



Find the plan that's right for you.



Vermont Health Connect

Information for the Health Care Professional



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What is Vermont Health Connect?

Vermont Health Connect (VHC) is a new way for Vermonters to find health coverage that fits their needs and budget.

- Eligible residents apply/enroll through Vermont Health Connect
- Applicants can request financial assistance
- Enrollment Options:
 - Web VermontHealthConnect.gov
 - Phone Customer Service Center 1-855-899-9600
 - Navigator Assistance
 - Paper application

Sunsetting Programs

The following Green Mountain Care (GMC) programs will be discontinued on December 31, 2013:

- CHAP – Catamount Health Assistance Program
- ESIA – Employer Sponsored Insurance Assistance
- VHAP – Vermont Health Access Program
- VHAP/ESIA – ESIA with VHAP wrap
- VHAP Pharmacy
- VScript
- VScript Expanded

Who is Required to Apply through Vermont Health Connect

- GMC members currently enrolled in one of the sunsetting programs whose family income is greater than 138% of Federal Poverty Level (FPL) are required to enroll in a new plan

VHC Enrollment timeline:

- GMC members who complete VHC enrollment process, select a health care plan and make the required premium payment by 12-15-13 will be enrolled effective 1-1-14
- Failure to pay the required premium in a timely manner may result in the patient not receiving their health plan ID card and enrollment packet

Example: Apply & Pay By:		Coverage Begins On:	
December	1 - 15	January	1
December	16 - 31	February	1
January	1 - 15	February	1
January	16 - 31	March	1
February	1 - 15	March	1
February	16 - 28	April	1
March	1 - 15	April	1
March	16 - 31	May	1

***The Apply & Pay By Chart is intended as an example; please contact VHC to validate coverage start dates.**

Who is not Required to Apply through Vermont Health Connect

At this time, the following GMC members are not required to apply on VHC because they will be covered by Vermont Medicaid:

- SSI-Related Medicaid Individuals
- LTC Recipients
- Refugee Medicaid Individuals
- Foster Children
- ANFC-Related Medicaid Individuals
- Dr. Dynasaur children & pregnant women
- CHIP children
- Individuals in Sunsetting programs whose income is less than 138% FPL

Eligibility Verification

PROTECT YOURSELF FROM UNINSURED PATIENTS

It is the responsibility of the health care professional to verify patient coverage prior to providing any service.

- When a patient enrolls and selects a health care plan through VHC, their coverage will not begin immediately
- If the patient does not have a health care plan, have the patient sign a release stating that they understand that they will be responsible for payment before providing service
- Retain the documentation in the patient's file
- HP Enterprise Services will only be able to verify Medicaid program eligibility
- Providers may have to check with the other insurance carriers to verify coverage

Communication & Outreach

Notices were sent to GMC members in September of 2013 informing them that their health care is changing.

- GMC members were notified that they will be automatically covered by Vermont Medicaid if they were identified as under 138% of FPL or if they met other qualifying criteria
- GMC members were directed to VHC for Open Enrollment if they were identified as having income over 138% of FPL
- These GMC members were given directions on how to maintain coverage by following the open enrollment instructions & timeline

How to Contact Us

- VHC Customer Support is available (toll-free) at 1-855-899-9600, 8am-8pm M-F & 8am-1pm Saturdays
- Please visit VHC website VermontHealthConnect.gov
- Educational materials can be requested and provided to patients. Email vthealthconnect@state.vt.us to request educational materials.

Providers are encouraged to call or e-mail VHC with questions.

Thank you

