

2021 Vermont Household Health Insurance Survey

Vermont Department of Health

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Survey Methodology



Methodology

Background

The Vermont Household Health Insurance Survey (VHHIS) has been completed periodically since the early 2000's and is used to monitor the health insurance coverage status of Vermont residents. Through this survey data are collected and analyzed on health insurance coverage sources, demographics, income, employment, health status, affordability of insurance and financial barriers to care. These data are used to measure the impacts of options for health insurance coverage expansion in Vermont. They inform the design and outreach for state-sponsored health insurance programs for the uninsured. The results help monitor impacts of employer-sponsored insurance, premium cost, cost sharing and benefit design, and access to insurance and care.

Survey Instrument

The Vermont Household Health Insurance Survey was updated in 2021 to include questions to examine the impact of the COVID-19 pandemic, gather additional information on health saving and health reimbursement accounts, obtain detailed information about disproportionately affected populations, and the financial impact of health care. Market Decisions Research worked with the Vermont Department of Health to modify the survey for 2021. The survey was finalized in August 2021.

Sample Design

Between August 23, 2021, and December 12, 2021, Market Decisions Research interviewed 3,037 Vermont households, totaling 7,040 individual Vermont residents, using a dual-frame, stratified sampling methodology. Interviews were conducted using a random digit dial (RDD) system that included both landlines and cellphones. To ensure accurate statewide representation the sample design was based on four geographic regions.

Sample Regions

| Region | Counties |
|-------------------|--|
| Burlington Area | Chittenden County, Franklin County, Grand Isle County |
| Northeast VT | Caledonia County, Essex County, Lamoille County, Orleans County |
| Southwest Vermont | Addison County, Bennington County, Rutland County |
| Southeast VT | Orange County, Washington County, Windham County, Windsor County |

Survey Weighting

Survey data have been weighted to the population of Vermont based on area of the state, age, gender, race, ethnicity, income, and Medicaid enrollment. Weighting allows statements to be made about the state, as well as for various sub-populations with a known standard error and confidence. The population size reflected in the final data is the total noninstitutionalized population of Vermont, or 618,720 residents.

How to Read This Report

Key Terms and Acronyms

| Abbreviation | Meaning |
|--------------|---|
| DK-REF | Respondent says, “I don’t know” or similar or refuses to answer |
| ESI | Employer Sponsored Insurance |
| FPL | Federal Poverty Level |
| MDR | Market Decisions Research, the company that gathered data for this project and wrote this report. |
| N/A | The question was not asked in the year noted |
| Other | Infrequent responses to a question combined |

Testing for Significant Differences

Analysis was conducted to determine if there were differences in the responses to questions among sub-populations (such as different age group, different incomes, or differences by insurance status). Tests were conducted using 95% confidence intervals. Differences are noted in the text using the term “significant”.

In addition, changes over time are noted when the two years being compared are statistically different from one another.



Executive Summary



Executive Summary

Primary Type of Health Insurance

Ninety-seven percent or 599,000 Vermonters are covered by health insurance, comparable to 2018. Almost half of Vermonters (49%) are primarily covered by private health insurance in 2021 (approximately 304,600 persons) while 24% are enrolled in Medicaid and 21% Medicare.

The Uninsured

Just three percent of Vermonters report no health care coverage (approximately 19,400 persons). This continues to be the lowest level of uninsured Vermonters in the survey since 2000.

The age group most likely to be uninsured continues to be 25 to 34 years old - 8% of Vermonters in this age range are uninsured. Those who identify as American Indians or Alaska Natives are significantly more likely than Vermonters overall to be uninsured (9% vs. 3%). The income groups most likely to be uninsured are between 201% and 400% of the Federal Poverty Level (FPL).

The number of uninsured among young adults and Vermonters with moderately low income declined; however, the number increased among older Vermonters. The estimated number of Vermonters without insurance age 25-34 fell 10%, from 7,100 in 2018 to 6,400 in 2021, while the number of uninsured Vermonters ages 35-44 fell 30%, from 3,700 in 2018 to 2,600 in 2021. For those age 45-64, the estimated number of uninsured increased over 50% from 4,900 in 2018 to 7,400 in 2021.

The uninsured rate for Vermonters with incomes just above Medicaid levels (139%-200% of FPL) fell from 6% in 2018 to 2% in 2021. Note that, unlike in 2018, many Vermonters in this income cohort can still be on Medicaid due to the public health emergency's continuous coverage requirement. In fact, the report shows that a majority (56%) of Vermonters with income 139-200% FPL are on Medicaid in 2021.

The rate of uninsured Vermonters increased among employees of small businesses. Of Vermonters who work for businesses with 2-9 employees, 11% are uninsured in 2021, up from 7% in 2018.

One out of three uninsured Vermonters (33%) have access to employer-sponsored insurance (ESI) in 2021, up from 23% in 2014 and 28% in 2018. Three-quarters of the uninsured that had access to ESI (76%) cited the cost of the insurance plan as the reason for declining coverage.

Previous VTHHIS reports can be found here: <https://www.healthvermont.gov/stats/surveys/household-health-insurance-survey>

Executive Summary

The Uninsured, continued

Of the nearly 70,000 Vermonters who lost their job or were furloughed due to the COVID-19 pandemic, the vast majority reported they were able to maintain health insurance coverage (84%). Of those who maintained coverage, more than one in three (36%) enrolled in Medicaid while 30% were covered by a spouse or parent, 12% utilized COBRA, and 9% signed up through the state's health insurance marketplace, Vermont Health Connect.

In 2021, uninsured Vermonters are significantly more likely than in prior years to have been uninsured for between one and five years (39% in 2021, compared to only 18% in 2018). While most Vermonters impacted by the COVID-19 pandemic maintained their health insurance, the onset of the pandemic stands out as an uninsurance-triggering event, with over one-fifth (22%) of uninsured Vermonters reporting that they've been without insurance between 13 and 24 months - the period that would include the early months of the pandemic - compared to 9% in 2018. The proportion of the uninsured who lacked insurance for no more than a year fell from 52% in 2018 to 29% in 2021 after rising from 2012 to 2018.

More than three-quarters of uninsured Vermonters are either very interested (48%) or somewhat interested (31%) in enrolling in state health insurance programs. The most common reason given for not enrolling in state health insurance programs is concern that they cost too much (48% a major reason, 18% a minor reason).

Among uninsured adults 19 to 64 years old, 20% (3,700) are potentially eligible for Medicaid, based on their income. Another 52% (9,200) have income levels that make them potentially eligible for Affordable Care Act subsidies to buy private insurance through Vermont Health Connect, while the remaining 28% (5,100) are potentially eligible for expanded subsidies under the American Rescue Plan Act of 2021. It's important to note that the one out of three uninsured Vermonters who have an offer of employer-sponsored insurance typically would not qualify for these subsidies.

Executive Summary

The Commonwealth Fund Definition of the Underinsured

In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. (For example, respondents could include out-of-pocket costs related to dental, vision, hearing needs, or over-the-counter medications which are not necessarily traditionally covered under a health plan.) There are other models that can be used to determine whether a person is considered underinsured.

In 2021, 36% (187,800) of all Vermonters meet one of the Commonwealth Fund's definitions of being underinsured. Forty-four percent (131,100) of privately insured meet one of the Commonwealth Fund's definitions of underinsured, as well as 30% of Medicaid members.

Health Care Utilization

Insured Vermonters are significantly more likely than uninsured Vermonters to see a doctor. Almost nine-in-ten (88%) insured Vermonters had visited a doctor in 2021, compared to just 48% of uninsured Vermonters. Uninsured residents are significantly less likely to have visited a doctor or health care provider during the past 12 months.

Insured Vermonters are less likely than uninsured Vermonters to delay care due to cost. There was no difference in the proportion of insured Vermonters who delayed care due to cost in 2021 compared to 2012, 2018, or 2021.

Some populations are more likely than all Vermonters to forgo care due to cost. Gender identity minorities are more likely not to receive care from a doctor or surgery because they could not afford it (12%); as are those with a disability under age 65 (8%), Black or African American Vermonters (8%) and LGBTQ Vermonters (8%). People with a disability under age 65 and LGBTQ Vermonters are more likely not to receive many types of care because of cost than Vermonters overall. Persons of colors are more likely not to receive routine medical care or dental care; black and African American Vermonters are more likely not to receive mental health care. Vermonters who identify as American Indian or Alaskan Native are more likely not to received routine medical care, mental health care or dental care due to cost.

Executive Summary

Health Care Utilization, continued

Insured and uninsured Vermonters visited the Emergency Department (ED) at roughly equal rates (37%). Insured Vermonters are significantly more likely to seek mental health care (34% vs 21%) and use telehealth services (58% vs 43%).

Health Care Cost Burden

Insured Vermonters have fewer cost burdens in 2021 than in past years. Insured Vermonters are less likely to have problems paying medical bills in 2021 than in 2012 (13% in 2021 vs. 21% in 2012). Uninsured Vermonters are significantly more likely to report difficulty paying their medical bills (30%) than insured Vermonters. American Indian or Alaska Native Vermonters (28%) and Vermonters with a disability under the age of 65 (25%) are more likely to live in a household where someone has had problems paying medical bills in the last year.

Insured Vermonters are less likely in 2021 than in 2018 to have needed to use their savings to pay a bill (5% vs. 9%), incur large credit card debt or a loan (3% vs. 6%), or be unable to pay for basic necessities due to medical bills (1% vs. 3%). Insured Vermonters have a similar likelihood of paying a bill >\$500 in 2021 as in 2012 (13% both years). Uninsured Vermonters are also significantly more likely to have to use savings (15% vs 5%), take on debt (10% vs 3%) or be unable to pay for basic necessities due to medical bills (6% vs 1%). American Indian or Alaska Native Vermonters and Vermonters with a disability under the age of 65 are also significantly more likely to have to use savings (14%, 10% respectively), take on debt (16%, 6%) or be unable to pay for basic necessities due to medical bills (8%, 4%).

Uninsured Vermonters spent, on average, more on out-of-pocket medical expenses than their insured counterparts. On average, uninsured Vermont residents spent almost \$3,700 in the prior 12 months compared to less than \$3,100 spent by insured Vermonters. In comparing these costs, it's important to note the typical uninsured Vermonter tends to be younger – and presumably healthier – than the typical insured Vermonter.

Executive Summary

Health Care Cost Burden, continued

Vermonters ages 18 to 64 years old who met the Commonwealth Fund’s definitions of underinsured had a similar distribution of premium costs as those not deemed underinsured. Underinsured and not underinsured were similarly likely to have monthly premiums under \$100 (14%, 14% respectively) and over \$750 (23%, 20%). Those deemed underinsured spent, on average, about two and a half times more on out-of-pocket costs than those not deemed underinsured. In the prior 12 months residents 18 to 64 years old deemed underinsured spent an average of \$4,655 out-of-pocket on healthcare compared to less than \$1,900 among those that did not meet one of the definitions.

Private Health Insurance

In 2021, 52% of residents (318,800) report having private health insurance coverage either alone or combined with other types of coverage. This is a significant decrease from both 2012 and 2014.

Over one third of Vermonters 18 to 64 years old report having a health savings account (HSA). Vermonters in 2021 are significantly more likely to have an HSA than in 2014 or 2012. On average residents contribute approximately \$2,600 to their health savings account. Thirteen percent of Vermont residents with private insurance have a health reimbursement account as part of their policy in 2021 with employers contributing approximately \$2,600.

How Vermonters pay for health care varies. Specifically, monthly premiums, or the amount people pay to maintain their health insurance, vary widely. One in seven (14%) households with private insurance pay \$100 or less toward the cost of their monthly premium, while one in five (21%) pay more than \$750. The average household with private insurance pays \$505 toward their monthly premium, down from \$538 in 2018 (\$597 if adjusted for inflation).

Deductibles also vary widely -- one in four (26%) households with private insurance have an annual deductible of no more than \$1,000, while two in five (41%) have a deductible over \$4,000.

Nearly two-fifths (38%) of Vermonters with private insurance have a deductible equal to at least 5% of household income, up from 32% in 2018.

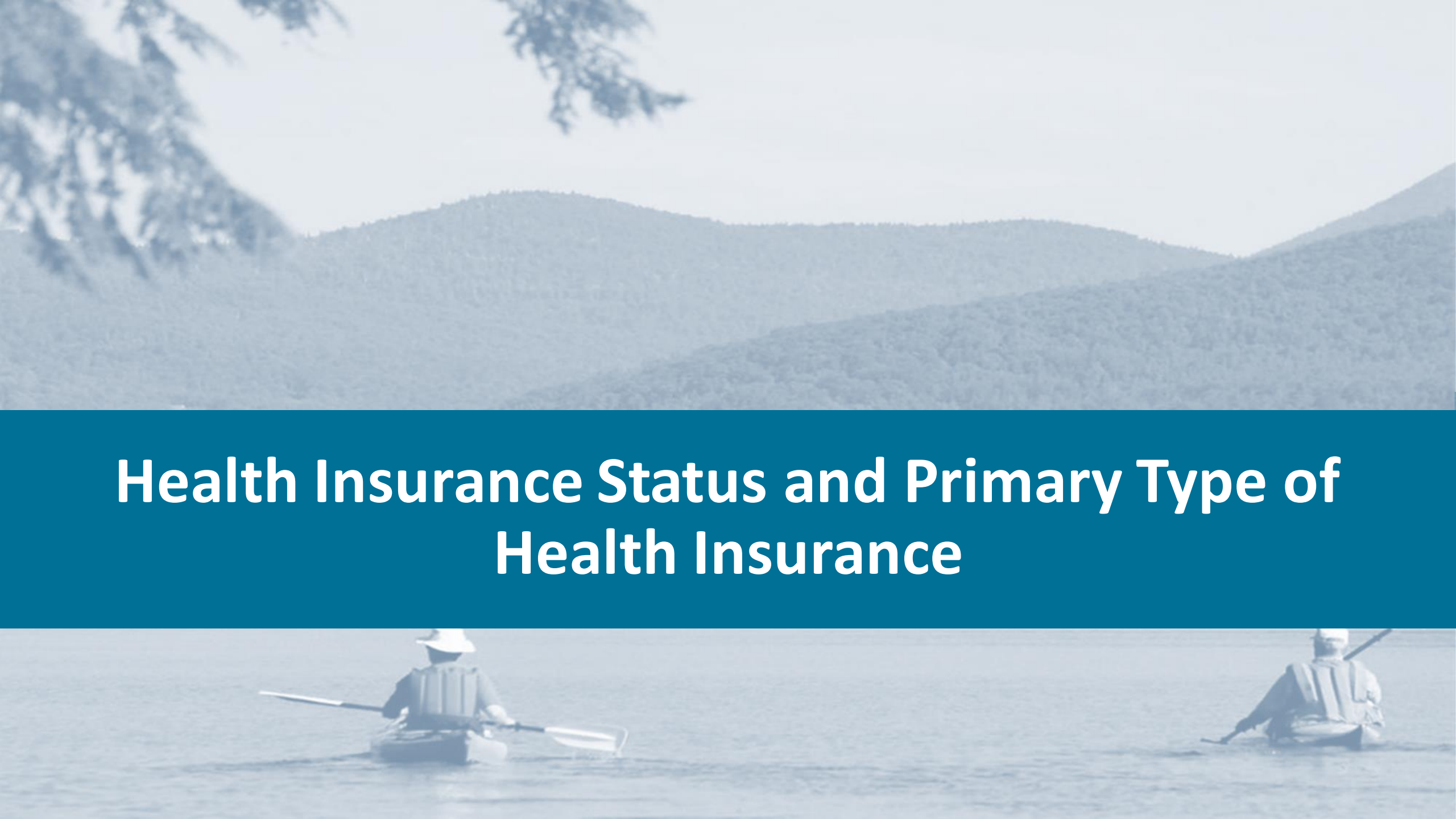
Executive Summary

Private Health Insurance, continued

Over one-third (34%) of Vermonters 18 to 64 years old with private insurance report having a health savings account (HSA) in 2021, significantly more likely than in 2014 or 2012. On average residents contribute approximately \$2,600 to their health savings account. Thirteen percent of Vermont residents with private insurance have a health reimbursement account as part of their policy in 2021 with employers contributing approximately \$2,600.

Medicaid

In 2021, 30% of Vermonters (182,800) report being enrolled in Medicaid or Dr. Dynasaur either alone or combined with other types of coverage).

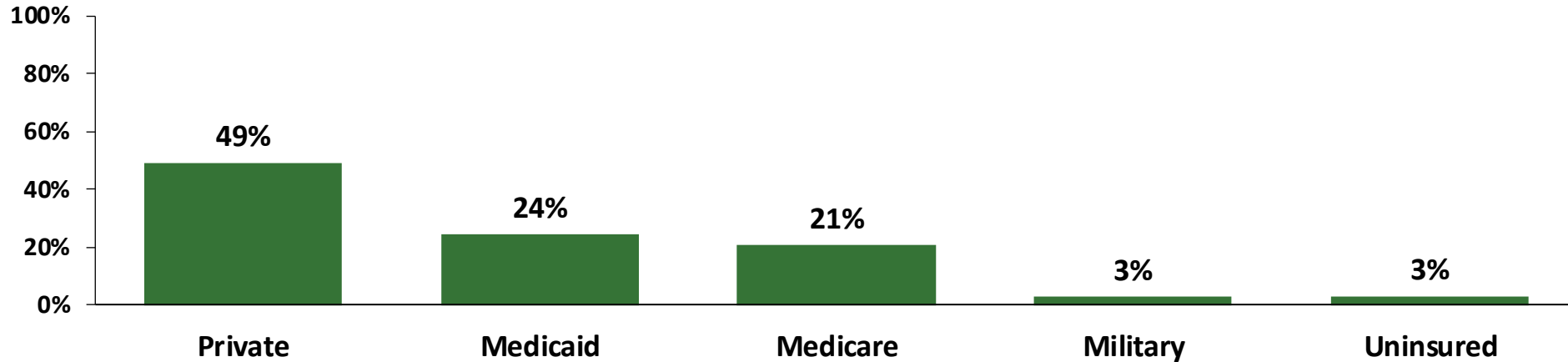
The image shows a serene outdoor scene. In the foreground, two people are kayaking on a calm body of water. They are wearing life jackets and hats. The background features rolling hills covered in dense green forest under a clear sky. The overall tone is peaceful and natural.

Health Insurance Status and Primary Type of Health Insurance

Primary Type of Coverage

In 2021, 97% (599,400) of Vermonters report having a primary source of health insurance. The remaining 3% (19,400) of people are uninsured. Almost half (49%), of Vermonters (304,600) have private health insurance as their primary source. About one-quarter (24% or 150,000) are enrolled in Medicaid, while 21% (128,200) are enrolled in Medicare as a primary source. Three percent report their primary insurance as being via the military, representing 16,600 of those insured.

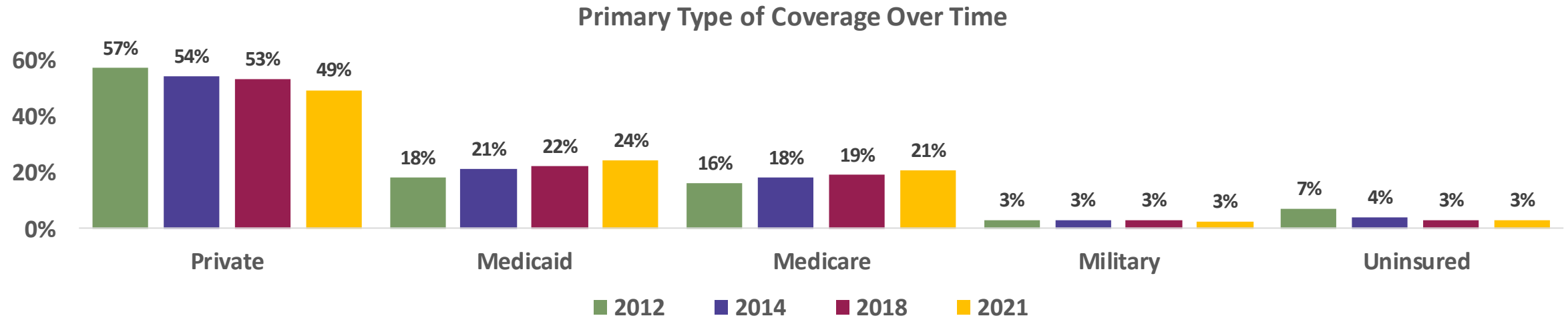
Primary Type of Insurance



| Insurance Type | Estimated Population |
|----------------|----------------------|
| Private | 304,600 |
| Medicaid | 150,000 |
| Medicare | 128,200 |
| Military | 16,600 |
| Uninsured | 19,400 |

Primary Type of Coverage Over Time

In 2021, the percentage of Vermonters reporting their primary source of health insurance as private insurance (49%) has significantly decreased since 2012 (57%). The percentage reporting Medicaid has significantly increased since 2012 (24% in 2021 compared to 18% in 2012) as has the percentage reporting Medicare (21% in 2021 compared to 16% in 2012).

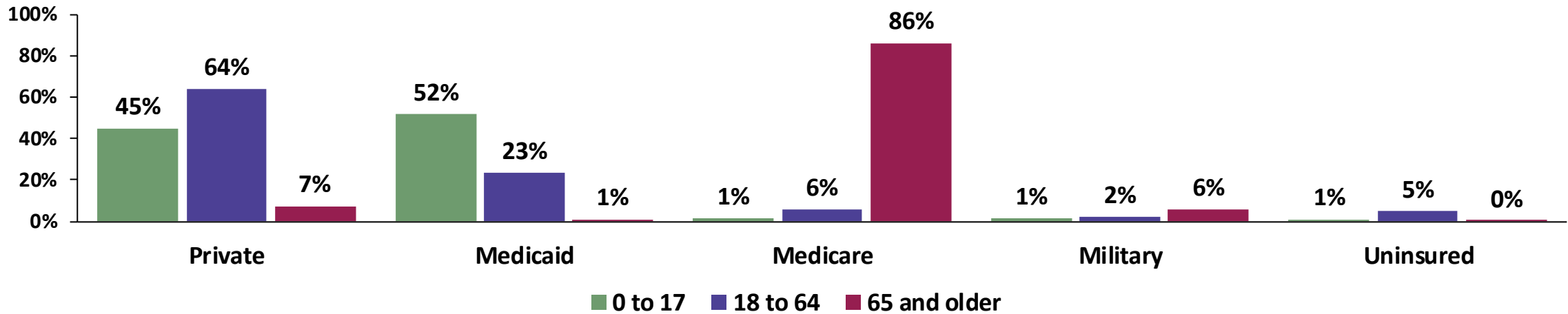


| Insurance Type | Estimated Population Over Time | | | |
|----------------|--------------------------------|---------|---------|---------|
| | 2012 | 2014 | 2018 | 2021 |
| Private | 355,900 | 341,100 | 329,800 | 304,600 |
| Medicaid | 111,800 | 132,800 | 136,900 | 150,000 |
| Medicare | 100,500 | 110,900 | 121,100 | 128,200 |
| Military | 15,500 | 18,600 | 16,900 | 16,600 |
| Uninsured | 42,800 | 23,200 | 19,800 | 19,400 |

Primary Type of Coverage by Age

Over half (52%) of Vermonters 0 to 17 years old (60,000) are enrolled in Medicaid as their primary source of insurance. Sixty-four percent of adults aged 18 to 64 (243,400) report having a private source as their primary coverage, while 86% of adult residents ages 65 and older (104,800) are enrolled in Medicare.

Primary Type of Insurance by Age

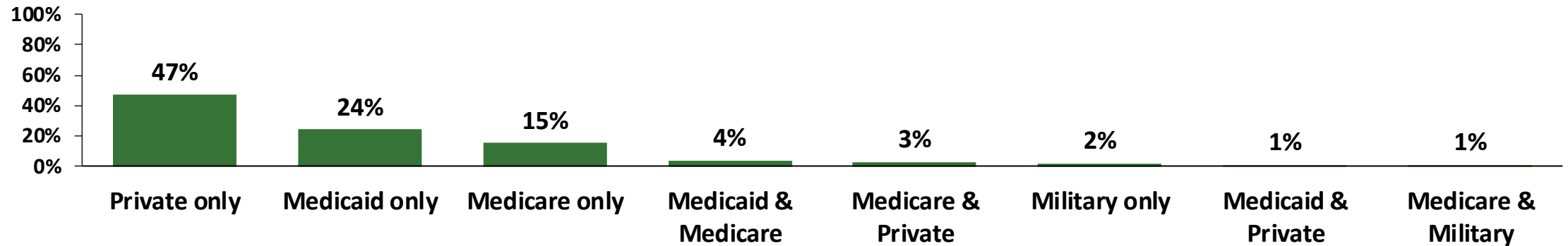


| Estimated Population by Age | | | | | |
|-----------------------------|---------|----------|----------|----------|-----------|
| Age | Private | Medicaid | Medicare | Military | Uninsured |
| 0 to 17 | 52,200 | 60,000 | 1,500 | 1,600 | 1,200 |
| 18 to 64 | 243,400 | 89,000 | 21,800 | 8,200 | 18,100 |
| 65 and older | 9,000 | 1,000 | 104,800 | 6,900 | 100 |

Primary Type of Coverage Detail

Eighty-seven percent of Vermont residents (540,900) have only one type of insurance, while 9% (58,400) have two or more types of insurance. Almost half (47%) of Vermont residents (291,400) have only private health insurance, while 24% (148,400) are enrolled only in Medicaid, 15% (90,700) were only enrolled in Medicare, and 2% (10,400) use Military as a primary source. Four percent report having both Medicaid and Medicare (23,700), 3% use Medicare and private insurance (15,900). Lastly, 1% of the Vermont population use both Medicaid and Private (7,300), or Medicaid and Military (5,000).

Percent of Vermonters With Each Insurance Type, Including Combinations of Vermonters with Insurance



| Insurance Type | Estimated Population |
|---------------------|----------------------|
| Private only | 291,400 |
| Medicaid only | 148,400 |
| Medicare only | 90,700 |
| Medicaid & Medicare | 23,700 |
| Medicare & Private | 15,900 |
| Military only | 10,400 |
| Medicaid & Private | 7,300 |
| Medicare & Military | 5,000 |



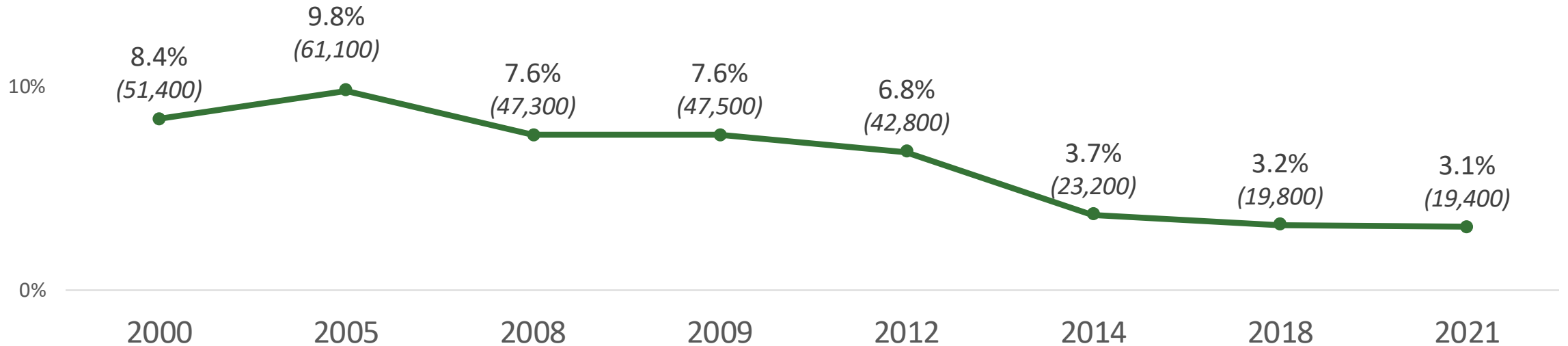
Uninsured Vermonters



Uninsured Vermonters Over Time

Just three percent of Vermonters report no health care coverage (approximately 19,400 persons). This continues to be the lowest level of uninsured Vermonters in the survey since 2000. As of 2021, 3% of Vermont residents were uninsured (19,400). The overall percentage of uninsured Vermonters has not changed since 2018.

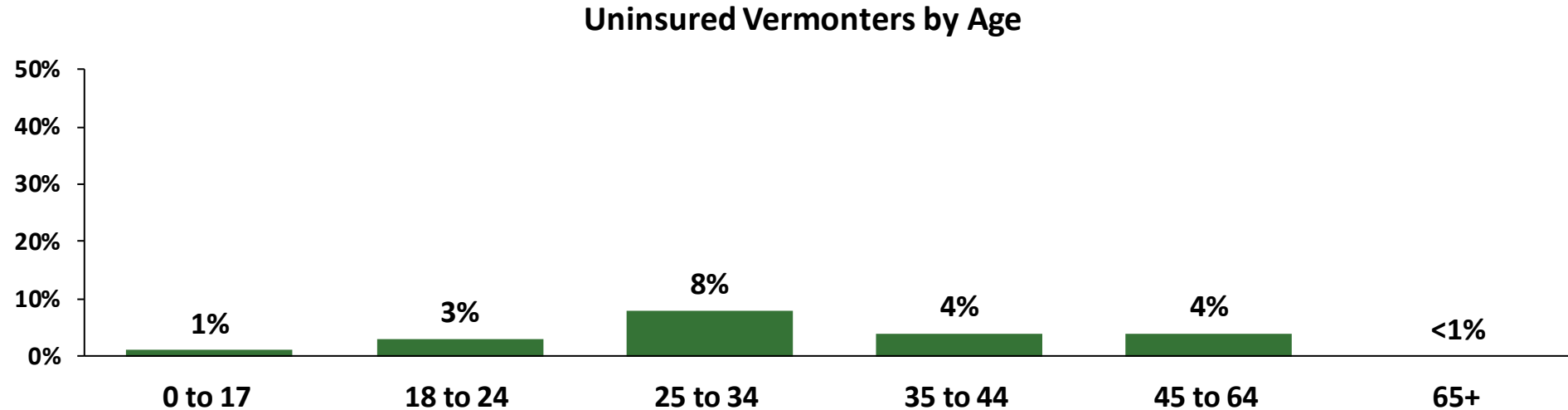
Uninsured Vermonters Over Time



| Year | Estimated Population | Year | Estimated Population |
|------|----------------------|------|----------------------|
| 2000 | 51,400 | 2012 | 42,800 |
| 2005 | 61,100 | 2014 | 23,200 |
| 2008 | 47,300 | 2018 | 19,800 |
| 2009 | 47,500 | 2021 | 19,400 |

Uninsured Vermonters by Age

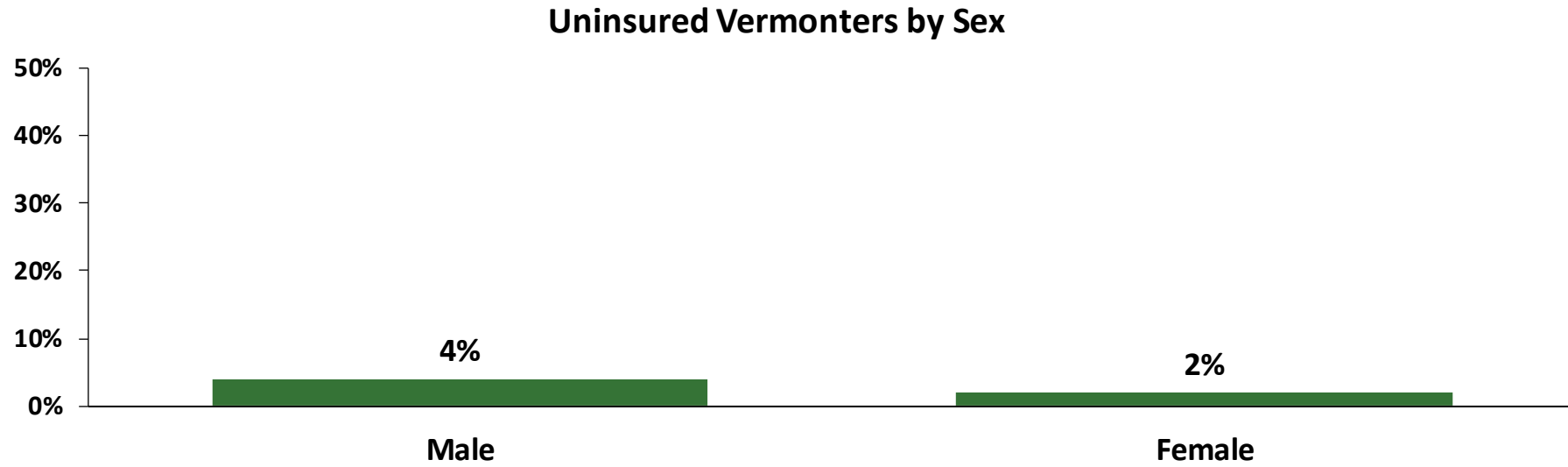
In 2021, 8% of Vermonters’ 25 to 34 years old (6,400) were uninsured, significantly higher rate than other age groups. Four percent of 35 to 44 (2,600) and 45- to 64-year-olds (7,400) were uninsured. This compares to 1% of Vermont youth, 0 to 17 years old (1,200), and less than 1% of Vermont’s seniors aged 65 and older (100) who were uninsured.



| Age | Estimated Population |
|----------|----------------------|
| 0 to 17 | 1,200 |
| 18 to 24 | 1,700 |
| 25 to 34 | 6,400 |
| 35 to 44 | 2,600 |
| 45 to 64 | 7,400 |
| 65+ | 100 |

Uninsured Vermonters by Sex

In 2021, 4% of Vermont men (12,900) and 2% of Vermont-women (6,500) were uninsured.

