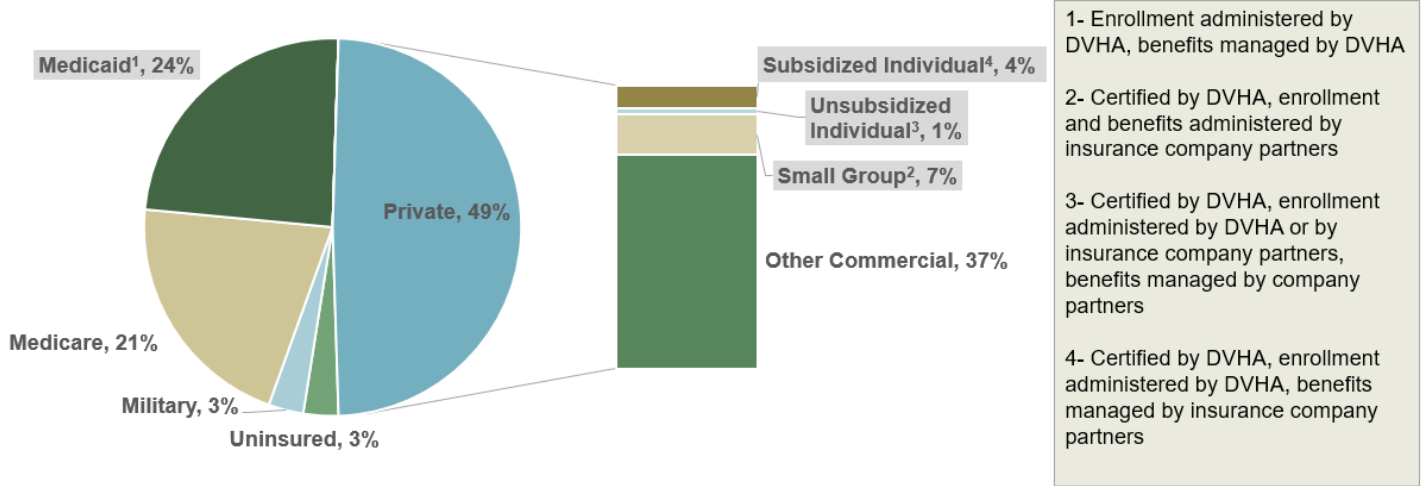


HEALTH INSURANCE IN VERMONT*



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: 193,938 ¹ (178,852) ⁶			Total Commercial: 71,598 (72,463) ⁶					
Medicaid Health Insurance			Other Medicaid Benefits		Health Insurance Marketplace Qualified Health Plans (QHP)²		Direct from Insurance Companies³ QHP & Reflective	
Total: 179,805			Total: 14,133		Total: 25,457		Total: 46,141	
Medicaid for the Aged, Blind & Disabled ⁴ : 25,971 (25,612)⁶			Pharmacy Assistance (Only): 9,734 (10,054)⁶		Total w/ Subsidy ⁴ : 23,030 (20,121)⁶		Small Businesses: 40,498 (40,707)⁶	
Aged, Blind & Disabled Adults: 6,178	Duals (Medicare & Medicaid): 18,238	Blind, Disabled Children: 1,555			State & Federal Subsidy: 11,421	Federal Only Subsidy: 11,609	QHP: 29,698	Reflective: 10,800
Medicaid for Children and Adults ⁴ : 153,834 (138,544)⁶			Choices for Care: 4,399 (4,642)⁶		No Advanced Payment of Subsidy: 2,427 (4,082)⁶		Individuals: 5,643 (7,553)⁶	
Adults: 86,963	Children: 66,871				Not Eligible: 787	Unknown ⁵ : 1,640	QHP: 3,545	Reflective: 2,098

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) = January effectuated members from DVHA enrollment reports.

³ Direct from Insurance Companies = January 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.

