

HEALTH INSURANCE MARKETPLACES 2024 OPEN ENROLLMENT REPORT

The Health Insurance Marketplaces 2024 Open Enrollment Report summarizes health plan selections through the individual Marketplaces during the 2024 Open Enrollment Period (OEP). This reportincludes OEP data for the 32 states with Marketplacesthatuse the HealthCare.gov eligibility and enrollment platform for the 2024 plan year HealthCare.gov Marketplaces), as well as for the 19 States Marketplaces (SBMs) that use their own eligibility and enrollment platforms.

Key findings from this report include:

- **-**

Total Marketplace Plan Selections: During the 2024 OEP, over 21.4 million consumers selected or were automatically concorded in health insurance coverage throughHealthCare.gov Marketplaces and SBMs. 5.1 million more consumers signed up for coverage during the 2024 OEP compared to the 202 OEP, a 31% increase. Nearly 7 million more consumers signed up compared to the 2022OEP and 9.4 million more consumers signed up compared to the 2021 OEP, reflecting a 48% and 79% increase respectively.

HealthCare.gov Marketplaces Plan Selections:In HealthCare.gov Marketplaces,16.4 million consumers selectedplans during the 2024OEP between November 1, 2023 and January 16, 2024. State-based Marketplaces Plan Selections: Across the 19 SBMs, 5.1 million consumers selected plans during the 2024 OEP from November 1, 2023 through the end of their respective OEPs.

¹ 3 O D Q V H O H F W L R Q V D Q G R W K H U G D W D E \ O D U N H W S O D F H S O D W I R the time of that OEP unless noted otherwise. Data for SBMs that use their own eligibility and enrollment platforms D U H U H W U L H Y H G I U R P W K H U H V S H F W L Y H V W D W H V ¶ L Q I R U P D W L R Q metrics for these states may vary. The 19 SBMs that use their own eligibility and enrollment platforms in 2024 are California, Colorado, Connecticut, the District of Columbia, Idaho, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Nevada, New Jersey, New Mexico, New York, Pennsylvania, Rhode Island, Vermont, Virginia and Washington. Virginia transitioned to a SBM for the 2024 plan year; Kentucky, Maine, and New Mexico transitioned to SBMs for the 2022 plan year; New Jersey and Pennsylvania transitioned to SBMs for the 2021 plan year; and Nevada transitioned to a SBM for the 2020 plan year.

² As in prior years, consumers with Marketplace coverage at the end of 2023 who did not make an active plan selection were generally automatically re-enrolled for 2024 coverage. When consumers had 2024 Marketplace plans available to them from their 2023 issuer, they were generally automatically re-enrolled into the same plan as 2023 or a different plan from the same issuer. Depending on the Marketplace, they could also be automatically re-enrolled into a suggested alternate plan from a different issuer if no plan from their current issuer was available to them. Beginning in plan year 2024, CMS finalized a change to the hierarchy at 45 CFR 155.335(j)(4) that allows Marketplaces to modify their automatic re-enrollment hierarchies such that some consumers who are eligible for CSRs and are currently enrolled in a bronze level QHP are instead automatically re-enrolled in a silver-level QHP (with CSRs).



New Consumers:Nationwide, the number of new consumers selecting Marketplacecoverage during the 2024OEP increased by 41%, to 5.2 million from 3.7 million in the 2023 OEP.

Demographic Trends: Among consumers who attested to a race or ethnicity, 22% identified as Hispanic/Latino in the 2024 OEP, compared to 21% in the 2023 OEP, and he percent of consumers who attested to a race or ethnicity and identified as Black remained at 9% in the 2024 OEP.

Premiums and Financial Assistance: Nationwide, 9.6 million more consumers are receiving Advance Payments of the Premium Tax Credit (APTC) in 2024 compared to 2021. Additionally, 1.5 million consumers reportenousehold incomes over 400% of the Federal Poverty Level (FPL) during the 2024 OEP. Without the continued expansion of subsidies made available through the American Rescue Plan (ARP) and Inflation Reduction Act (IRA), these consumers would have been ineligible for APTC. The average monthly premium after APTC fell by 32% from \$164 in 2021 to \$111 in 2024, and 44% of consumers, omearly 9.4 million people, selected a plan for \$10 or less per month after APTC during the 2024 OEP.

Cost-Sharing: For the 2024OEP, 50% of all Marketplaceconsumers received cost-sharing reductions (CSRs).

Consumer Savings due to ARP and IRANational estimates show that most consumers qualify for \$Opremiums or are continuing to see annual premium savings exceeding \$800µnderscoring the continued impact of expanded subsidies made available through the ARP/IRÅ.In HealthCare.gov Marketplaces, consumers with APTC are saving an average **48**% on monthly premiums, due to the continued availability of expanded subsidies through the IRA.