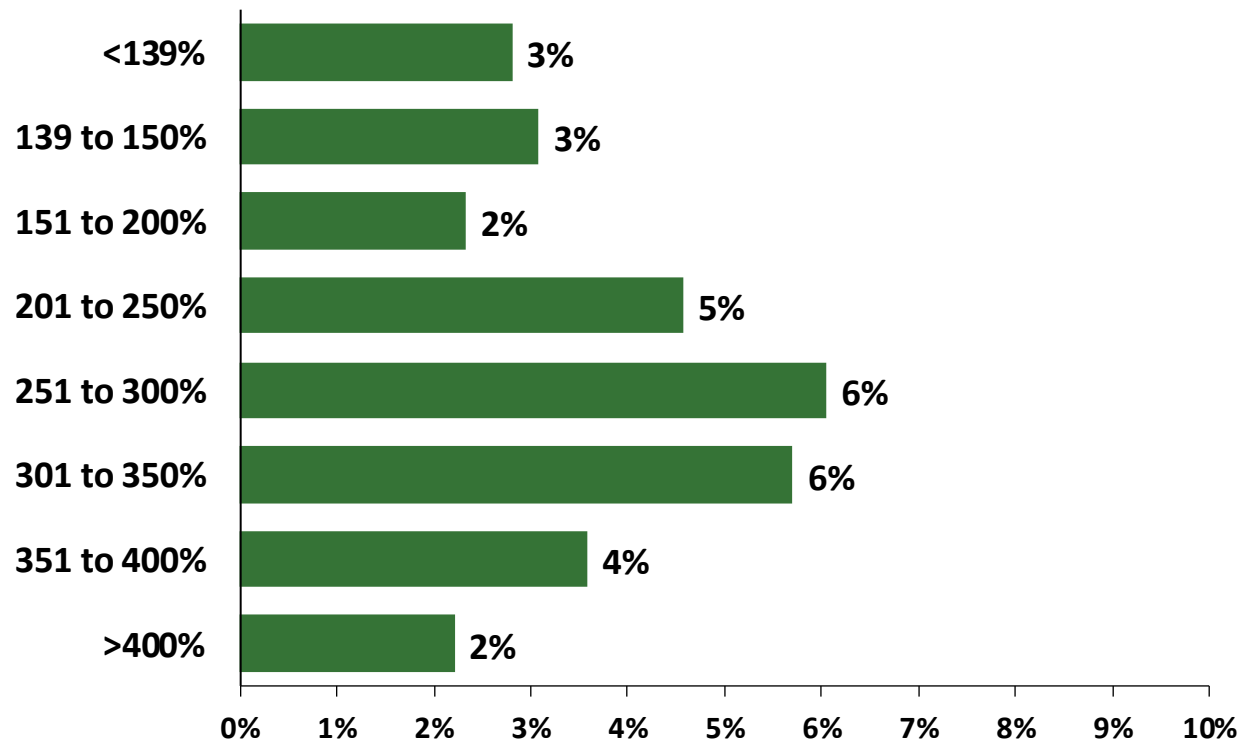


| Gender | Estimated Population |
|--------|----------------------|
| Male | 12,900 |
| Female | 6,500 |

Uninsured Vermonters by Federal Poverty Level

The rate of uninsured Vermonters in 2021 was highest among those with an annual income between 251% to 350% of the FPL with 6% (2,800) uninsured. This is significantly higher than the overall state rate (3%).

Uninsured by Federal Poverty Level

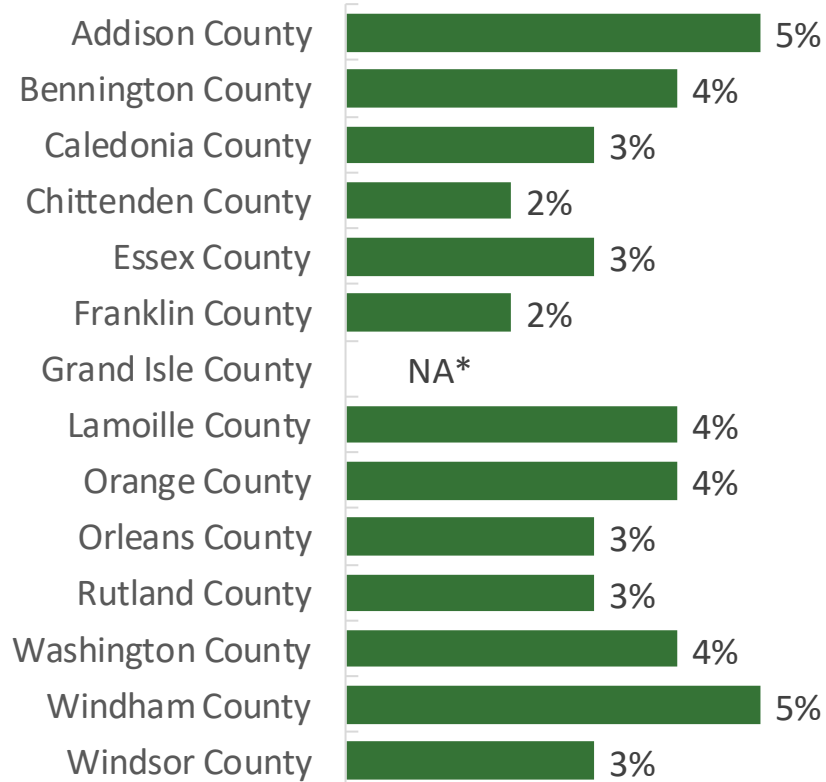


| Percent of FPL | Estimated Population |
|----------------|----------------------|
| <139% | 3,700 |
| 139 to 150% | 300 |
| 151 to 200% | 1,200 |
| 201 to 250% | 2,000 |
| 251 to 300% | 2,800 |
| 301 to 350% | 2,400 |
| 351 to 400% | 1,300 |
| >400% | 5,700 |

Uninsured Vermonters by County

Windham County had the highest rate of uninsured at 5% (2,200) followed by Addison County with slightly less than 5% (1,700) and Bennington County with 4% (1,400) of residents uninsured.

Uninsured Vermonters by County

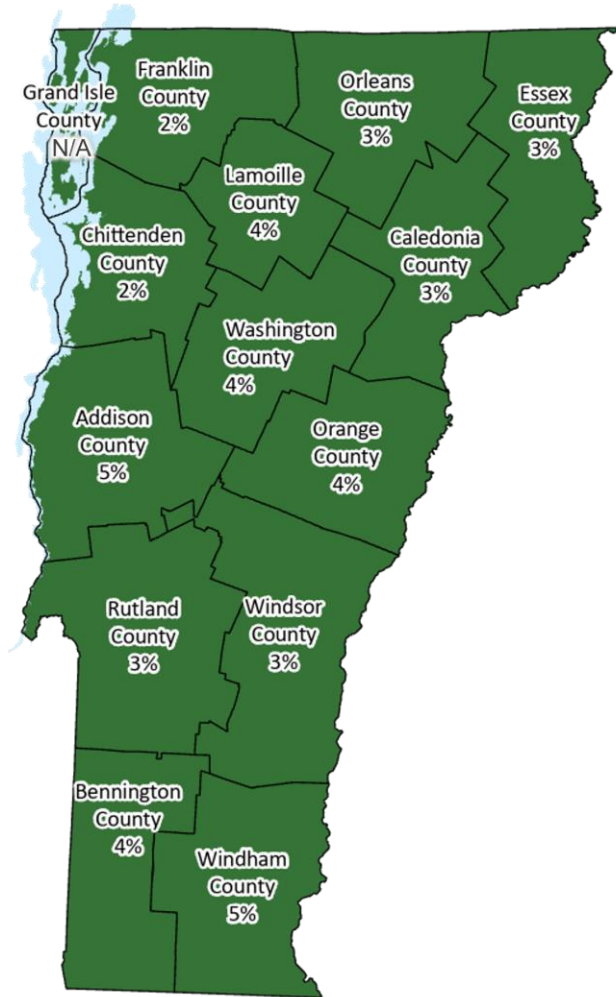


| County | Estimated Population |
|-------------------|----------------------|
| Addison County | 1,700 |
| Bennington County | 1,400 |
| Caledonia County | 900 |
| Chittenden County | 3,400 |
| Essex County | 200 |
| Franklin County | 1,100 |
| Grand Isle County | NA* |
| Lamoille County | 1,000 |
| Orange County | 1,000 |
| Orleans County | 800 |
| Rutland County | 1,900 |
| Washington County | 2,200 |
| Windham County | 2,200 |
| Windsor County | 1,600 |

*Too few survey respondents to report

Uninsured Vermonters by County

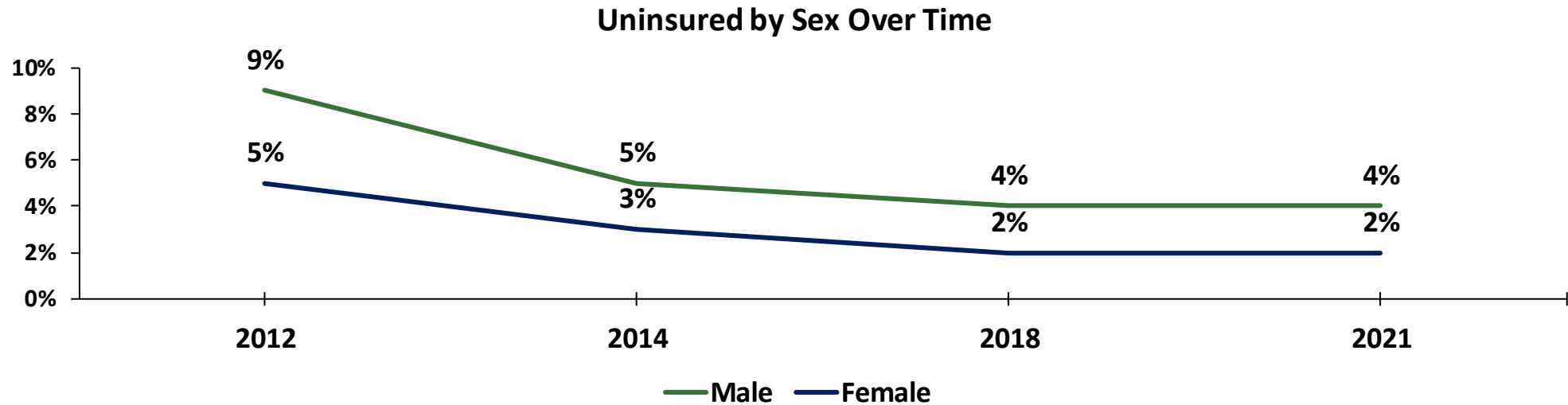
Windham County had the highest rate of uninsured at 5% (2,200) followed by Addison County with slightly less than 5% (1,700) and Bennington County with 4% (1,400) of residents uninsured.



| County | Estimated Population |
|-------------------|----------------------|
| Addison County | 1,700 |
| Bennington County | 1,400 |
| Caledonia County | 900 |
| Chittenden County | 3,400 |
| Essex County | 200 |
| Franklin County | 1,100 |
| Grand Isle County | N/A |
| Lamoille County | 1,000 |
| Orange County | 1,000 |
| Orleans County | 800 |
| Rutland County | 1,900 |
| Washington County | 2,200 |
| Windham County | 2,200 |
| Windsor County | 1,600 |

Uninsured Vermonters by Sex

The percentage of uninsured male Vermonters decreased from 2012 (27,600) to 2021 but has not changed significantly since 2018, remaining at 4%. The rate of uninsured females has decreased since 2012. Compared to 2018, the overall female rate (2% or 6,500) has not changed.

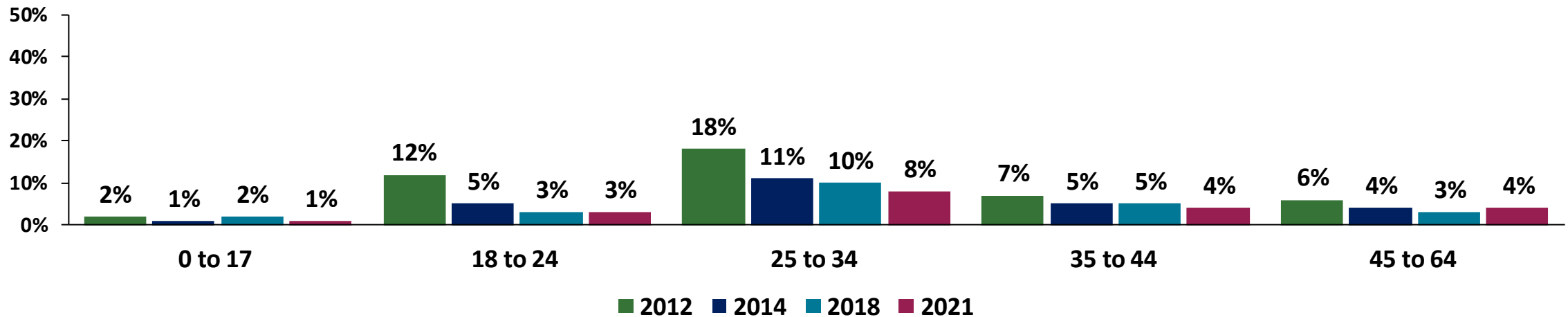


| Estimated Population Over Time | | | | |
|--------------------------------|---------|--------|--------|--------|
| Sex | 2012 | 2014 | 2018 | 2021 |
| Male | 27,600 | 15,200 | 13,200 | 12,900 |
| Female | 152,000 | 8,000 | 6,700 | 6,500 |

Uninsured Vermonters by Age

Since 2012, Vermonters aged 25 to 34 (6,400) had the largest decrease in the rate of uninsured, descending by 10 percentage points. Rates among those 18 to 24 years old have declined by 9 percentage points since 2012.

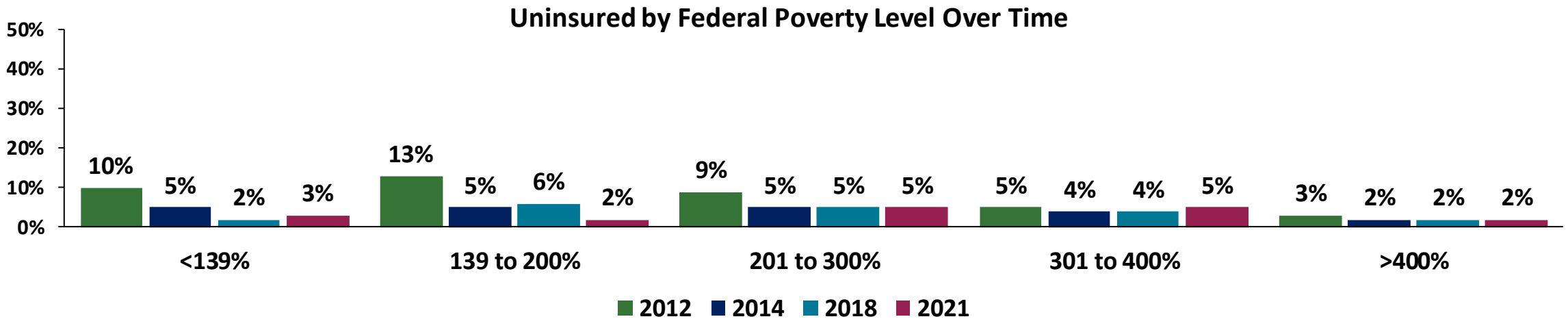
Uninsured by Age Over Time



| Age | Estimated Population Over Time | | | |
|----------|--------------------------------|-------|-------|-------|
| | 2012 | 2014 | 2018 | 2021 |
| 0 to 17 | 2,800 | 1,300 | 1,800 | 1,200 |
| 18 to 24 | 9,300 | 2,900 | 1,900 | 1,700 |
| 25 to 34 | 12,800 | 7,900 | 7,100 | 6,400 |
| 35 to 44 | 5,400 | 3,700 | 3,700 | 2,600 |
| 45 to 64 | 12,100 | 7,100 | 4,900 | 7,400 |

Uninsured Vermonters by Federal Poverty Level

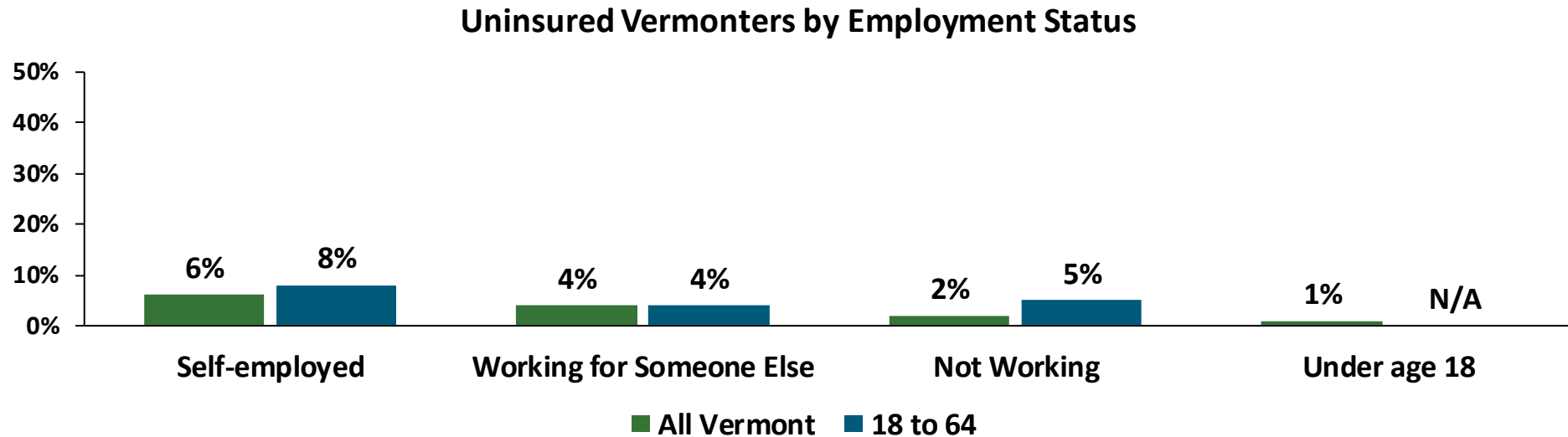
Among those with annual incomes between 139% and 200% of the FPL, the rated of uninsured has decreased 11 percentage points between 2012 (a rate of 13%) and 2021 (2%).



| Federal Poverty Level | Estimated Population Over Time | | | |
|-----------------------|--------------------------------|-------|-------|-------|
| | 2012 | 2014 | 2018 | 2021 |
| <139% | 14,100 | 6,900 | 3,200 | 3,700 |
| 139 to 150% | 1,200 | 400 | 700 | 300 |
| 151 to 200% | 5,900 | 3,100 | 3,000 | 1,200 |
| 201 to 250% | 4,000 | 2,500 | 3,100 | 2,000 |
| 251 to 300% | 5,600 | 2,200 | 1,500 | 2,800 |
| 301 to 350% | 2,800 | 2,200 | 2,200 | 2,400 |
| 351 to 400% | 1,900 | 900 | 1,200 | 1,300 |
| >400% | 7,200 | 4,900 | 4,900 | 5,700 |

Uninsured Vermonters by Employment Status

Uninsured rates are highest among Vermonters who are self-employed (6%), significantly higher than those working for someone else. Those employed by someone else have an uninsured rate of 4%. The rate among self-employed Vermonters aged 18 to 64 is 8%, while 5% of non-working adults aged 18 to 64 are uninsured.

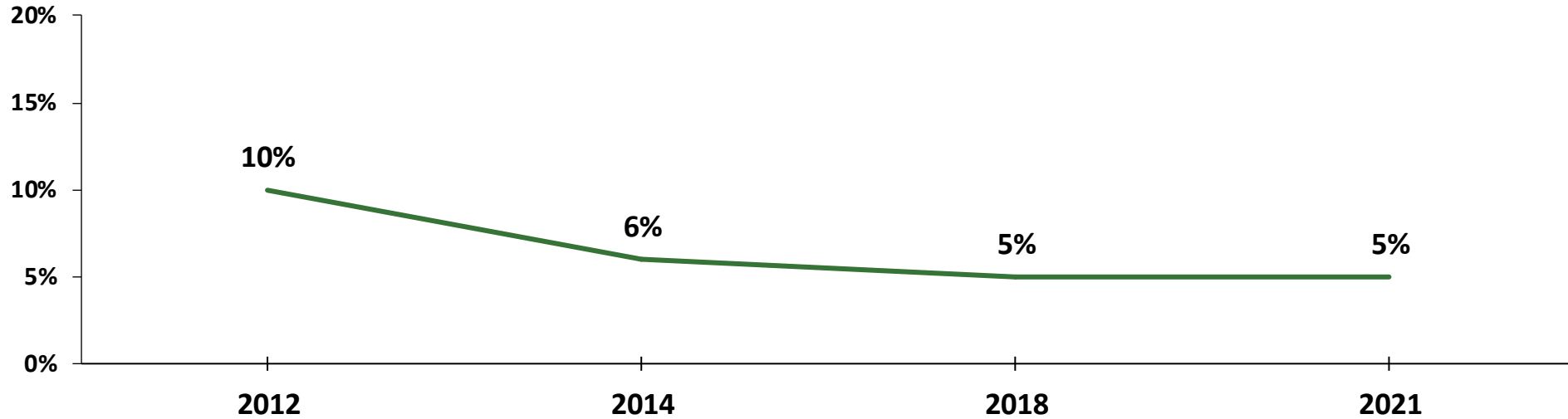


| Employment Status | Estimated Population | |
|--------------------------|----------------------|----------|
| | All Vermonters | 18 to 64 |
| Self-employed | 4,500 | 4,400 |
| Working for Someone Else | 9,700 | 9,700 |
| Not Working | 4,000 | 4,000 |
| Under age 18 | 1,200 | N/A |

Uninsured Rate Among Employed Vermont Residents Aged 18 to 64 Over Time

The uninsured rate among working Vermonters 18 to 64 years old has decreased five percentage points from 10% in 2012 (30,000) to 5% in 2021 (14,100).

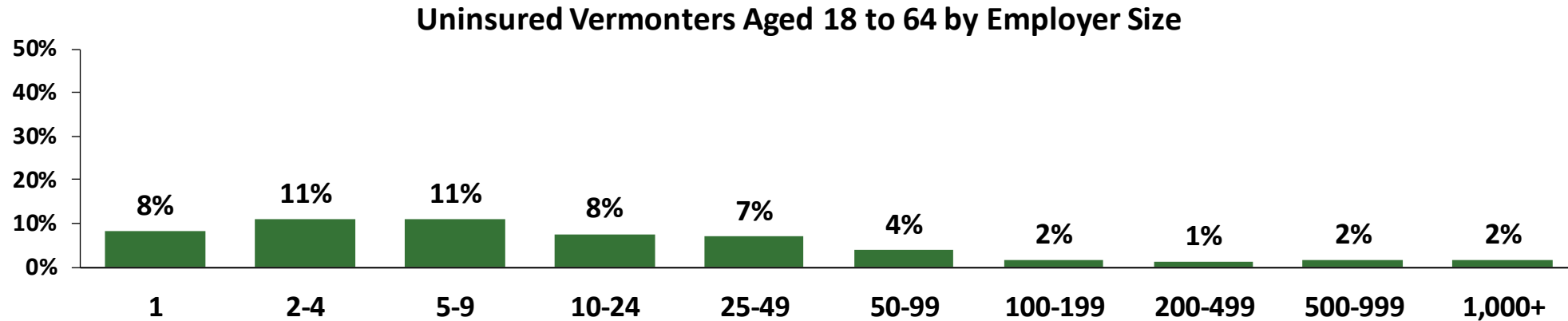
Uninsured Rate Among Employed Vermont Residents Age 18 to 64 Over Time



| Year | Estimated Population |
|------|----------------------|
| 2012 | 30,000 |
| 2014 | 17,200 |
| 2018 | 15,200 |
| 2021 | 14,100 |

Uninsured Vermonters Aged 18 to 64 by Employer Size

The highest rate of uninsured among working Vermonters 18 to 64 years old is at smaller companies (fewer than 50 employees). Among the self-employed with no other employees, 8% are uninsured. In companies with 2-9 employees 11% are uninsured, 8% among companies with 10 to 24 employees, and 7% among companies with 25 to 49 employees.

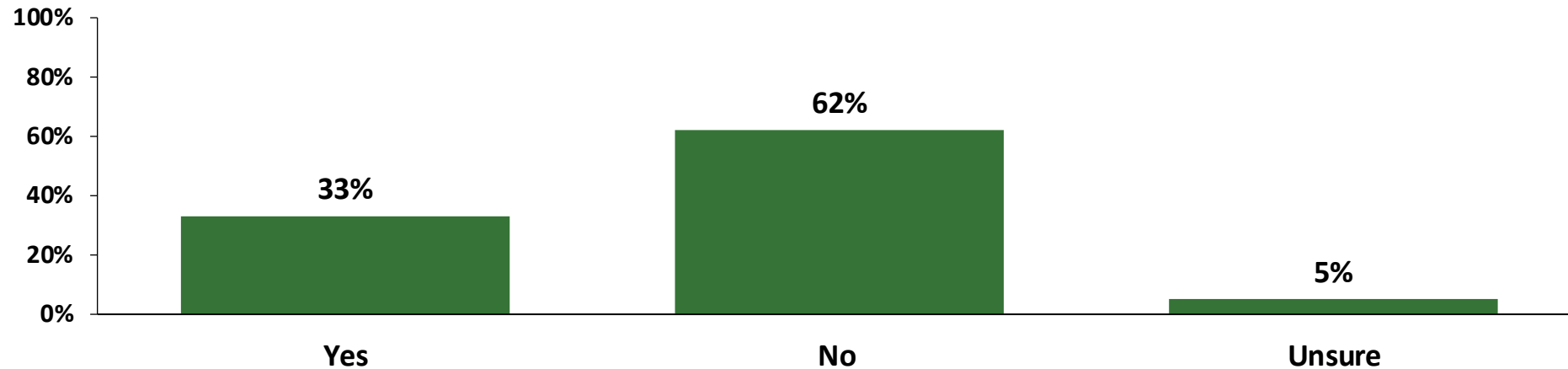


| Employer Size | Estimated Population |
|---------------|----------------------|
| 1 | 2,700 |
| 2-4 | 2,300 |
| 5-9 | 2,200 |
| 10-24 | 2,400 |
| 25-49 | 1,200 |
| 50-99 | 800 |
| 100-199 | 400 |
| 200-499 | 400 |
| 500-999 | 300 |
| 1,000+ | 1,400 |

Access to Employer Sponsored Insurance Available Among Uninsured Working Vermonters Aged 18 to 64

Among uninsured working Vermonters aged 18 to 64, 33% have access to Employer Sponsored Insurance (ESI). Only 11% of the uninsured working for an organization with fewer than 25 employees have access to ESI compared to 88% of the uninsured working for companies with 200 or more employees. Seventy-six percent of those with access to ESI have not enrolled in their employer’s plan due to cost.

Access to Employer Sponsored Insurance Available Among Uninsured Working Vermonters Aged 18 to 64

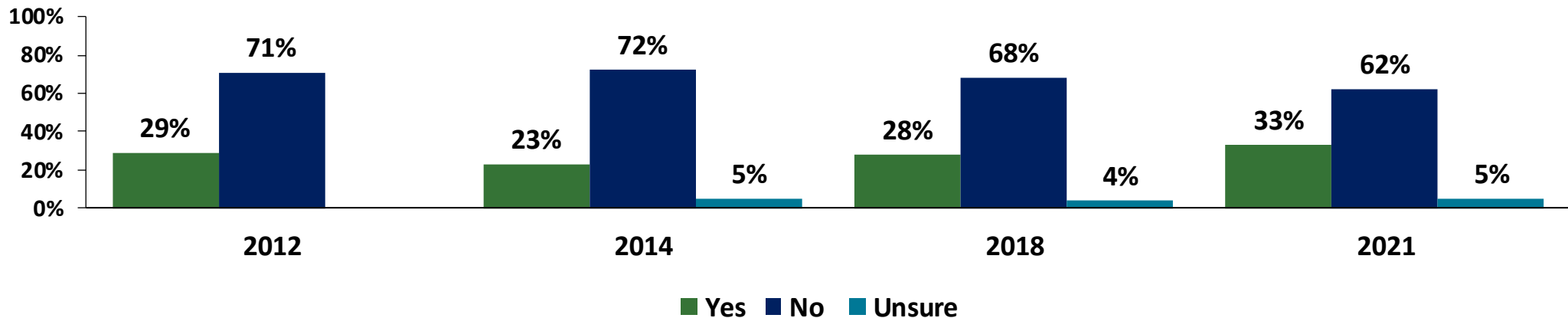


| Response | Estimated Population |
|----------|----------------------|
| Yes | 3,700 |
| No | 7,100 |
| Unsure | 600 |

Access to Employer Sponsored Insurance Available Among Uninsured Working Vermonters Aged 18 to 64 Over Time

The percentage of uninsured working Vermonters aged 18 to 64 with access to ESI has not changed significantly since 2012.

