

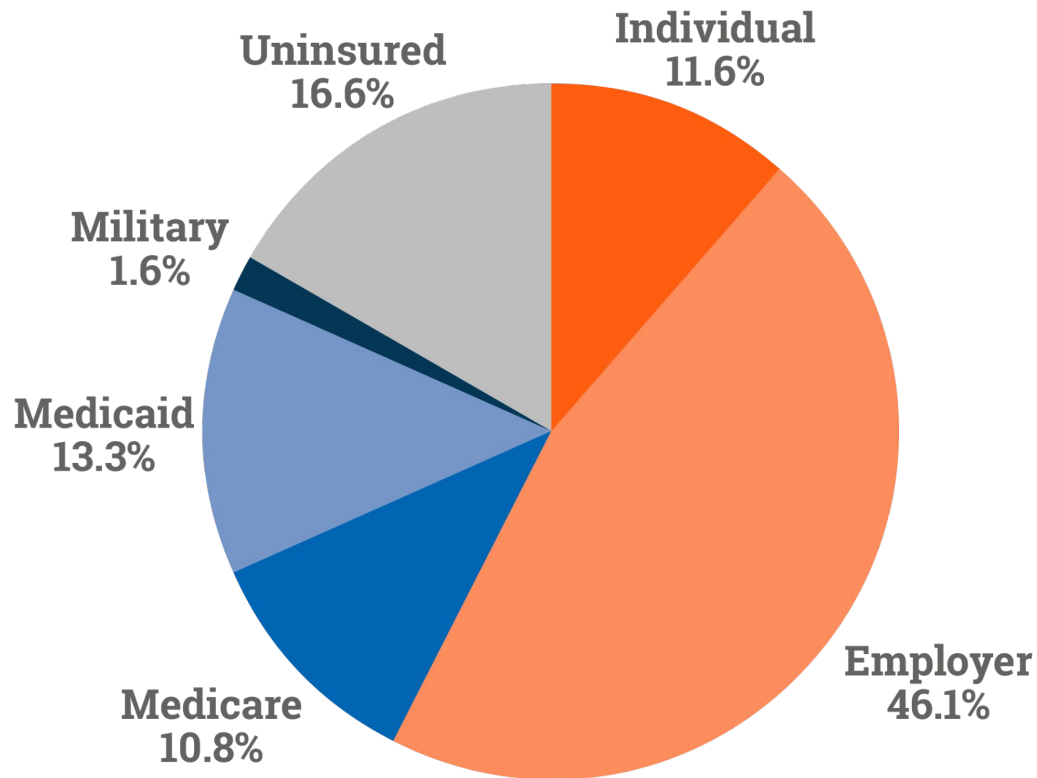
Marketplace Health Coverage: Why Texas is Set to Lose the Most

September 2025



How Texans Get Their Coverage

- **80%** of private market coverage is employer-based
- **84%** of Texas workers have an employer that provides coverage
- **77%** of employer plans are self-funded (not regulated by TDI)
- **Individual market** coverage has grown popular as subsidies improve affordability
- **Uninsured Texans** cite employment as the top reason for not having health coverage
- **70%** of the uninsured are employed but less likely to have consistent, full-time jobs



Keep Health Care Costs Affordable for Texans: Renew the Enhanced Tax Credits

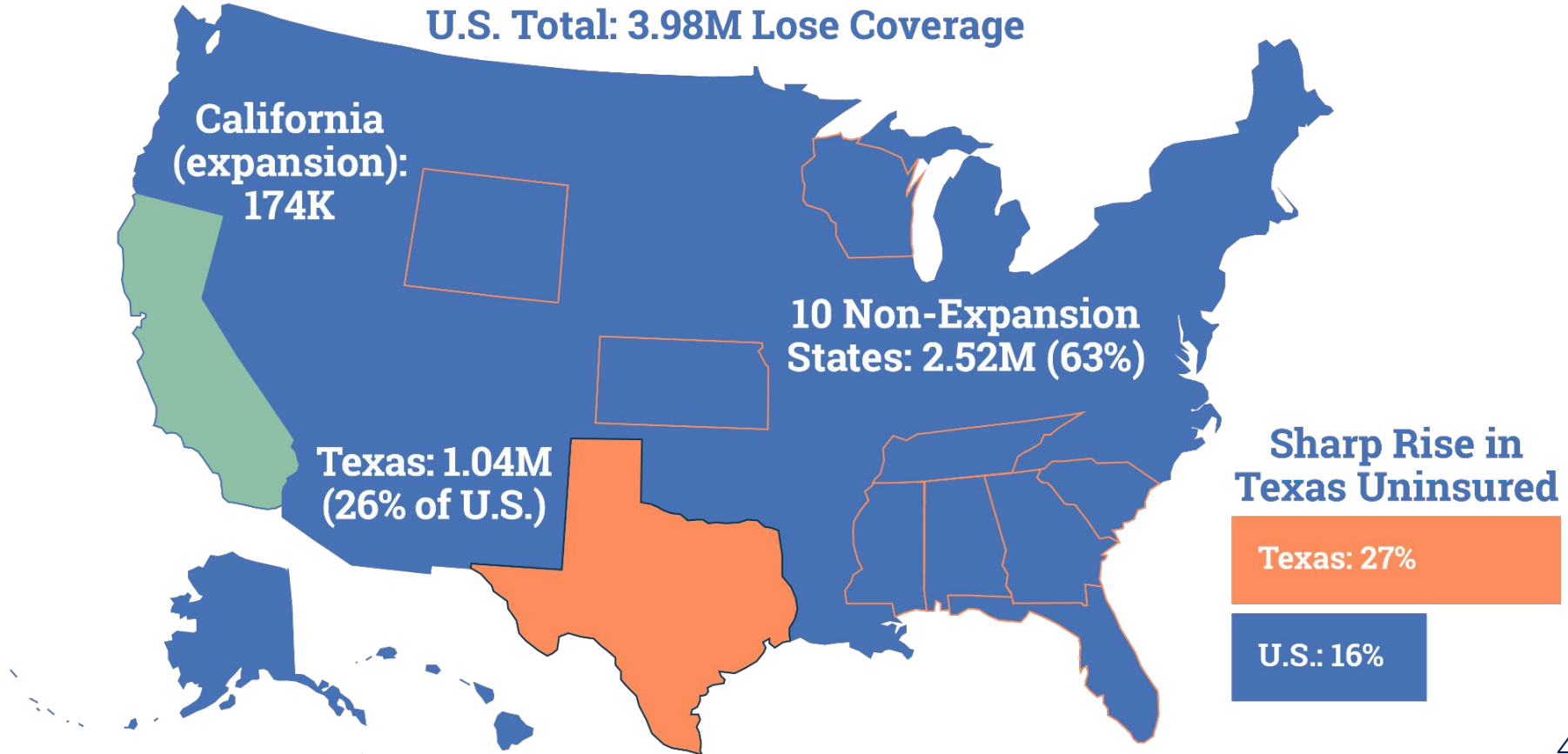
If Enhanced Premium Tax Credits Expire, Texas Is Hit Hardest