³ As a result of ARP/IRA changes to the applicable percentage table (<u>htt</u> 29.pdfhttps://www.irs.gov/pub/irs-drop/rp-23-29.pdf)29.pdf

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CONSUMERS SELECTING PLANS THROUGH THE MARKETPLACES: 50 STATES, PLUS DC

During the 2024 OEP, 21.4 million consumers selected or were automatically re enrolled in a Marketplaceplan. This includes 16.4 million consumers in Marketplaces using the HealthCare.gov platform and 5.1 million consumers in SBMs using their own platforms (see Figure 1).

HealthCare.gov Marketplaces State-based Marketplaces 25 21.4M 20 5.1M 16.4M 14.5M 15 4.2M 12.0M 4.3M 11.4M 10 3.8M 3.1M 16.4M 12.2M 5 10.3M 8.3M 8.3M 0 2022 2024 2020 2021 2023

Figure 1: Plan Selections during 2020- 2024 Open Enrollment Periods⁴

⁴ For HealthCare.gov Marketplaces: the 2020 OEP was from 11/1/2019 to 12/15/2019, with data reported through 12/21/2019 (this includes the additional time provided to consumers who were unable to enroll by the original deadline); the 2021 OEP was from 11/1/2020 to 12/15/2020, with data reported through 12/21/2020 (this includes the additional time provided to consumers who were unable to enroll by the original deadline); the 2022 OEP was from 11/1/2021 to 1/15/2022, with data reported through 1/15/2022; the 2023 OEP was from 11/1/2022 to 1/15/2023, with data reported through 1/15/2023; the 2024 OEP was from 11/1/2023 to 1/16/2024, with data reported through 1/15/2023; the 2024 OEP was from 11/1/2023 to 1/16/2024, with data reported through 1/16/2024. Dates through which data are reported vary for SBMs; see the PUF FAQs for detailed information.



Nationwide, the number of plan selections during the 2024OEP increased by 31% in comparison to the 2023 OEP, 48% in comparison to the 2022 OEP, and 79% in comparison to the 2021 OEP (see Table 1). HealthCare.gov Marketplaces, plan selections increased by 34%, to 16.4 million during the 2024 OEP from 12.2 million during the 2023 OEP. In comparison to the 2022 OEP, plan selections increased by 60% from 10.3 million. Plan selections in SBMs increased by 22% to 5.1 million during the 2024 OEP from 4.2 million during the 2023 OEP.

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From 2023 to 2024, 44 of the 51 Marketplaces saw incriena states second at least 10%. While plan selections in Medicaid non-expansion states accounted for over half of total 2024 OEP plan selections, several Medicaid expansion states experienced greater increases in plan selections. The states with the highest increases in plan selections, from 2023 to 2024, included West Virginia (80%), Louisiana (76%), Ohio (62%), Indiana (60%), and Tennessee (59%). In contrast, the Marketplaces with the smallest increases in plan selections, from 2023 to 2024, included California and Nevada (3%), Hawaii and Oregon (2%), and the District of Columbia (0%). Notably, only one Marketplace, Maine-(1%), saw a decrease in plan selections.





Table 1: OEP Plan Selections by State

State	2024 Platform	2024	2023	2022	2021	% Change 2023 to 2024	% Change 2022 to 2024	% Change 2021 to 2024
Total	HC.gov & SBM	21,446,150	16,357,030	14,511,077	12,004,365	31%	48%	79%
AK	HC.gov	27,464	25,572	22,786	18,184	7%	21%	51%
AL	HC.gov	386,195	258,327	219,314	169,119	49%	76%	128%
AR	HC.gov	156,607	100,407	88,226	66,094	56%	78%	137%
AZ	HC.gov	348,055	235,229	199,706	154,504	48%	74%	125%
CA	SBM	1,784,653	1,739,368	1,777,442	1,625,546	3%	0%	10%
CO	SBM	237,106	201,758	198,412	179,607	18%	20%	32%
CT	SBM	129,000	108,132	112,633	104,946	19%	15%	23%
DC	SBM	14,799	14,768	15,989	16,947	0%	-7%	-13%
DE	HC.gov	44,842	34,742	32,113	25,320	29%	40%	77%
FL	HC.gov	4,211,902	3,225,435	2,723,094	2,120,350	31%	55%	99%
GA	HC.gov	1,305,114	879,084	701,135	517,113	48%	86%	152%
HI	HC.gov	22,170	21,645	22,327	22,903	2%	-1%	-3%
IA	HC.gov	111,423	82,704	72,240	59,228	35%	54%	88%
ID	SBM	103,783	79,927	73,359	68,832	30%	41%	51%
IL	HC.gov	398,814	342,995	323,427	291,215	16%	23%	37%
IN	HC.gov	295,772	185,354	156,926	136,593	60%	88%	117%
KS	HC.gov	171,376	124,473	107,784	88,627	38%	59%	93%
KY	SBM	75,317	62,562	73,935	77,821	20%	2%	-3%
LA	HC.gov	212,493	120,804	99,626	83,159	76%	113%	156%
MA	SBM	311,199	232,621	268,023	294,097	34%	16%	6%
MD	SBM	213,895	182,166	181,603	166,038	17%	18%	29%
ME	SBM	62,586	63,388	66,095	59,738	-1%	-5%	5%

