

**Testimony of Ellen Allen**  
**Resident of Pinch, West Virginia**  
**Before the House Committee on Energy and Commerce Subcommittee on Health**  
***“Lowering Health Care Costs for All Americans: An Examination of Health Insurance Affordability”***  
**January 22, 2026**

Chairs Guthrie and Griffith, Ranking Members Pallone and DeGette, Members of the Committee, thank you for the opportunity to testify before you today on the importance of the Affordable Care Act (ACA) and the enhanced premium tax credits that make health insurance accessible and affordable to millions of Americans, including me.

My name is Ellen Allen, a multi-generational daughter of Appalachia who is no stranger to hard work. I have formally worked since I was 15 and informally since I was 12 years old, mowing lawns for many of my neighbors and picking up discarded glass soda bottles along the backroads in my hometown. The local grocer paid me for these bottles which I immediately leveraged into a soda and moon pie.

While I was not born into great wealth, I did enjoy the privilege of growing up in a middle class, working family in southern West Virginia — not the coal fields, but not too far removed.

My parents provided for me. I had everything I needed and almost everything I wanted.

I was — I believe — the first girl to play sanctioned Little League Baseball in West Virginia. This was in 1972, when girls were not allowed to play with the boys. I was an athlete and still consider myself one, such as it is. I ate well, was dutiful to my annual physicals, and took good care of myself. I still do so today.

I graduated from college and earned an MBA, and thanks to my parents I incurred no student loan debt.

One of the privileges I have enjoyed throughout my life is consistent access to high quality, affordable health insurance. I am 64 years old, and I have essentially never lived a day without being covered by health insurance. It is not something I could even consider, no matter the cost. No matter the economic burden.

It is also a situation, until quite recently, I have taken for granted. Until three years ago, I was always covered by employer sponsored health insurance, through employers who paid the majority — and sometimes even the entirety — of the premium costs.

But I changed jobs in 2023. The small organization I now work for cannot afford the \$50,000 it would take to cover the annual premiums for its two W-2 employees. I therefore enrolled for coverage through the ACA marketplace in August of 2023, and I remain enrolled today.

Last month, I did what millions of Americans including tens of thousands of West Virginians did — I went online to re-enroll in my health insurance through [healthcare.gov](https://healthcare.gov).

When I saw my new premium for 2026, I felt a pit in my stomach. While I was expecting to see some sort of increase, it was a punch in the gut to see my premium had jumped a whopping 323%.

In 2025, I paid \$479.84 per month — nearly \$6,000 a year — for a Bronze-level Plan, including vision and dental coverage. I liked this health care plan, and it was relatively affordable for me, even though I had a high deductible and \$9,200 in maximum out-of-pocket costs.

In 2026, with the expiration of the ePTCs, my monthly premium now costs me \$1,965.87 — and that is without vision or dental coverage. I enrolled in essentially the same Bronze-level Plan I had last year minus the vision and dental benefits: I simply can no longer afford them. And my maximum out-of-pocket cap is now \$9,900.

Despite taking good care of myself, eating right, and maintaining an active lifestyle, I have developed chronic conditions that can be managed with medications and sometimes more invasive procedures. This means that I am likely to hit my maximum for out-of-pocket expenses, especially when you consider the 40% co-insurance I am responsible for.

Thankfully, I will be eligible for Medicare starting in September. But before that, I will be paying \$15,726.96 in premiums alone. When you add in my out-of-pocket costs, I expect to incur approximately \$25,626 in total health care expenses — and that's just in the first eight months of 2026. This is a lot to ask of a hard-working American who has worked every day of her teen and adult life.

I am indeed grateful for the ACA and the ePTCs that have made health care affordable for me and millions of other Americans, including more than 65,000 of my fellow West Virginians.<sup>1</sup>

These tax credits were a game-changer. They kept people insured. They allowed small business owners to keep their doors open. They kept families healthy. The tax credits helped reduce West Virginia's uninsured rate from approximately 20% to below 6%<sup>2,3</sup> — an extraordinary achievement.

West Virginians know what it means to work hard and play fair. We do not expect handouts or special treatment. But we do expect fairness — and right now, there's nothing fair about a system that forces us to dip into retirement savings to pay for basic but life-preserving procedures as I must do. Or, as several people I know are doing, dropping health insurance all together and rolling the dice that they will not get sick or have an accident that could bankrupt them altogether.

The good news is that this is fixable. Congress can still act right now to restore and make permanent the ACA's expanded premium tax credits. Doing so would save lives, protect families, and strengthen our economy. I hope this body will at least pass a three-year extension of the ePTCs, and during that time, work on bipartisan ways to truly make health care accessible and affordable for every American in every state and stage of life.

The expiration of the ePTCs was not an economic inevitability. It was a political choice. Health care is not a luxury, it is a necessity. The ability to access it should never depend on how much money you make, where you work, or who you voted for.

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<sup>1</sup> Centers for Medicare & Medicaid Services. "2025 Marketplace Open Enrollment Period Public Use Files." May 12, 2025. <https://www.cms.gov/data-research/statistics-trends-reports/marketplace-products/2025-marketplace-open-enrollment-period-public-use-files>

<sup>2</sup> United States Census Bureau. "State Health Insurance Coverage: 2013, 2019, and 2023: American Community Survey Briefs." September 2024. <https://www2.census.gov/library/publications/2024/demo/acsbr-021.pdf>

<sup>3</sup> The Commonwealth Fund. "2025 Scorecard on State Health System Performance." June 18, 2025. <https://www.commonwealthfund.org/publications/scorecard/2025/jun/2025-scorecard-state-health-system-performance>

When lawmakers choose to cut taxes for the wealthy instead of keeping health care affordable for working families, they are choosing who wins and who loses. And it is clear that people like me and my fellow West Virginians — the teachers, caregivers, small business owners and retirees — are the ones being forced to lose. Our healthcare was sacrificed.

It is time for our leaders to put people before profits, families before corporations and patients before politics. When we say health care is a human right, it is time we act like it.

Thank you for the opportunity to testify before you today.