- **Why Texas?:** State relied on the private individual market instead of Medicaid expansion.
- **Coverage Losses:** 1.04M Texans lose coverage — 26% of all U.S. losses.
- **Family Costs:** Average family premiums up \$2,000/year for over 3 million Texans that rely on tax credits.
- **Uninsured Spike:** Texas uninsured rate jumps from 16% → 20% (27%↑)
- **Who's Hit:** Self-employed, entrepreneurs, and small-business workers — those groups make up half of the Texas workforce & marketplace coverage
- **Before 2022:** Coverage was out of reach for many Texans without enhanced credits.
- **Deadline:** Without Congressional action, Texans will receive premium notices soon, and face sticker shock on Nov. 1 open enrollment.



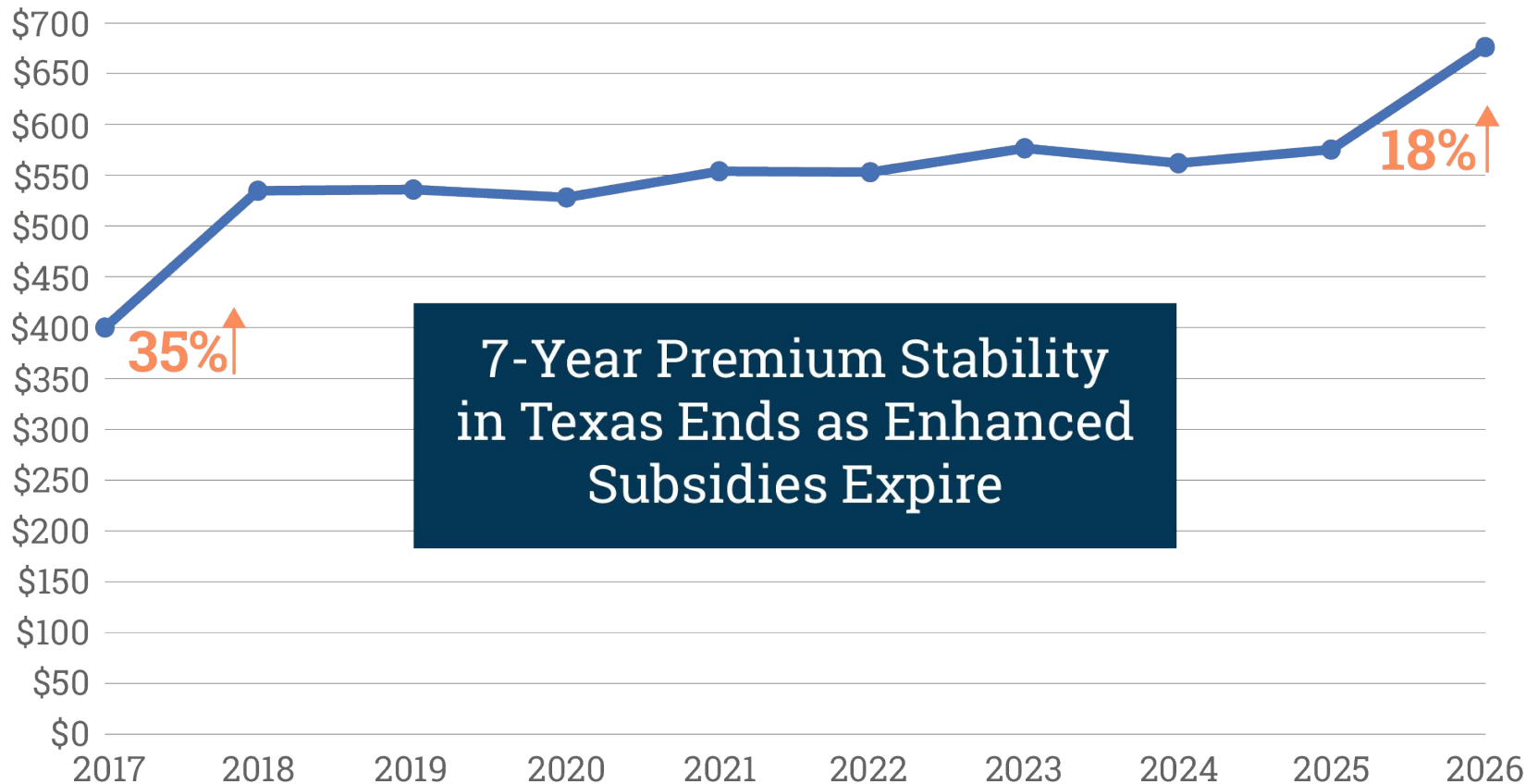
Non-Expansion States Bear the Burden Led by More Than 1M Texans Losing Coverage

U.S. Total: 3.98M Lose Coverage



Source: [Urban Institute](#) Analysis of Coverage Losses

Price Increases Return as Healthier Texans Drop Coverage



Note: Full price monthly premiums (w/o tax credits) shown, actual increases are greater as shown on next slides.