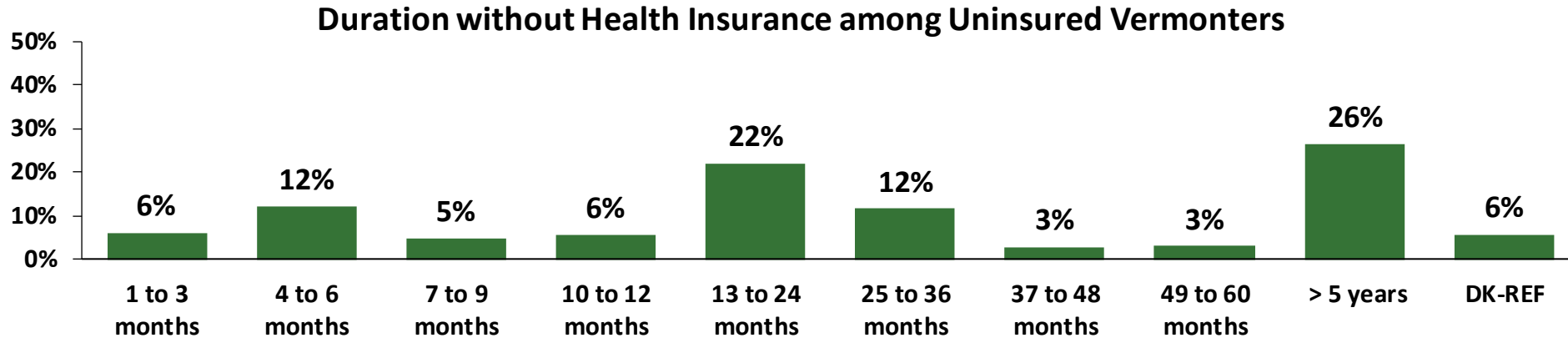
Access to Employer Sponsored Insurance Available Among Uninsured Working Vermonters Aged 18 to 64 Over Time



| | Estimated Population Over Time | | | |
|----------|--------------------------------|-------|-------|-------|
| Response | 2012 | 2014 | 2018 | 2021 |
| Yes | 8,800 | 3,900 | 4,200 | 3,700 |
| No | 21,000 | 3,900 | 4,200 | 7,100 |
| Unsure | 0 | 800 | 600 | 600 |

Duration without Health Insurance, Uninsured Vermonters

In 2021, 29% of uninsured Vermonters have been without health insurance for a year or less, while 26% have been without coverage for five or more years. When asked about prior coverage, 43% report prior coverage through private health insurance through an employer while 23% had prior coverage through Medicaid or Green Mountain Care.

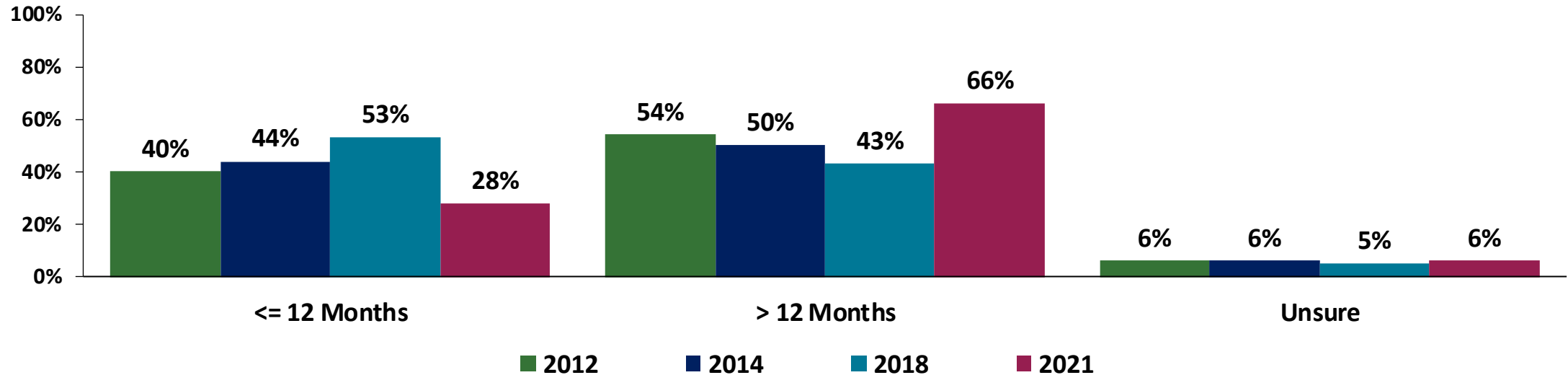


| Duration of Time | Estimated Population |
|------------------|----------------------|
| 1 to 3 months | 1,200 |
| 4 to 6 months | 2,300 |
| 7 to 9 months | 900 |
| 10 to 12 months | 1,100 |
| 13 to 24 months | 4,300 |
| 25 to 36 months | 2,200 |
| 37 to 48 months | 500 |
| 49 to 60 months | 600 |
| > 5 years | 5,100 |
| DK-REF | 1,100 |

Duration without Health Insurance, Uninsured Vermonters Over Time

When comparing the percentage of uninsured Vermonters over time, the percentage of the uninsured without coverage for a year or more has increased since 2018. In 2018, 43% of the uninsured reported a lack of health insurance coverage for more than 12 months. This percentage increased to 66% in 2021.

Duration without Health Insurance, Uninsured Vermonters Over Time

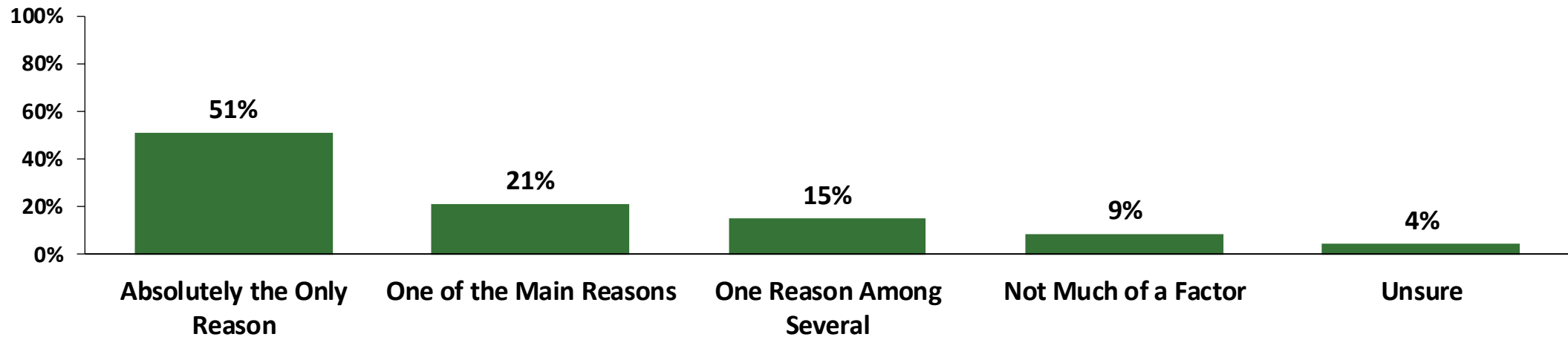


| Estimated Population Over Time | | | |
|--------------------------------|-------------|-------------|--------|
| Year | ≤ 12 Months | > 12 Months | Unsure |
| 2012 | 17,300 | 23,000 | 2,500 |
| 2014 | 10,100 | 11,700 | 1,400 |
| 2018 | 10,400 | 9,400 | 1,000 |
| 2021 | 5,518 | 12,753 | 1,096 |

Importance of Cost in Not Having Health Insurance Among Uninsured Vermont Residents

Cost is still the primary barrier to health insurance coverage for uninsured Vermonters. More than half (51%) of the uninsured identify cost as the only reason they do not have insurance, while 21% indicate cost is one of the main reasons, and 15% say it is one reason among many for being uninsured. Only 9% indicate that cost is not much of a factor in their not having health insurance coverage.

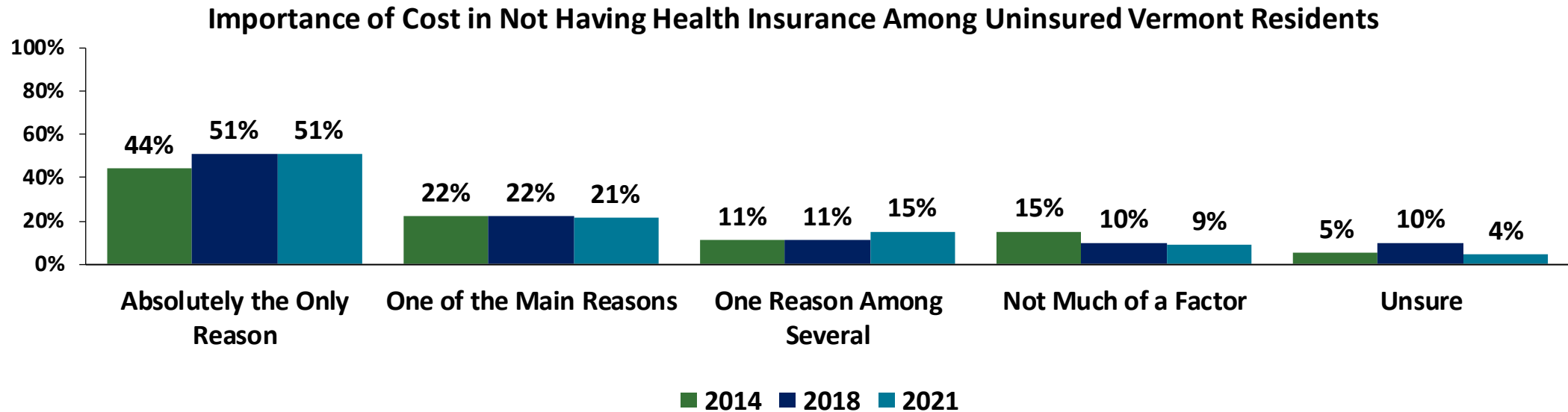
Importance of Cost in Not Having Health Insurance Among Uninsured Vermont Residents



| Response | Estimated Population |
|-----------------------|----------------------|
| Only Reason | 9,800 |
| One Main Reason | 4,100 |
| One Reason of Several | 2,900 |
| Not Much of a Factor | 1,700 |
| Unsure | 800 |

Importance of Cost in Not Having Health Insurance Among Uninsured Vermont Residents

The percentage of uninsured Vermonters reporting cost as the only or main reason they lack health insurance coverage in 2021 is comparable to 2018.

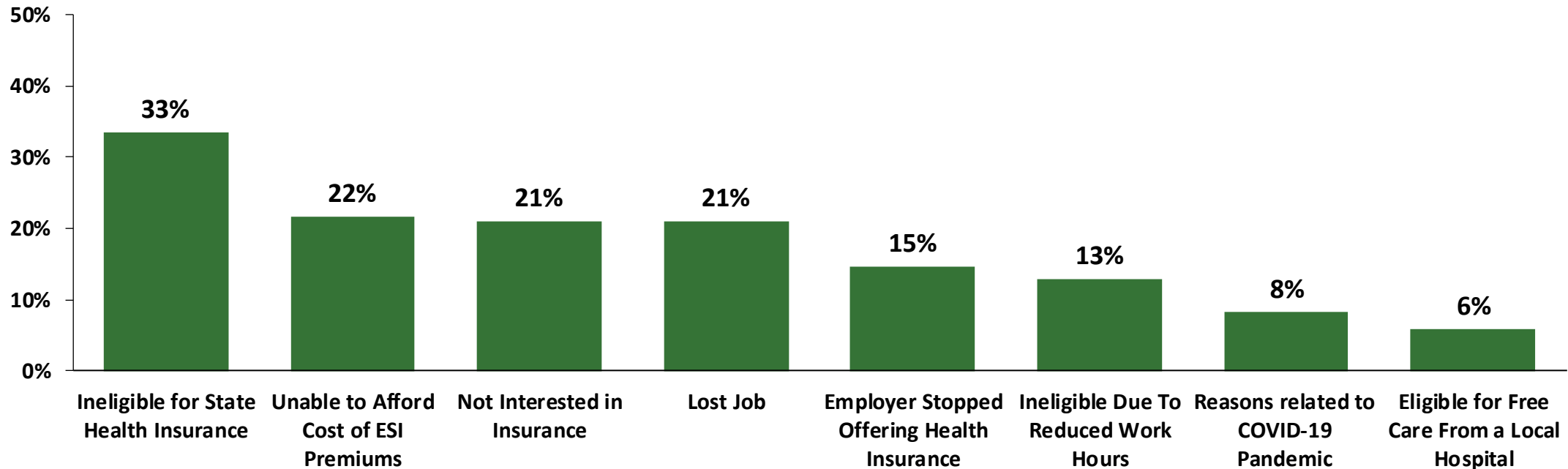


| Response | Estimated Population Over Time | | |
|-----------------------|--------------------------------|--------|-------|
| | 2014 | 2018 | 2021 |
| Only Reason | 10,000 | 10,100 | 9,800 |
| One Main Reason | 5,000 | 4,400 | 4,100 |
| One Reason of Several | 2,500 | 2,100 | 2,900 |
| Not Much of a Factor | 3,500 | 2,000 | 1,700 |
| Unsure | 1,200 | 600 | 800 |

Main Reasons for Not Having Health Insurance Among Uninsured

Thirty-three percent of uninsured Vermonters indicate they lack health insurance because they are ineligible for state health insurance coverage, 22% cannot afford to pay ESI premiums, 21% are not interested in insurance, and 21% lost their insurance due to job loss. These percentages are comparable to the percentages in 2018. Eight percent of uninsured Vermonters report COVID-19 as a reason for the loss of health insurance coverage.

Main Reasons for Not Having Health Insurance Among Uninsured Vermont Residents



Main Reasons for Not Having Health Insurance Among Uninsured Vermont Residents

The percentage of uninsured Vermonters in 2021 indicating they were not eligible for state health insurance or that they were no longer able to afford the cost of premiums is comparable to 2018.

| Reasons* | Rates Over Time | | | Estimated Population Over Time | | |
|---|-----------------|------|------|--------------------------------|-------|-------|
| | 2014 | 2018 | 2021 | 2014 | 2018 | 2021 |
| Not Eligible for State Health Insurance | 21% | 34% | 33% | 4,900 | 6,700 | 6,500 |
| No Longer Able to Afford Cost of Premiums for ESI | 25% | 26% | 22% | 5,800 | 5,100 | 4,200 |
| Person in Family Lost Job | 21% | 20% | 21% | 4,800 | 3,900 | 4,000 |
| No Longer Eligible for Insurance Because of Reduced Hours | 10% | 11% | 13% | 2,400 | 2,200 | 2,500 |
| Employer Stopped Offering Health Insurance | 15% | 10% | 15% | 3,500 | 2,000 | 2,800 |

*Only survey questions asked in each year are included in this table.

Reasons Lost Coverage or Became Ineligible for Medicaid, Green Mountain Care or Dr. Dynasaur

Among the uninsured Vermonters that indicate they lost health insurance coverage through Medicaid or Green Mountain care, 25% report they lost coverage because they were not sure what information they needed to provide and 21% indicate that they could not provide the information that was requested.

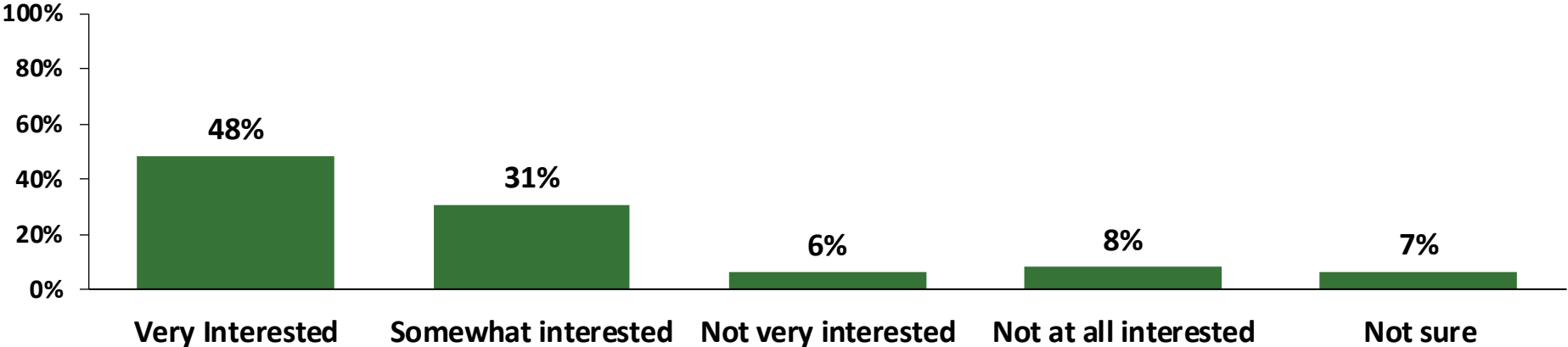
Reason Person lost coverage or became ineligible for Medicaid, Green Mountain Care or Dr. Dynasaur.

| Reasons | Rates | Estimated Population |
|---|-------|----------------------|
| Our family didn't know what information they needed to provide | 25% | 1,700 |
| Information was requested and our family could not provide it | 21% | 1,400 |
| Our family didn't know how to submit the information or who to send it to | 20% | 1,400 |
| There was too much documentation required | 18% | 1,200 |
| The right documentation was not submitted | 18% | 1,200 |
| Our family didn't know how to get the information that was requested | 13% | 900 |
| None of these | 62% | 4,300 |

Interest in Enrolling in State Health Insurance Programs

Among uninsured Vermonters, 48% are very interested in enrolling in a state health insurance program and another 31% are somewhat interested in enrolling in state health insurance programs.

Interest in Enrolling in State Health Insurance Programs Among Uninsured Vermont Residents

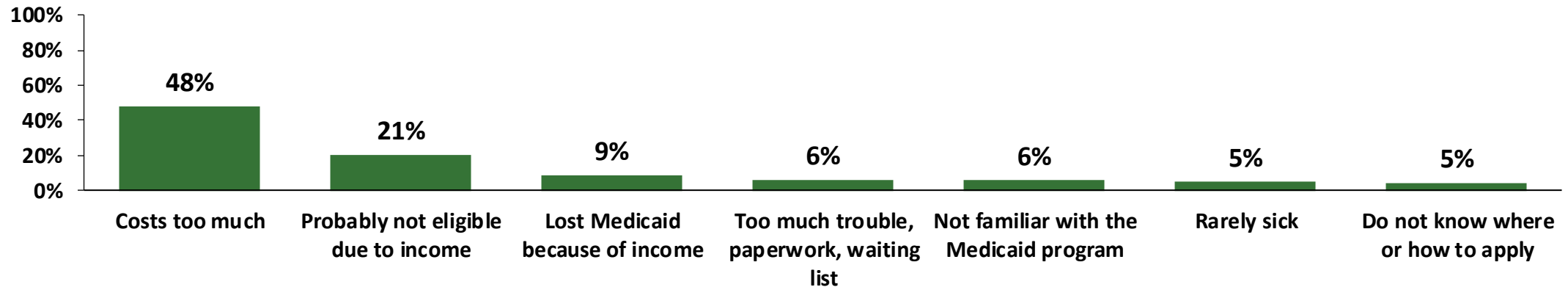


| Response | Estimated Population |
|-----------------------|----------------------|
| Very Interested | 9,400 |
| Somewhat interested | 6,000 |
| Not very interested | 1,200 |
| Not at all interested | 1,600 |
| Not sure | 1,300 |

Main Reasons for Not Enrolling in State Health Insurance Programs

Nearly half (48%) of those that have not enrolled in a state health insurance program indicate that its cost is a major reason for not enrolling and another 21% indicate that they believe that they are probably not eligible due to income.

Main Reasons for Not Enrolling in State Health Insurance Programs Among Uninsured Vermont Residents



| Reasons | Estimated Population |
|---|----------------------|
| Costs too much | 9,300 |
| Probably not eligible due to income | 4,000 |
| Lost Medicaid because of income | 1,800 |
| Too much trouble, paperwork, waiting list | 1,200 |
| Not familiar with the Medicaid program | 1,200 |
| Rarely sick | 1,000 |
| Do not know where or how to apply | 900 |



Underinsured Vermonters



Underinsured Vermonters

The proportion of persons with insurance but whose policy does not sufficiently cover current medical costs, or their potential future medical expenses should a serious condition or illness develop, is generally referred to as the “underinsured” population. For this report, VDH estimated the proportion of the Vermont population that is underinsured using a formula developed by the Commonwealth Fund*. Using this method an individual is considered underinsured if either of the following two conditions are met:

- Current medical expenses, excluding the cost of insurance premiums, is equal to or greater than:
 - 10% of household income if 200% or higher of FPL
 - 5% of household income if below 200% of FPL

OR

- Have a deductible equal to or greater than 5% of household income.

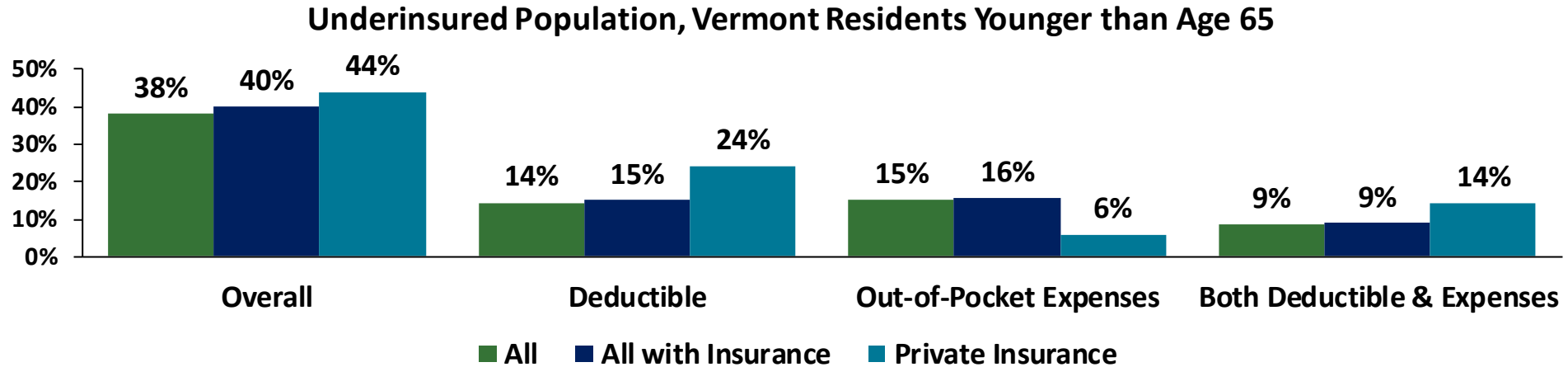
That is, either their current or their potential future medical expenses are more than what their income could bear.

Note that uninsured Vermonters are not included as underinsured but are included as part of the overall population. When analyses are limited to those with insurance, results are similar to the overall population.

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. For example, respondents could include out-of-pocket costs related to dental, vision, hearing needs, or over-the-counter medications which are not necessarily traditionally covered under a health plan. There are other models that can be used to determine whether a person is considered underinsured.

Underinsured* Vermonters Younger than Age 65

In 2021, 38% (187,800) of all Vermonters ages 64 or younger with any type of insurance were underinsured. This represents 40% of insured Vermonters. Forty-four percent (131,100) of privately insured residents were underinsured. Among those with private insurance who are underinsured, 24% are classified as underinsured due to their plan’s deductible, 6% due to out-of-pocket expenses during the prior 12 months and 14% due to both.

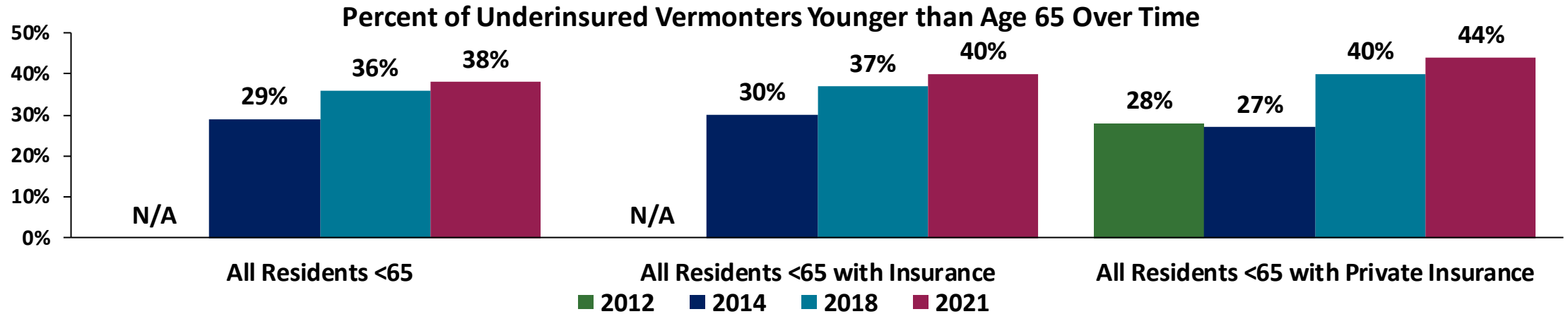


| Type | Estimated Population by Insurance Status | | |
|----------------------------|--|--------------------|-------------------|
| | All | All with Insurance | Private Insurance |
| Overall | 187,800 | 187,800 | 131,100 |
| Deductible | 71,300 | 71,300 | 71,300 |
| Out-of-Pocket Expenses | 74,400 | 74,400 | 17,700 |
| Both Deductible & Expenses | 42,100 | 42,100 | 42,100 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Underinsured* Vermonters Younger than 65 Years Old Over Time

The percentage of underinsured Vermonters has increased from 29% in 2014 and is up slightly from 2018, when 36% of Vermonters were underinsured.



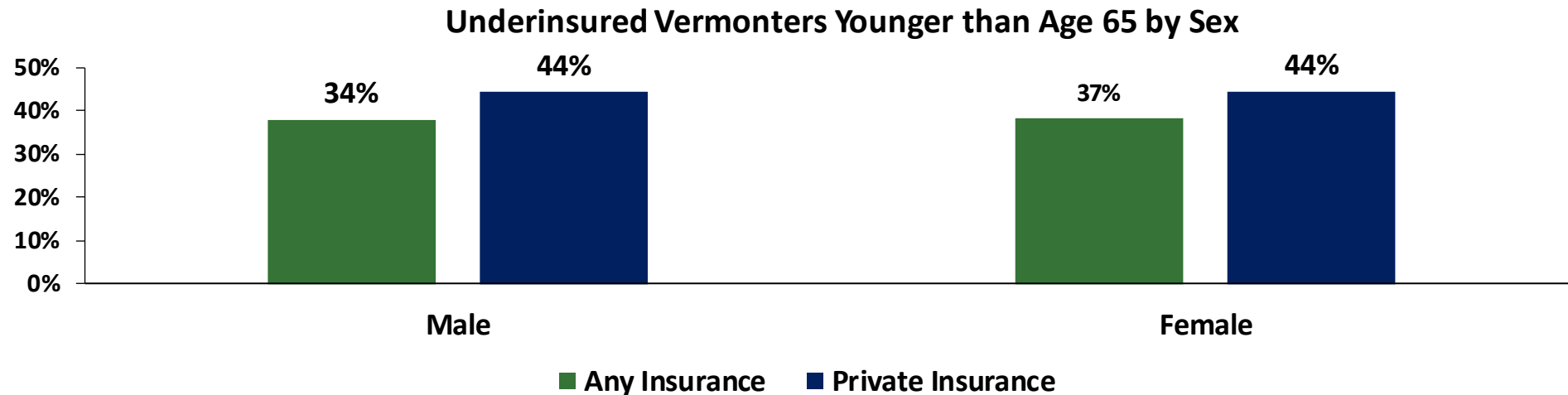
| Year | Estimated Population Over Time | | |
|------|--------------------------------|----------------------------------|--|
| | All Residents <65 | All Residents <65 with Insurance | All Residents <65 with Private Insurance |
| 2012 | N/A* | N/A* | 101,300 |
| 2014 | 151,200 | 151,200 | 92,300 |
| 2018 | 182,200 | 182,200 | 131,200 |
| 2021 | 187,800 | 187,800 | 131,100 |

In 2012 only the rate of underinsured among those with private insurance was calculated.

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Underinsured* Vermonters Younger than Age 65 by Sex

Among those under 65 years old with any type of insurance, 37% (94,000) of female Vermonters are underinsured compared to 34% (93,800) of male Vermonters. Among those with private health insurance 44% of males and females are underinsured.

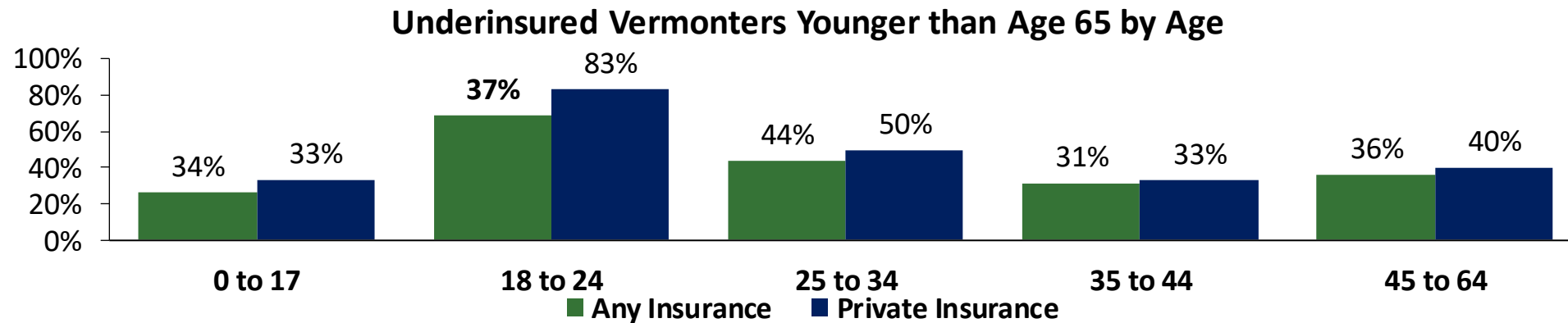


| Sex | Estimated Population by Sex | |
|--------|-----------------------------|-------------------|
| | Any Insurance | Private Insurance |
| Male | 93,800 | 65,800 |
| Female | 94,000 | 65,400 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Underinsured* Vermonters Younger than Age 65 by Age

Vermonters 18 to 24 years old are the most likely to be underinsured among those under the age of 65 (37% or 38,700). Those 35 to 44 years old are the least likely to be underinsured (31% or 22,200). Eighty-three percent (29,900) of residents 18 to 24 years old with private insurance are underinsured, a significantly higher percentage than other age groups under 65.



