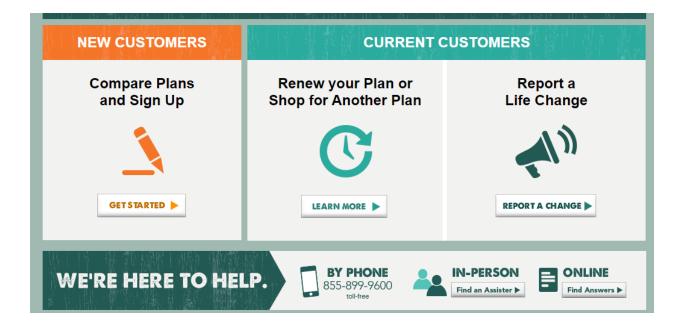
- 1) Google 'Vermont Health Connect' and you will end up here <u>https://portal.healthconnect.vermont.gov/VTHBELand/welcome.a</u> <u>ction</u>
- 2) If you're a new customer (1st time getting insured with VHC) go to compare plans. If you currently have a VHC plan you can either renew it or shop for a new one. Both of these activities can be undertaken in the open enrollment period which runs until Dec 15th. Outside of open enrolment you can only make a change if you have a 'qualifying event', such as change in income, household, loss of employer coverage, etc.



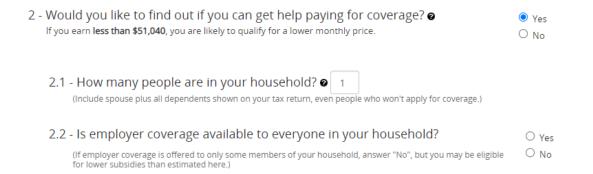
3) The best place to start if you're looking for a new plan is the plan comparison tool.

Find the plan that's right for you.	Contact Us 855-899-9600 TTY/TDD 888-834-7898		① Languages		Home	Tour	Advi	ce and Exp	lanations
		Help Center	Health Plans	About VHC	Latest U	pdates	FAQ	Search	SIGN IN

Tell us about those who will be covered under this insurance.

1 -	- Who will be	covered?									
		Age when coverage begins:	Relationsh	ip	In general, would say the health of person is: (optional) @		Expected Procedures: (Member of Federally Recognized Tribe? 🕑	Pregnant woman? 😧	
	Person 1	42	Self	~	Select	*	None	~			
										Ad	ld Another Person
2 - Would you like to find out if you can get help paying for coverage? If you earn less than \$51,040, you are likely to qualify for a lower monthly price.						○ Yes ○ No					

Read each question carefully and use the '?' buttons if you need to understand what the question is asking. Some of this stuff is complicated! The "Advice and Explanations' button in the top right hand corner is actually pretty helpful. 4) The plan comparison tool can ESTIMATE your premium subsidy. An actual number will be provided to you once you actually apply. The subsidy is based on your projected household income for the upcoming tax year. If you earn less you may receive an additional credit when you do your taxes. If you earn more you may need to pay some of your subsidy back.



If employer coverage is available to everyone in the household you may still be eligible for subsidized coverage if your employer coverage is a deemed 'unaffordable'. There is an affordability calculator on the VHC website. <u>https://info.healthconnect.vermont.gov/2021ESI_calculator</u> 5) Depending on what income you report you may be eligible for a premium subsidy and cost saving reductions. Here's an example for a 1 person household who earns \$35,000 a year and does not have affordable employer coverage.

2.3 - What is your household expected income in 2021? @

\$	35000	lick here to see your estimated help	p paying for coverage	
	wages and tips, salary, self-employ s received, other income.)	nent income, interest and dividends rece	ived, alimony received, Social Security	
Financia	al help for buying health	insurance on Vermont Hea	alth Connect	
Based on y	our reported information, we es	timate that you may qualify for:		
		Premium Subsidy (APTC+VPA)	Enhanced Silver with Cost-Sharing Reductions	
		\$449 per month	Silver 73*	
for coverag	ge for the following person(s) yo	u listed:		
Pers	son 1 (Age 42)			
			However, you may find that a gold or b ns, but gold plans typically have lower o	
	you might have a complicated accurate for your situation.	situation, please call Vermont Health C	onnect at <u>855-899-9600</u> for more inforr	nation and to see if this eligibility
This is our	estimate. To get an official subsi	dy determination, you can submit an a	application through Vermont Health Co	nnect.

When you compare plans, we will use our estimate for your subsidy.

