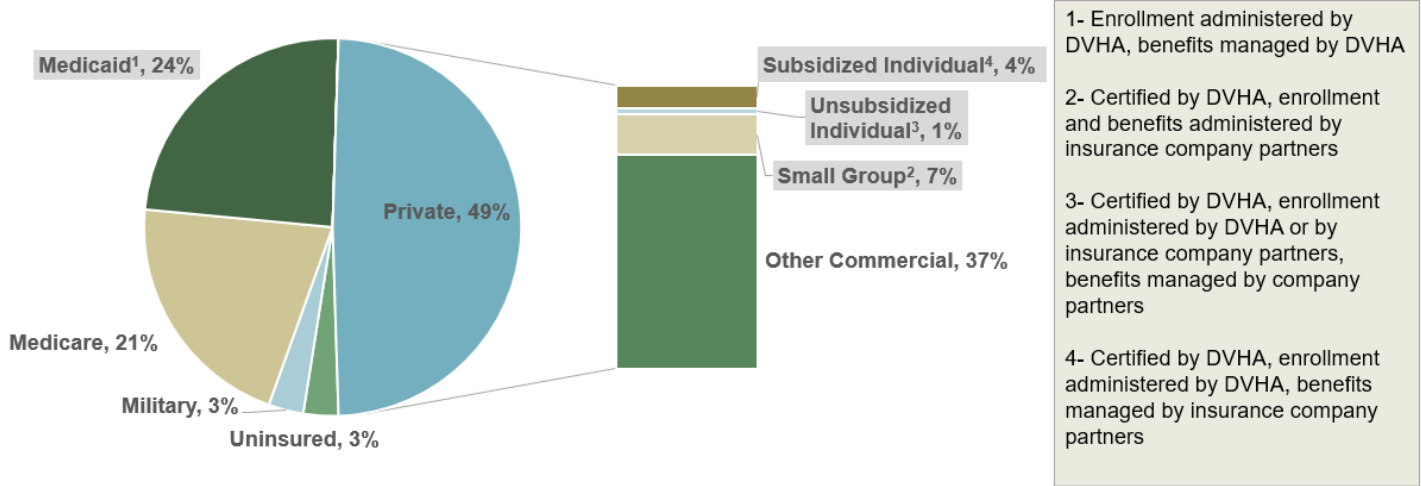


HEALTH INSURANCE IN VERMONT*



More than one out of three Vermonters are covered by a health plan that is administered and/or certified by the Department of Vermont Health Access (DVHA).