Source: [KEE](#) Single Marketplace Avg. Monthly Premium Before Tax Credits.

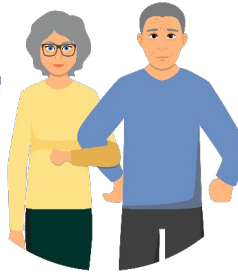
Ending Enhanced Subsidies Doubles Health Care Costs

For a single 40 year old
Earning \$35k a year



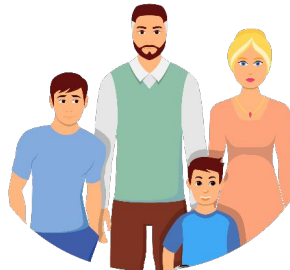
Annual Premiums
would increase by
\$1,215 **105%**

For a 60 Year Old Couple
Earning \$82.8k a year



Annual Premiums
would increase by
\$18,335 **263%**

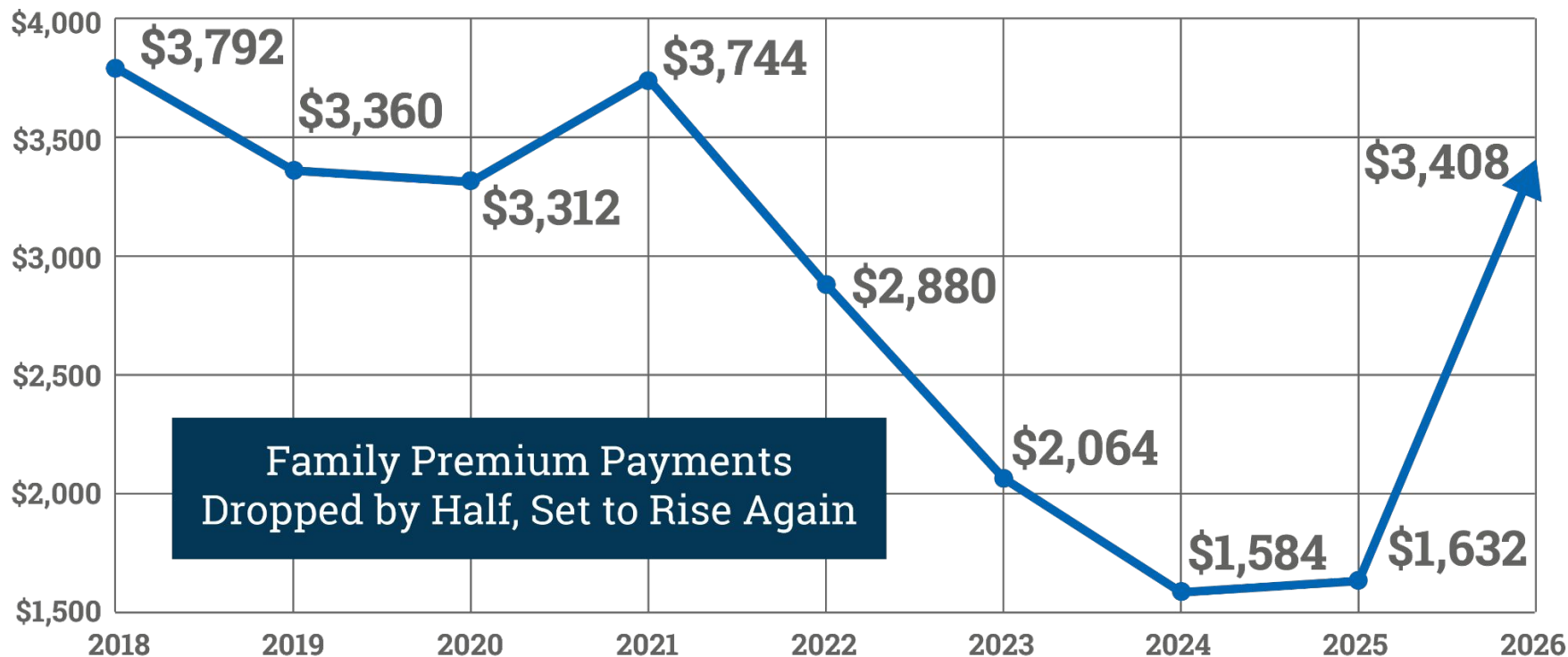
For a Family of Four
Earning \$64k a year



Annual Premiums
would increase by
\$2,355 **166%**

Source: [KFF Calculator](#)