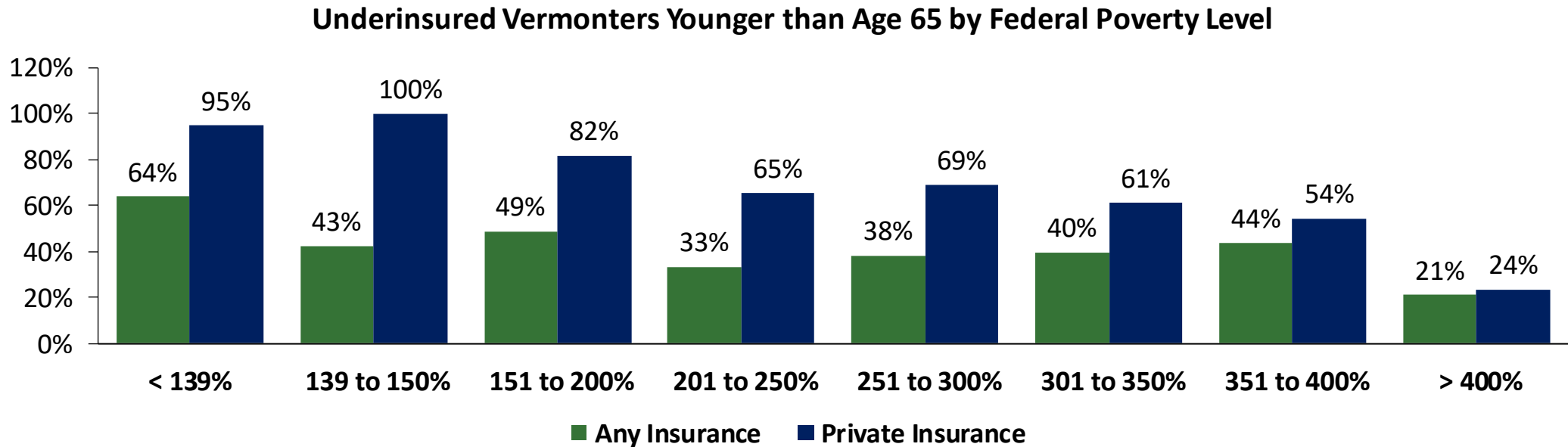
| Age | Estimated Population by Age | |
|----------|-----------------------------|-------------------|
| | Any Insurance | Private Insurance |
| 0 to 17 | 29,700 | 16,600 |
| 18 to 24 | 38,700 | 29,900 |
| 25 to 34 | 35,400 | 21,700 |
| 35 to 44 | 22,200 | 15,000 |
| 45 to 64 | 61,900 | 47,900 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Underinsured* Vermonters Younger than Age 65 by Federal Poverty Level

The highest rates of underinsurance are among those with the lowest incomes. Among those younger than 65 years old, 64% (72,900) of those earning less than 139% of FPL are underinsured, 43% (3,900) of those earning between 139% and 150% and 49% (19,100) of those with annual incomes between 151% and 200% are underinsured.

Among the privately insured, the percentage classified as underinsured are 95%, 100%, and 82% respectively for these income ranges.

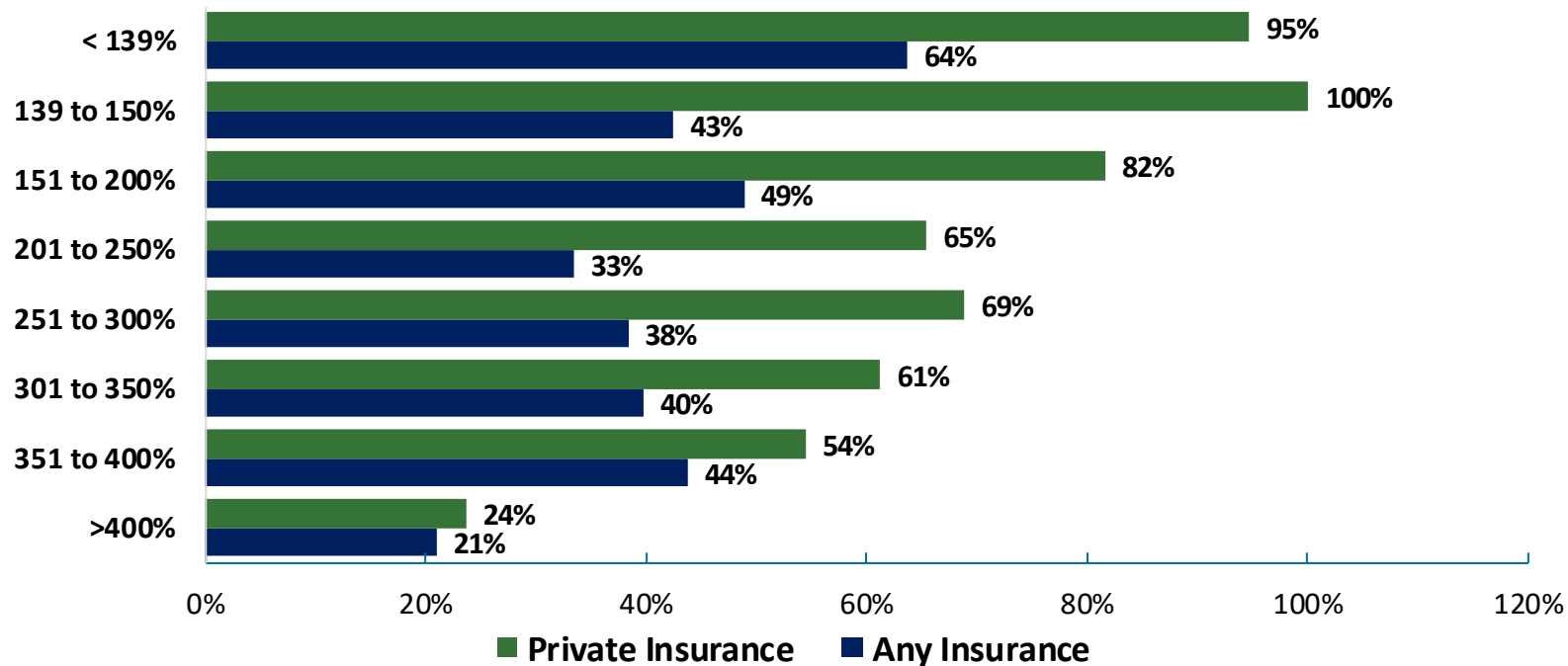


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Underinsured Vermonters Younger than Age 65 by Federal Poverty Level



| Percent of FPL | Estimated Population by Income | |
|----------------|--------------------------------|-------------------|
| | Any Insurance | Private Insurance |
| < 139% | 72,900 | 33,900 |
| 139 to 150% | 3,900 | 1,800 |
| 151 to 200% | 19,100 | 10,600 |
| 201 to 250% | 10,800 | 8,200 |
| 251 to 300% | 13,600 | 12,400 |
| 301 to 350% | 12,000 | 10,800 |
| 351 to 400% | 12,600 | 11,800 |
| > 400% | 43,000 | 41,600 |

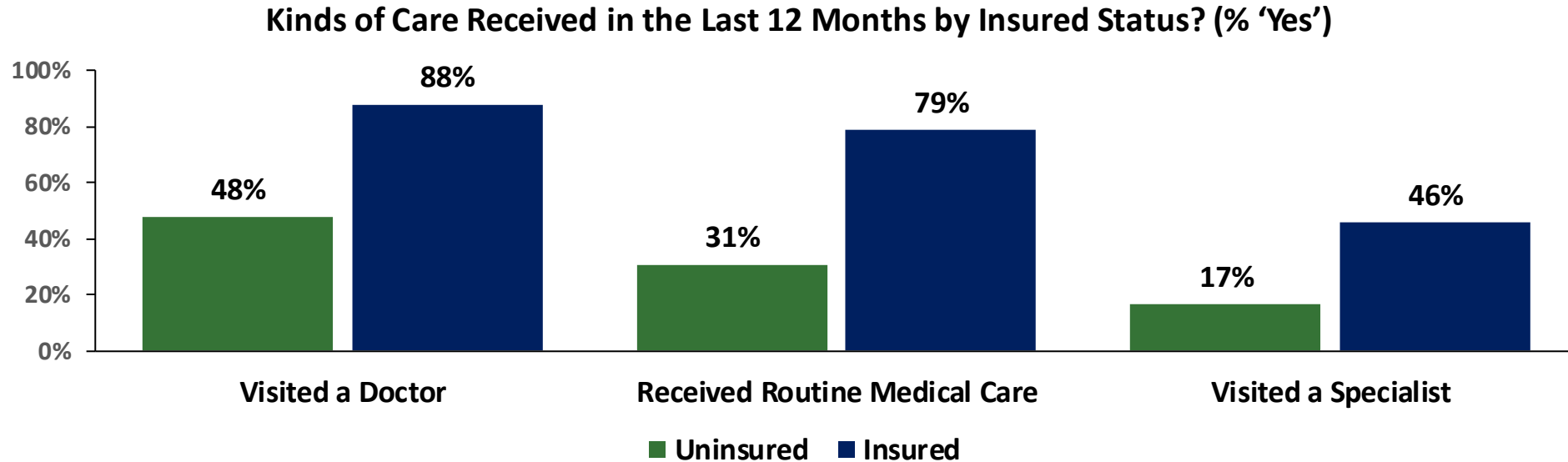
*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

The image features a scenic landscape with rolling hills and a lake. A teal banner is overlaid across the middle of the image, containing the text "Health Care Utilization". Below the banner, two kayakers are visible on the water, paddling away from the viewer. The overall scene is peaceful and natural.

Health Care Utilization

Health Care Utilization in Last 12 Months by Insured Status

Almost nine-in-ten (88%) insured Vermonters had visited a doctor in 2021, compared to just 48% of uninsured Vermonters. Uninsured residents are significantly less likely to have visited a doctor or health care provider during the past 12 months.

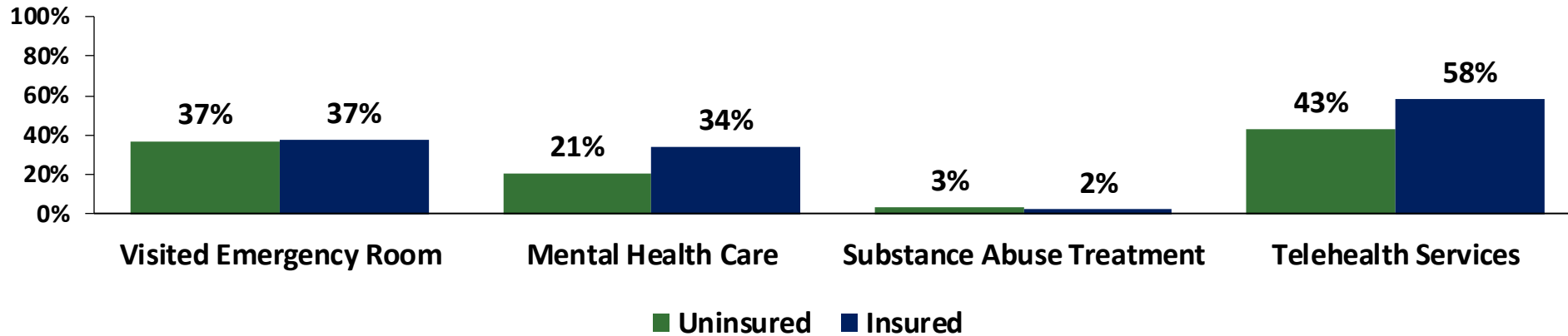


| Type of Care | Estimated Population by Insurance Status | |
|-------------------------------|--|---------|
| | Uninsured | Insured |
| Visited a Doctor | 9,300 | 529,300 |
| Received Routine Medical Care | 6,000 | 474,100 |
| Visited a Specialist | 3,300 | 273,200 |

Health Care Utilization in Last 12 Months by Insured Status

Insured and uninsured Vermonters visited the ER at roughly equal rates (37%). Insured Vermonters were more likely to seek mental health care (34% vs 21%) and telehealth services (58% vs 43%). Insured Vermonters were significantly less likely to have received mental health services and significantly more likely to have used Telehealth than uninsured residents.

Family Member Received Following Kinds of Care in the Last 12 Months by Insured Status



| Type of Care | Estimated Population by Insurance Status | |
|---------------------------|--|---------|
| | Uninsured | Insured |
| Visited Emergency Room | 7,100 | 223,400 |
| Mental Health Care | 4,000 | 203,300 |
| Substance Abuse Treatment | 600 | 12,400 |
| Telehealth Services | 8,300 | 348,600 |

Health Care Utilization in Last 12 Months by Insured Status Over Time

The rate at which insured Vermonters accessed care is similar to what it has been in the past. Uninsured Vermonters in 2021 were slightly less likely to visit a doctor than they were in 2018.

| Type of Care | 2012 | | 2014 | | 2018 | | 2021 | |
|-------------------------------|-----------|---------|-----------|---------|-----------|---------|-----------|---------|
| | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured |
| Visited a Doctor | 55% | 88% | 58% | 86% | 51% | 88% | 48% | 88% |
| Received Routine Medical Care | 34% | 77% | 34% | 76% | 29% | 76% | 31% | 79% |
| Visited a Specialist* | N/A | N/A | 23% | 39% | 19% | 43% | 17% | 46% |

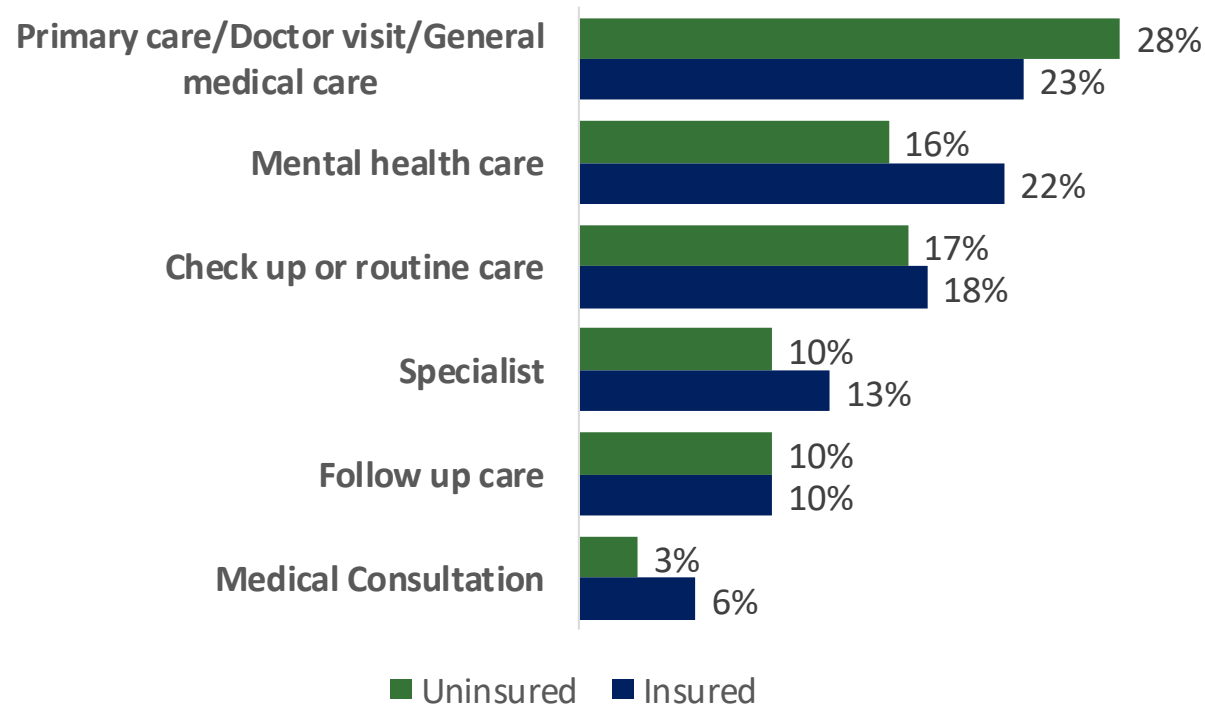
| Type of Care | 2012 | | 2014 | | 2018 | | 2021 | |
|-------------------------------|-----------|---------|-----------|---------|-----------|---------|-----------|---------|
| | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured |
| Visited a Doctor | 23,700 | 513,500 | 13,500 | 519,800 | 10,100 | 534,300 | 9,300 | 529,300 |
| Received Routine Medical Care | 14,400 | 449,700 | 7,900 | 460,600 | 5,800 | 461,600 | 6,000 | 474,100 |
| Visited a Specialist* | N/A | N/A | 5,200 | 232,300 | 3,700 | 257,800 | 3,300 | 273,200 |

*This question was not asked in 2012

Types of Care Family Received Through Telehealth

Among Vermonters reporting the use of Telehealth during the prior 12 months, they were most likely to report the type of care they received as primary care (23% insured; 28% uninsured), mental health care (22% insured; 16% uninsured), and check-up or routine care (18% insured; 17% uninsured).

Types of Care Family Received Through Telehealth by Insurance Status*



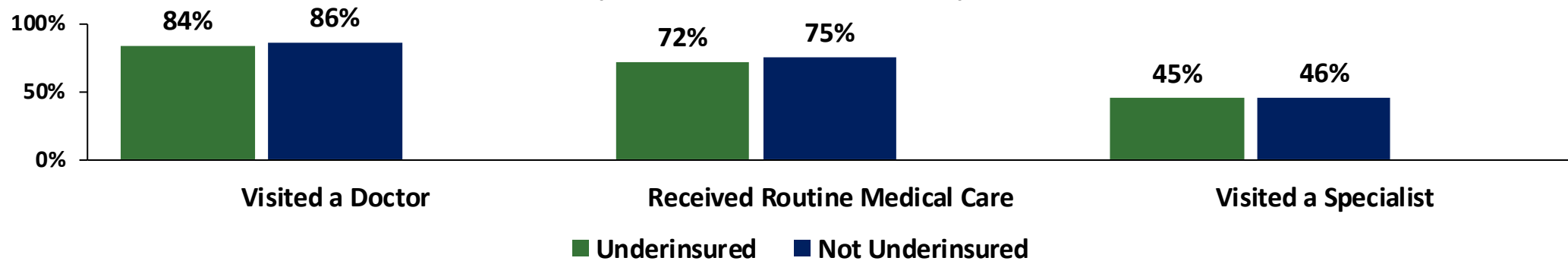
| Type of Care | Estimated Population by Insurance Status | |
|--|--|---------|
| | Uninsured | Insured |
| Primary care/Doctor visit/General medical care | 2,200 | 79,200 |
| Mental health care | 1,300 | 76,600 |
| Check up or routine care | 1,400 | 64,000 |
| Specialist | 800 | 43,600 |
| Follow up care | 800 | 33,800 |
| Medical Consultation | 300 | 21,600 |

*Multiple responses accepted so total exceeds 100%

Health Care Utilization in Last 12 Months by Underinsured* Status

Among Vermonters aged 18 to 64 with health insurance, utilization of different types of care was similar regardless of whether individuals were underinsured.

**Health Care Utilization in Last 12 Months by Insurance Status by Underinsured Status,
Vermonters Aged 18 to 64 with Insurance
(% with One or More Visits)**



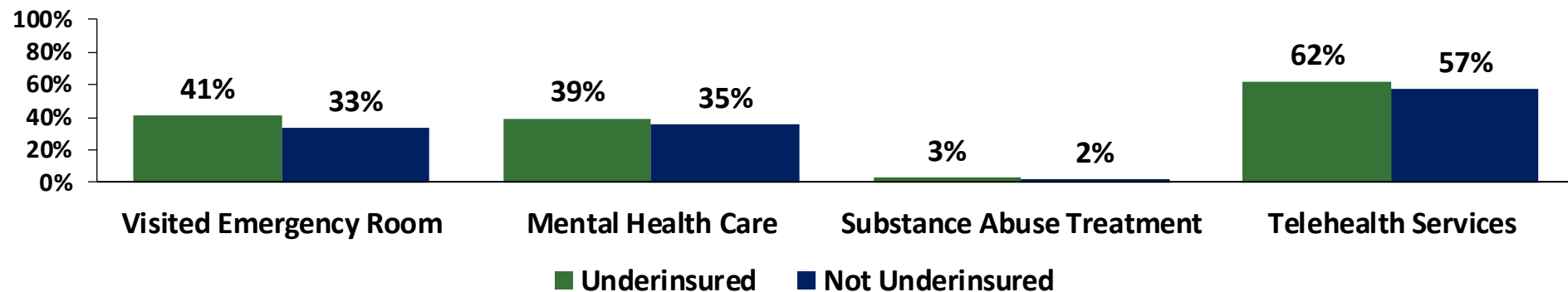
| Type of Care | Estimated Population by Underinsured Status | |
|-------------------------------|---|------------------|
| | Underinsured | Not Underinsured |
| Visited a Doctor | 132,600 | 175,000 |
| Received Routine Medical Care | 113,300 | 152,700 |
| Visited a Specialist | 71,800 | 93,800 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Health Care Utilization in Last 12 Months by Underinsured* Status

Underinsured Vermonters 18 to 64 years old were more likely to use telehealth services (62% vs 57%) or visit the emergency department (41% vs 33%), though differences are not statistically significant. This may be linked to deferring care or not seeking out needed care until it becomes an emergency.

Family Member Received Following Kinds of Care in the Last 12 Months by Underinsured Status, Vermonters Aged 18 to 64 with Insurance



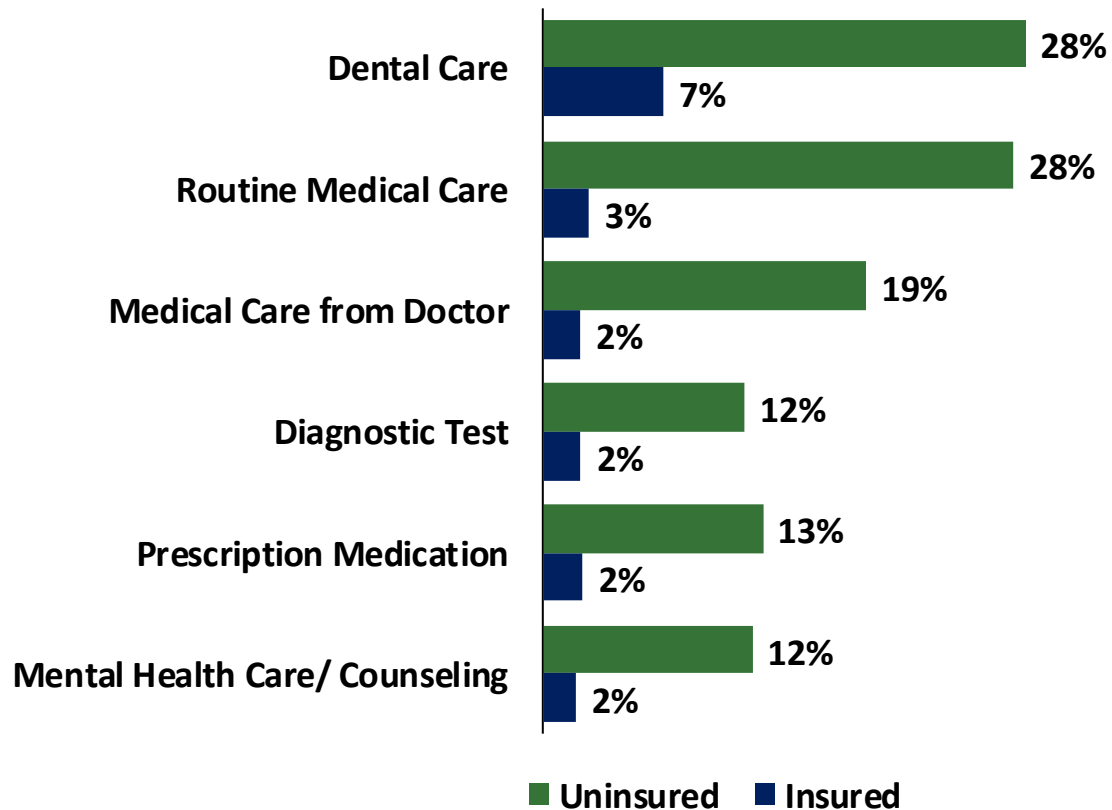
| Type of Care | Estimated Population by Underinsured Status | |
|---------------------------|---|------------------|
| | Underinsured | Not Underinsured |
| Visited Emergency Room | 64,500 | 68,100 |
| Mental Health Care | 62,100 | 72,400 |
| Substance Abuse Treatment | 4,500 | 3,600 |
| Telehealth Services | 97,700 | 116,700 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Care Delayed in Last 12 Months Due to Cost by Insurance Status

Uninsured Vermonters 18 to 64 years old were 3 to 7 times more likely to defer care due to cost than insured Vermonters, depending on the type of care delayed. Dental care was most often delayed (Uninsured: 28%; Insured: 7%) but the largest difference was seen in routine medical care (28% vs 3%). For all types of care delayed, uninsured residents were significantly more likely to have deferred care due to cost.

Care Delayed in Last 12 Months Due to Cost by Insurance Status



| Type of Care | Estimated Population by Insurance Status | |
|--------------------------------|--|---------|
| | Uninsured | Insured |
| Dental Care | 5,500 | 42,300 |
| Routine Medical Care | 5,400 | 16,100 |
| Medical Care from Doctor | 3,700 | 13,000 |
| Diagnostic Test | 2,300 | 13,300 |
| Prescription Medication | 2,500 | 13,900 |
| Mental Health Care/ Counseling | 2,400 | 11,400 |

Care Delayed in Last 12 Months Due to Cost by Insured Status Over Time

| Type of Care | 2012 | | 2014 | | 2018 | | 2021 | |
|-----------------------------------|-----------|---------|-----------|---------|-----------|---------|-----------|---------|
| | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured |
| Dental Care | 31% | 9% | 32% | 8% | 29% | 8% | 28% | 7% |
| Routine Medical Care* | N/A | N/A | N/A | N/A | 22% | 2% | 28% | 3% |
| Medical Care from Doctor | 17% | 3% | 17% | 2% | 11% | 2% | 19% | 2% |
| Diagnostic Test | 8% | 2% | 7% | 2% | 7% | 2% | 12% | 2% |
| Prescription Medication | 10% | 3% | 8% | 2% | 6% | 3% | 13% | 2% |
| Mental Health Care/ Counseling | 7% | 1% | 5% | 2% | 3% | 1% | 12% | 2% |

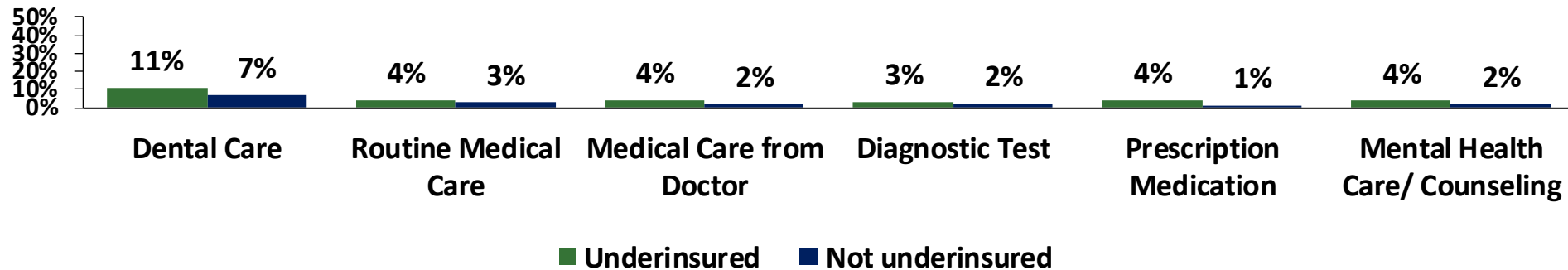
| Type of Care | 2012 | | 2014 | | 2018 | | 2021 | |
|-----------------------------------|-----------|---------|-----------|---------|-----------|---------|-----------|---------|
| | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured |
| Dental Care | 13,200 | 54,000 | 7,400 | 47,900 | 5,700 | 50,000 | 5,500 | 42,300 |
| Routine Medical Care* | N/A | N/A | N/A | N/A | 4,300 | 14,300 | 5,400 | 16,100 |
| Medical Care from Doctor | 7,200 | 15,900 | 3,900 | 12,000 | 2,200 | 9,600 | 3,700 | 13,000 |
| Diagnostic Test | 3,300 | 11,100 | 1,600 | 9,800 | 1,400 | 13,300 | 2,300 | 13,300 |
| Prescription Medication | 4,400 | 15,400 | 1,900 | 15,000 | 1,200 | 17,200 | 2,500 | 13,900 |
| Mental Health Care/ Counseling | 3,100 | 8,200 | 1,200 | 7,600 | 600 | 8,300 | 2,400 | 11,400 |

*Question was not asked in 2012 or 2014

Care Delayed in Last 12 Months Due to Cost by Underinsured* Status

Underinsured Vermonters 18 to 64 years old were more likely to delay medical care due to cost than those who were not underinsured. Underinsured Vermonters were significantly more likely than not underinsured Vermonters to defer getting needed prescription medications or dental care due to their cost.

Care Delayed in Last 12 Months Due to Cost by Underinsured Status, Vermonters Aged 18 to 64 with Insurance



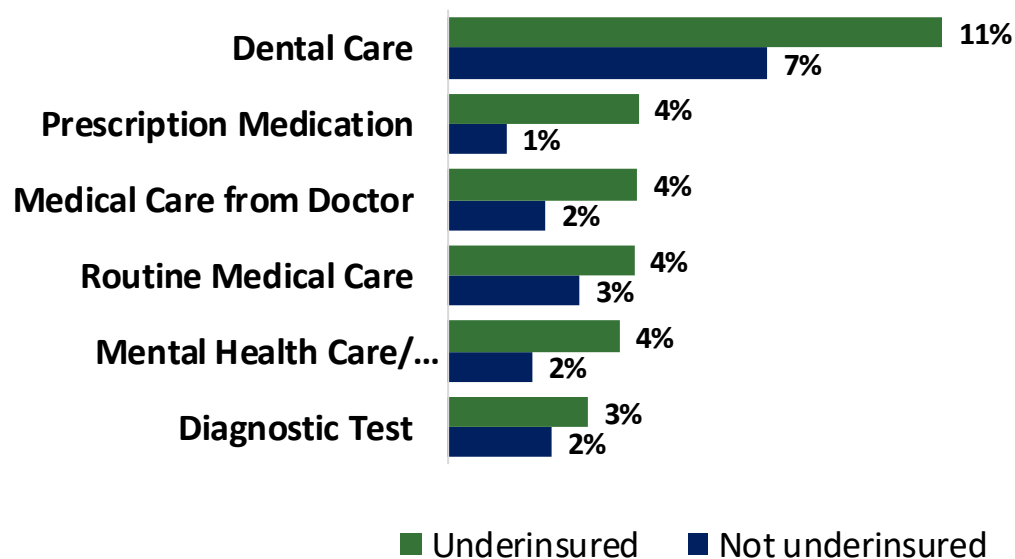
| Type of Care | Estimated Population by Underinsured Status | |
|--------------------------------|---|------------------|
| | Underinsured | Not underinsured |
| Dental Care | 17,300 | 14,500 |
| Routine Medical Care | 6,500 | 6,000 |
| Medical Care from Doctor | 6,700 | 4,500 |
| Diagnostic Test | 4,900 | 4,700 |
| Prescription Medication | 6,700 | 2,700 |
| Mental Health Care/ Counseling | 6,000 | 3,900 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Care Delayed in Last 12 Months Due to Cost by Underinsured* Status, Vermonters 18 to 64 with Insurance

Underinsured Vermonters 18 to 64 years old were more likely to delay medical care due to cost than those who were not underinsured. Underinsured Vermonters were significantly more likely than not underinsured Vermonters to defer getting needed prescription medications or dental care due to their cost.

