cancer rate counties had health insurance marketplace coverage in 2024, **166** percent more than in 2021. This includes:

- ~**14,632** residents ages 55-64
- ~**1,326** residents who are children

Additionally, the new reconciliation law will require **12,805** enrollees in high cancer rate counties to file new paperwork to stay covered.



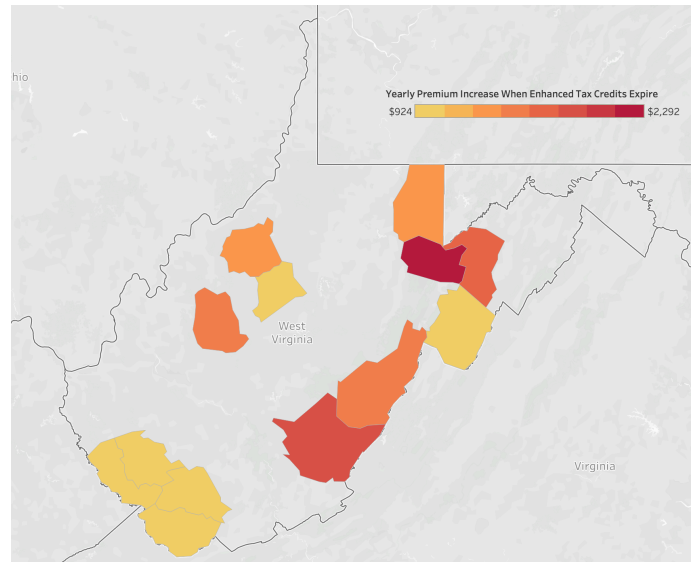
High Uninsured Rates Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$1,366** more per year for marketplace health coverage—and multiple times more per family.

6,400 residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **127** percent more than in 2021. This includes:

- ~**2,109** residents ages 55-64
- ~**13** residents who are children

Additionally, the new reconciliation law will require **1,853** enrollees in high uninsured rate counties to file new paperwork to stay covered.



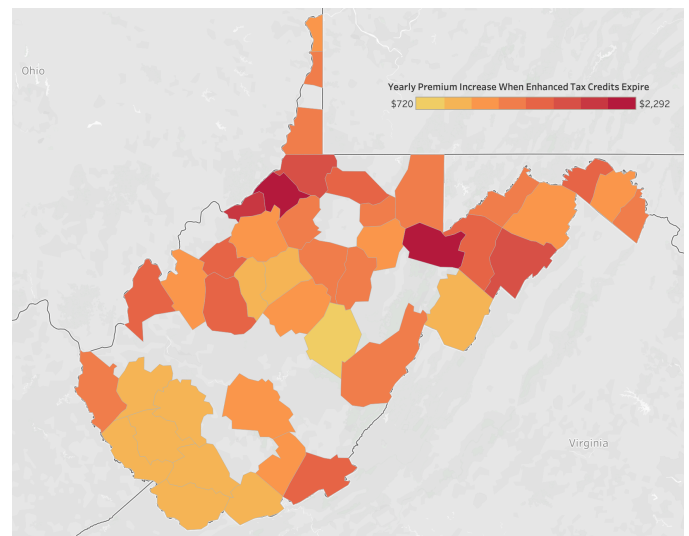
High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$1,329** more per year for marketplace health coverage—and multiple times more per family.

27,400 residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **145** percent more than in 2021. This includes:

- ~**8,944** residents ages 55-64
- ~**486** residents who are children

Additionally, the new reconciliation law will require **7,453** 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.