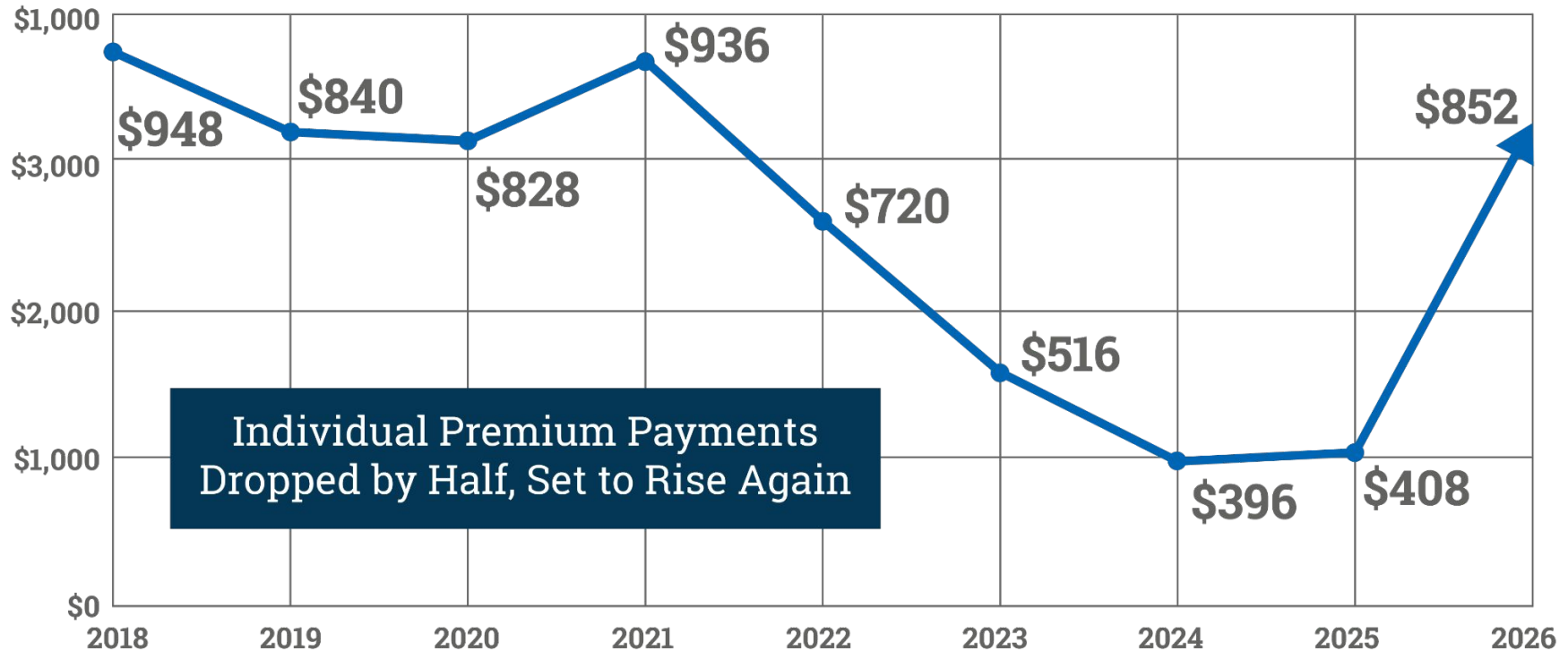
Sharp Rise in Texans Avg. Annual Family Premium Payments



Note: Excludes deductibles, copays, & coinsurance. 2026 projected in Texas if eAPTCs expire.

Source: [KFF](#) avg. annual premium family of four; [KFF](#) change in premium if eAPTCs expire

Sharp Rise in Texans Avg. Annual Individual Premium Payments

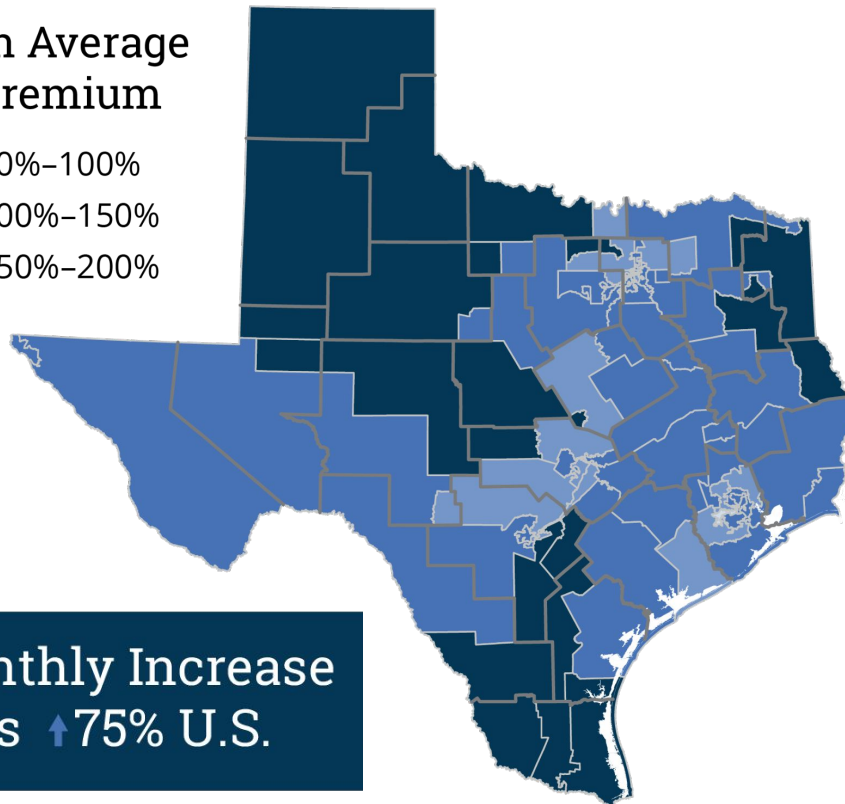
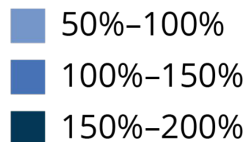


Note: Excludes deductibles, copays, & coinsurance. 2026 projected in Texas if eAPTCs expire.

Source: [KFF](#) avg. annual premium family of four; [KFF](#) change in premium if eAPTCs expire

Ending Enhanced Tax Credits Raises Premiums Most in South, West & Rural Texas

Increase in Average
Monthly Premium



Average Monthly Increase
↑ 115% Texas ↑ 75% U.S.