Care Delayed in Last 12 Months Due to Cost by Underinsured Status, Vermonters Aged 18 to 64 with Insurance



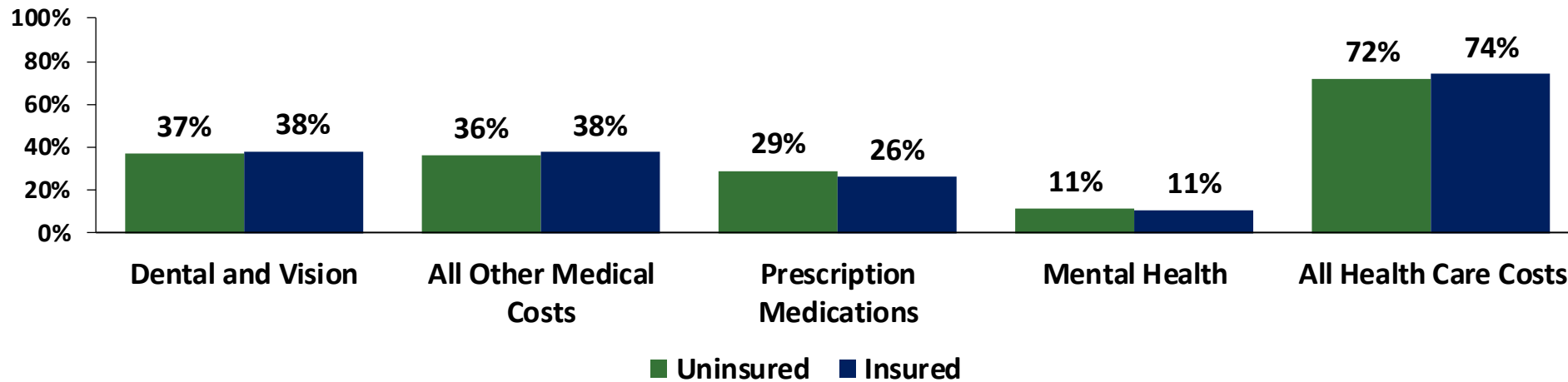
| Type of Care | Estimated Population by Underinsured Status | |
|-------------------------------|---|------------------|
| | Underinsured | Not underinsured |
| Dental Care | 17,300 | 14,500 |
| Prescription Medication | 6,700 | 2,700 |
| Medical Care from Doctor | 6,700 | 4,500 |
| Routine Medical Care | 6,500 | 6,000 |
| Mental Health Care/Counseling | 6,000 | 3,900 |
| Diagnostic Test | 4,900 | 4,700 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Out-of-Pocket Health Care Costs Greater than \$500 in Last 12 Months by Insured Status

Uninsured and insured Vermonters were similarly likely to have medical bills over \$500, regardless of the type of care. However, it should be noted that uninsured Vermonters were more likely to defer care (see page 55).

Greater than \$500 in Out of Pocket Costs in Last 12 Months by Insurance Status

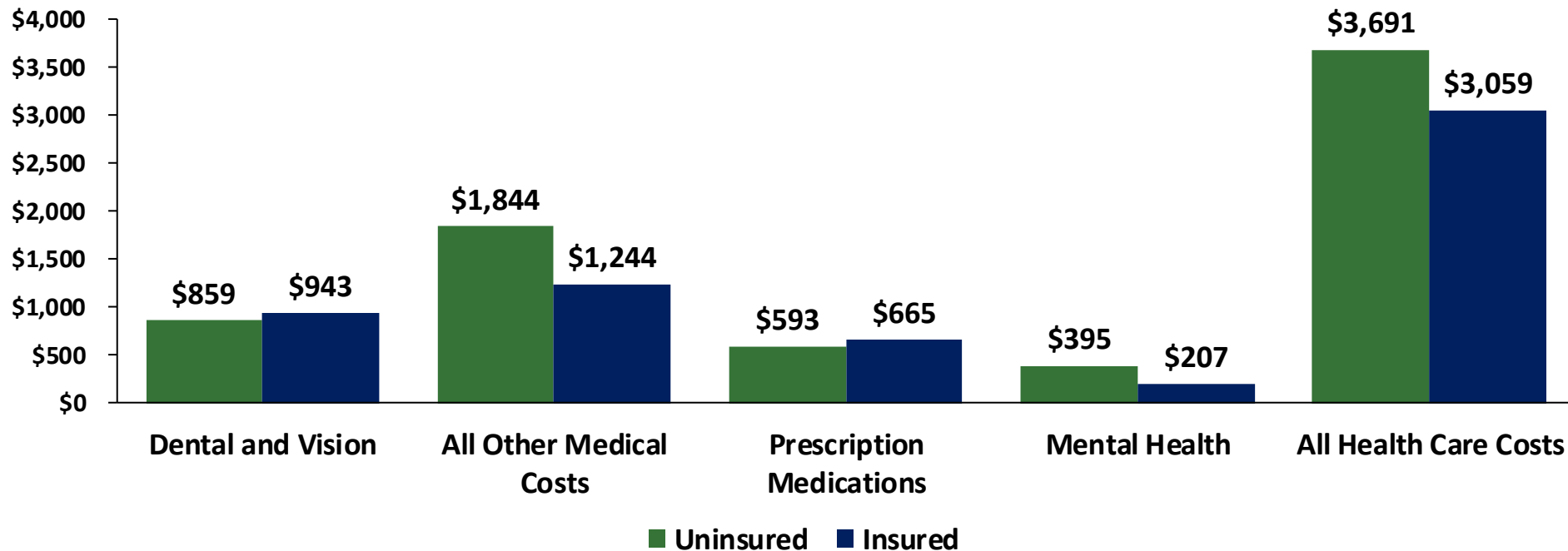


| Type of Care | Estimated Population by Insurance Status | |
|--------------------------|--|---------|
| | Uninsured | Insured |
| Dental and Vision | 7,200 | 228,300 |
| All Other Medical Costs | 7,000 | 225,400 |
| Prescription Medications | 5,600 | 156,700 |
| Mental Health | 2,200 | 63,700 |
| All Health Care Costs | 14,000 | 444,600 |

Average Amount Spent Out-of-Pocket In the Last 12 Months by Insured Status

Uninsured Vermonters spent, on average, more on medical expenses out-of-pocket than their insured counterparts. On average, uninsured Vermont residents spent almost \$3,700 in the prior 12 months compared to less than \$3,100 spent by insured Vermonters.

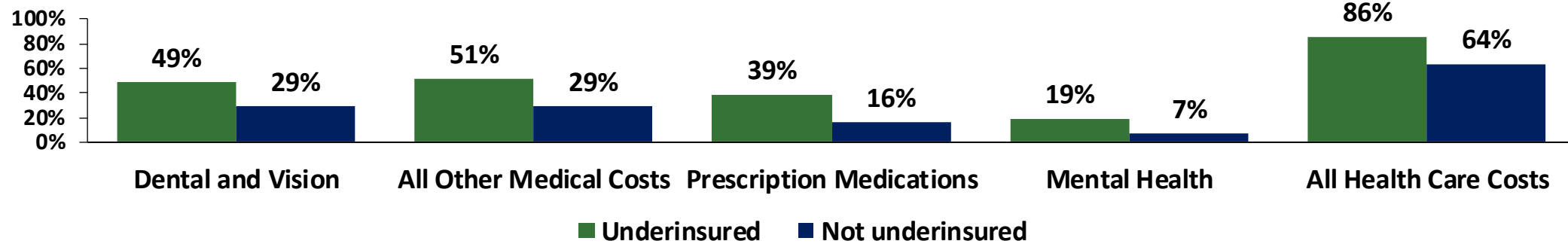
Average Amount of Money Spent Out of Pocket In the Last 12 Months by Insurance Status



Out-of-Pocket Health Care Costs Greater than \$500 for the Underinsured* with Insurance in Last 12 Months 18 to 64 Years Old

Underinsured Vermonters 18 to 64 years old are more likely to have large medical bills that have to be paid out-of-pocket than Vermonters who are not underinsured. This is true regardless of the type of expense but is most likely to happen for dental and vision care (49% vs 29%) and other medical costs (51% vs 29%).

Greater than \$500 in Out of Pocket Costs in Last 12 Months Underinsured Vermonters Aged 18 to 64 with Insurance

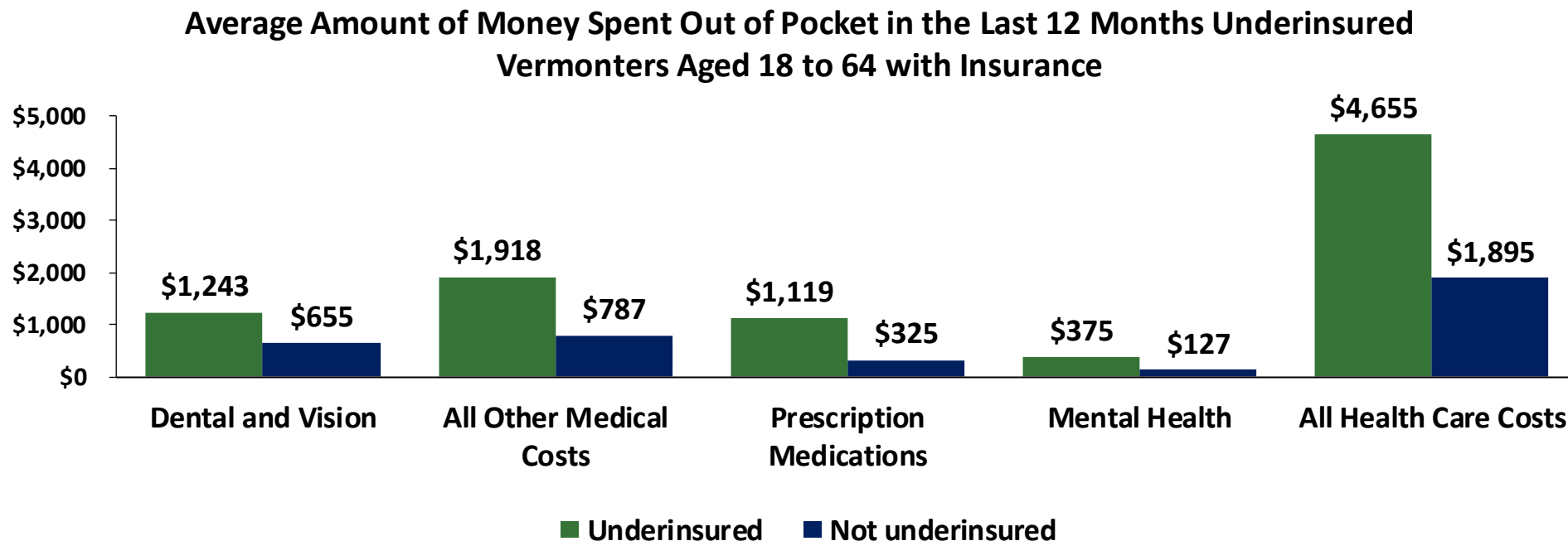


| Type of Care | Estimated Population by Underinsured Status | |
|--------------------------|---|------------------|
| | Underinsured | Not Underinsured |
| Dental and Vision | 76,700 | 59,000 |
| All Other Medical Costs | 81,200 | 59,300 |
| Prescription Medications | 61,100 | 33,200 |
| Mental Health | 30,000 | 14,800 |
| All Health Care Costs | 135,400 | 129,800 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Average Amount Spent Out-of-Pocket among the Underinsured* 18-64 Years Old with Insurance in the Last 12 Months

Underinsured Vermonters 18 to 64 years old spent, on average, about two and a half times more out-of-pocket on care than those who are not underinsured. In 2021, underinsured residents 18 to 64 years old spent an average of \$4,655 out-of-pocket on healthcare compared to less than \$1,900 among those that are not underinsured.

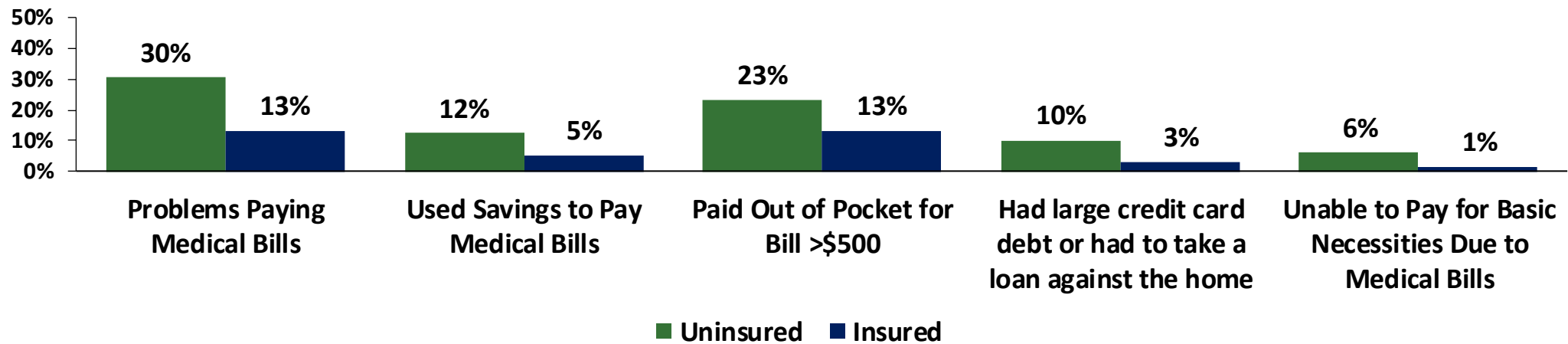


*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Medical Bills in Last 12 Months by Insured Status

Uninsured Vermonters are significantly more likely to report difficulty paying their medical bills than insured Vermonters. Uninsured Vermonters are also significantly more likely to have to use savings (15% vs 5%), take on debt (10% vs 3%) or more frequently unable to pay for basic necessities due to medical bills (6% vs 1%) than insured Vermonters.

Medical Bills in Last 12 Months by Insurance Status Vermont Residents



| Issue | Estimated Population by Insurance Status | |
|---|--|---------|
| | Uninsured | Insured |
| Problems Paying Medical Bills | 5,900 | 79,200 |
| Used Savings to Pay Medical Bills | 2,400 | 32,200 |
| Paid Out of Pocket for Bill >\$500 | 4,500 | 79,800 |
| Had large credit card debt or had to take a loan against the home | 2,000 | 19,000 |
| Unable to Pay for Basic Necessities Due to Medical Bills | 1,200 | 8,900 |

Medical Bills in Last 12 Months by Insured Status Over Time

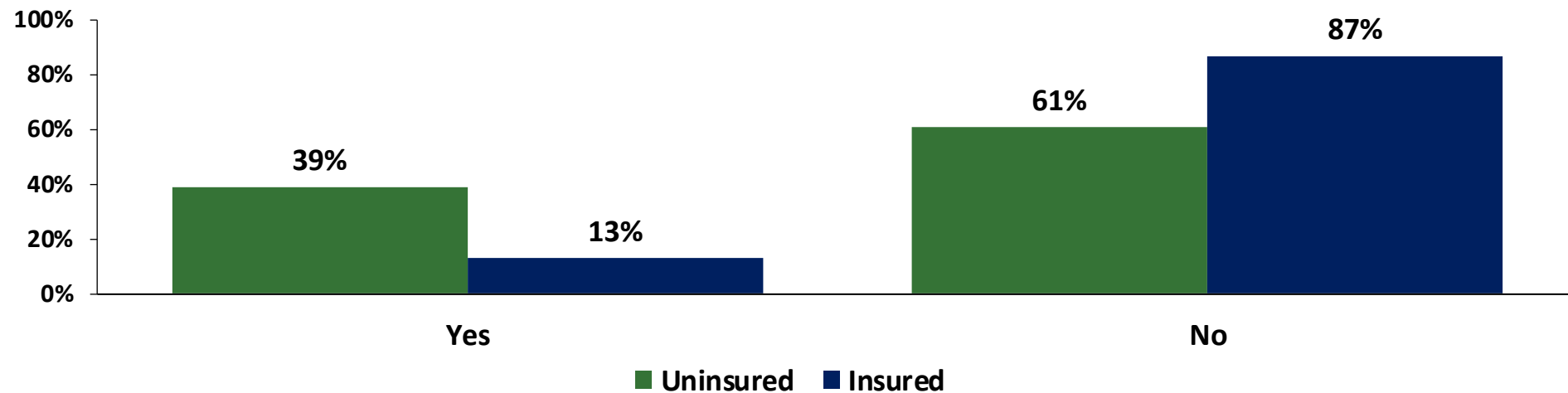
| Issue | 2012 | | 2014 | | 2018 | | 2021 | |
|---|-----------|---------|-----------|---------|-----------|---------|-----------|---------|
| | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured |
| Problems Paying Medical Bills | 40% | 21% | 37% | 19% | 30% | 17% | 30% | 13% |
| Used Savings to Pay Medical Bills | N/A | N/A | N/A | N/A | 16% | 9% | 12% | 5% |
| Paid Out of Pocket for Bill >\$500 | 22% | 13% | 22% | 11% | 12% | 13% | 23% | 13% |
| Had large credit card debt or had to take a loan against the home | N/A | N/A | N/A | N/A | 8% | 6% | 10% | 3% |
| Unable to Pay for Basic Necessities Due to Medical Bills | N/A | N/A | N/A | N/A | 4% | 3% | 6% | 1% |

| Issue | 2012 | | 2014 | | 2018 | | 2021 | |
|---|-----------|---------|-----------|---------|-----------|---------|-----------|---------|
| | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured | Uninsured | Insured |
| Problems Paying Medical Bills | 17,200 | 122,900 | 8,600 | 115,500 | 5,900 | 101,100 | 5,900 | 79,200 |
| Used Savings to Pay Medical Bills | N/A | N/A | N/A | N/A | 3,200 | 53,400 | 2,400 | 32,200 |
| Paid Out of Pocket for Bill >\$500 | 9,200 | 76,500 | 5,000 | 69,300 | 2,500 | 77,900 | 4,500 | 79,800 |
| Had large credit card debt or had to take a loan against the home | N/A | N/A | N/A | N/A | 1,700 | 34,400 | 2,000 | 19,000 |
| Unable to Pay for Basic Necessities Due to Medical Bills | N/A | N/A | N/A | N/A | 800 | 15,600 | 1,200 | 8,900 |

Fear of Medical Debt in Decision Making by Insured Status

Medical debt is significantly more likely to impact the decision making of uninsured Vermonters than it is insured Vermonters. Thirty-nine percent of uninsured Vermonters indicate that fear of medical debt impacted decisions to seek medical care. Sixty-five percent of the uninsured with fear of debt did not get primary care and 46% did not get dental care (as shown on the following slide).

During the past 12 months, has fear of medical debt impacted household when making decisions about whether to seek medical care? By Insurance Status



| Estimated Population by Insurance Status | | |
|--|-----------|---------|
| Response | Uninsured | Insured |
| Yes | 7,500 | 78,400 |
| No | 11,700 | 519,700 |

Health Care Not Sought due to Fear of Debt by Insured Status

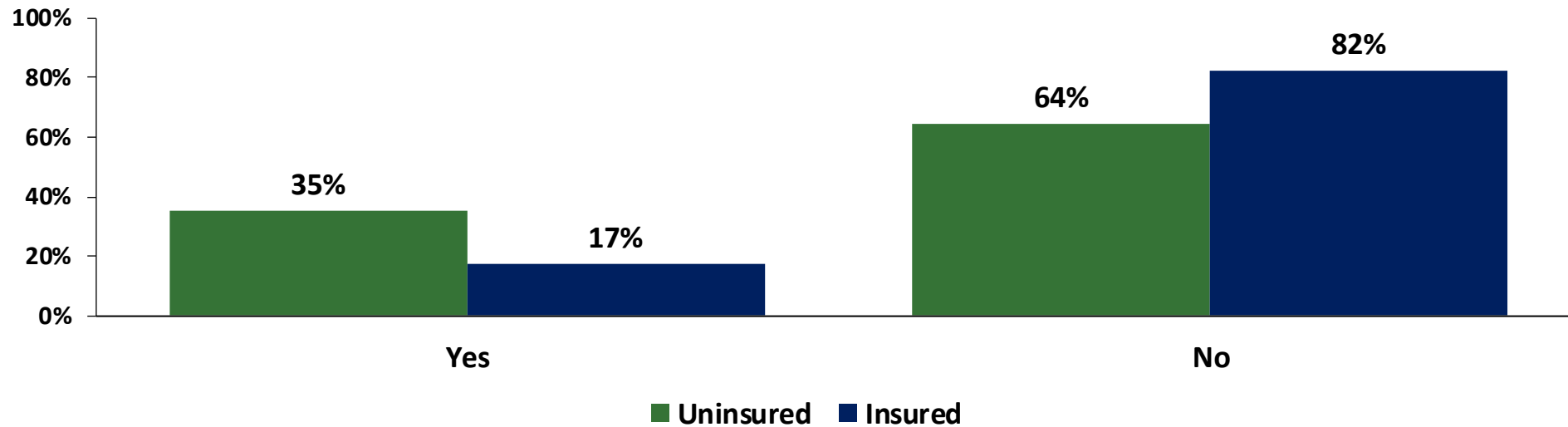
Fear of medical debt has impacted household decisions about whether to seek medical care by Insurance Status

| Type of Care | Rates of Those With Fear of Medical Debt by Insured Status | | Estimated Population of Those With Fear of Medical Debt by Insured Status | |
|--|--|---------|---|---------|
| | Uninsured | Insured | Uninsured | Insured |
| Primary care | 65% | 25% | 4,900 | 19,700 |
| Dental care | 46% | 32% | 3,400 | 25,200 |
| Other outpatient or ongoing medical care | 31% | 35% | 2,400 | 27,600 |
| Vision related care | 30% | 9% | 2,200 | 7,300 |
| Emergency or urgent care | 28% | 13% | 2,100 | 10,200 |
| OB or GYN related care | 18% | 4% | 1,400 | 2,800 |
| Mental health related care | 14% | 11% | 1,100 | 8,700 |
| Diagnostic procedure | 2% | 4% | 300 | 2,900 |
| Other | 2% | 6% | 200 | 4,400 |
| Surgery | 1% | 3% | 100 | 3,100 |
| DK-REF | 4% | 4% | 100 | 2,200 |

Past Due Health Care Expenses, by Insured Status

Uninsured Vermonters were about twice as likely as insured Vermonters to report owing money for medical related debt that is past due (35% vs 17%), a statistically significant difference.

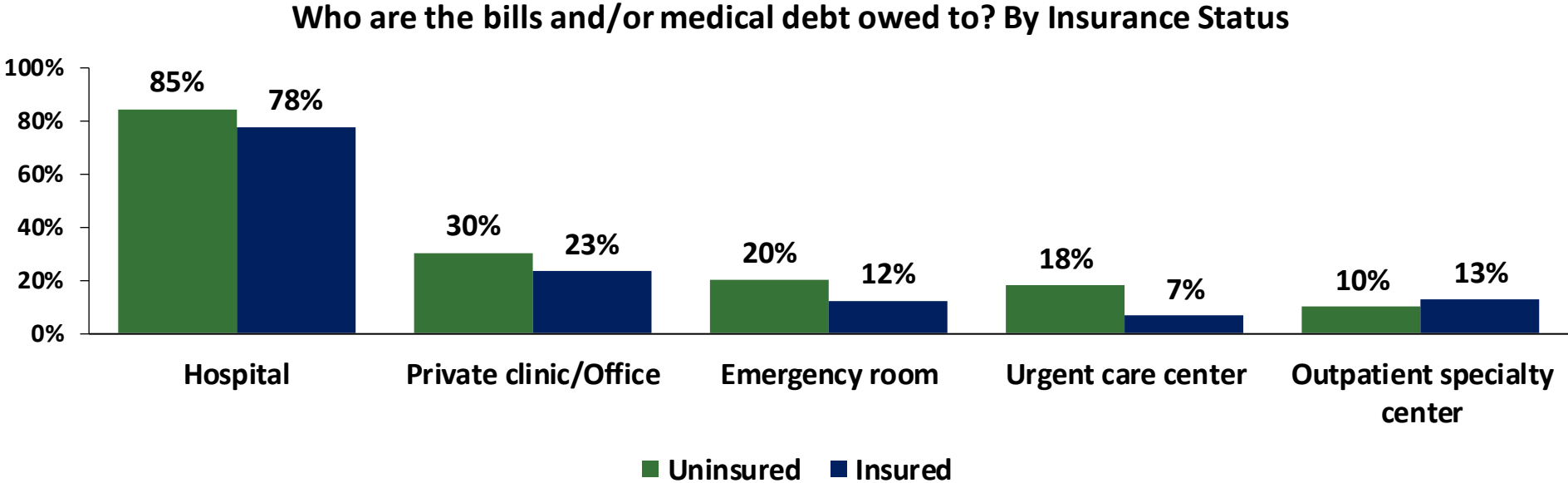
In the past 12 months, has family owed money for medical-related expenses that is now past due? By Insurance Status



| Estimated Population by Insurance Status | | |
|--|-----------|---------|
| Response | Uninsured | Insured |
| Yes | 6,800 | 103,400 |
| No | 12,500 | 492,000 |

Source of Past Due Health Care Expenses, by Insured Status

Medical debt was most often owed to a hospital for both uninsured (85%) and insured (78%) Vermonters.

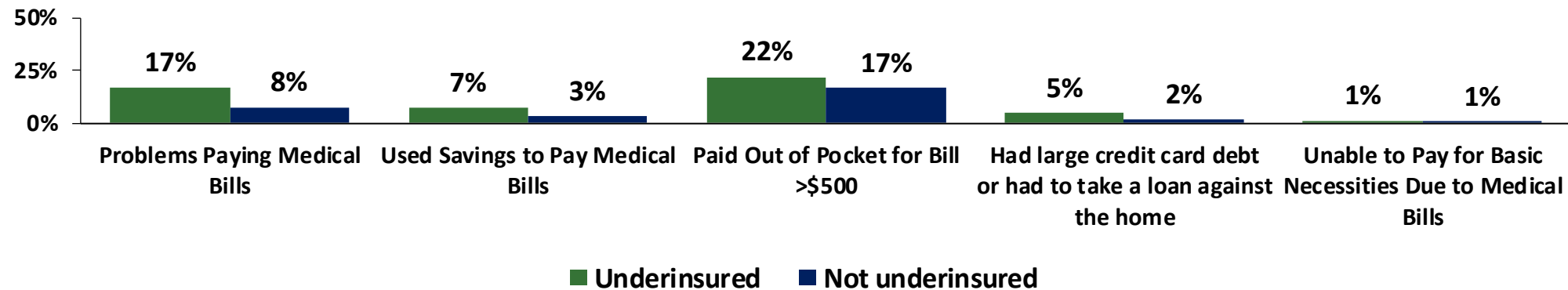


| Response | Estimated Population by Insured Status | |
|-------------------------------------|--|---------|
| | Uninsured | Insured |
| A hospital | 5,700 | 80,400 |
| A private clinic or doctor's office | 2,100 | 24,200 |
| An emergency room | 1,400 | 12,900 |
| An outpatient specialty center | 700 | 13,300 |
| An urgent care center | 1,200 | 6,800 |

Medical Bills in Last 12 Months by Underinsured* 18 to 64 Years Old

Underinsured Vermonters 18 to 64 years old were significantly more likely than other insured Vermonters aged 18 to 64 to report difficulty paying medical bills (17% vs 8%) and statistically more likely to report having to pay a bill out-of-pocket of more than \$500.

Medical Bills in Last 12 Months by Underinsured Status Vermont Residents Aged 18 to 64 with Insurance



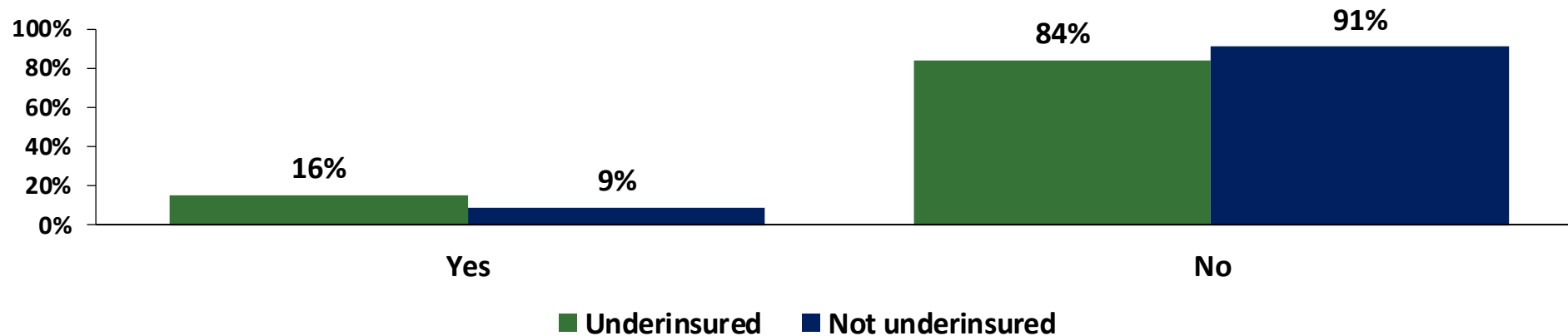
| Bills | Estimated Population by Underinsured Status | |
|---|---|------------------|
| | Underinsured | Not underinsured |
| Problems Paying Medical Bills | 19,400 | 9,900 |
| Used Savings to Pay Medical Bills | 8,500 | 4,200 |
| Paid Out of Pocket for Bill >\$500 | 25,300 | 22,000 |
| Had large credit card debt or had to take a loan against the home | 5,300 | 2,400 |
| Unable to Pay for Basic Necessities Due to Medical Bills | 1,400 | 700 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Health Care not Sought due to Fear of Debt by Underinsured* Status

Underinsured Vermonters 18 to 64 years old were significantly more likely than those who are not underinsured to have had their medical decision making impacted by fear of medical debt (16% vs 9%).

Health Care not Sought due to Fear of Medical Debt by Underinsured Status, Vermonters Aged 18 to 64 with Insurance



| Estimated Population by Underinsured Status | | |
|---|--------------|------------------|
| Response | Underinsured | Not underinsured |
| Yes | 17,900 | 11,800 |
| No | 96,300 | 118,900 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Health Care not Sought due to Fear of Debt by Underinsured* Status

Among those with health insurance, the most common types of care not sought due to fear of medical debt were outpatient or ongoing medical care (40% among the underinsured and 35% among those not underinsured), primary care (27% among the underinsured and 22% among those not underinsured), and dental care (19% among the underinsured and 24% among those not underinsured).