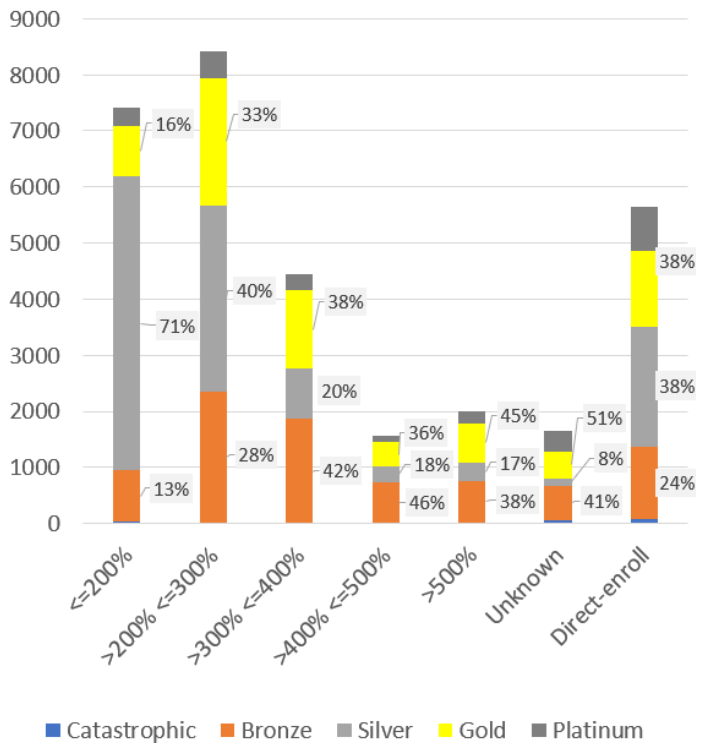
⁵ If members do not provide financial information, they cannot be determined eligible for advanced payments of premium tax credits (APTC). However, as long as they enroll through Vermont Health Connect, they may still receive premium tax credits when they file their federal taxes.