**South Texas
Premiums Increase:**

173%
(TX-28, TX-15, TX-34)

**West Texas &
Panhandle Premiums
Increase:**

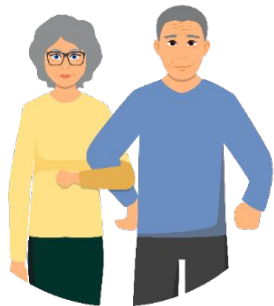
150%
(TX-13, TX-9, TX-11,
TX-23)

**Rural East Texas
Premiums Increase:**

183%
(TX-1)

Ending Premium Tax Credits Leaves a Gap Larger Than the OBBA Tax Cuts

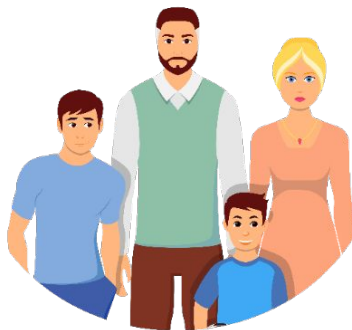
60 Year Old Couple
Earning \$82.8k



Families Pay More: **\$17,371**



Family of Four
Earning \$64k



Families Pay More: **\$1,879**



Family of Four
Earning \$129.8k

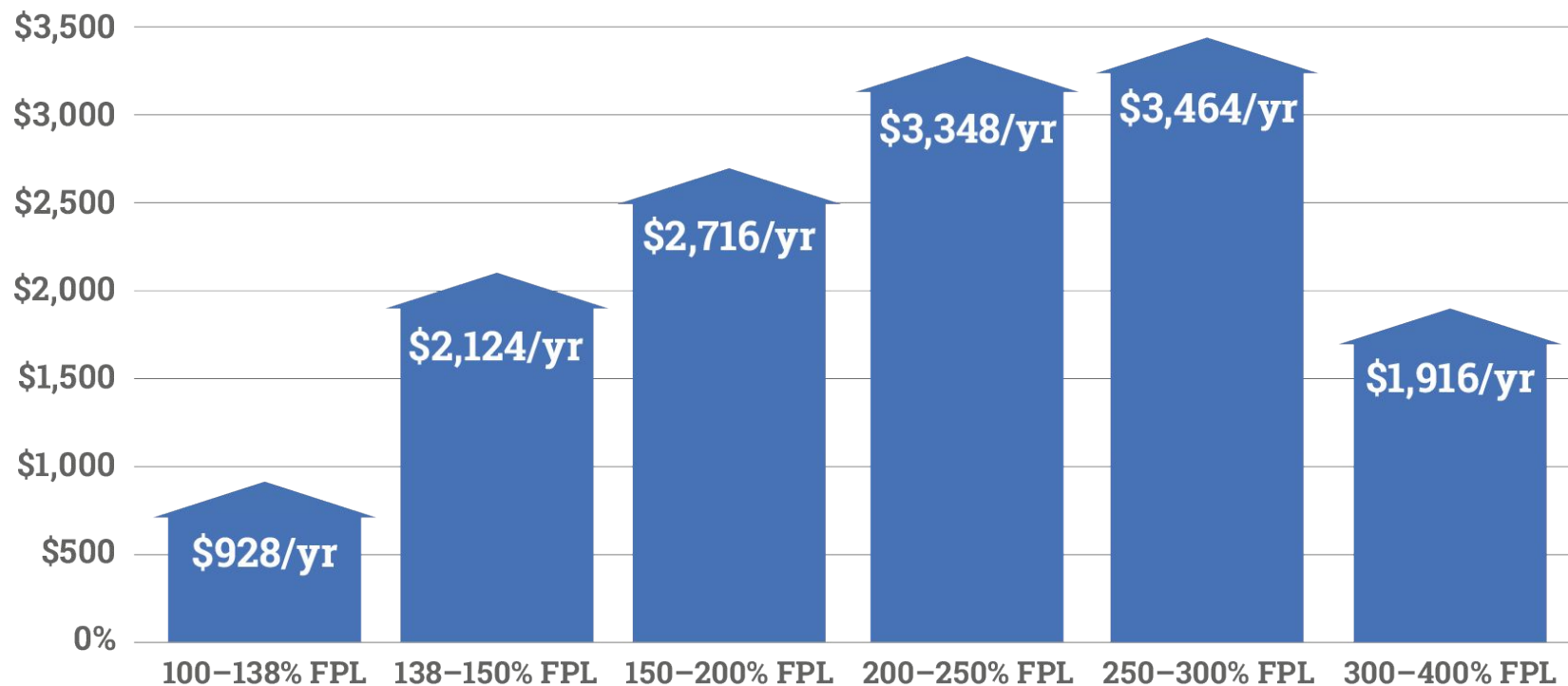


Families Pay More: **\$8,197**



Source: Keep Americans Covered [Texas Analysis](#)