	2024					% Change	% Change	% Change
State		2024	2023	2022	2021	2023 to	2022 to	2021 to
	Platform					2024	2024	2024
MI	HC.gov	418,100	322,273	303,550	267,070	30%	38%	57%
MN	SBM	135,001	118,431	121,322	112,804	14%	11%	20%
MO	HC.gov	359,369	257,629	250,341	215,311	39%	44%	67%
MS	HC.gov	286,410	183,478	143,014	110,966	56%	100%	158%
MT	HC.gov	66,336	53,860	51,134	44,711	23%	30%	48%
NC	HC.gov	1,027,930	800,850	670,223	535,803	28%	53%	92%
ND	HC.gov	38,535	34,130	29,873	22,709	13%	29%	70%
NE	HC.gov	117,882	101,490	99,011	88,688	16%	19%	33%
NH	HC.gov	65,117	54,557	52,497	46,670	19%	24%	40%
NJ	SBM	397,942	341,901	324,266	269,560	16%	23%	48%
NM	SBM	56,472	40,778	45,664	42,984	38%	24%	31%
NV	SBM	99,312	96,379	101,411	81,903	3%	-2%	21%
NY	SBM	288,681	214,052	221,895	215,889	35%	30%	34%
OH	HC.gov	477,793	294,644	259,999	201,069	62%	84%	138%
OK	HC.gov	277,436	203,157	189,444	171,551	37%	46%	62%
OR	HC.gov	145,509	141,963	146,602	141,089	2%	-1%	3%
PA	SBM	434,571	371,516	374,776	337,722	17%	16%	29%
RI	SBM	36,121	29,626	32,345	31,174	22%	12%	16%
SC	HC.gov	571,175	382,968	300,392	230,050	49%	90%	148%
SD	HC.gov	52,974	47,591	41,339	31,375	11%	28%	69%
TN	HC.gov	555,103	348,097	273,680	212,052	59%	103%	162%
ΤX	HC.gov	3,484,632	2,410,810	1,840,947	1,291,972	45%	89%	170%
UT	HC.gov	366,939	295,196	256,932	207,911	24%	43%	76%
VA	SBM	400,058	346,140	307,946	261,943	16%	30%	53%
VT	SBM	30,027	25,664	26,705	24,866	17%	12%	21%



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State	2024 Platform	2024	2023	2022	2021	% Change 2023 to 2024	% Change 2022 to 2024	% Change 2021 to 2024
WA	SBM	272,494	230,371	239,566	222,731	18%	14%	22%
WI	HC.gov	266,327	221,128	212,209	191,702	20%	26%	39%
WV	HC.gov	51,046	28,325	23,037	19,381	80%	122%	163%
WY	HC.gov	42,293	38,565	34,762	26,728	10%	22%	58%



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New York, consumers who apply for coverage with household incomes between 133% and 200% of the FPL and a not PLQLPXEVVHQWLDO IF & YOO YOO BE & KELOGUH-QVXED QPWK3 & RJ-OD are enrolled in the applicable state BHP instead of a Qualified Health Plan (QHP) otal BHP enrollment increased 33% from approximately 975,000 nollees in the 20210EP to 1.3 million enrollees during the 20240EP. DOGHZ<RUMCOVFUENCE TO 1.3 million WR

⁷ Table 2: Basic Health Program Enrollment

State	2024	2023	2022	2021	% Change 2023 to 2024	% Change 2022 to 2024	% Change 2021 to 2024
Total	1,302,034	1,217,921	1,054,603	975,337	7%	23%	33%

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⁵ BHP enrollment is not limited to an OEP; the data reflects BHP enrollments as of the end date of the New < R U N ¶ W IDQQCH V R W Boff Whe 20(20 YOEP) I H Z < R U N ¶ V G D W D L V D V R I D W Q G O L Q Q H V R W D ¶ V G D W D L V

⁶ The BHP also provides coverage to lawfully present noncitizens with household income below 200% FPL who are ineligible for Medicaid or CHIP due to immigration status.

⁷ New York's BHP is known as the Essential Plan and Minnesota's BHP is known as MinnesotaCare.