Health Care not Sought due to Fear of Debt

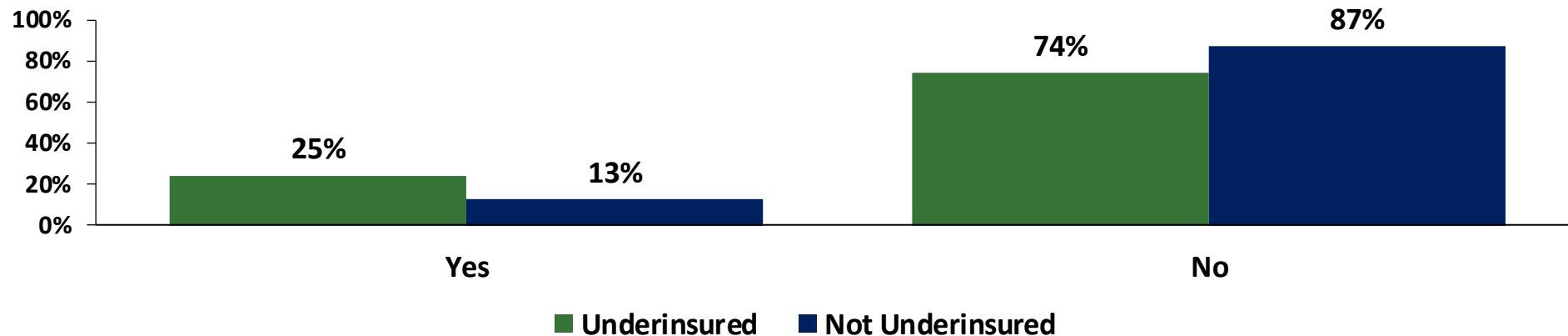
| Type of Care Not Sought | Rates Among Those with Fear of Medical Debt by Underinsured Status | | Estimated Population Among Those with Fear of Medical Debt by Underinsured Status | |
|--|--|------------------|---|------------------|
| | Underinsured | Not Underinsured | Underinsured | Not Underinsured |
| Other outpatient or ongoing medical care | 40% | 35% | 7,200 | 4,100 |
| Dental care | 19% | 24% | 3,500 | 2,800 |
| Primary care | 27% | 22% | 4,800 | 2,600 |
| Emergency or urgent care | 14% | 14% | 2,600 | 1,700 |
| Mental health related care | 12% | 3% | 2,100 | 400 |
| Vision related care | 12% | 3% | 2,100 | 400 |
| OB or GYN related care | 4% | 3% | 700 | 400 |
| Diagnostic procedure | 5% | 5% | 900 | 600 |
| Surgery | 3% | 4% | 500 | 500 |
| Other | 5% | 8% | 1,000 | 900 |
| DK-REF | 5% | 4% | 1,000 | 500 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Past Due Health Care Expenses, by Underinsured* Status

A quarter (25%) of underinsured Vermonters aged 18 to 64 owed past due medical expenses in 2021, compared to just 13% of those who were insured but not underinsured.

In the past 12 months, has family owed money for medical-related expenses that is now past due? By Underinsured Status, Vermonters Aged 18 to 64 with Insurance

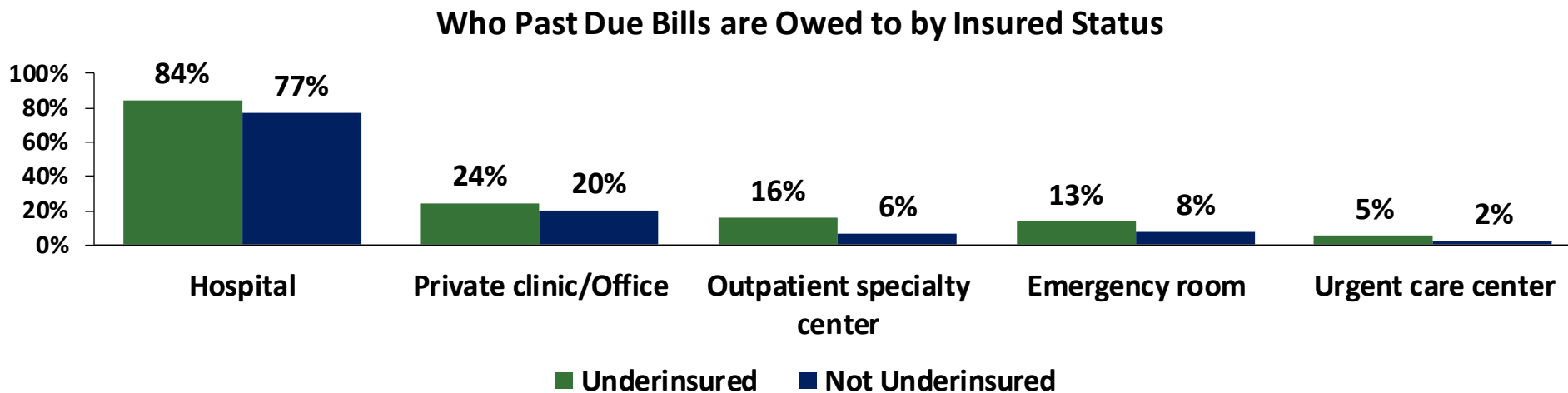


| Estimated Population by Underinsured Status | | |
|---|--------------|------------------|
| Response | Underinsured | Not Underinsured |
| Yes | 28,100 | 16,800 |
| No | 85,100 | 113,800 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Source of Past Due Health Care Expenses, by Underinsured* Status

Most medical debt was owed to hospitals, whether an underinsured (84%) or not underinsured (77%) Vermonter.



| Response | Estimated Population by Underinsured Status | |
|-------------------------------------|---|------------------|
| | Underinsured | Not Underinsured |
| A hospital | 23,600 | 13,000 |
| A private clinic or doctor's office | 6,800 | 3,400 |
| An outpatient specialty center | 4,500 | 1,100 |
| An emergency room | 3,800 | 1,300 |
| An urgent care center | 1,500 | 400 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.



Health Savings and Health Reimbursement Accounts

Health Savings and Health Reimbursement Accounts

A **Health Savings Account (HSA)** is a type of savings account that lets you set aside money on a pre-tax basis to pay for qualified medical expenses. HSAs are available to taxpayers who are enrolled in a High Deductible Health Plan. The money in the account can only be spent for health care and can grow from year to year.

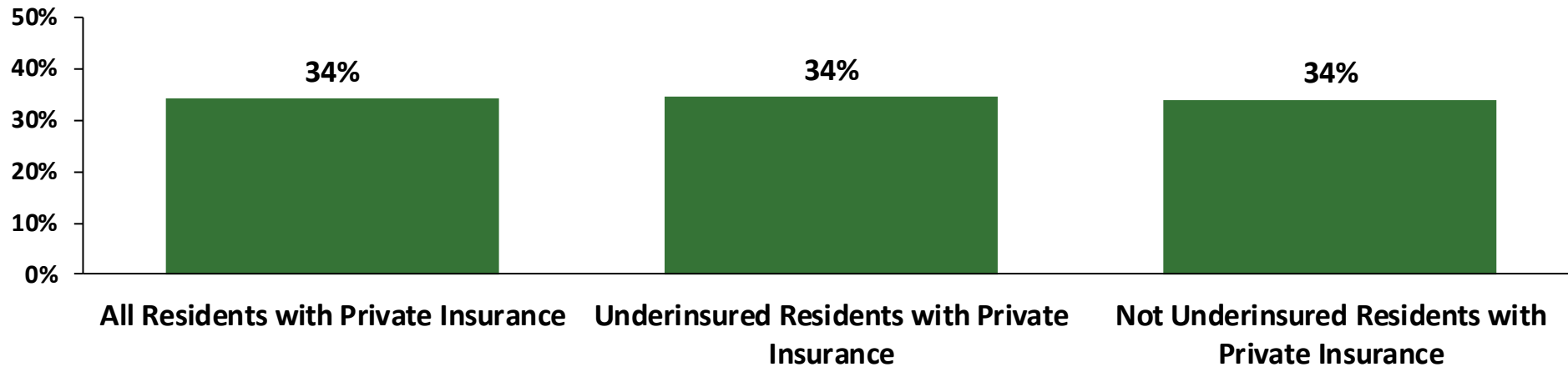
A **Health Reimbursement Account (HRA)** is an employer funded account from which employees are reimbursed tax-free for qualified medical expenses up to a fixed dollar amount per year. Unused amounts may be rolled over to be used in subsequent years. The employer funds and owns the account.

Overall, 34% of residents 18 to 64 years old with private insurance have an HSA, 13% have an HRA, and 9% have both.

Vermont Residents 18 to 64 Years Old with Health Savings Accounts

Over a third of Vermonters 18 to 64 years of age with private insurance reported having a health savings account (HSA), regardless of whether they were underinsured* (34%) or not (34%). Vermonters in 2021 were significantly more likely to have an HSA than in 2014 or 2012.

Have a Health Savings Account Vermont Residents Aged 18 to 64



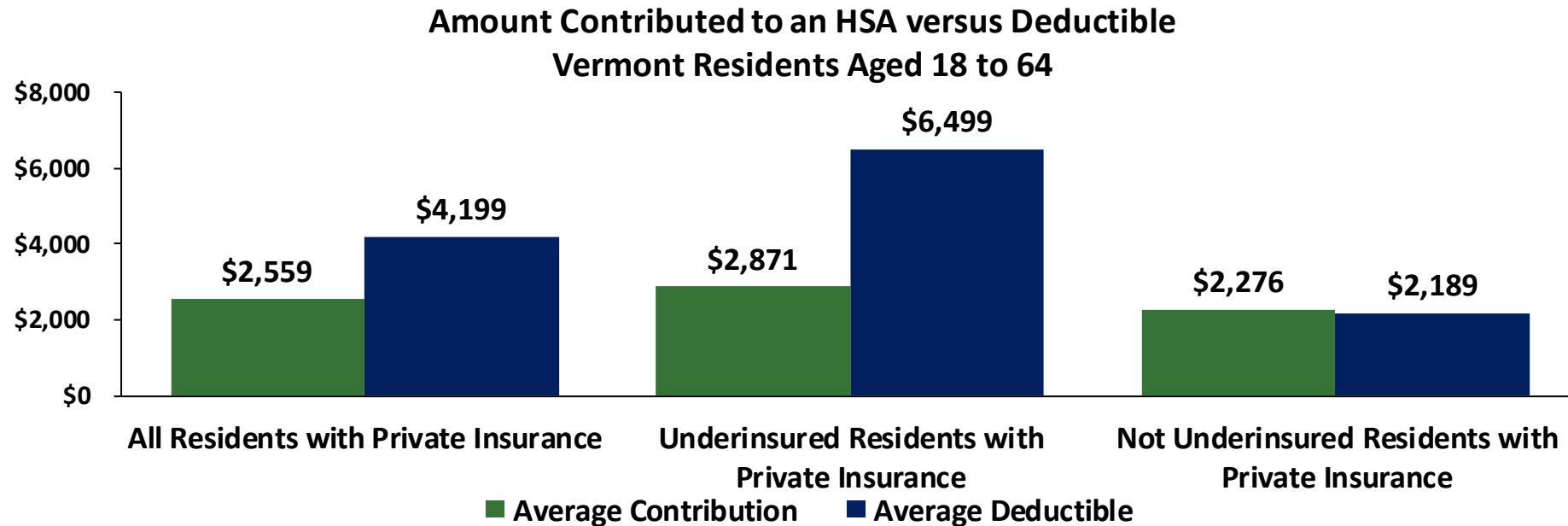
| Health Savings Account Status | Estimated Population |
|---|----------------------|
| All Residents with Private Insurance | 83,900 |
| Underinsured Residents with Private Insurance | 39,500 |
| Not Underinsured Residents with Private Insurance | 44,400 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Amount Contributed to an HSA versus Deductible

All Vermonters with private health insurance saved an average of \$2,559. Given they have an average deductible of \$4,199; they did not save enough to cover 60% of their deductible. Those who are not underinsured* have a lower average deductible (\$2,189); so, although they saved, on average, slightly less (\$2,276), that was enough to cover their deductible.

While underinsured Vermonters contributed slightly more to an HSA (\$2,871) than those who were not underinsured, their contributions were, on average, enough to cover only 44% of their much larger deductible (\$6,499).

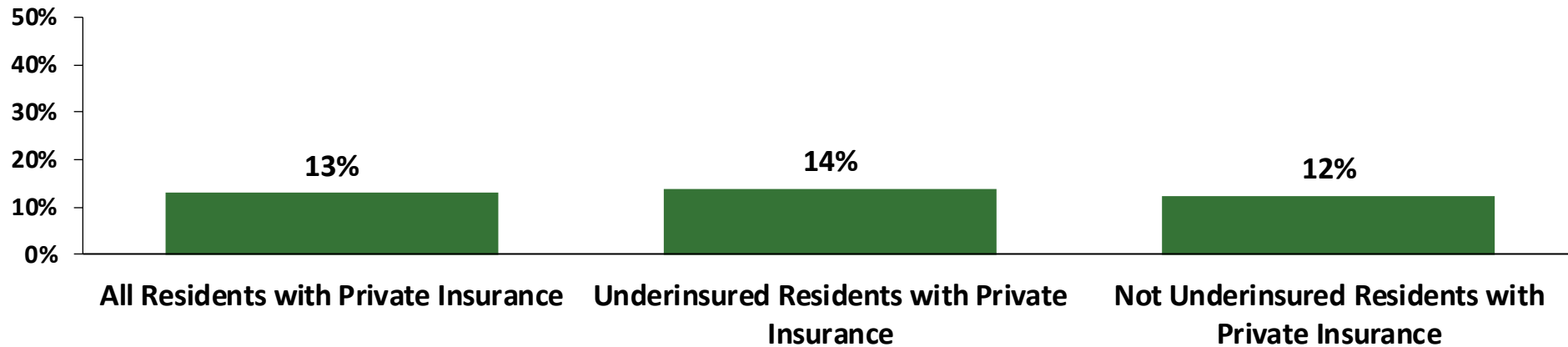


*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Vermont Residents 18 to 64 Years Old with a Health Reimbursement Account (HRA)

One in eight (13%) Vermont residents 18 to 64 years of age with private insurance had a health reimbursement account (HRA) as part of their health insurance policy in 2021. Residents of Windham County were significantly more likely to have an HRA.

**Have a Health Reimbursement Account
Vermont Residents Aged 18 to 64 (% who said 'Yes')**



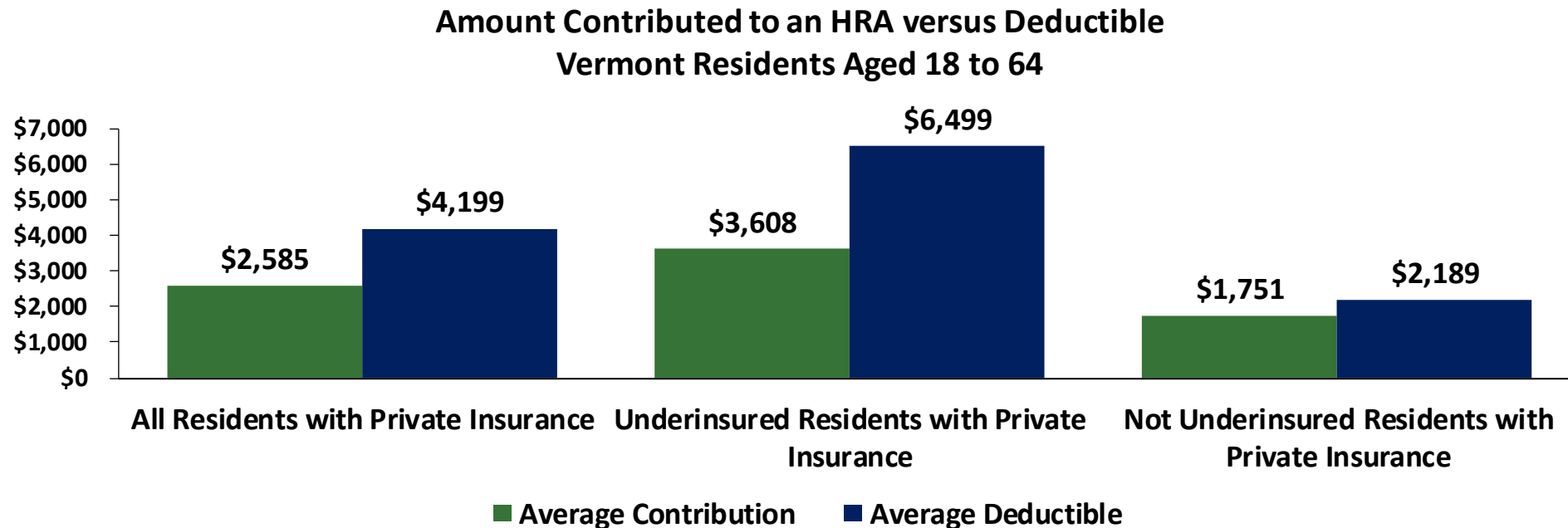
| Health Reimbursement Account Status | Estimated Population |
|---|----------------------|
| All Residents with Private Insurance | 27,600 |
| Underinsured* Residents with Private Insurance | 12,900 |
| Not Underinsured Residents with Private Insurance | 14,700 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Amount Contributed to an HRA versus Deductible

Among all Vermonters with private health insurance including an HRA, employers contributed an average of \$2,585 to the account. Given they have an average deductible of \$4,199; employers contributed enough to cover 62% of the deductible. Those who are not underinsured* have a lower average deductible (\$2,189); so, although their employers, on average, contributed slightly less (\$1,751), that is enough to cover 80% of the deductible.

While employers of underinsured Vermonters contributed slightly more to an HRA (\$3,608) than those who were not underinsured, their contributions were, on average, enough to cover only 56% of their much larger deductible (\$6,499).

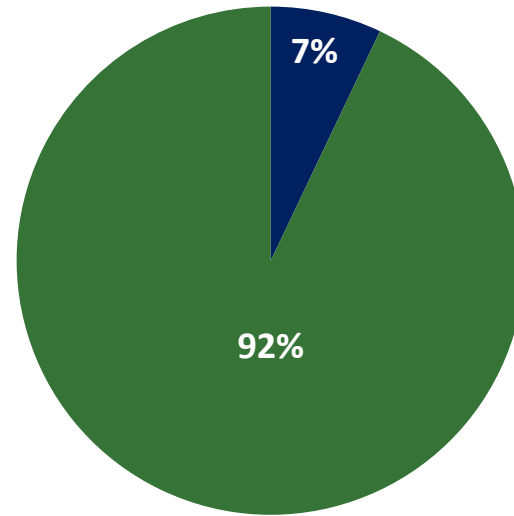


*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Health Care Bills not Covered by an HSA or HRA Vermont Residents Aged 18 to 64

Among those with an HSA or HRA about 7% had a medical bill that was not covered by their account.

Health Care Bills not Covered by an HSA or HRA, among Vermont Residents with Private Insurance, Aged 18 to 64

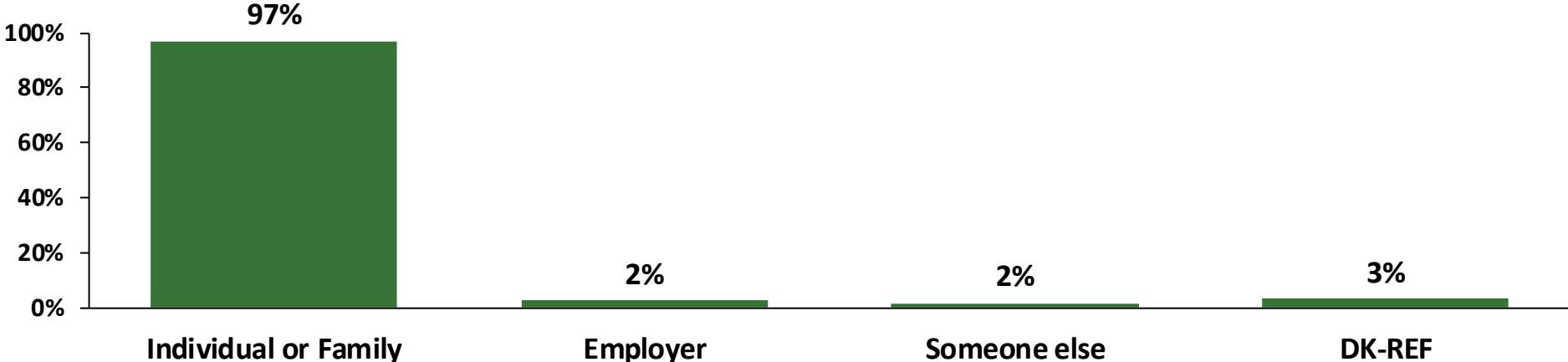


| Response | Estimated Population |
|----------|----------------------|
| Yes | 7,700 |
| No | 96,200 |

Payment of Health Care Expenses not Covered by HSA or HRA Vermont Residents 18 to 64 Years Old

Among those with a medical bill not covered by their HSA or HRA, almost all (97%) were covered by the individual or their family.

Payment of Health Care Bills not Covered by HSA or HRA Vermont Residents with Private Insurance Aged 18 to 64

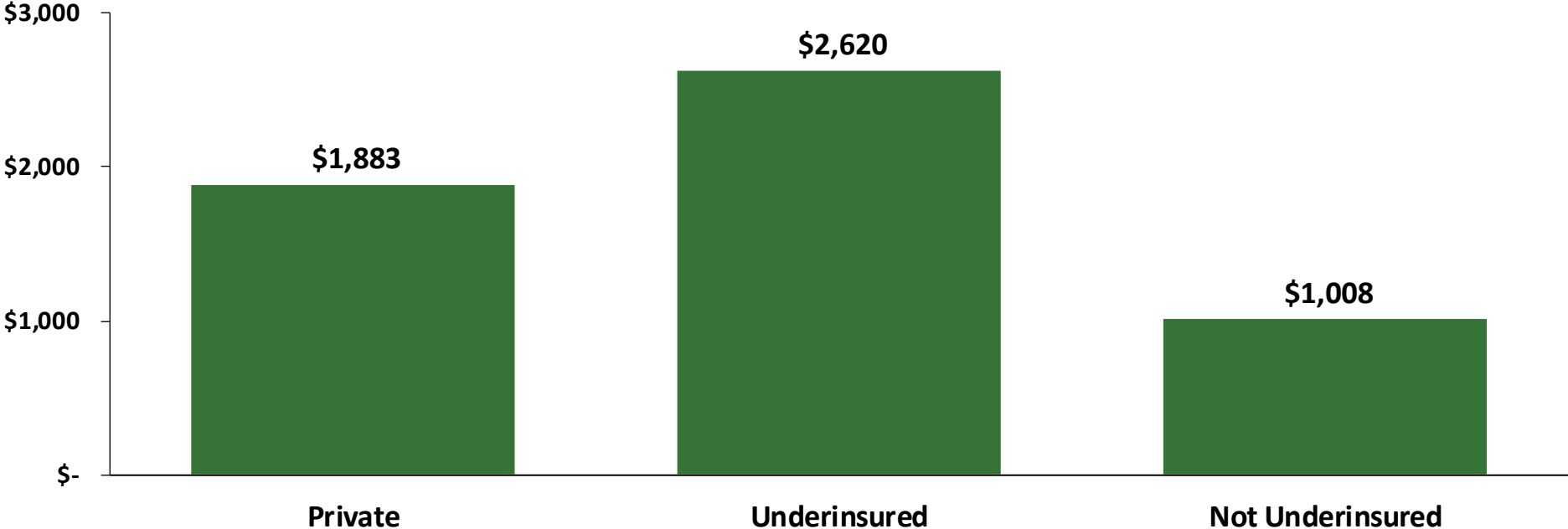


| Payment Source | Estimated Population |
|--------------------|----------------------|
| You or your family | 7,500 |
| Your employer | 200 |
| Someone else | 100 |
| DK-REF | 200 |

Health care Expenses not Covered by HSA or HRA

Privately insured Vermonters with an HSA or HRA had an average of \$1,883 in health care costs not covered by the HSA or HRA. The underinsured* paid a greater amount for health care costs not covered by the HSA or HRA (\$2,620) than privately insurance Vermonters that were not underinsured (\$1,008).

Amount of the health care bills not covered by HSA or HRA Vermont Residents Aged 18 to 64



*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

A scenic view of a lake with two kayakers in the foreground and forested hills in the background. The kayakers are wearing life jackets and hats, and are paddling away from the viewer. The hills in the background are covered in dense green trees. The sky is clear and blue.

Eligibility for State Health Insurance Programs

Eligibility for Subsidies for Private Insurance Purchased through Vermont Health Connect

- Under the Patient Protection and Affordable Care Act (PPACA) guidelines, those who are uninsured are eligible for coverage under the expanded Medicaid program. They also have the option to receive a level of financial assistance (e.g., tax credits, cost-sharing reductions), to purchase private health insurance through a health insurance marketplace, known in this state as Vermont Health Connect.
- In Vermont, an adult with an income under 139% of Federal Poverty Level can gain access to Medicaid. Children living in a household with an income that is 318% or less of the Federal Poverty Level would also be eligible for coverage through Dr. Dynasaur (Medicaid).
- For those residents that do not meet the income requirements for Medicaid, the PPACA potentially provides tax credits that reduce premium costs for private insurance. Under the initial guidelines, this includes those in families with incomes up to 400% of Federal Poverty Level.
- Under the American Rescue Plan Act of 2021, this eligibility was extended to potentially include those in families with incomes over 400% of Federal Poverty Level. The law caps out-of-pocket expenses for premiums at 8.5% of a family's income, though the duration of this extended coverage is uncertain.
- Factors other than income are also used to make final determinations of eligibility for tax credits such as an offer of employer sponsored health insurance. The results presented in this section report the counts and percentage of uninsured residents that are potentially eligible based on their income and do not factor in these other determinants of eligibility. The one out of three uninsured Vermonters who have an offer of employer-sponsored insurance typically would not qualify for these subsidies.

Eligibility Counts for State Health Insurance or to Purchase Health Insurance Through VT Health Connect, Uninsured Vermonters 19 to 64

Among uninsured adults 19 to 64 years old in 2021, 20% (3,700) are eligible for Medicaid. Another 52% (9,200) are potentially eligible to apply for subsidies to purchase private health insurance through Vermont Health Connect while 28% (5,100) are potentially eligible for subsidies under the American Rescue Plan Act of 2021. There has been a general decline in the percentage of uninsured that are eligible for Medicaid and an increase eligible for subsidies to purchase health insurance through Vermont Health Connect.

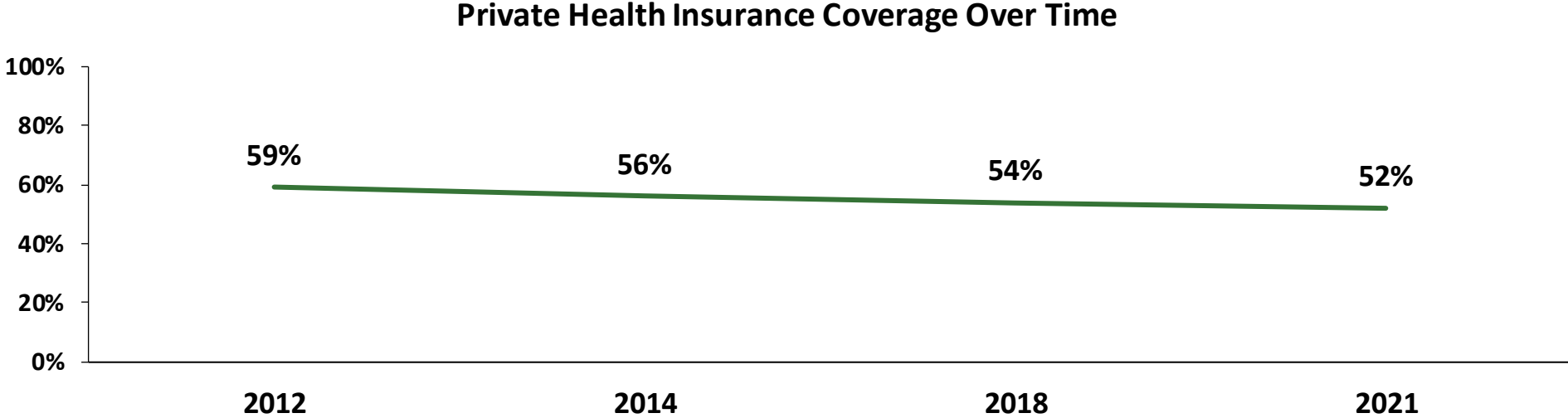
| % FPL | Eligibility | Rates | | | | Estimated Population | | | |
|-------------|--|-------|------|------|------|----------------------|-------|-------|-------|
| | | 2012 | 2014 | 2018 | 2021 | 2012 | 2014 | 2018 | 2021 |
| <139% | Eligible for Medicaid | 35% | 30% | 17% | 20% | 13,600 | 6,500 | 3,000 | 3,700 |
| 139 to 150% | Potentially Eligible for Subsidies to Purchase Health Insurance Through VT Health Connect | 3% | 2% | 3% | 2% | 1,100 | 400 | 500 | 300 |
| 151 to 200% | | 13% | 14% | 16% | 7% | 5,100 | 3,100 | 2,800 | 1,200 |
| 201 to 250% | | 9% | 10% | 17% | 10% | 3,500 | 2,300 | 3,000 | 1,800 |
| 251 to 300% | | 12% | 10% | 7% | 16% | 4,800 | 2,200 | 1,200 | 2,800 |
| 301 to 400% | | 11% | 13% | 17% | 17% | 4,300 | 2,900 | 2,900 | 3,100 |
| >400% | Not eligible for subsidies prior to 2021 but now Potentially Eligible for Subsidies under American Rescue Plan | 17% | 20% | 23% | 28% | 6,700 | 4,400 | 3,900 | 5,100 |

The image features a scenic landscape with rolling hills and a lake. A teal banner is overlaid across the middle of the image, containing the text "Private Health Insurance" in white. The background shows a calm lake in the foreground, with two people kayaking. The hills in the background are covered in dense forest. The sky is clear and blue. The overall tone is peaceful and natural.

Private Health Insurance

Private Health Insurance Coverage* Over Time

In 2012, 59% of Vermonter’s (371,100), reported having private health insurance. As of 2021, 52% of resident’s (318,800) reported having private health insurance coverage. This is a significant decrease from both 2012 and 2014.

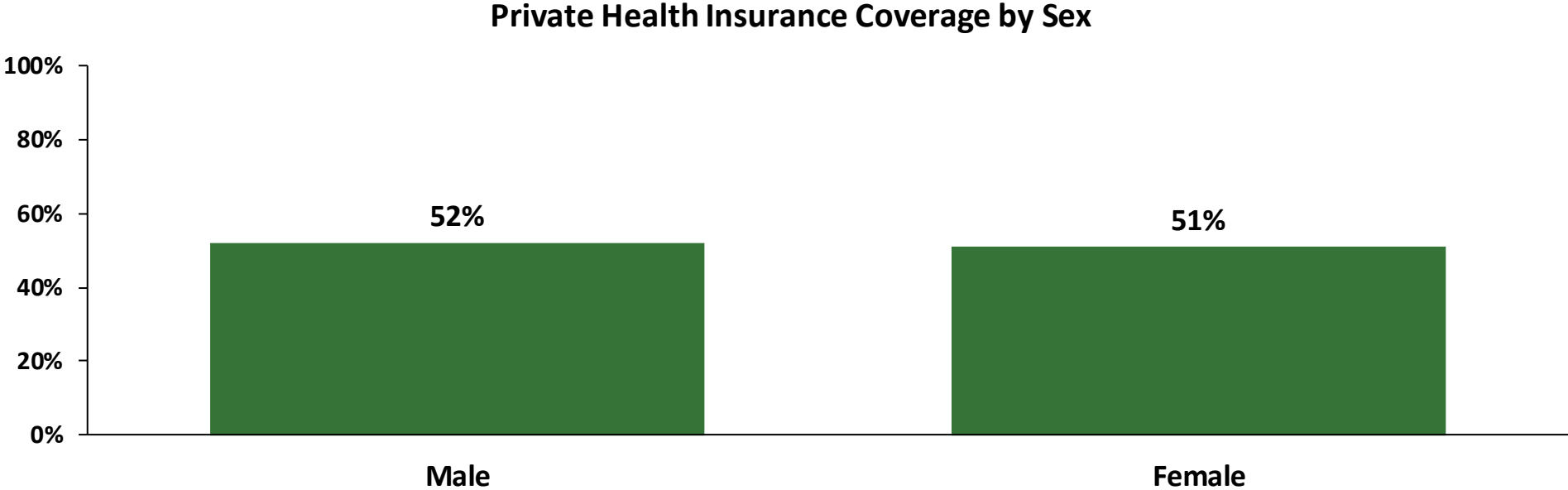


| Year | Estimated Population |
|------|----------------------|
| 2012 | 371,100 |
| 2014 | 351,200 |
| 2018 | 335,100 |
| 2021 | 318,800 |

*The data reported in this section includes all Vermonters with private health insurance including residents with more than one type of health insurance coverage such as Medicare, Medicaid, or military insurance.