How Much More a Family of Four Pays in Premiums Each Year

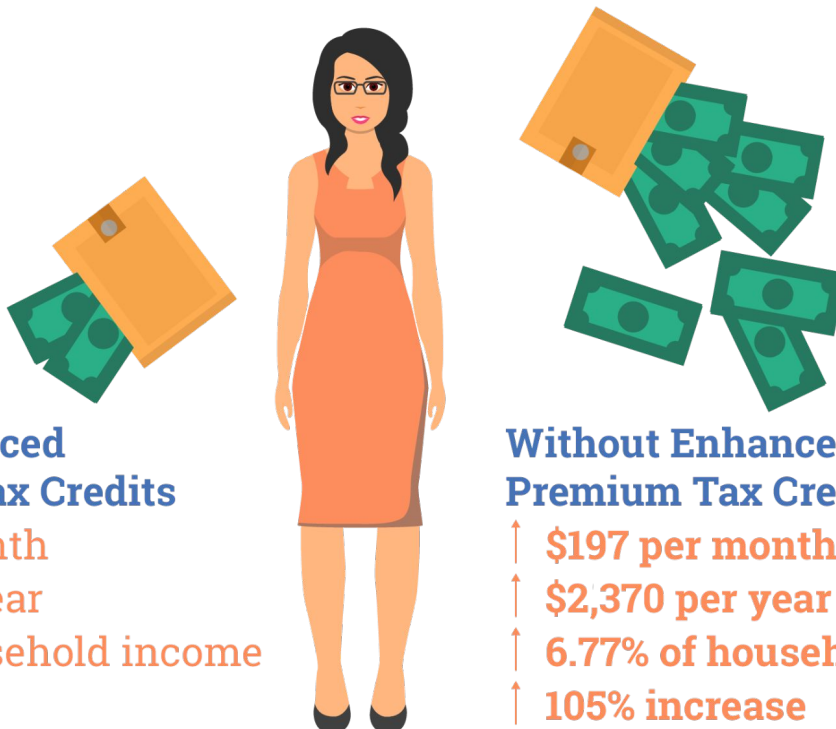


Note: Amounts shown are the avg. national increase in a family premium payment if enhanced tax credits expire. Figures do not include deductibles, copays, or coinsurance.

Source: [CMS](#) Health Insurance Marketplaces 2024 Open Enrollment Report, Table 8

Ending Enhanced Subsidies Doubles Health Care Costs

Single 40 year Old With a \$35K Annual Income
Basic "Silver" Health Insurance Plan



With Enhanced Premium Tax Credits

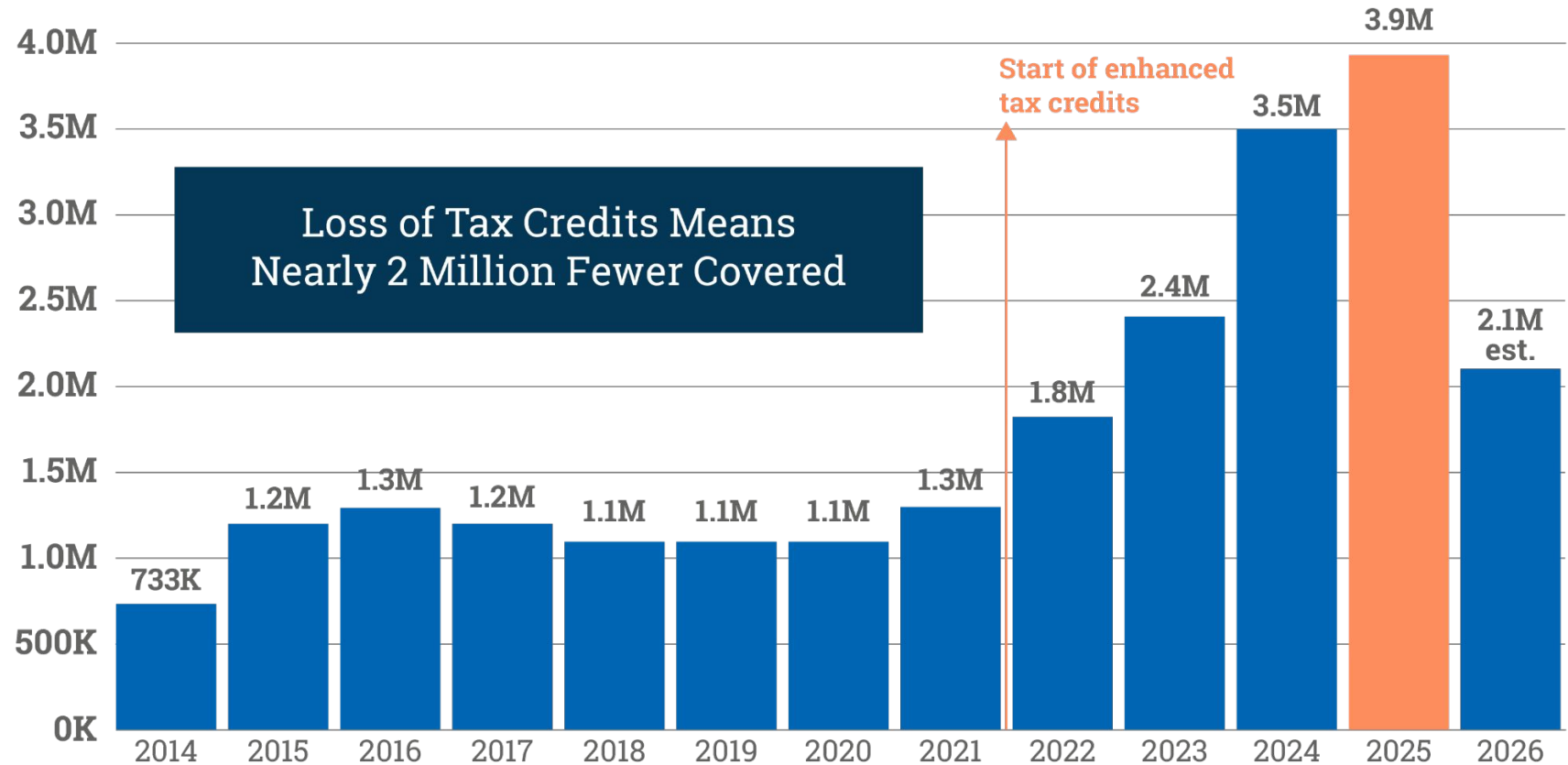
\$96 per month
\$1,155 per year
3.3% of household income