6) Once you get your plan options how do you differentiate between them and make a good decision?

Available Health Plans: 26	plans found.		Sort By	Cost in an Avg Year	
	Plan 🛛	Yearly Cost Estimates (Includes premiums and estimated out-of-pocket costs)			
Filter Results	Click plan name for DETAILS or to ENROLL Click checkboxes to compare	Good Year @ (18% chance)	Average Year 🛛 ݩ	Bad Year @ 🗎 (3% chance)	
Metal Level Bronze Silver Gold Platinum	■ MVP VT Plus Bronze 1 MVP Health Care - HMO - O Bronze Monthly Premium: \$42.30 - after \$449.00 subsidy Deductible: Medical: \$7,250 / Drug: \$700 Max Out-of-Pocket O: \$8,400	\$508	\$2,368	\$8,908	
Plan Type @ EPO HMO	■ MVP VT Bronze 3 HDHP MVP Health Care - HMO - O Bronze Monthly Premium: \$53.90 - after \$449.00 subsidy Deductible: \$5,500 Max Out-of-Pocket O : Medical: \$6,900 / Drug: \$1,400	\$647	\$2,417	\$7,547	
Blue Cross and Blue Shield of Vermont MVP Health Care Monthly Premium (with subsidy)	MVP VT Bronze 2 MVP Health Care - HMO - O Bronze Monthly Premium: \$48.28 - after \$449.00 subsidy Deductible: Medical: \$6,250 / Drug: \$1,000 Max Out-of-Pocket O : Medical: \$8,400 / Drug: \$1,400	\$579	\$2,419	\$8,979	
\$40 - \$500	MVP VT Plus Bronze 5				

Consider the following:

- Do you already have a provider you want to keep seeing? Do they take BCBS, MVP or both?
- How much can you afford to spend on your premium each month?
- Do you need to use your plan often or is it just for emergencies?
- Do you have savings to draw on in the event of a health emergency?
- How comfortable are you with financial risk?
 - Would you prefer to pay more each month for a plan that will leave you with few out of pocket costs?
 - Or, would you rather have a low monthly cost and much higher potential out of pocket costs if you have to use your plan?
 - If you are interested in a low monthly premium you might consider a plan that allows a Health Savings Account. This will allow you put money aside for health expenses and reduce your taxable income.
- Do you expect to have prescriptions this year? If so, check if your plan has a separate Rx deductible or if it is included.
- Are there other health services you expect to require? How much will you pay for these on your plan?

7) Once you have a few plans in mind select and compare them.

Comparing Health Plans	1. MVP VT Plus Bronze 1	2. MVP VT Bronze 3 HDHP						
2 Plans Selected < Back to Results Print	Yearly Cost Estimate: \$2,368 Cost in a Bad Year: \$8,908 To Enroll	Yearly Cost Estimate: \$2,417 Cost in a Bad Year: \$7,547 To Enroll						
Benefits and Coverage (assuming you use preferred providers) (Note: For a more detailed and accurate explanation of the benefits offered by this plan please refer to the Summary of Benefits and Coverage [SBC]. The benefits are described in more detail in the SBC and it will include additional information about those benefits. Some nuances about the benefits like visit limits and other details are not listed below. You should refer to the SBC for those details about the plan. Click on the "View Summary of Benefits and Coverage" link above to view the SBC.)								
In-Network Deductible (Note: Unless excepted in the plan's benefit description, you must pay all the costs up to the deductible amount before the plan begins to pay for covered services you use. There may be additional details about the deductible that are not shown below. Please refer to the SBC for additional details.)	\$7,250	\$5,500						
Extra Deductible for Drugs 🕑	\$700							
In-Network Maximum Out-Of-Pocket 🥑	\$8,400	\$6,900						
Extra Maximum Out-Of-Pocket for Drugs		\$1,400						
Doctor Visits								
Doctor Visit - Preventive Care	No Charge	No Charge						
Doctor Visit - Primary Care	\$40 Copay after deductible	50% Coinsurance after deductible						
Doctor Visit - Specialist	\$100 Copay after deductible	50% Coinsurance after deductible						

Click the plus sign on 'Benefits and Coverage' and compare how much various services will cost with these plans. Consider the ones you are likely to use this year and also look at what might happen in a worst case scenario.

Note whether the plan charges a copay or coinsurance.

Once you have found a plan that meets your needs click the 'Enroll' button.

You can enroll in a plan online, with an assister or on the phone.