

# ALABAMA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Alabama State Coverage Facts

|                                      |              |
|--------------------------------------|--------------|
| Statewide Rural Medicaid Enrollment  | 23.1%        |
| Medicaid Expansion Status            | Non-expanded |
| Rural Medicare Advantage Penetration | 61.8%        |
| Residents receiving ePTCS            | 375,000      |

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# ALASKA RURAL HEALTH COVERAGE FACTS



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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Alaska State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 25.2%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 1.3%     |
| <b>Residents receiving ePTCS</b>            | 23,000   |

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# ARIZONA RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Arizona State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 43.1%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 44.9%    |
| Residents receiving ePTCS            | 308,000  |

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# ARKANSAS RURAL HEALTH COVERAGE FACTS



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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Arkansas State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 27.7%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 46.8%    |
| <b>Residents receiving ePTCS</b>            | 145,000  |

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# CALIFORNIA RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## California State Coverage Facts

|   |           |
|---|-----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.4%     |
| <b>Medicaid Expansion Status</b>            | Expanded  |
| <b>Rural Medicare Advantage Penetration</b> | 14.3%     |
| <b>Residents receiving ePTCS</b>            | 1,554,000 |

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# COLORADO RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Colorado State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.2%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 36.8%    |
| <b>Residents receiving ePTCS</b>            | 183,000  |

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# CONNECTICUT RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Connecticut State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.4%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 93.4%    |
| <b>Residents receiving ePTCS</b>            | 112,000  |

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# FLORIDA RURAL HEALTH COVERAGE FACTS



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- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Florida State Coverage Facts

|   |              |
|---|--------------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.8%        |
| <b>Medicaid Expansion Status</b>            | Non-expanded |
| <b>Rural Medicare Advantage Penetration</b> | 51.3%        |
| <b>Residents receiving ePTCS</b>            | 4,089,000    |

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# GEORGIA RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Georgia State Coverage Facts

|                                      |              |
|--------------------------------------|--------------|
| Statewide Rural Medicaid Enrollment  | 22.3%        |
| Medicaid Expansion Status            | Non-expanded |
| Rural Medicare Advantage Penetration | 59.9%        |
| Residents receiving ePTCS            | 1,245,000    |

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# HAWAII RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Hawaii State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 22.2%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 54.2%    |
| <b>Residents receiving ePTCS</b>            | 18,000   |

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# IDAHO RURAL HEALTH COVERAGE FACTS



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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Idaho State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.2%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 36%      |
| <b>Residents receiving ePTCS</b>            | 90,000   |

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# ILLINOIS RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Illinois State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 16.3%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 34.8%    |
| <b>Residents receiving ePTCS</b>            | 356,000  |

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# INDIANA RURAL HEALTH COVERAGE FACTS



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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Indiana State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.6%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 50.6%    |
| <b>Residents receiving ePTCS</b>            | 263,000  |

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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Iowa State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 21%      |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 29.7%    |
| Residents receiving ePTCS            | 100,000  |

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# KANSAS RURAL HEALTH COVERAGE FACTS



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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Kansas State Coverage Facts

|   |              |
|---|--------------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 16.3%        |
| <b>Medicaid Expansion Status</b>            | Non-expanded |
| <b>Rural Medicare Advantage Penetration</b> | 20.8%        |
| <b>Residents receiving ePTCS</b>            | 160,000      |

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# KENTUCKY RURAL HEALTH COVERAGE FACTS



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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Kentucky State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 31.6%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 58.9%    |
| <b>Residents receiving ePTCS</b>            | 63,000   |

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# LOUISIANA RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Louisiana State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 35.9%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 49.3%    |
| <b>Residents receiving ePTCS</b>            | 203,000  |

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# MAINE RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Maine State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 24.1%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 60.7%    |
| <b>Residents receiving ePTCS</b>            | 52,000   |

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# MARYLAND RURAL HEALTH COVERAGE FACTS



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### Medicaid Coverage

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- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Maryland State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 19.8%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 18.9%    |
| Residents receiving ePTCS            | 164,000  |

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# MICHIGAN RURAL HEALTH COVERAGE FACTS



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- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Michigan State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 23.5%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 61.1%    |
| <b>Residents receiving ePTCS</b>            | 374,000  |

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# MINNESOTA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

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### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Minnesota State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 21.5%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 46.8%    |
| <b>Residents receiving ePTCS</b>            | 78,000   |

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# MISSOURI RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
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- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Missouri State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 20%      |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 48.9%    |
| Residents receiving ePTCS            | 338,000  |

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# MISSISSIPPI RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
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### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Mississippi State Coverage Facts

|   |              |
|---|--------------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 24.8%        |
| <b>Medicaid Expansion Status</b>            | Non-expanded |
| <b>Rural Medicare Advantage Penetration</b> | 42.4%        |
| <b>Residents receiving ePTCS</b>            | 281,000      |

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# MONTANA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Montana State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 24.8%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 28.3%    |
| <b>Residents receiving ePTCS</b>            | 61,000   |

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# NEBRASKA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Nebraska State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 17.4%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 24.4%    |
| <b>Residents receiving ePTCS</b>            | 112,000  |

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# NEVADA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Nevada State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 16.3%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 35%      |
| <b>Residents receiving ePTCS</b>            | 85,000   |