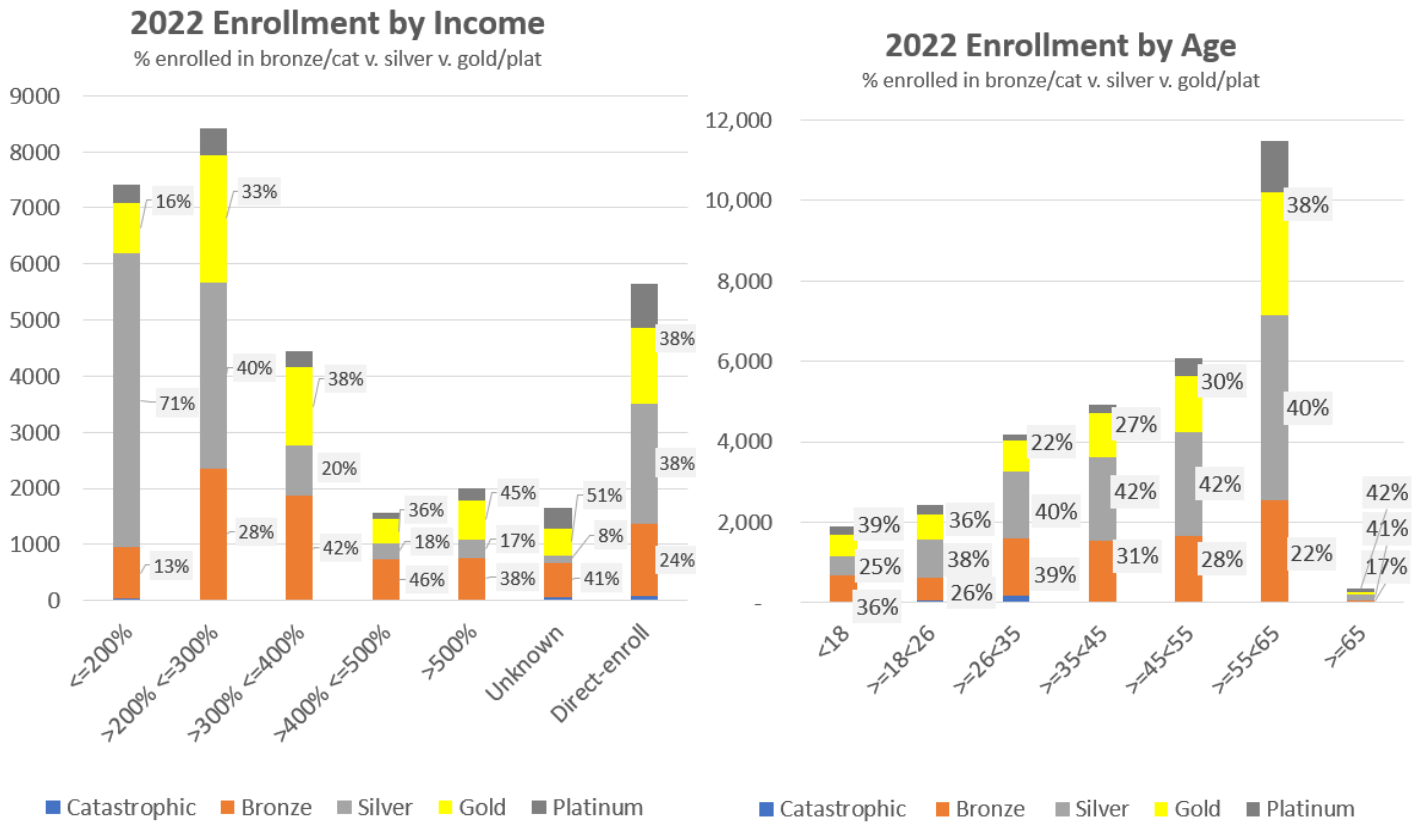
* Estimates of primary insurance type have been compiled from multiple sources, including the 2021 Vermont Household Health Insurance Survey, and should be viewed as an example of relative scale, not absolute values.

