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Cutting Health Insurance Subsidies Would Hurt Alaska Families

In Alaska, the median income for an average family of four is $88,361 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,276. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Alaska residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Alaska would receive $3,040 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Alaska would no longer receive any sort of help, and would find themselves paying 15% of their annual household income on insurance premiums. Across Alaska, about 88,113 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Alaska families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt California Families

In California, the median income for an average family of four is $77,014 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $12,798. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many California residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in California would receive $5,578 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in California would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across California, about 4,469,291 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. California families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Colorado Families

In Colorado, the median income for an average family of four is $75,987 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $12,045. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Colorado residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Colorado would receive $5,196 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Colorado would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across Colorado, about 707,190 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Colorado families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Delaware Families

In Delaware, the median income for an average family of four is $76,085 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,336. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Delaware residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Delaware would receive $5,977 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Delaware would no longer receive any sort of help, and would find themselves paying 19% of their annual household income on insurance premiums. Across Delaware, about 126,942 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Delaware families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Hawaii Families

In Hawaii, the median income for an average family of four is $85,577 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $11,273. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Hawaii residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Hawaii would receive $3,287 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Hawaii would no longer receive any sort of help, and would find themselves paying 15% of their annual household income on insurance premiums. Across Hawaii, about 200,655 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Hawaii families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Illinois Families

In Illinois, the median income for an average family of four is $78,182 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $12,620. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Illinois residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Illinois would receive $5,249 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Illinois would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across Illinois, about 1,816,496 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Illinois families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Massachusetts Families

In Massachusetts, the median income for an average family of four is $96,572 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,775. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Massachusetts residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Massachusetts would receive $3,402 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Massachusetts would no longer receive any sort of help, and would find themselves paying 16% of their annual household income on insurance premiums. Across Massachusetts, about 851,306 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Massachusetts families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

Cutting Health Insurance Subsidies Would Hurt Michigan Families

In Michigan, the median income for an average family of four is $73,490 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $11,926. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Michigan residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Michigan would receive $5,135 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Michigan would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across Michigan, about 1,492,388 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Michigan families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Minnesota Families

In Minnesota, the median income for an average family of four is $84,394 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $14,820. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Minnesota residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Minnesota would receive $6,669 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Minnesota would no longer receive any sort of help, and would find themselves paying 20% of their annual household income on insurance premiums. Across Minnesota, about 803,069 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Minnesota families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt New Hampshire Families

In New Hampshire, the median income for an average family of four is $89,740 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,272. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many New Hampshire residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in New Hampshire would receive $3,467 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in New Hampshire would no longer receive any sort of help, and would find themselves paying 16% of their annual household income on insurance premiums. Across New Hampshire, about 201,040 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. New Hampshire families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt New York Families

In New York, the median income for an average family of four is $79,966 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,230. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many New York residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in New York would receive $5,525 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in New York would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across New York, about 2,474,008 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. New York families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 (“Expanded Subsidies are Essential to Health Reform”), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Pennsylvania Families

In Pennsylvania, the median income for an average family of four is $75,867 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $12,587. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Pennsylvania residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Pennsylvania would receive $5,343 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Pennsylvania would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across Pennsylvania, about 1,848,663 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Pennsylvania families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Rhode Island Families

In Rhode Island, the median income for an average family of four is $88,035 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,759. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Rhode Island residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Rhode Island would receive $4,343 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Rhode Island would no longer receive any sort of help, and would find themselves paying 17% of their annual household income on insurance premiums. Across Rhode Island, about 151,442 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Rhode Island families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Vermont Families

In Vermont, the median income for an average family of four is $73,130 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,345. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Vermont residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Vermont would receive $6,528 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Vermont would no longer receive any sort of help, and would find themselves paying 20% of their annual household income on insurance premiums. Across Vermont, about 94,244 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Vermont families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Virginia Families

In Virginia, the median income for an average family of four is $82,598 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $12,046. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Virginia residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Virginia would receive $3,881 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Virginia would no longer receive any sort of help, and would find themselves paying 16% of their annual household income on insurance premiums. Across Virginia, about 1,070,653 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Virginia families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 (“Expanded Subsidies are Essential to Health Reform”), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

Cutting Health Insurance Subsidies Would Hurt Washington Families

In Washington, the median income for an average family of four is $79,397 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,874. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Washington residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Washington would receive $6,199 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Washington would no longer receive any sort of help, and would find themselves paying 19% of their annual household income on insurance premiums. Across Washington, about 956,354 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Washington families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Wisconsin Families

In Wisconsin, the median income for an average family of four is $74,885 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $12,946. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Wisconsin residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Wisconsin would receive $5,852 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Wisconsin would no longer receive any sort of help, and would find themselves paying 19% of their annual household income on insurance premiums. Across Wisconsin, about 899,464 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Wisconsin families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.

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Cutting Health Insurance Subsidies Would Hurt Wyoming Families

In Wyoming, the median income for an average family of four is $77,432 and the projected family health insurance premium in the proposed new national marketplace (to be implemented under Congressional reform proposals) is $13,230. If premium subsidies are cut from 400% of the federal poverty line to 300%, as politicians in the House of Representatives and in the Senate have proposed, many Wyoming residents may not be able to purchase health insurance.

With the subsidy proposed in current House of Representatives legislation, the median family of four in Wyoming would receive $5,299 a year to help them purchase insurance in the new insurance exchange. By cutting eligibility to 300% of the federal poverty line, the average family in Wyoming would no longer receive any sort of help, and would find themselves paying 18% of their annual household income on insurance premiums. Across Wyoming, about 82,884 individuals stand to lose support.

Nationally, about 42 million individuals (or 14.3% of the population) are between 300-400% of the federal poverty line and thus stand to be affected by a cut in eligibility. The lost subsidy for these families averages $5,000 per year, meaning that the median family would be forced to spend 19% of their income on premiums. This analysis likely understates the problem because it only looks at insurance premiums, and not total out-of-pocket medical expenses.

Slashing subsidies to lower the price of reform undermines the fundamental point of reform—to make health insurance more, not less, accessible and affordable. Wyoming families ought to ensure that their politicians make reform affordable for middle-class households. More information can be found in the EPI Issue Brief #261 ("Expanded Subsidies are Essential to Health Reform"), available online at http://www.epi.org/page/-/pdf/ib261.pdf.