Figure 2illustrates the comparison of new and returning consumer plan selections nationwide during OEPs from 2020 to 2024. In the 2024 OEP, new consumer plan selections across all Marketplaces exceeded 5.2 million, approximately 2.4 million more than the 2020OEP. In comparison to the 2023OEP, new consumer enrollment increased by 41%. As demonstrated below, 16.2 million enrollees returned to the Marketplaces actively or through auto regnollment, representing a 28% increase from 12.7 million in 2023.

Figure 2: New and Returning Consumer Plan Selections during 2020to 2024 Open Enrollment Periods

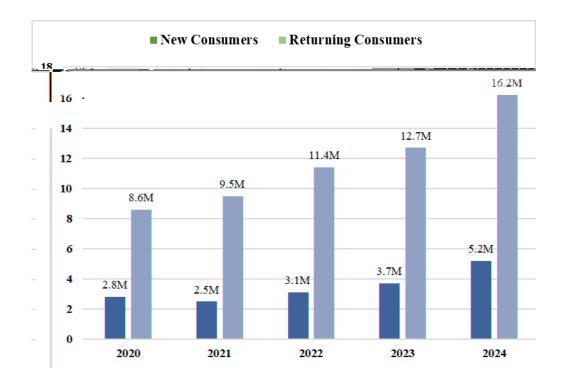




Table 3 summarizes consumers who selected Marketplace plans during the 2021 to 2024 OEPs by enrollment type. Nationally, new consumer plan selections, as a percentage of total plan selections, increased from 21% in the 2021 and 2022OEPs to 24% in the 2024OEP. Actively returning consumer plan selections decreased from 47% to 45% from 2023 to 2024. In 2024, 52% Icaf IthCare.gov enrollees represented actively returning consumers, while 26% were consumers new to the HealthCare.gov platform. For SBMs, 19% of plan selections were new consumers and 23% were actively returning in 2024. Additional plan selection and demographic data for Marketplaces in all 50 states plus DC are provided in the accompanying public use files (PUFs).

 Table 3: Summary of OEP Plan Selections by Enrollment Type

	Count 2024	Count 2023	Count 2022	Count 2021	% of Total 2024	% of Total 2023	% of Total 2022	% of Total 2021
New Consumers: All Marketplaces	5,215,764	3,699,749	3,066,360	2,545,559	24	23	21	21
Returning Consumers Re-enrolling in Coverage: All Marketplaces	16,230,3 8	12,657,281	11,444,717	9,458,806	76	77	79	79
Active Re-enrollees: All Marketplaces	9,659,365	7,629,744	6,742,948	5,513,796	45	47	46	46
Automatic Re-enrollees: All Marketplaces	6,571,021	5,027,537	4,701,769	3,945,010	31	31	32	33
		HealthCare	.gov Market	places				
New Consumers: HC.gov Marketplaces	4,226,461	3,000,155	2,380,835	1,884,174	26	25	23	23
Returning Consumers Re-enrolling in Coverage: HC.gov Marketplaces	12,136,672	9,203,467	7,874,801	6,367,529	74	75	77	77



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	Count 2024	Count 2023	Count 2022	Count 2021	% of Total 2024	% of Total 2023	% of Total 2022	% of Total 2021
Active Reenrollees: HC.gov Marketplaces	8,511,722	6,654,213	5,680,878	4,648,617	52	55	55	56
		State-bas	sed Marketp	olaces				

CONSUMERS APPLYING FOR AND SELECTING PLANS: DETAILS

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Table 4 shows metrics at the individualevel for those who requested coverage on submitted Marketplace applications for the 2021 to 2024 OEPs. During the 2024 OEP, 68% of applicants requesting coverage through the Marketplaceswere determined eligible to make a Marketplaceplan selection, compared to 69% during the 2023OEP. On the HealthCare.gov platform, 96% of applicants were determined eligible to make a Marketplace plan selection, and 41% of applicants using the SBMs were determined eligible to make a Marketplaceplan selection. The percentage of consumers who requested coverage through ealthCare.gov and were preliminarily determined eligible for their V W D W H V ROWH-G & FIELO GH U F H QOWID J fillion 5% in the 2023 OEP to 4% in the 2024 OEP.

 Table 4: Marketplace Application Activity and Eligibility for 2021to 2024

	Count 2024	Count 2023	Count 2022	Count 2021	% of Total 2024	% of Total 2023	% of Total 2022	% of Total 2021
Consumers Requesting Coverage on Applications Submitted: All Marketplaces	38,036,48	327,653,18	825,830,06	422,415,477	7 100	100	100	100
MarketplaceEligible: All Marketplaces	25,854,2 4	19,191,464	17,485,459	914,925,762	2 68	69	68	67
	Health	Care.gov N	Marketplace	S				
Consumers Requesting Coverage on Applications Submitted: HC.gov Marketplaces	18,568,08	314,036,57	212,194,577	10,161,816	100	100	100	100
MarketplaceEligible: HC.gov Marketplaces	17,795,30	513,324,63	811,486,135	9,479,261	96	95	94	93
Medicaid/CHIPEligible: HC.gov Marketplaces	831,411	746,999	743,544	762,533	4	5	6	8