Private Health Insurance Coverage by Sex

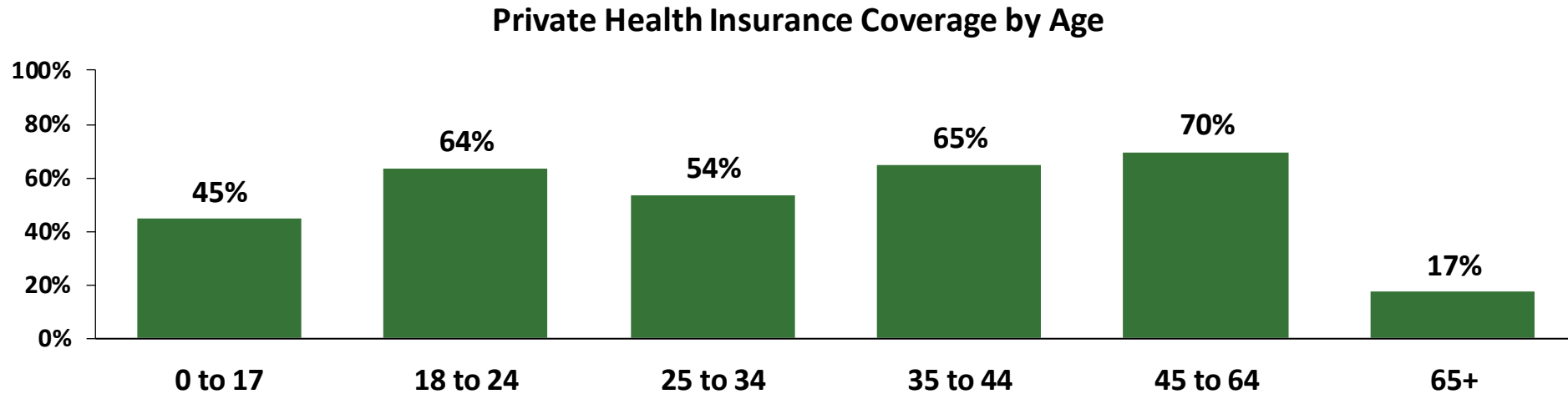
Over half of male (52% or 159,500) and female (51% or 159,200) Vermonters had private health insurance in 2021.



| Sex | Estimated Population |
|--------|----------------------|
| Male | 159,500 |
| Female | 159,200 |

Private Health Insurance Coverage by Age

Seventy percent of those aged 45 to 64 (120,100) in 2021 have private health insurance compared to 65% of those 35 to 44 years old (45,600) and 64% of those 18 to 24 years old (36,000). Just over half (54%) of Vermont residents 25 to 34 years old (43,700) and 45% of 0- to 17-year-olds have private insurance. Vermonters between the ages of 18 and 64 were significantly more likely to have private insurance than younger and older Vermonters.

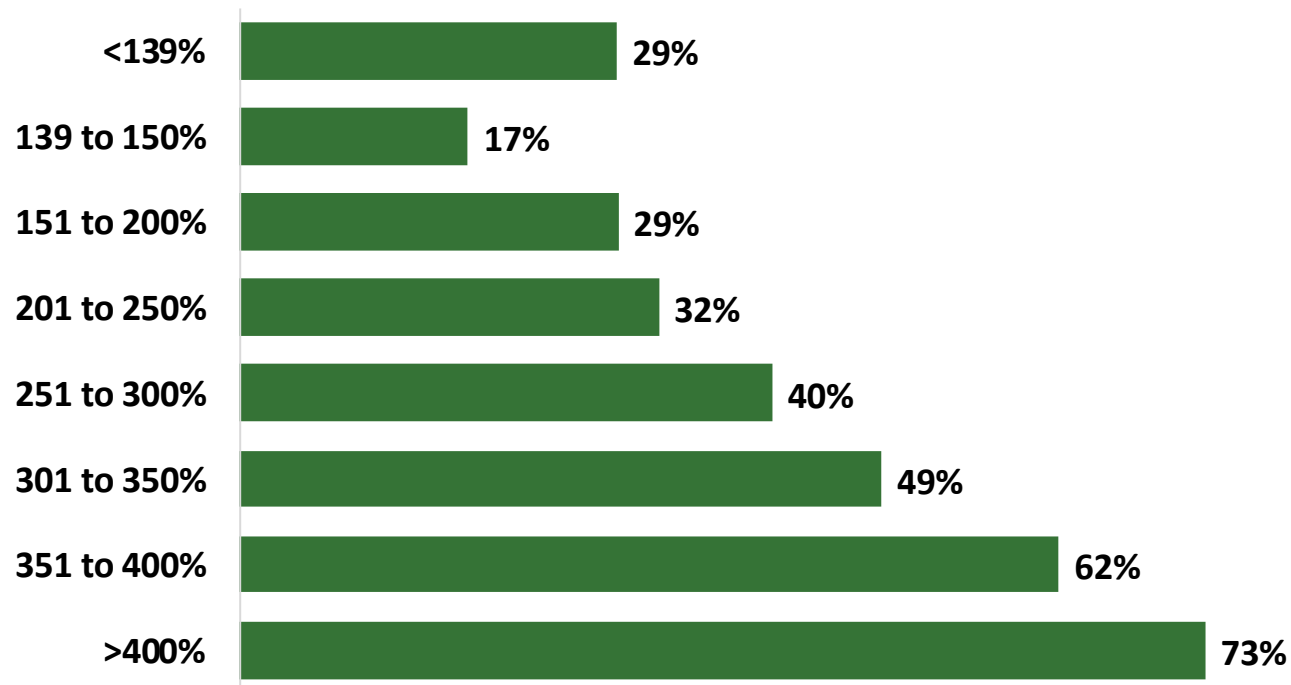


| Age | Estimated Population |
|----------|----------------------|
| 0 to 17 | 52,200 |
| 18 to 24 | 36,000 |
| 25 to 34 | 43,700 |
| 35 to 44 | 45,600 |
| 45 to 64 | 120,100 |
| 65+ | 21,100 |

Private Health Insurance Coverage by Federal Poverty Level

In general, the percentage of residents with private health insurances increases with income. Almost three-quarters (73%) of Vermont residents with an income of 400% of the FPL or greater (189,600 residents) have private health insurance while three in five (62%) of those with incomes between 351% to 400% of the FPL (22,400) have private insurance. Those with an annual income of more than 350% of the FPL are significantly more likely to have private health insurance coverage while those earning 300% or less of the FPL are significantly less likely to have private insurance.

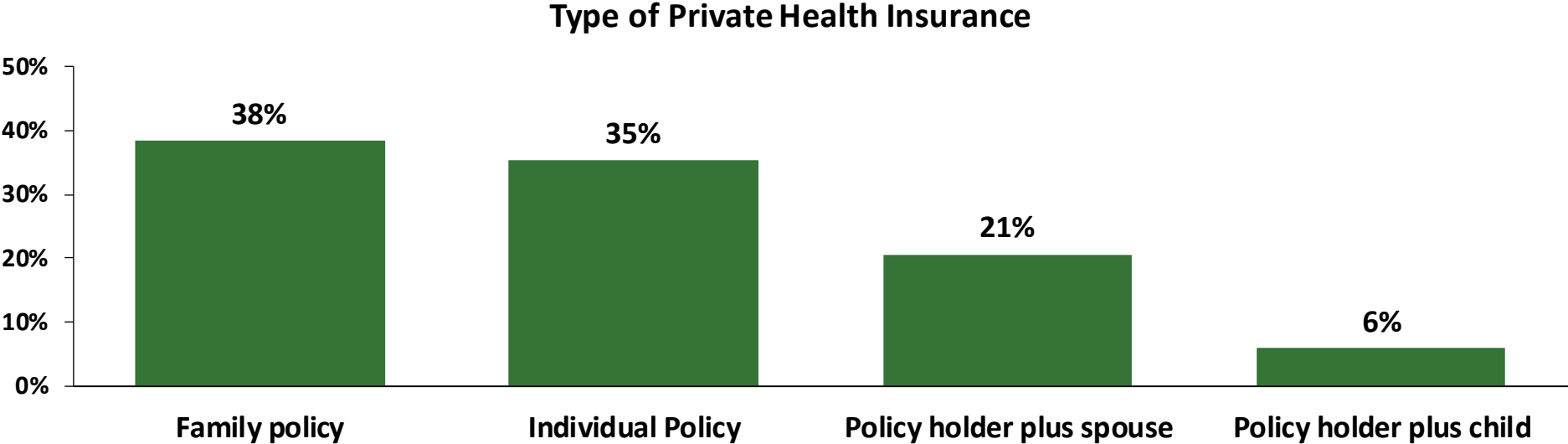
Private Health Insurance Coverage by Federal Poverty Level



| Private Health Insurance Coverage by Federal Poverty Level | |
|--|----------------------|
| Percent of FPL | Estimated Population |
| <139% | 37,500 |
| 139 to 150% | 1,800 |
| 151 to 200% | 14,500 |
| 201 to 250% | 13,700 |
| 251 to 300% | 18,900 |
| 301 to 350% | 20,300 |
| 351 to 400% | 22,400 |
| >400% | 189,600 |

Number of Beneficiaries Covered by Private Health Insurance Policy

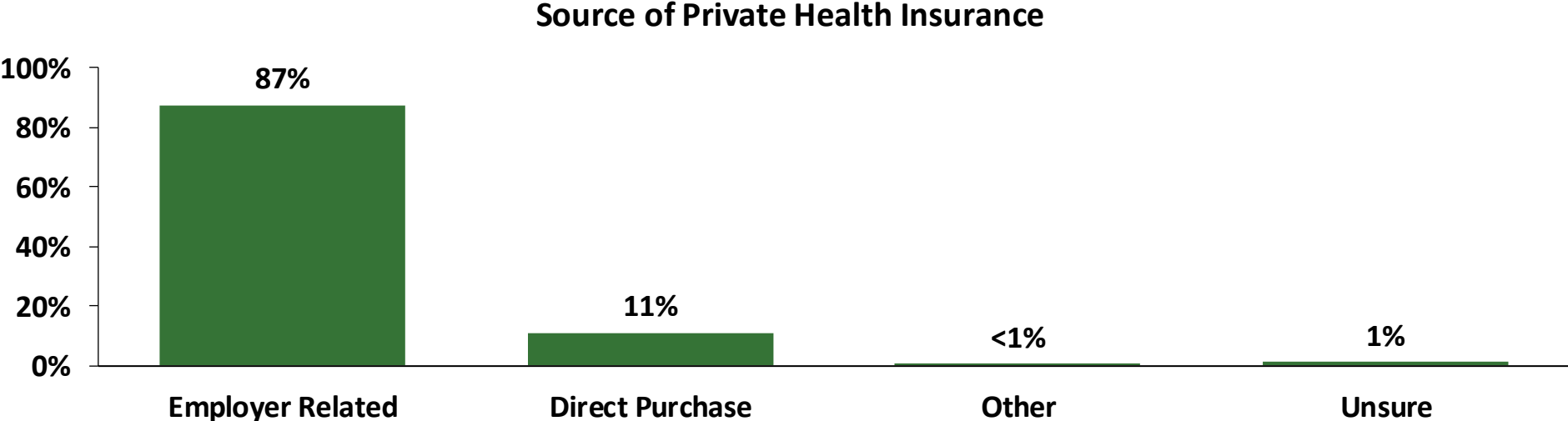
Most of privately insured Vermonters have either a family policy (38%; 122,200) covering themselves, a spouse and one or more children, or an individual policy (35%; 112,500).



| Policy Type | Estimated Population |
|---------------------------|----------------------|
| Family policy | 122,200 |
| Individual Policy | 112,500 |
| Policy holder plus spouse | 65,600 |
| Policy holder plus child | 18,400 |

Source of Private Health Insurance

In 2021, most Vermont residents (87%; 278,700) received their health insurance through an employer related source (including employer sponsored insurance, COBRA or retirement plan) while 11% (35,500) purchased health insurance directly. Among those directly purchasing insurance, 23,700 purchased private health insurance through Vermont Health Connect or 7% of all Vermonters with private insurance (data not shown).

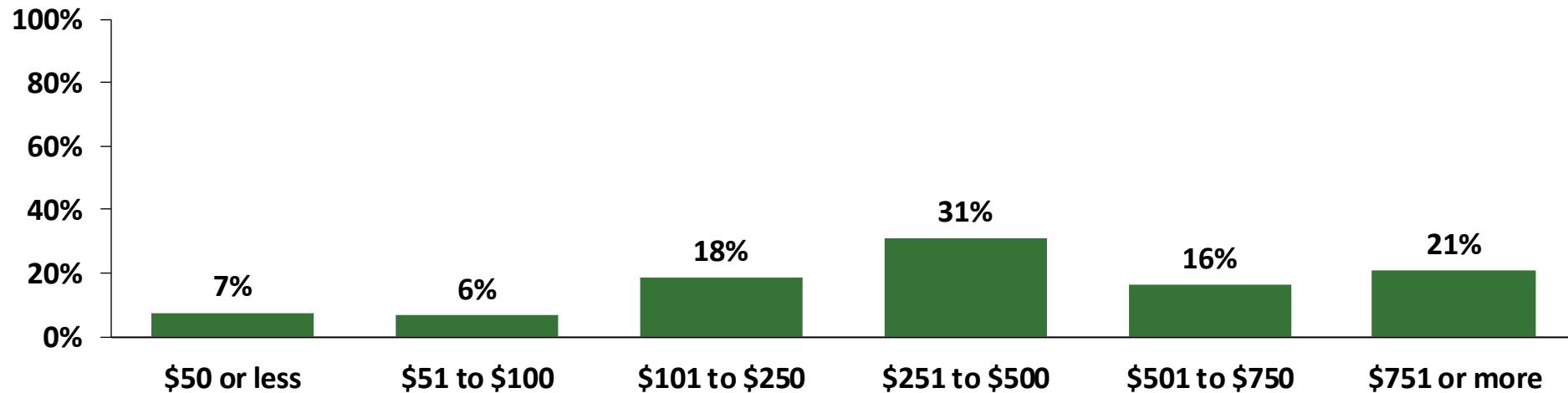


| Source | Estimated Population |
|------------------|----------------------|
| Employer Related | 278,700 |
| Direct Purchase | 35,500 |
| Other | 1,300 |
| Unsure | 3,200 |

Private Health Insurance Monthly Premium

A third (31%) of those with private insurance (98,100) pay a premium of \$251 to \$500 per month. Nearly a fifth (21%; 66,100) pay \$751 or more a month. The average monthly premium paid out-of-pocket is \$505 in 2021 compared to \$538 in 2018, \$403 in 2014, and \$388 in 2012 (data not shown).

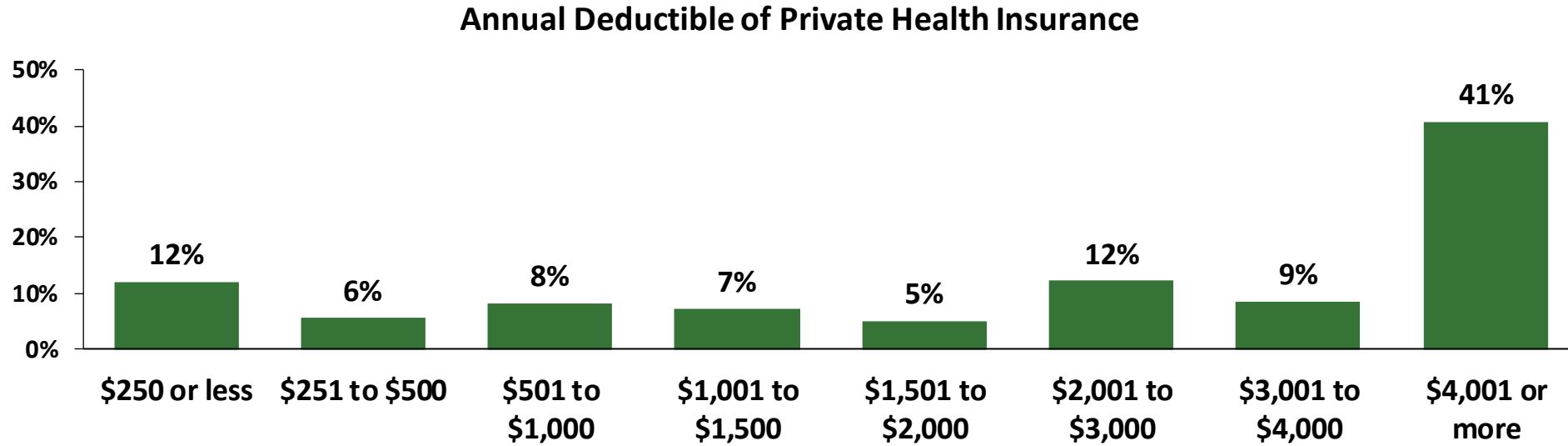
Monthly Premium Paid for Private Health Insurance



| Amount | Estimated Population |
|----------------|----------------------|
| \$50 or less | 23,700 |
| \$51 to \$100 | 20,700 |
| \$101 to \$250 | 58,900 |
| \$251 to \$500 | 98,100 |
| \$501 to \$750 | 51,300 |
| \$751 or more | 66,100 |

Annual Deductible of Private Health Insurance

Forty-one percent of Vermonter's (130,000) with private health insurance have an annual deductible greater than \$4,000.



| Amount | Estimated Population |
|--------------------|----------------------|
| \$250 or less | 38,700 |
| \$251 to \$500 | 18,000 |
| \$501 to \$1,000 | 26,400 |
| \$1,001 to \$1,500 | 23,100 |
| \$1,501 to \$2,000 | 16,400 |
| \$2,001 to \$3,000 | 38,900 |
| \$3,001 to \$4,000 | 27,200 |
| \$4,001 or more | 130,000 |

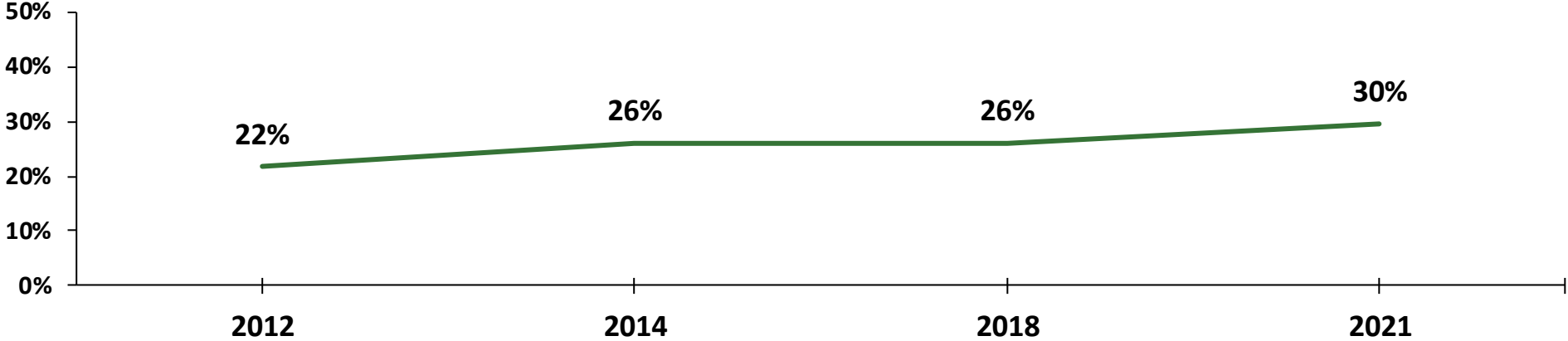
The image is a composite of two scenes. The top scene shows a wide, calm lake with a dense forest of evergreen trees covering the rolling hills in the background. The sky is a pale, clear blue. The bottom scene shows two people kayaking on the same lake. They are seen from behind, wearing white helmets and life jackets. The water is a light blue-grey color, and the overall lighting is soft and natural.

Medicaid or Dr. Dynasaur Coverage

Medicaid or Dr. Dynasaur Coverage* Over Time

In 2021, 30% of Vermonter’s (182,800) report being enrolled in Medicaid or Dr. Dynasaur. This has increased significantly from 22% in 2012.

Medicaid or Dr. Dynasaur Coverage Over Time (% Yes)

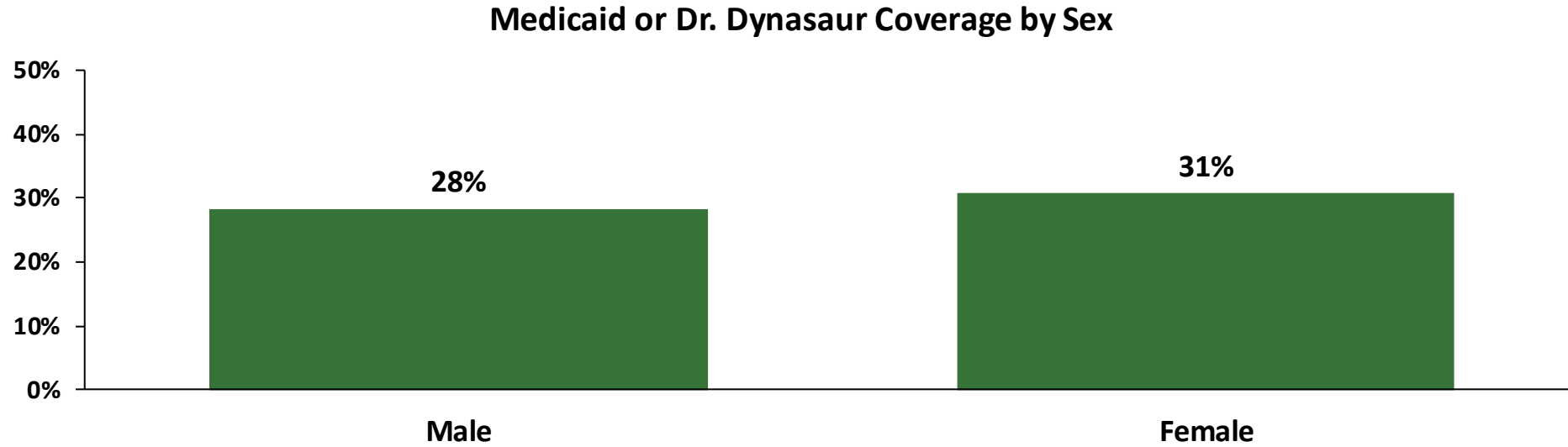


| Year | Estimated Population |
|------|----------------------|
| 2012 | 135,800 |
| 2014 | 162,700 |
| 2018 | 163,000 |
| 2021 | 182,800 |

*The data reported in this section includes all Vermonters with Medicaid or Dr. Dynasaur including residents with more than one type of health insurance coverage such as private insurance, Medicare, or military insurance.

Medicaid or Dr. Dynasaur Coverage by Sex

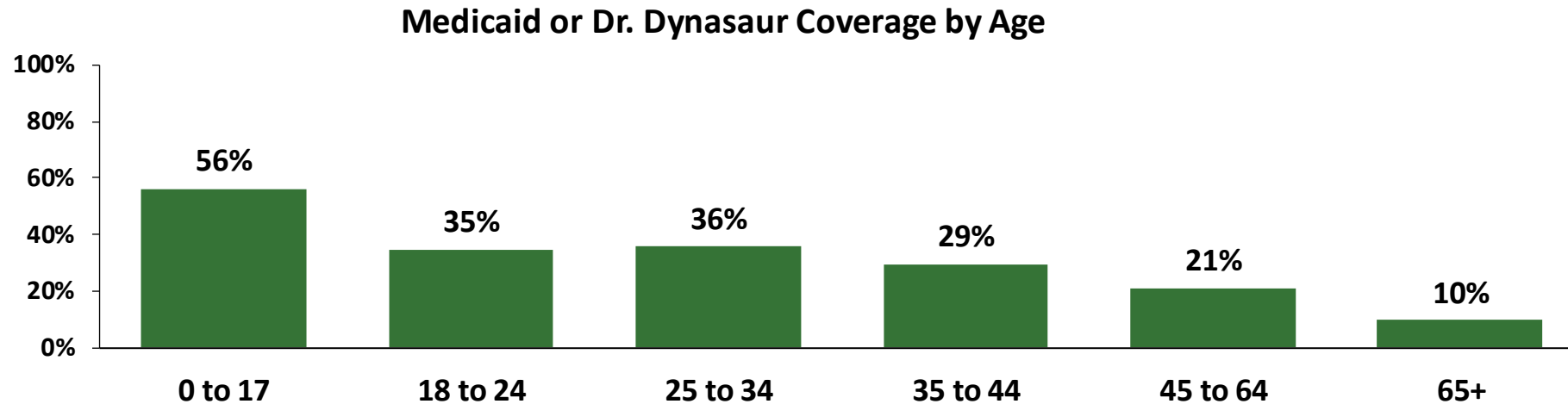
Thirty-one percent of female Vermont residents (95,900) report being enrolled in Medicaid or Dr. Dynasaur. This compares to 28% of male residents (86,900) who report being enrolled in the program.



| Sex | Estimated Population |
|--------|----------------------|
| Male | 86,900 |
| Female | 95,900 |

Medicaid or Dr. Dynasaur Coverage by Age

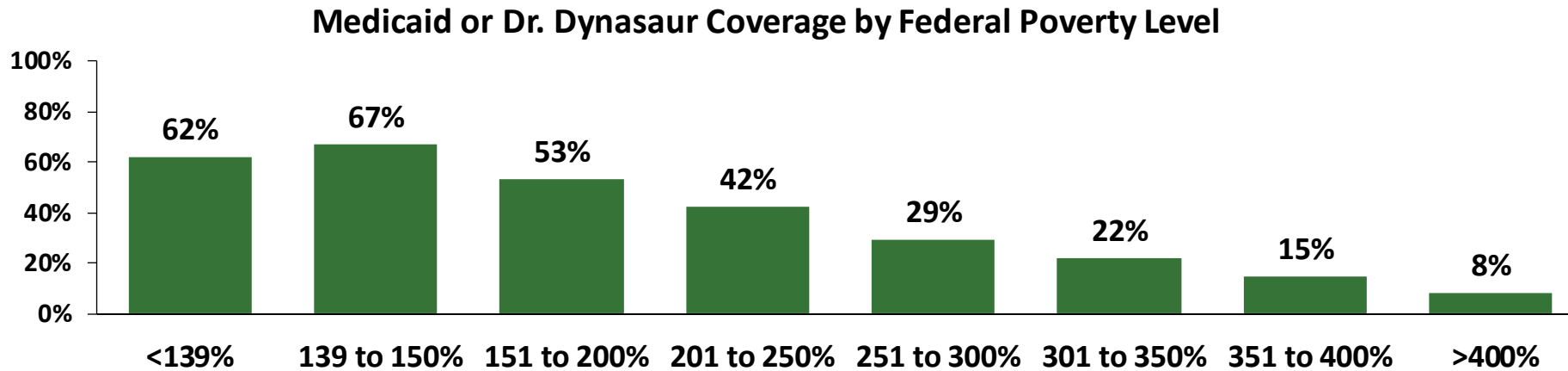
Over half (56%) of Vermont residents 0 to 17 years old (65,500) are enrolled in Medicaid or Dr. Dynasaur, significantly higher than other age groups. Thirty-six percent of adults between the age of 25 and 34 (28,900) and 35% of young adults aged 18 to 24 (19,600) are enrolled in Medicaid or Dr. Dynasaur. Only 10% of those 65 and older (11,600) are enrolled in Medicaid or Dr. Dynasaur, which is the smallest enrollee age group.



| Age | Estimated Population |
|----------|----------------------|
| 0 to 17 | 65,500 |
| 18 to 24 | 19,600 |
| 25 to 34 | 28,900 |
| 35 to 44 | 20,700 |
| 45 to 64 | 36,400 |
| 65+ | 11,600 |

Medicaid or Dr. Dynasaur Coverage by Federal Poverty Level

Sixty-seven percent (7,100) of Vermonters with an income between 139% and 150% of the FPL are enrolled in Medicaid or Dr. Dynasaur coverage, as are 62% (81,300) of residents with annual incomes of 139% of FPL or less. Over half (53%) of Vermonters with an income between 151 to 200% of the FPL (26,900) are enrolled in Medicaid or Dr. Dynasaur. Residents earning 250% of the FPL or less are significantly more likely to be enrolled in Medicaid.

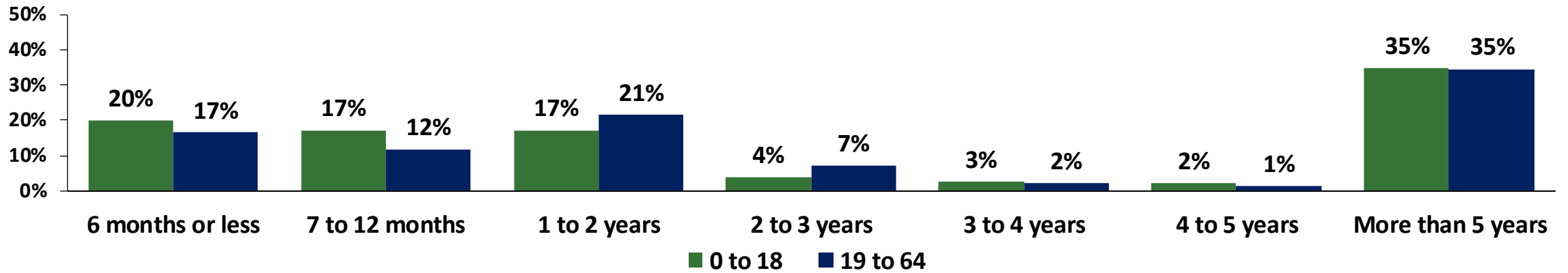


| Percent of FPL | Estimated Population |
|----------------|----------------------|
| <139% | 81,300 |
| 139 to 150% | 7,100 |
| 151 to 200% | 26,900 |
| 201 to 250% | 18,200 |
| 251 to 300% | 13,800 |
| 301 to 350% | 9,100 |
| 351 to 400% | 5,300 |
| >400% | 21,100 |

Length of Time Covered Through Medicaid

Among those enrolled in Medicaid, over a third (35%) of Vermonters 0 to 18 years old (23,900) and 19 to 64 years old (35,300) have had Medicaid coverage for 5 years or more. Thirty-seven percent of children 0 to 18 years old enrolled in Medicaid have been enrolled for a year or less compared to 29% of enrollees 19 to 64 years old.