2022 BENEFIT MAP: QUALIFIED HEALTH PLANS (INDIVIDUALS AND SMALL GROUPS) AND MEDICAID

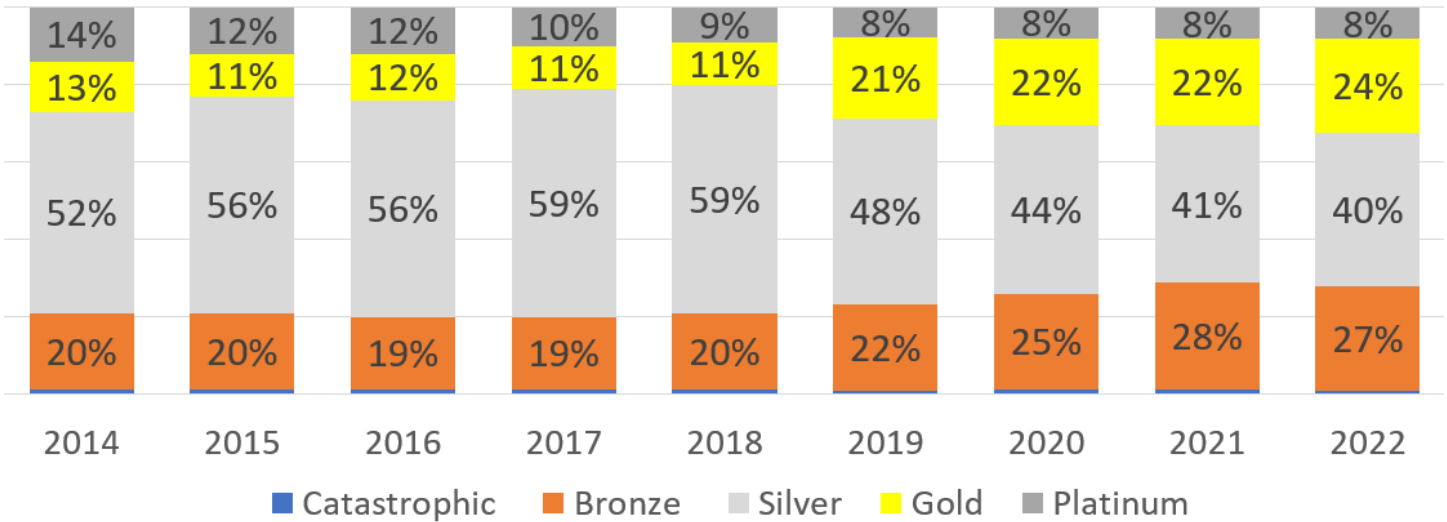
Total Medicaid: 196,252 ¹ (183,553) ⁶			Total Commercial: 70,754 (71,211) ⁶					
Medicaid Health Insurance			Other Medicaid Benefits		Health Insurance Marketplace Qualified Health Plans (QHP)²		Direct from Insurance Companies³ QHP & Reflective	
Total: 182,188			Total: 14,064		Total: 25,004		Total: 45,750	
Medicaid for the Aged, Blind & Disabled ⁴ : 25,959 (25,786)⁶			Pharmacy Assistance (Only): 9,616 (9,980)⁶		Total w/ Subsidy ⁴ : 22,913 (19,728)⁶		Small Businesses: 40,390 (40,491)⁶	
Aged, Blind & Disabled Adults: 6,117	Duals (Medicare & Medicaid): 18,307	Blind, Disabled Children: 1,535			State & Federal Subsidy: 11,132	Federal Only Subsidy: 11,781	QHP: 29,628	Reflective: 10,762
Medicaid for Children and Adults ⁴ : 156,229 (143,197)⁶			Choices for Care: 4,448 (4,590)⁶		No Advanced Payment of Subsidy: 2,091 (4,396)⁶		Individuals: 5,360 (6,596)⁶	
Adults: 89,073	Children: 67,156				Not Eligible ⁷ : 634	Unknown ^{5,7} : 1,457	QHP: 3,365	Reflective: 1,995

- ¹ Medicaid enrollment = state fiscal year-to-date actual caseload from Medicaid Program Enrollment and Expenditures Quarterly Report.
- ² Health Insurance Marketplace (Vermont Health Connect) = June effectuated members from DVHA enrollment reports.
- ³ Direct from Insurance Companies = June effectuated members as reported by insurance companies to DVHA.
- ⁴ DVHA uses the tax-based measure of income, Modified Adjusted Gross Income (MAGI), to determine eligibility for Medicaid for Children and Adults and financial help for qualified health plans in accordance with the Affordable Care Act. Medicaid for the Aged, Blind, and Disabled, Pharmacy Assistance, and Choices for Care use eligibility standards (Non-MAGI) that existed prior to the Affordable Care Act.
- ⁵ If members do not provide financial information, they cannot be determined eligible for advanced payments of premium tax credits (APTC). However, as long as they enroll through Vermont Health Connect, they may still receive premium tax credits when they file their federal taxes.
- ⁶ Values in parentheses are the equivalent values from June 2021
- ⁷These values are estimates due to the availability of data