	State	e-based Ma	rketplaces ⁸						
Consumers Requesting Coverage on Applications Submitted: SBMs			·	12,253,6 6	100	100	100	100	
MarketplaceEligible: SBMs	8,058,936	5,866,826	5,999,324	5,446,501	41	43	44	44	

⁸ Most State-based Marketplaces have integrated eligibility systems with their state Medicaid. In those states, consumers requesting coverage on applications submitted includes applications received for modified adjusted gross income (MAGI) Medicaid renewals, in addition to QHP renewal applications and new applications. Some SBMs do not report on consumers determined eligible for Medicaid/CHIP and, thus, a total number is not provided here. See PUF definitions for more information.





Table 5 shows demographic and plan characteristics among consumers who selected or were automatically renrolled in a Marketplace plan during the 2024, 2023,2022,and 20210EPs. The percentage of consumers with a household income between 100% and 50% FPLin 2024increased by 7 percentage points from 37% in 2023. Moreover, it grew by 12 percentage points from 32% in 2021 to 44% in 2024. 7% (1.5 million) of plan selections for the 2024 OEP included consumers with a household income over 400% FPL.

Some of the continued increase in the percentage of consumers receiving financial assistance in 2024 can be attributed to impacts of the IRA. Nationally, during the 2024 OEP, 92% of consumers had their premiums reduced by APTC compared to 90% in the 2023 OEP and 85% in the 2021 OEP. Split by Marketplace type, 95% of HealthCare.gov consumers and 83% of SBM consumers selected plans with APTC, compared to 88% and 78%, respectively, in 2021. During the 2024 OEP, 50% of all Marketplace consumers selected plans with CSRs in comparison to 48% in 2023. 41% of 2024 OEP ealthCare.gov enrollees selected plans that cover 94% of their expected health care costs- 94% actuarial value (AV)- an increase of 4percentage points from 2023.

	% of Total 202 <i>4</i>	% of Total 202 <i>3</i>	% of Total 202 <i>2</i>	% of Total 2021
Age				
< 18	10	9	9	9
18 - 34	27	25	25	25
35-54	38	37	36	36
55+	26	29	29	30
Gender				
Female	52	53	54	54
Male	48	47	46	46
Location: HealthCare.gov States				
Rural	18	18	18	18
Non-rural	82	82	82	82

Table 5: Demographic and Plan Characteristics of Consumers with OEP PlanSelections (HealthCare.gov Marketplaces and SBMs, Unless Otherwise Noted)

⁹ Totals may not sum to 100% due to rounding.





	% of Total	% of Total	% of Total	% of Total
10	2024	2023	2022	2021
Household Income ¹⁰				
< 100%	2	1	2	2
150%	44	37	32	32
•100% and " 138%	32	26	23	NA
> 150% anG " 0%	29	29	32	34
> 250% and " 400%	15	19	20	20
> 400%FPL	7	8	8	3
Other Household Income ¹¹	4	5	6	9
Financial Assistance				
With APTC: All Marketplaces	92	90	89	85
HealthCare.gov Marketplaces	95	93	92	88
SBMs	83	82	83	78
With CSR: All Marketplaces ¹⁰	50	48	49	47
HealthCare.gov Marketplace	53	52	53	51
73% AV	2	3	5	4
87% AV	9	11	13	12
94%AV	41	37	35	34
American Indian/Alaskan	.1	.1	1	1
Native	<1	<1	1	1
SBMs ¹⁰	39	35	37	39
Metal Level				
Catastrophic	<1	<1	1	1
Bronze	31	32	32	35
Silver	54	54	56	55
Gold	13	12	10	8
Platinum	1	1	1	1

¹⁰ Idaho has been excluded from 2021 household income metrics as , G D Koras hold income data for 2021 was not DYDLODEOH DW WKH WLPH RIWKLV UHSRUW 1H& BGCDDKWDDVIREUHHQ H 2022 was not available at the time of this report. ¹¹ Other household income includes plan selections for which consumers were not requesting financial assistance

and unknown household income.



Table 6 provides raceand ethnicity demographics for alkonsumers who enrolled in Marketplace plansduring OEPs 2021to 2024. Alignedwith the overall increase in totalplan selections, there was a corresponding rise in the number of individuals identifying as Hispanic/Latino or Black. Based on primary data available in the accompanying PUFs, among consumers who reported their ethnicity or race (constituting 50% of total plan selections) during the 2024 OEP, enrollees identifying as Hispanic/Latino increased by 17%, and those identifying as Black increased by 16% from 2023 to 2024. As a percentage of total plan selections, among consumers **repor**ted a race or ethnicity, 22% identified as Hispanic/Latino in the 2024 OEP, compared to 21% in the 2023 OEP. The proportion of consumers self-reported as Black, NonHispanic remained constant at 9% for 2024, 2023, and 2022.