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# NEW HAMPSHIRE RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## New Hampshire State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 14.7%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 38.1%    |
| <b>Residents receiving ePTCS</b>            | 47,000   |

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# NEW MEXICO RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## New Mexico State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 37.1%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 44.4%    |
| Residents receiving ePTCS            | 46,000   |

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# NEW YORK RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## New York State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 34.5%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 57%      |
| <b>Residents receiving ePTCS</b>            | 206,000  |

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# NORTH CAROLINA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

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- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

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- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## North Carolina State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 23%      |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 55.7%    |
| Residents receiving ePTCS            | 979,000  |

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# NORTH DAKOTA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## North Dakota State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 14%      |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 19.8%    |
| <b>Residents receiving ePTCS</b>            | 35,000   |

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# OHIO RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Ohio State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 19.4%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 51.6%    |
| Residents receiving ePTCS            | 427,000  |

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# OKLAHOMA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Oklahoma State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 25%      |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 35.6%    |
| Residents receiving ePTCS            | 267,000  |

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# OREGON RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Oregon State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 27.2%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 29.8%    |
| <b>Residents receiving ePTCS</b>            | 118,000  |

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# PENNSYLVANIA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Pennsylvania State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 22.6%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 56.4%    |
| <b>Residents receiving ePTCS</b>            | 378,000  |

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# SOUTH CAROLINA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## South Carolina State Coverage Facts

|   |              |
|---|--------------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 25.2%        |
| <b>Medicaid Expansion Status</b>            | Non-expanded |
| <b>Rural Medicare Advantage Penetration</b> | 52.1%        |
| <b>Residents receiving ePTCS</b>            | 546,000      |

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# SOUTH DAKOTA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

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- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## South Dakota State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 17.6%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 15.1%    |
| <b>Residents receiving ePTCS</b>            | 53,000   |

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# TENNESSEE RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Tennessee State Coverage Facts

|   |              |
|---|--------------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 23%          |
| <b>Medicaid Expansion Status</b>            | Non-expanded |
| <b>Rural Medicare Advantage Penetration</b> | 53.6%        |
| <b>Residents receiving ePTCS</b>            | 528,000      |

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# TEXAS RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Texas State Coverage Facts

|                                      |              |
|--------------------------------------|--------------|
| Statewide Rural Medicaid Enrollment  | 20.4%        |
| Medicaid Expansion Status            | Non-expanded |
| Rural Medicare Advantage Penetration | 49.3%        |
| Residents receiving ePTCS            | 3,352,000    |

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# UTAH RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Utah State Coverage Facts

|   |          |
|---|----------|
| <b>Statewide Rural Medicaid Enrollment</b>  | 14.1%    |
| <b>Medicaid Expansion Status</b>            | Expanded |
| <b>Rural Medicare Advantage Penetration</b> | 40.8%    |
| <b>Residents receiving ePTCS</b>            | 350,000  |

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# VERMONT RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Vermont State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 23.5%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 32.7%    |
| Residents receiving ePTCS            | 27,000   |

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# VIRGINIA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Virginia State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 21.2%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 46.4%    |
| Residents receiving ePTCS            | 350,000  |

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# WASHINGTON RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Washington State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 23.8%    |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 31.1%    |
| Residents receiving ePTCS            | 195,000  |

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# WEST VIRGINIA RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## West Virginia State Coverage Facts

|                                      |          |
|--------------------------------------|----------|
| Statewide Rural Medicaid Enrollment  | 28%      |
| Medicaid Expansion Status            | Expanded |
| Rural Medicare Advantage Penetration | 53.5%    |
| Residents receiving ePTCS            | 49,000   |

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# WISCONSIN RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Wisconsin State Coverage Facts

|                                      |              |
|--------------------------------------|--------------|
| Statewide Rural Medicaid Enrollment  | 18%          |
| Medicaid Expansion Status            | Non-expanded |
| Rural Medicare Advantage Penetration | 50.8%        |
| Residents receiving ePTCS            | 235,000      |

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# WYOMING RURAL HEALTH COVERAGE FACTS



## National Rural Coverage Facts

### Medicare Advantage (MA)

- 48% of rural beneficiaries nationwide are enrolled in a Medicare Advantage (MA) plan.
- The growth of MA has led to delays in care and a greater financial burden of care for rural beneficiaries and administrative burdens, delays in payment, and erosion of important designations for rural providers.

### Marketplace Enhanced Premium Tax Credits (ePTCs)

- The Congressional Budget Office estimates that 4 million Americans will lose coverage if enhanced premium tax credits (ePTCs) are not renewed.
- ePTCs save rural enrollees an average of \$890 per year, about 28% more than their urban counterparts.

### Medicaid Coverage

- Adults and children in rural areas are more likely than those living in metro areas to rely on Medicaid/CHIP for their health insurance.
- Reverting to pre-ACA eligibility levels would lead to particularly large increases in rural hospital closures.

## Wyoming State Coverage Facts

|                                      |              |
|--------------------------------------|--------------|
| Statewide Rural Medicaid Enrollment  | 14.7%        |
| Medicaid Expansion Status            | Non-expanded |
| Rural Medicare Advantage Penetration | 16.3%        |
| Residents receiving ePTCS            | 41,000       |

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