



## CMS NEWS

FOR IMMEDIATE RELEASE

June 13, 2017

Contact: CMS Media Relations  
(202) 690-6145 | [CMS Media Inquiries](#)

### **County by County Analysis of Current Projected Insurer Participation in Health Insurance Exchanges**

The Centers for Medicare & Medicaid Services (CMS) released a [county-level map](#) of 2018 projected Health Insurance Exchanges participation based on the known issuer participation public announcements through June 9, 2017. This map shows that insurance options on the Exchanges continue to disappear. Plan options are down from last year and, in some areas, Americans will have no coverage options on the Exchanges, based on the current data.

“This is yet another failing report card for the Exchanges. The American people have fewer insurance choices and in some counties no choice at all. CMS is working with state departments of insurance and issuers to find ways to provide relief and help restore access to healthcare plans, but our actions are by no means a long-term solution to the problems we’re seeing with the Insurance Exchanges,” said CMS Administrator Seema Verma.

The CMS map displays point in time data and is expected to fluctuate as issuers continue to make announcements on exiting or entering specific states and counties. It currently shows that nationwide 47 counties are projected to have no insurers, meaning that Americans in these counties could be without coverage on the Exchanges for 2018. It’s also projected that as many as 1,200 counties - nearly 40% of counties nationwide – could have only one issuer in 2018. Currently, for 2018 at least 35,000 active Exchange participants live in the counties projected to be without coverage in 2018, and roughly 2.4 million Exchange participants are projected to have one issuer. [\[1\]](#) It’s expected that the number of consumers with no coverage choices will rise.

CMS continues to work with state departments of insurance and issuers to address bare counties, exploring all options available under current law to provide Americans with access to coverage.

Qualified Health Plan submissions for the Federally-facilitated Exchanges will be accepted by states and CMS through June 21, 2017.

The Department of Health and Human Services (HHS) is committed to doing everything permitted under current law to provide patients with immediate relief from damage the Exchanges has done to the individual and small group health insurance markets. HHS actions are intended to stabilize the markets, increase choices, and lower costs. You can learn more by visiting [hhs.gov/relief](https://hhs.gov/relief).

###

Get CMS news at [cms.gov/newsroom](https://cms.gov/newsroom), sign up for CMS news [via email](#) and follow CMS on Twitter [@CMSgovPress](#)

---

[1] Data as of January 31, 2017.