⁶ Values in parentheses are the equivalent values from January 2021

A CLOSER LOOK: INDIVIDUALS IN QUALIFIED HEALTH PLANS

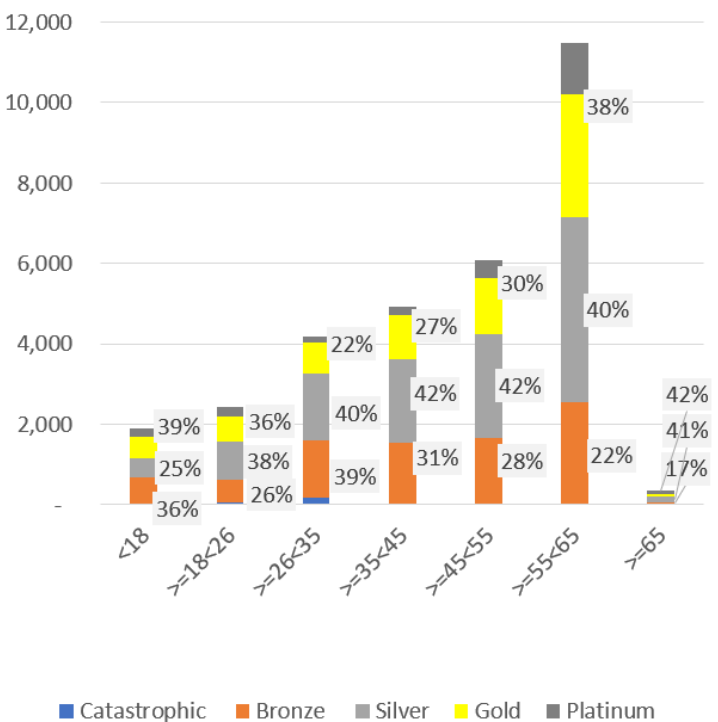
2022 Enrollment by Income

% enrolled in bronze/cat v. silver v. gold/plat

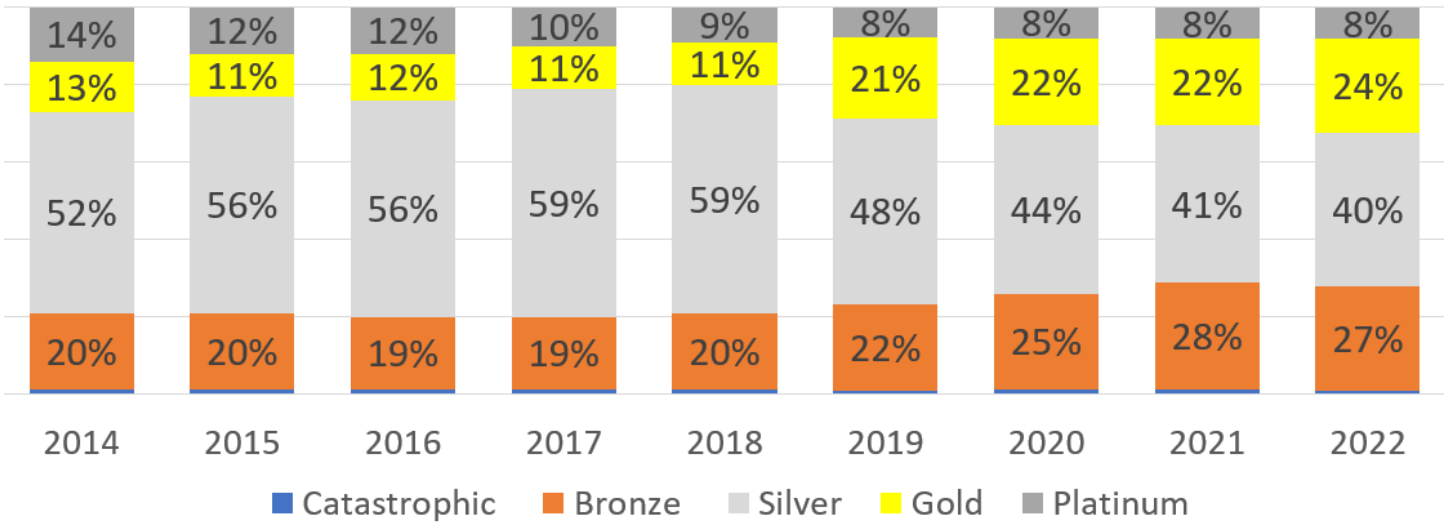


2022 Enrollment by Age

% enrolled in bronze/cat v. silver v. gold/plat



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.

Metal Level	Vermont Premium Assistance (VPA)	State and/or Federal Cost-Sharing Reductions	Federally Required Cost-Sharing Reductions (CSR)	Vermont Cost-Sharing Reductions (VCSR)	Advance Premium Tax Credits (APTC)
Bronze, Gold, Platinum	11,421 ↓ (15,170) \$4.1M ↓ (\$5.4M) Income ≤ 300% FPL	8,414 ↓ (8,896) Silver Plan, Income ≤ 300% FPL	7,347 ↓ (8,017) \$11.1M (\$11.1M)	3,287 ↑ (2,991) \$1.1M ↑ (\$1.0M)	23,030 ↑ (20,121) \$145.6M ↑ (\$111.1M)
Silver					Applied for subsidies and chose to receive some or all of their federal tax credit in advance. Members also have the option to receive some or all of their tax credit when they file their taxes. The \$ estimate above only accounts for advance payments, not what they will receive after tax filing.
Household Income					
As % of 2021 FPL	150%	200%	250%	300%	
1-person household	\$19K	\$26K	\$32K	\$39K	\$106K
4-person household	\$40K	\$53K	\$66K	\$80K	\$297K (if family plan)

Key Members as of January 2022 (Jan 2021) Estimate for Calendar Year 2022* (2021 actual) Notable eligibility criteria

*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.