Without Enhanced Premium Tax Credits

↑ \$197 per month
↑ \$2,370 per year
↑ 6.77% of household income
↑ 105% increase

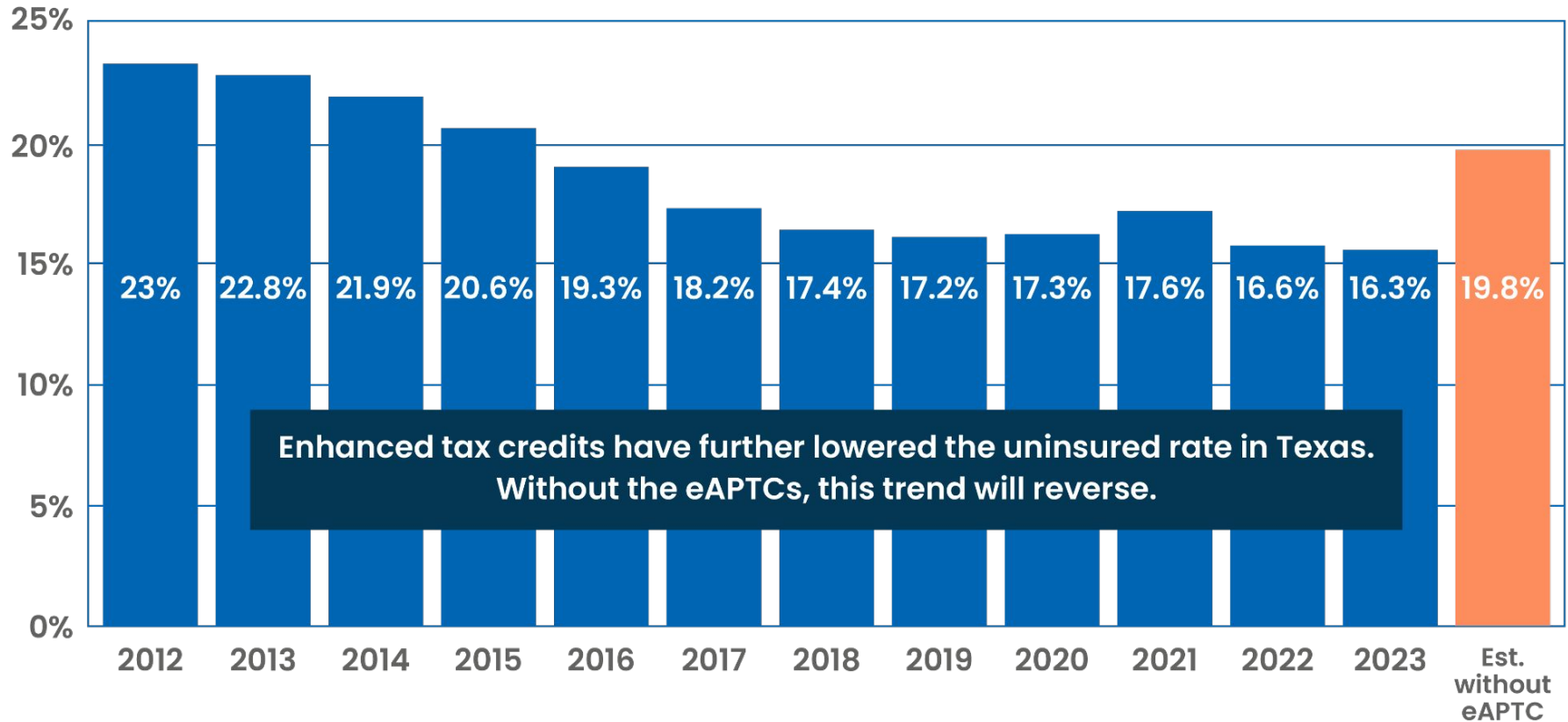
Source: [KFF Calculator](#)

