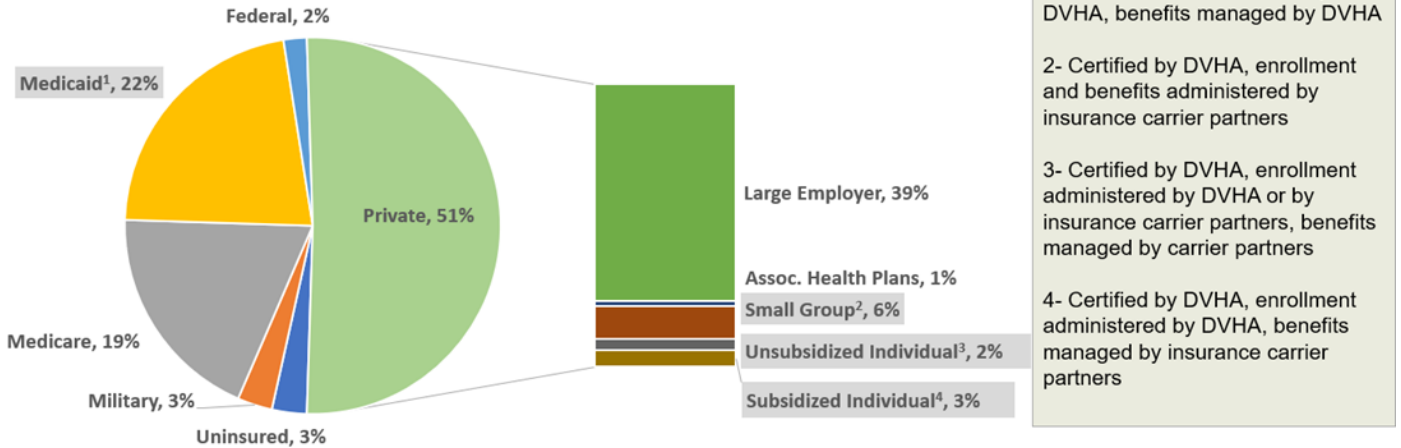


HEALTH COVERAGE IN VERMONT*


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 2018 Vermont Household Health Insurance Survey, and should be viewed as an example of relative scale, not absolute values.

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

Total Medicaid: 166,342 ¹			Total Commercial: 73,859					
Medicaid Health Coverage			Other Medicaid Benefits		Vermont Health Connect Qualified Health Plans ²		Direct from Carriers ³ QHP & Reflective	
Total: 151,839			Total: 14,503		Total: 24,802		Total: 49,057	
Medicaid for the Aged, Blind & Disabled ⁴ : 25,577			Pharmacy Assistance (Only): 9,988		Total w/ Subsidy ⁵ : 21,108		Individuals: 7,525	
Aged, Blind & Disabled Adults: 6,298	Duals (Medicare & Medicaid): 17,521	Blind, Disabled Children: 1,758			State & Federal Subsidy: 16,039	Federal Only Subsidy: 5,069	Qualified Health Plan (QHP): 4,921	Reflective: 2,604
Medicaid for Children and Adults ⁵ : 126,262			Choices for Care: 4,515		No Subsidy ⁶ : 3,694		Small Businesses: 41,532	
Adults: 63,474	Children: 62,788	QHP: 31,168					Reflective: 10,364	

¹ Medicaid enrollment is from the quarterly DVHA Enrollment and Expenditure report, is for the state fiscal year-to-date, and reports caseload representative of an average monthly member enrollment.

² Vermont Health Connect qualified health plan data is from June effectuated coverage from DVHA enrollment reports.

³ Carrier direct enrollment is June effectuated coverage as reported by the Carriers to DVHA.

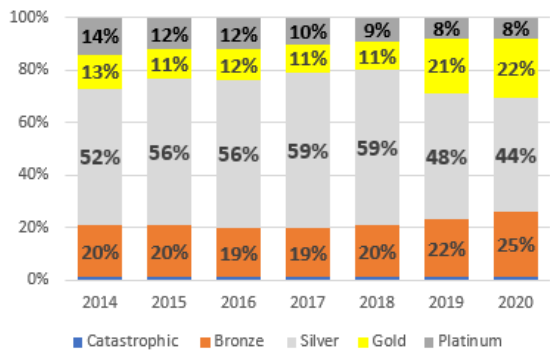
⁴ Medicaid for the Aged, Blind, and Disabled, Pharmacy Assistance, and Choices for Care use the previous eligibility standards (Non-MAGI) to determine eligibility.

⁵ Vermont uses the tax-based measure of income, Modified Adjusted Gross Income (MAGI), to determine eligibility and benefit amounts for Medicaid for Children and Adults and premium tax credits in accordance with the Affordable Care Act.

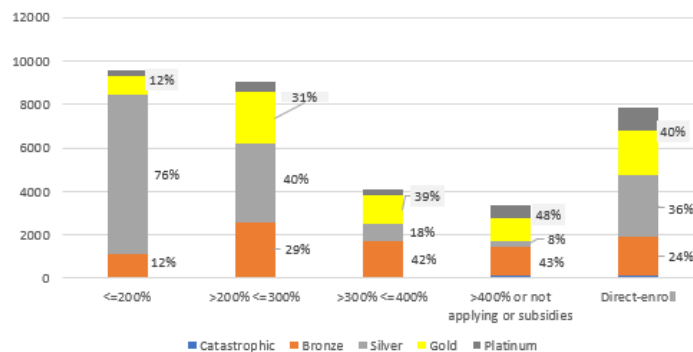
⁶ The no subsidy category includes those who did not qualify for a subsidy but chose to enroll through the Exchange anyway & those who did not apply for a subsidy.

A CLOSER LOOK: INDIVIDUALS IN QUALIFIED HEALTH PLANS

Metal Level Distribution by Year

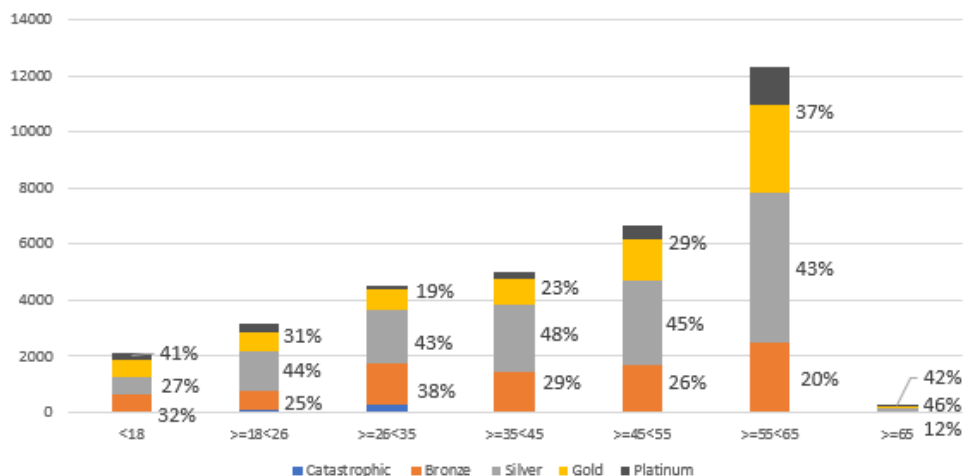


2020 Enrollment by Income
(% enrolled in bronze/cat v. silver v. gold/plat)



2020 Enrollment by Age

% in gold/platinum plans vs. silver vs. bronze/catastrophic plans



A CLOSER LOOK: INDIVIDUALS IN QUALIFIED HEALTH PLANS WITH SUBSIDIES

As of January 2020, two out of three 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.