	% of Total 2024 ²	% of Total 2023 ²	% of Total 2022 ²	% of Total 2021 ²
Race/Ethnicity: All Marketplaces ¹³				
Race/EthnicityKnown	50	59	66	69
Hispanic/Latino	22	21	19	18
White, Non -Hispanic	53	54	55	57
Black, Non -Hispanic	9	9	9	8
Asian, Non-Hispanic	11	11	12	13
Native Hawaiian/PacificIslander, Non- Hispanic	<1	<1	<1	<1
American Indian/Alaska Native, Non-	1	1	1	1

 Table 6: Race and Ethnicity Demographics
 of Consumers with OEP Plan Selections

¹² Totals may not sum to 100% due to rounding. Race and Ethnicity data for 2022 was revised to include all states with available data for the 2022 OEP; therefore, these numbers may not match what was previously published. The 2022 OEP report excluded Colorado.

¹³ Some SBM applications do not include Other or Multi-Racial as an option. SBM Race and Ethnicity breakouts for the 2022 OEP do not add up to total plan selections because WA reports consumers choosing more than one race in multiple categories. SBM Race and Ethnicity breakouts for the 2021 OEP do not add up to total plan selections as NY, VT, and WA reported consumers choosing more than one race in multiple categories.



	% of Total 2024 ²	% of Total 2023 ²	% of Total 2022 ²	% of Total 2021 ²
Hispanic				
Other, Non -Hispanic	2	2	2	NA
Multi-Racial, Non -Hispanic	2	2	2	2
Race/EthnicityUnknown, Non-Hispanic	50	41	34	31



CONSUMER PREMIUMS AND FINANC IAL ASSISTANCE

Table 7 shows the average premiums for consumers who mad Marketplace plan selections during the 2021to 2024 OEPs. Nationally, the averagemonthly premium after APTC decreased by14% from \$129 in 2023 and by2% from \$164 in 2021 to \$111 in 2024. 44% of consumers selected a plan fo\$100r less per month after APTC in 2024. The average monthly APTC for all consumers increased to \$536 in 2024, representing a 2% increase from \$526 in 2023 and an 11% increase from \$485 in 2021.

The average monthly premium after APTC forHealthCare.gov consumers fell 43%, from \$143 in 2021 to \$81 in 2024. The continued expansion of financial assistance for consumers resulted in an 8% increase of the average monthly APTC amount for HealthCare.gov enrollees who selected plans with APTC, from \$509 in 2021 to \$548 in 2024As a result, in the 2024OEP, 51% of all HealthCare.gov consumers had a plan selection with a premium of \$10 or less per month after APTC, compared to 40% in 2023.

In the SBMs, the average monthly premium after APTC w\$207in 2024,and 20% of consumers selected plans that were \$10 or less per month after APTC. Some SBMs, including those in California, Colorado, Connecticut, Maryland, Massachusetts, New Jersey, New Mexico, Vermont, and Washington, apply state subsidies in addition to APTC and/or CSRsto further reduce the cost sharing that consumers pay. These cost reductions are not reflected in this data.



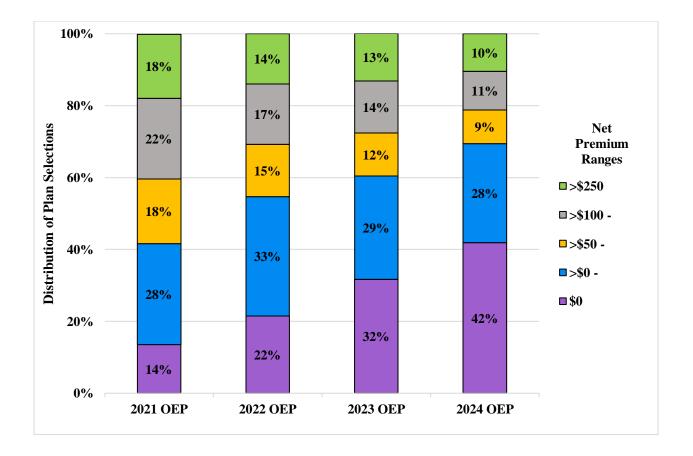


Table 7: Average Monthly Premium before and after APTC

	% of Plan Selections with \$10 Monthly Premium after APTC	% of Consumers with APTC	Average Monthly Premium after APTC	Average Monthly Premium before APTC	Average Monthly APTC Amount for Consumers Receiving APTC
All Marketplaces					

Figure 3 illustrates the distributions of monthly premiums after APTC for HealthCare.gov consumers during the 202-2024 OEPs. In 2024, coverage became more affordable for consumers compared to the preceding three OEPs. During the 2024OEP, 42% (6.8million) of consumers selected plans witha \$0monthly premium after APTC. This percentage represents an increase from 32% (3.8million), 22% (2.1 million), and 14% (1.1 million) in the 2023, 2022, and 2021 OEPs, respectively. Additionally, 69% of 2024 OEP consumers had premiums of \$50 or less after APTC, representing an increase of over 8.0 million consumers compared to 2021.