New Tax Credits Made Coverage Affordable for Texans



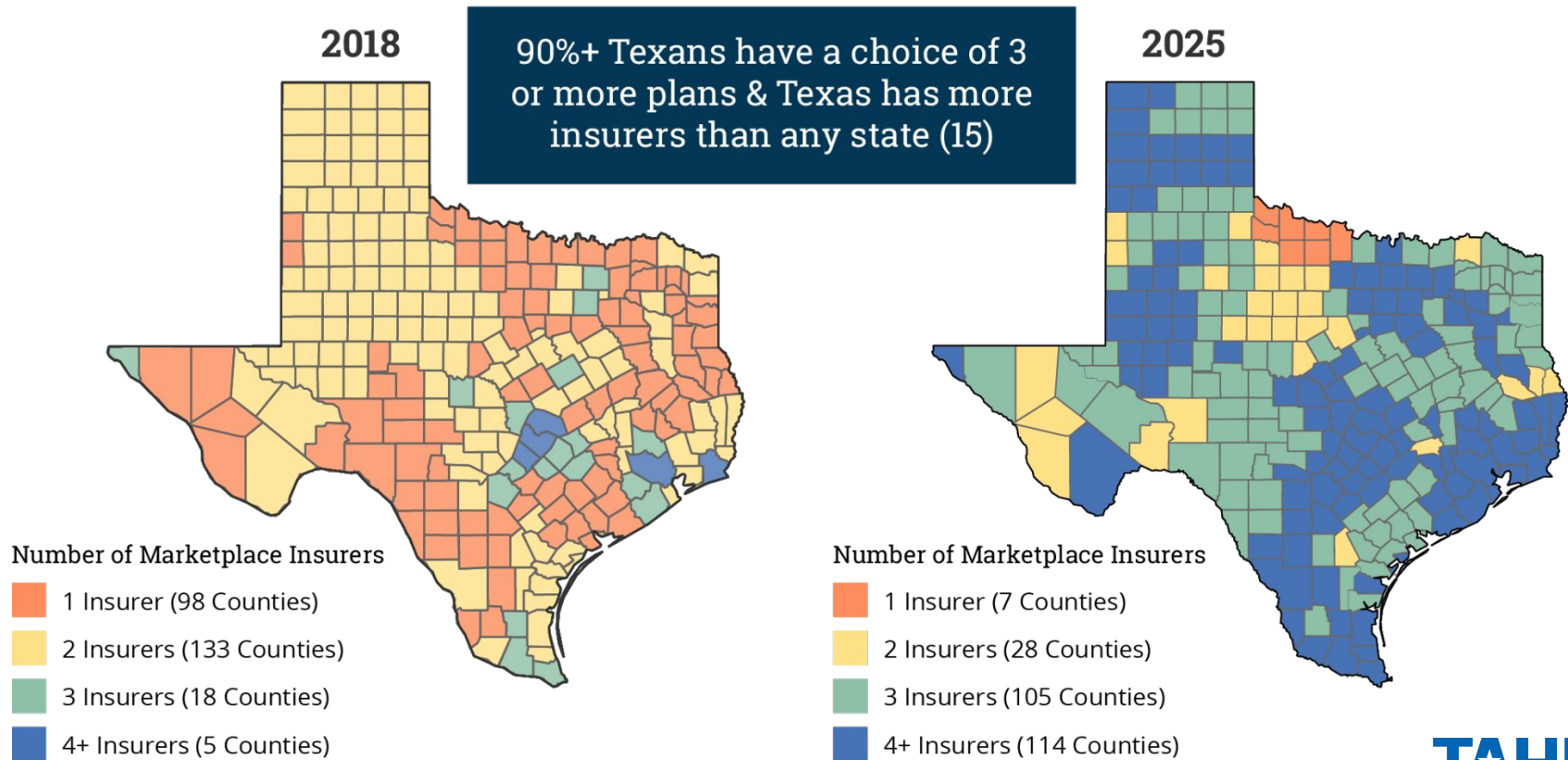
Source: [KFF](#) Coverage by State, [Urban Institute](#) Analysis of Coverage Losses

Tax Credits Helped More Texans Get Covered



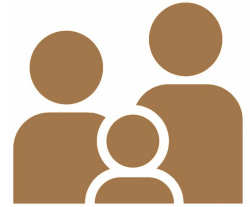
Source: [KFF](#) Coverage by State, [Urban](#) Institute Analysis of Coverage Losses, Latest [Census](#) Pop. Est.

Enhanced Tax Credits Led to More Competition, Lower Prices



Overwhelming Bi-Partisan Support for Premium Tax Credits & Their Extension

- **~80%** of voters support premium tax credits.
 - Backed by **68%** of Trump voters, **78%** of swing voters
- **72%** want extension when told premiums could double or 5M families could lose coverage.
- Support for tax credits is highest (**86%**) among those with marketplace experience, but also strong (**77%**) among those without.
- **91%** of voters say it's important as many Americans as possible are covered.
- **Source:** Fabrizio & Ward [Poll](#), July 2025



Coverage Creates Access to Preventive Care

Private Coverage Creates Access to Preventive Care

- **Breast Cancer Screenings:** Twice as likely to get screened vs. uninsured
- **Colon Cancer Screenings:** Uninsured are 60% less likely to get screened
- **Cervical Cancer Screenings:** 80% higher rates of screening vs. uninsured

Marketplace Enrollees & Preventive Care

- Marketplace enrollees get preventive care at the same rate as those covered at work (55% to 57%)



Minority Groups Have Gained the Most in Coverage & Have the Greatest Need

- **Screening Rates Reflect Need for Coverage:** Hispanic men 60% less likely to get prostate cancer screening, Hispanic women 12% less likely to get cervical cancer screening. Rural Black & Hispanic women 33%/22% less likely to get mammograms.
- **Marketplace Coverage Gains:** Hispanic & Black enrollees have the greatest gains in coverage under enhanced tax credits (104% & 116%)

Coverage Protects Against Catastrophic Costs

High Cost of Care Without Insurance: Without insurance, medical costs can quickly escalate into significant financial burdens, including debt or bankruptcy.

- **NICU Admissions:** \$77K median cost
- **Colorectal Cancer Treatment:** As high as \$300,000
- **Heart Bypass Surgery:** Average \$151,000
- **Hospital Stays:** Average 3-day stay costs \$30,000
- **Median New Drug Price 2024:** \$370,000, up 35% from 2022 (2008 was \$2,000)



Source: [Health Care Cost Institute](#), [Amer. Jour. Cardiology](#), [Public Health](#), [Healthcare.gov](#), [Reuters Survey](#)

OBBBA Reforms Stepped Up Protection for Fraud & Abuse

New rules & the “One Big Beautiful Bill Act” made changes to address concerns

- **End to Self-Attested Income:** If no tax data is available or data shows an income under 100% FPL, additional proof is now required.
- **Past Due Payment Collections:** Insurers are now allowed to halt coverage until enrollees catch up on an overdue balance.
- **Minimum Premium for Auto-Enrollment:** \$5/month premium if the individual is auto-re enrolled in a \$0 monthly premium plan.
- **Open Enrollment Period Shortens:** November 1 to December 15 (previously November 1 to January 15).
- **End of Ongoing Low Income Special Enrollment:** Enrollees under 150% FPL no longer get an endless open enrollment period.
- **Repayment Cap Removed:** If actual income is higher than projected income, enrollees will owe back all of the extra tax credits they received. Right now, the repayment amount is capped.