A CLOSER LOOK: INDIVIDUALS IN QUALIFIED HEALTH PLANS

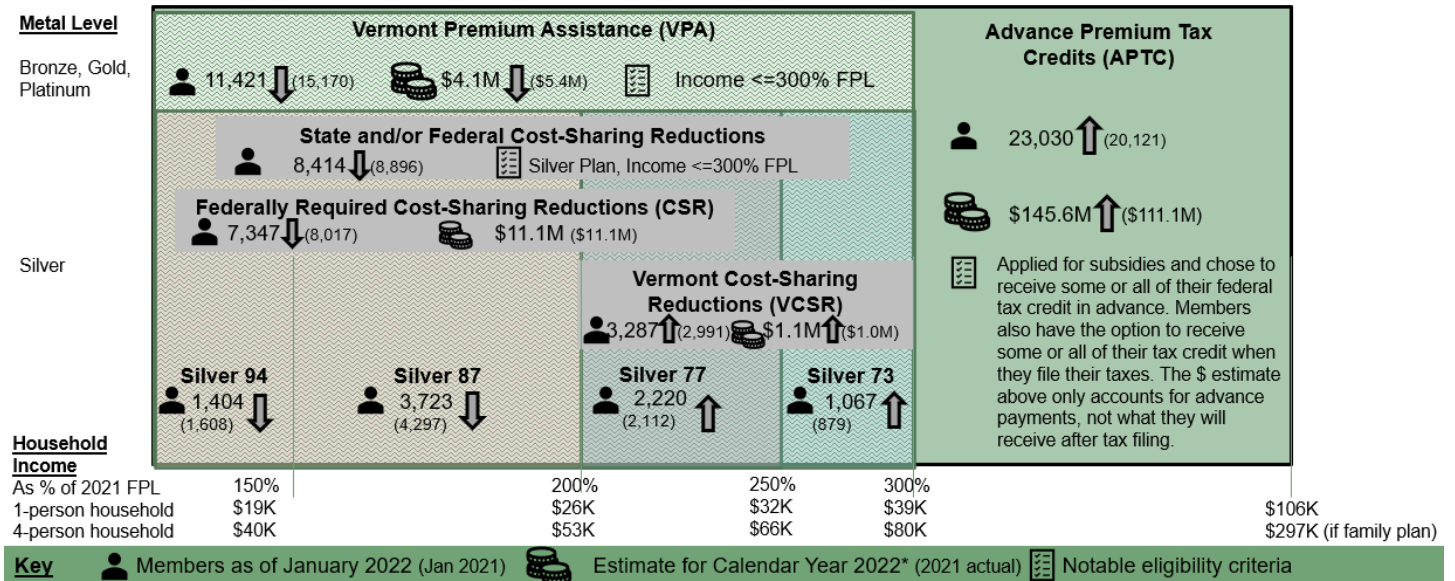


Metal Level Distribution by Year - Individual Market



A CLOSER LOOK: INDIVIDUALS IN QUALIFIED HEALTH PLANS WITH SUBSIDIES

As of January 2022, nearly three-quarters of Vermonters in the individual market received federal premium tax credits to lower their monthly insurance costs. Many also received financial help to further reduce premium and out-of-pocket costs from the State and/or through federally required benefits. To qualify, they can't have another offer of affordable coverage, must enroll in a metal level plan, and must meet income guidelines.



*Estimates of total 2022 subsidies are based on January enrollment figures as well as typical annual attrition rates. This year's enrollment trends are likely to be atypical, due to 1) A longer open enrollment period resulting in an increase in enrollment from January to February, 2) An expected influx of new QHP enrollees coming from Medicaid after the restart of annual redeterminations, and 3) The potential for direct-enrolled individuals to transfer into the marketplace to take advantage of expanded subsidies. As a result, these projections could well underestimate the amount of subsidies for this year.