Figure 3: 2021,2022, 2023, an@0240EP Premium Distribution in HealthCare.gov Marketplaces ¹⁶



¹⁶ The distribution of monthly premiums after APTC for the 2021 OEP excludes Kentucky, Maine, and New Mexico, reflecting each state's transition to a SBM for the 2022 coverage year. Similarly, the distribution of monthly premiums after APTC for the 2021 OEP has been adjusted to exclude Virginia, reflecting the state's transition to a SBM for the 2024 coverage year. Furthermore, the distribution of monthly premiums after APTC for the 2022 and 2023 OEPs has been adjusted to exclude Virginia, aligning with the state's transition to a SBM for the 2024 coverage year. These adjustments may result in differences from previously published data.

Table 8 shows that, on average, consumenseceiving APTC in 2024 are seeingnore SHUHDLOGUHPLXVIDYLQJVWQXWKHFROGSWLQXRDWKRQ\$53 V APTC expansion. The estimate assumes that the same demographic composition of enrollment and plan choices would exist without the IRA. Using the savings amounts for 2024OEP HealthCare.gov consumers receiving APTC and applying the estimated national income distribution for consumers receiving APTC, the average monthly savings for 2024 is approximately \$59, which equates to an annual tofta\$705. As a result of the ARP/IRA subsidy enhancements, consumers below 150% FPL generally have access to a \$0 or nea\$0 2024 plan option.

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Table 8: Estimated Consumer APTC Savings due to the ARP and IRA by Income Category

Income Category (% of FPL)	Estimated Average Monthly Premium Savings from ARP/IRA APTC Expansion ¹⁷	Estimated Average Yearly Premium Savings from ARP/IRA APTC Expansion	Estimated Percent of OEP Plan Selections with APTC ¹⁸
Total	\$59	\$705	100%
<100%	\$9	\$113	1%
100-138%	\$19	\$232	34%
>138-150%	\$44	\$531	13%
>150200%	\$57	\$679	18%

¹⁷ The Average Monthly 2024 Premium without ARP/IRA Expansion metric calculates APTC assuming a FRQVXPHUV¶ LQFRPH IDPLO202# planSde with Methaling the Sage GH2 wever, in the absence of the expanded APTC available from the ARP/IRA, some consumers would choose not to enroll at all and others would select less generous plans with lower premiums. APTC is calculated with the applicable percentages that would be in effect without the ARP/IRA. For coverage year 2024, the applicable percentages at 26 CFR 1.36B-3(g)(2) would be multiplied by 0.8827984162, the rate of premium growth relative to the rate of income growth for 2013 to 2023 (calculated using the NHEA Projections, 2021-2030, available at: https://www.cms.gov/data-research/statistics-trends-and-reports/national-health-expenditure-data/projected) as of June 2023, and the methodology used to calculate the same rates of growth in the Premium Adjustment Percentage guidance for the 2024 benefit year published by the Center for Medicare and Medicaid Services on December 12, 2022, available at: https://www.cms.gov/files/document/2024-papi-parameters-guidance-2022-12-12.pdf). Estimates are based on HealthCare.gov state data only.

¹⁸ The Estimated Percent of 2024 OEP Plan Selections with APTC is equal to the product of the total plan selections in each income category (for all states) and the percent of plan selections with APTC in the given income category, using HealthCare.gov data for the latter percents.

Income Category (% of FPL)	Estimated Average Monthly Premium Savings from ARP/IRA APTC Expansion ¹⁷	Estimated Average Yearly Premium Savings from ARP/IRA APTC Expansion	Estimated Percent of OEP Plan Selections with APTC ¹⁸
>200250%	\$70	\$837	12%
>250300%	\$72	\$866	8%
>300400%	\$40	\$479	8%
>400%	\$354	\$4,248	5%

Table 9 details average 2024 monthly premiums for consumers with APTC in HealthCare.gov GXH WWKH -5\$ V FRQWLWKDW\$15\$300% expansion. The table also simulates what the average monthly premium would be for each HealthCare.gov Marketplace without the ARP/IRA APTC expansion, assuming the same level and demographic composition of enrollment and plan choices. The continued APTC expansion reduces the average monthly premium for consumers receiving APTC in 2024 by 48%, or \$52 per month. In 29 of the 32 HealthCare.gov Marketplaces, APTC consumers are saving at least 40% on monthly premiums, on average, due to the IRA APTC expansion. In 26HealthCare.gov Marketplaces, the difference in the actual average monthly 2024premium with APTC

FXUUBQBYQGVKDHYHUDRHQWKO\SUHPLZZPWKRX¥5\$WKKH\$37& expansion is at least \$50.



Table 9: Estimated HealthCare.gov Consumer APTC Savings due to ARP and IRA by State^{19,20}

State	Actual Average Monthly 2024 Premium with ARP/IRA APTC Expansion	Average Monthly 2024 Premium without ARP/IRA APTC Expansion	Average Monthly 2024 APTC Amount for Consumers Receiving APTC	\$ Premium Savings from ARP/IRA APTC Expansion	% Premium Savings from ARP/IRA APTC Expansion
Total	\$56	\$108	\$548	\$52	48%
Alaska	\$122	\$275	\$865	\$153	56%
Alabama	\$55	\$106	\$656	\$51	48%
Arkansas	\$82	\$151	\$476	\$69	46%
Arizona	\$75	\$140	\$452	\$64	46%
Delaware	\$147	\$247	\$585	\$100	41%
Florida	\$49	\$93	\$568	\$44	47%
Georgia	\$52	\$96	\$531	\$44	46%
Hawaii	\$183	\$273	\$544	\$90	33%
lowa	\$93	\$183	\$507	\$90	49%
Illinois	\$141	\$227	\$545	\$86	38%
Indiana	\$82	\$149	\$452	\$67	45%
Kansas	\$77	\$136	\$561	\$59	44%
Louisiana	\$65	\$130	\$647	\$64	50%
Michigan	\$98	\$167	\$426	\$69	41%
Missouri	\$61	\$127	\$594	\$66	52%
Mississippi	\$25	\$65	\$592	\$41	62%

¹⁹ The Average Monthly 2024 Premium without the ARP/IRA Expansion metric calculates APTC assuming a income, family composition, and OE 2024 plan selection remaining the same. However, in the absence of the expanded APTC available from the ARP/IRA, some consumers would choose not to enroll at all and others would select less generous plans with lower premiums. APTC is calculated with the applicable percentages that

would be in effect without the ARP/IRA. For coverage year 2024, the IRS published these applicable percentages in Revenue Procedure 23-29 (<u>https://www.irs.gov/pub/irs-drop/rp-23-29.pdf</u>).

²⁰ Table 9 only includes data for HealthCare.gov consumers receiving APTC in 2024.

State	Actual Average Monthly 2024 Premium with ARP/IRA APTC Expansion	Average Monthly 2024 Premium without ARP/IRA APTC Expansion	Average Monthly 2024 APTC Amount for Consumers Receiving APTC	\$ Premium Savings from ARP/IRA APTC Expansion	% Premium Savings from ARP/IRA APTC Expansion
Montana	\$112	\$203	\$504	\$91	45%
North Carolina	\$55	\$111	\$558	\$56	51%
North Dakota	\$99	\$189	\$433	\$90	48%
Nebraska	\$93	\$184	\$580	\$92	50%
New Hampshire	\$124	\$197	\$350	\$74	37%
Ohio	\$81	\$148	\$498	\$67	45%
Oklahoma	\$57	\$115	\$575	\$57	50%
Oregon	\$164	\$275	\$524	\$112	41%
South Carolina	\$50	\$99	\$553	\$49	50%
South Dakota	\$92	\$199	\$611	\$108	54%
Tennessee	\$45	\$90	\$580	\$45	50%
Texas	\$33	\$71	\$536	\$38	54%
Utah	\$48	\$104	\$421	\$55	54%
Wisconsin	\$117	\$217	\$572	\$100	46%
WestVirginia	\$88	\$205	\$1,035	\$117	57%
Wyoming	\$80	\$236	\$863	\$156	66%



Appendix

Public Use Files

Public Use Files Contents: More information on applications and plan selections is available in a suite of accompanying public use files (PUFs). The PUFs contain information on applications submitted and the number of medical and standlone dental plan selections by state, county, and ZIP code. The 2024 OEP state PUF includes other plan and demographic information, including the metal level of selected plans, premium and financial assistance information, age, gender, rural location, self-reported race and ethnicity, andhousehold income as a percentage of the FPL. Within the 2020 EP state, metallevel, and enrollment status PUF, data are stratified by new, returning, and automatically renrolled consumers and by plan metal level. The methodology for this report and detailed metric definitions are included in the materials for the PUFs.

An additional PUF is available for HealthCare.gov plan selections, including deductibles, HSA eligibility, and standardized plan option selection rates.

The PUFs can be found at: <u>https://www.cms.gov/dataesearch/statisticstrends-and-reports/marketplaceproducts/2024marketplace-open-enrollment-period-public-use-files</u>