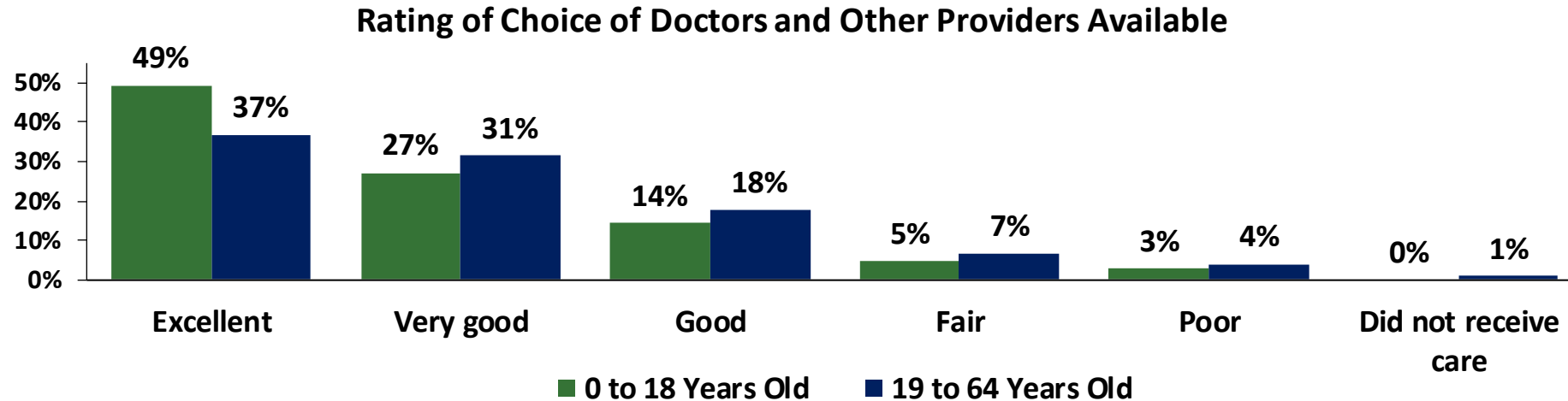
Length of Time Covered Through the Medicaid Program



| Estimated Population by Age | | |
|-----------------------------|---------|----------|
| Length of Time | 0 to 18 | 19 to 64 |
| 6 months or less | 13,700 | 16,900 |
| 7 to 12 months | 11,800 | 12,100 |
| 1 to 2 years | 11,800 | 21,900 |
| 2 to 3 years | 2,700 | 7,400 |
| 3 to 4 years | 1,700 | 2,100 |
| 4 to 5 years | 1,400 | 1,500 |
| More than 5 years | 23,900 | 35,300 |

Doctor and Provider Choice

Almost half (49%) of Medicaid insured between the ages of 0 and 18 years old (34,100) and 37% of adults between 19 and 64 years old (37,700) rated their options for choice of doctors and providers as “Excellent”. This is compared to 3% of 0 to 18-year-olds, and 4% of 19 to 64-year-olds that rated the choice of providers as “Poor”.

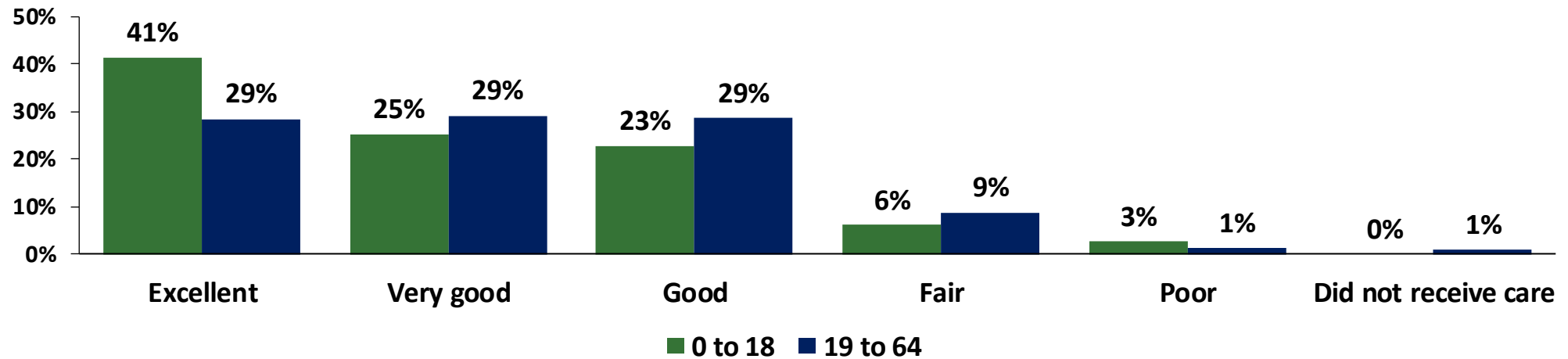


| Rating | Estimated Population by Age | |
|----------------------|-----------------------------|----------|
| | 0 to 18 | 19 to 64 |
| Excellent | 34,100 | 37,700 |
| Very good | 18,700 | 32,200 |
| Good | 9,900 | 18,100 |
| Fair | 3,200 | 6,800 |
| Poor | 1,900 | 4,100 |
| Did not receive care | 0 | 900 |

Range of Services Covered by Medicaid, Green Mountain Care or Dr. Dynasaur

Forty-one percent of Medicaid insured ages 0 to 18 years old (28,500) and nearly three in ten (29%) ages 19 to 64 years old (29,200) indicate the range of services covered is “excellent.” A quarter (25%) of children and almost one-third (29%) of adults (29,900) said the range of services covered was “very good.” Three percent of children (1,800) and 1% of adults (1,300) rated the range of services covered as “poor.”

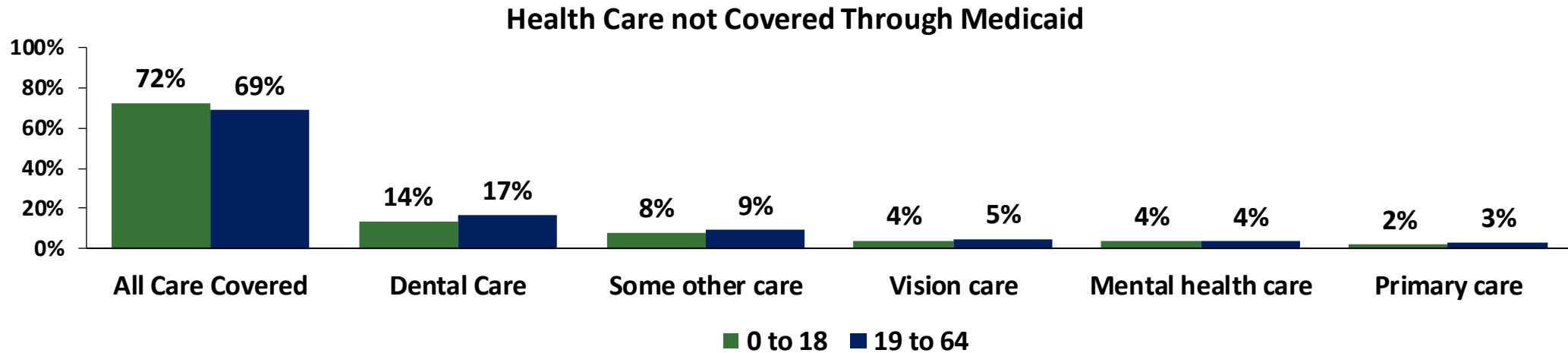
Rating of Range of Services Covered by Medicaid, Green Mountain Care or Dr. Dynasaur



| Rating | Estimated Population by Age | |
|----------------------|-----------------------------|----------|
| | 0 to 18 | 19 to 64 |
| Excellent | 28,500 | 29,200 |
| Very good | 17,500 | 29,900 |
| Good | 15,700 | 29,200 |
| Fair | 4,200 | 9,000 |
| Poor | 1,800 | 1,300 |
| Did not receive care | 0 | 1,000 |

Health Care not Covered Through Medicaid

When asked if there were health care services they needed but did not receive because Medicaid would not cover the costs, 72% of Medicaid enrollees 0 to 18 years old (49,800) and 69% of enrollees 19 to 64 years old (70,300) indicated there were no such instances. Fourteen percent of children (9,500) and 17% of adults (17,100) reported instances where they could not receive needed dental care because Medicaid did not cover the costs.



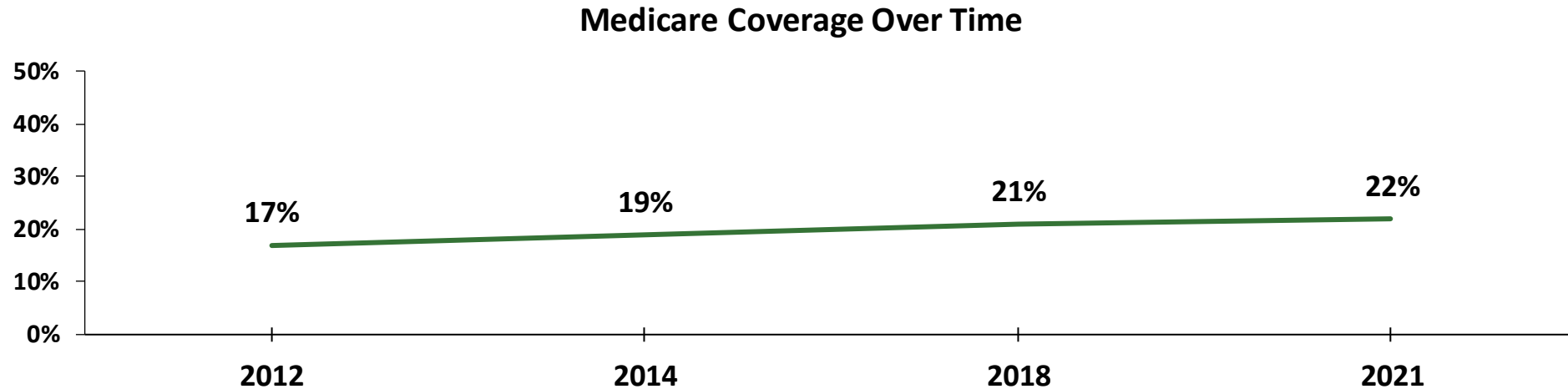
| Healthcare Type | Estimated Population by Age | |
|-------------------------|-----------------------------|----------|
| | 0 to 18 | 19 to 64 |
| All Care Covered | 49,800 | 70,300 |
| Dental Care | 9,500 | 17,100 |
| Some other type of care | 5,400 | 9,300 |
| Mental health care | 2,700 | 3,600 |
| Vision care | 2,700 | 4,800 |
| Primary care | 1,300 | 3,100 |
| Substance use treatment | 100 | 400 |

The image is a composite of two scenes. The top scene shows a wide, calm lake with a dense forest of evergreen trees covering the rolling hills in the background. The sky is a pale, clear blue. The bottom scene shows two people kayaking on the same lake. They are seen from behind, wearing white helmets and life jackets. The water is a light blue-grey color, and the overall lighting is soft and natural.

Medicare Coverage

Medicare Coverage* Over Time

Twenty-two percent (137,500) of Vermonters were covered under Medicare in 2021. This has increased significantly since 2012 and 2014 when 17% and 19% of Vermonters respectively were covered under Medicare.

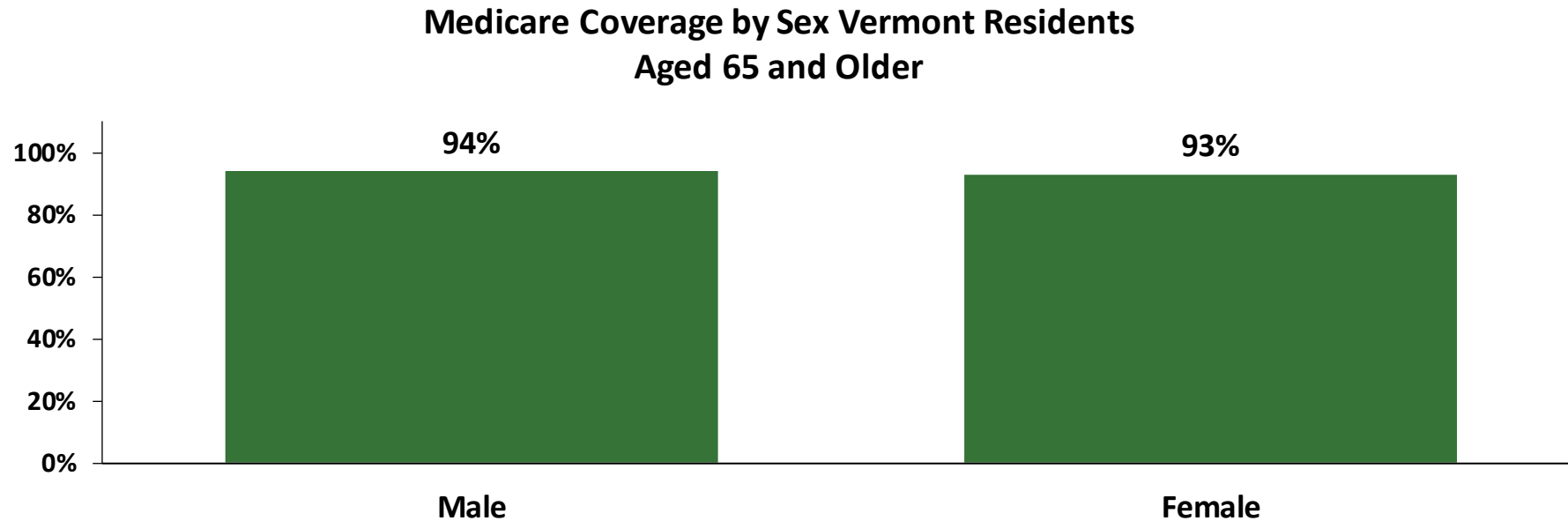


| Year | Estimated Population |
|------|----------------------|
| 2012 | 107,400 |
| 2014 | 121,600 |
| 2018 | 128,800 |
| 2021 | 137,500 |

*The data reported in this section includes all Vermonters with Medicare including residents with more than one type of health insurance coverage such as private insurance, Medicaid, or military insurance.

Medicare Coverage by Sex

Ninety-four percent of male (53,300) and 93% of female (60,500) Vermonter's aged 65 and older are enrolled in Medicare.

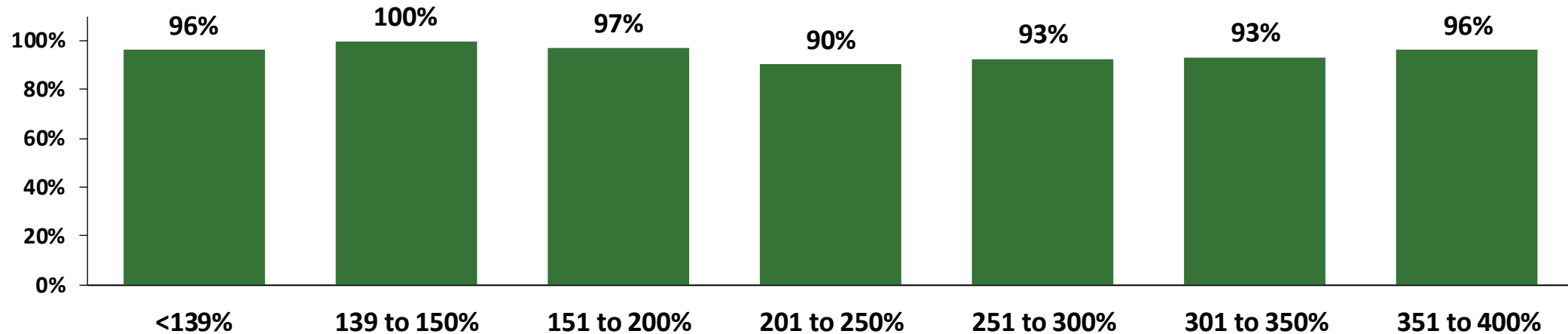


| Sex | Estimated Population |
|--------|----------------------|
| Male | 53,300 |
| Female | 60,500 |

Medicare Coverage by Federal Poverty Level

All resident's who are 65 and older with income between 139% and 150% of the FPL (1,500) are enrolled in Medicare, as are 97% (11,000) with an income between 151% and 200% of the FPL.

Medicare Coverage by Federal Poverty Level Vermont Residents Aged 65 and Older

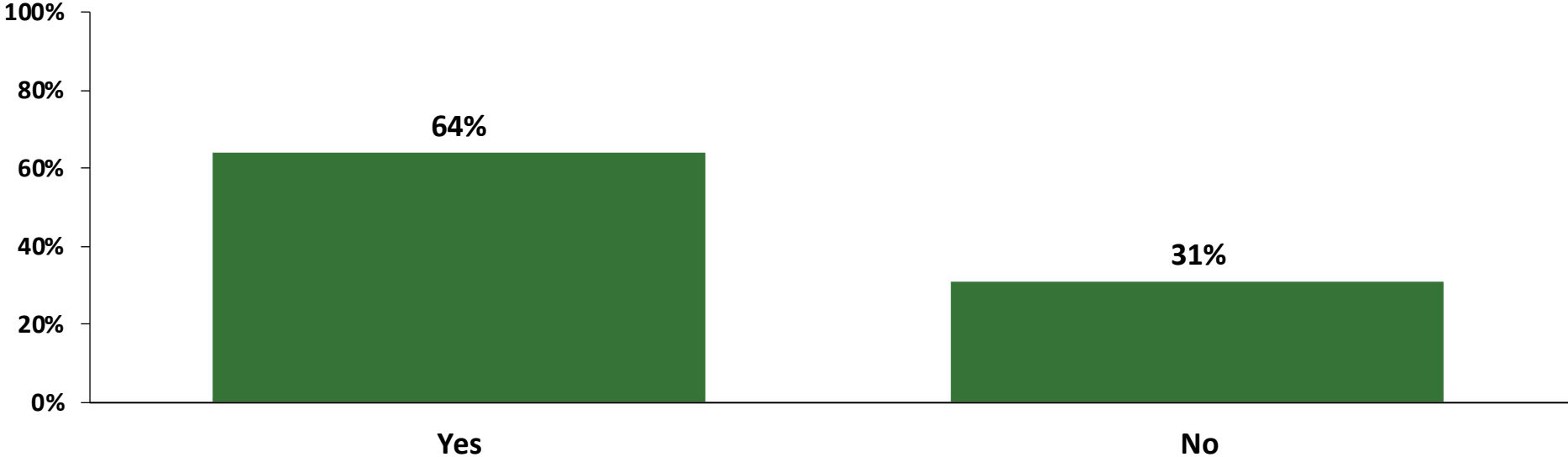


| Percent of Federal Poverty Level | Estimated Population |
|----------------------------------|----------------------|
| <139% | 15,400 |
| 139 to 150% | 1,500 |
| 151 to 200% | 11,000 |
| 201 to 250% | 9,600 |
| 251 to 300% | 10,400 |
| 301 to 350% | 10,200 |
| 351 to 400% | 7,000 |
| >400% | 48,800 |

Medicare Supplemental Coverage

In 2021, 64% of Vermonters aged 65 and older (73,000) who were enrolled in Medicare report that they also have Medicare supplemental insurance or are enrolled in a Medicare Advantage Plan.

Medicare Supplement Coverage Vermont Residents Aged 65 and Older



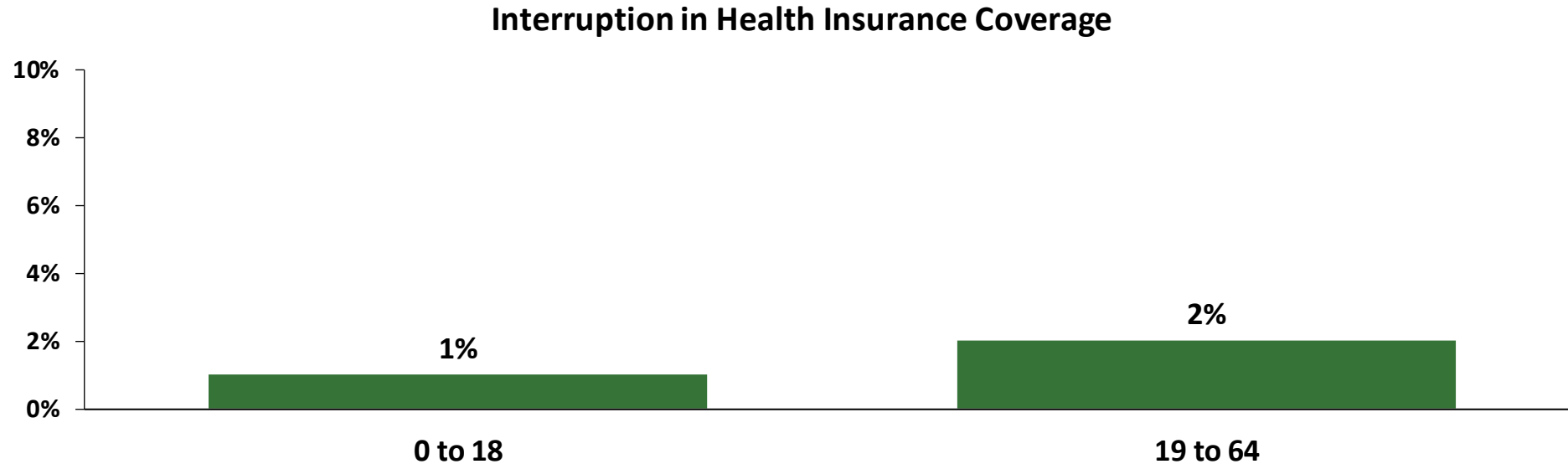
| Response | Estimated Population |
|----------|----------------------|
| Yes | 73,000 |
| No | 34,900 |

The image features a serene landscape with rolling hills covered in dense green forest, extending to a calm body of water in the foreground. The scene is captured in a soft, slightly desaturated light. A prominent teal banner is superimposed across the middle of the image, containing the title text in white. In the lower portion of the image, two individuals are seen from behind, paddling kayaks on the water. They are wearing white helmets and life jackets, and their paddles are visible in the water.

Interruptions in Health Insurance Coverage

Interruption in Health Insurance Coverage Over Time

About two percent (8,800) of adult Vermonters aged 19 to 64 had an interruption in their health insurance coverage in 2021.

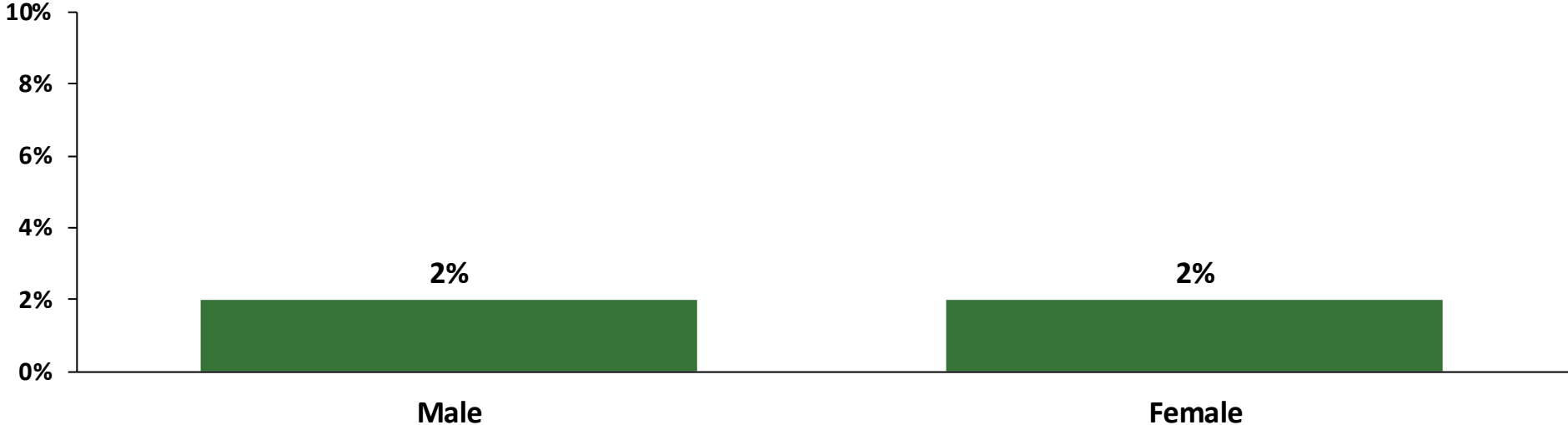


| Age | Estimated Population |
|----------|----------------------|
| 0 to 18 | 1,100 |
| 19 to 64 | 8,800 |

Interruption in Health Insurance Coverage by Sex

Male and female Vermonters under the age of 65 were equally likely to have had an interruption in their health insurance coverage in 2021.

Interruption in Health Insurance Coverage by Sex Vermont Residents Aged 0 to 64

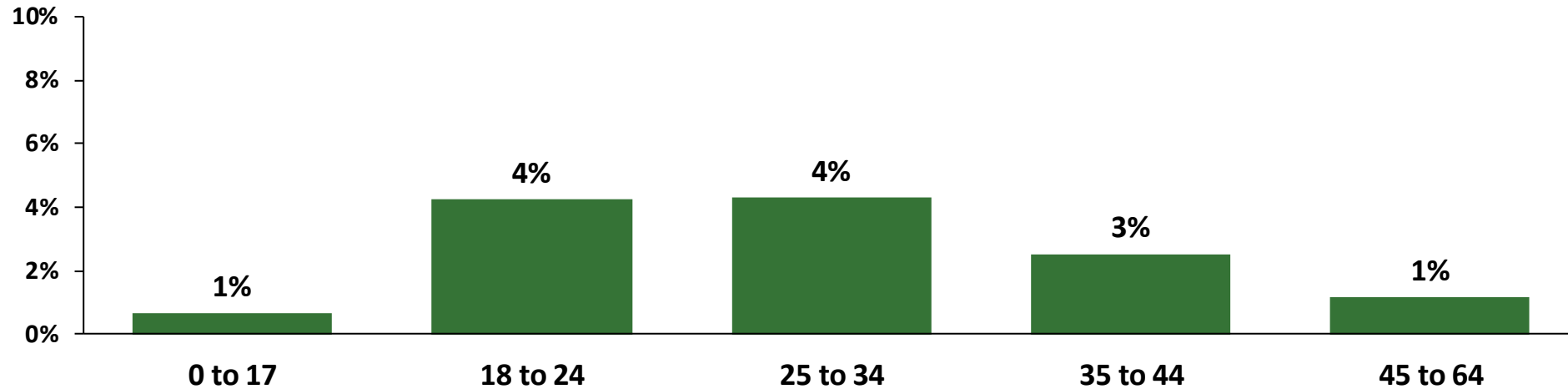


| Sex | Estimated Population |
|--------|----------------------|
| Male | 5,600 |
| Female | 4,300 |

Interruption in Health Insurance Coverage by Age

Four percent of Vermonters 18 to 24 years old and 25 to 34 years old experienced an interruption in their health insurance coverage in 2021. Vermonters 18 to 34 years old were significantly more likely than other age groups to have had an interruption in their insurance coverage in 2021.

Interruption in Health Insurance Coverage by Age Vermont Residents Aged 0 to 64

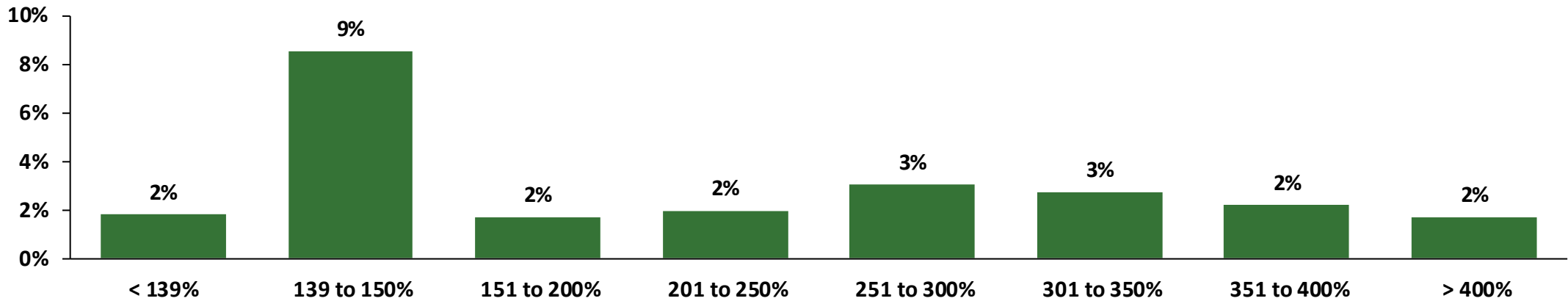


| Age | Estimated Population |
|----------|----------------------|
| 0 to 17 | 800 |
| 18 to 24 | 2,300 |
| 25 to 34 | 3,200 |
| 35 to 44 | 1,700 |
| 45 to 64 | 1,900 |

Interruption in Health Insurance Coverage by Federal Poverty Level

Nine percent (800) of Vermonters making 139% to 150% of the FPL experienced an interruption in health insurance coverage in 2021.

Interruption in Health Insurance Coverage by Federal Poverty Level Vermont Residents Aged 0 to 64

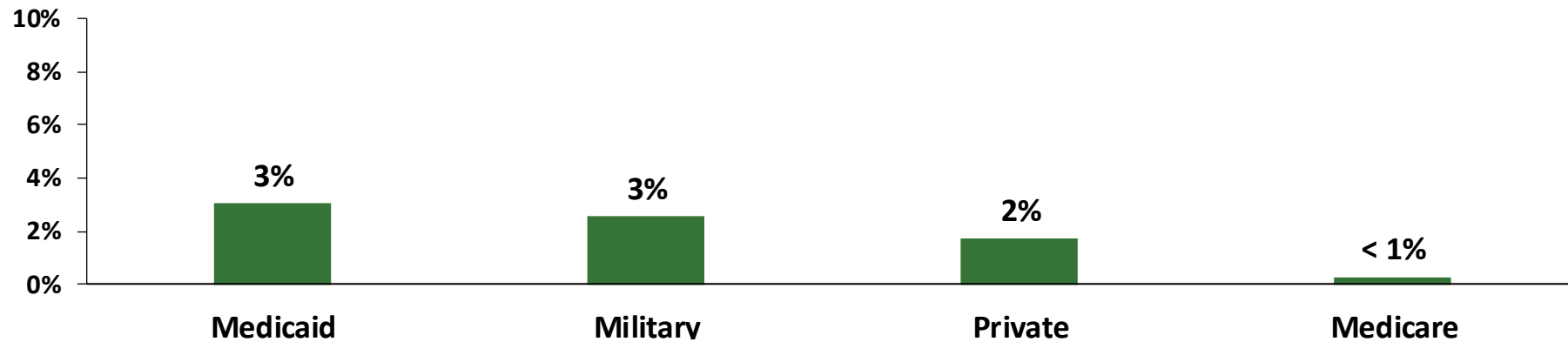


| Percent of FPL | Counts |
|----------------|--------|
| < 139% | 2,000 |
| 139 to 150% | 800 |
| 151 to 200% | 700 |
| 201 to 250% | 600 |
| 251 to 300% | 1,000 |
| 301 to 350% | 800 |
| 351 to 400% | 600 |
| > 400% | 3,400 |

Interruption in Health Insurance Coverage by Primary Type

In 2021, 3% of Vermont residents 0 to 64 years old primarily insured through Medicaid or military insurance experienced an interruption in coverage compared to 2% of those primarily insured through private insurance.

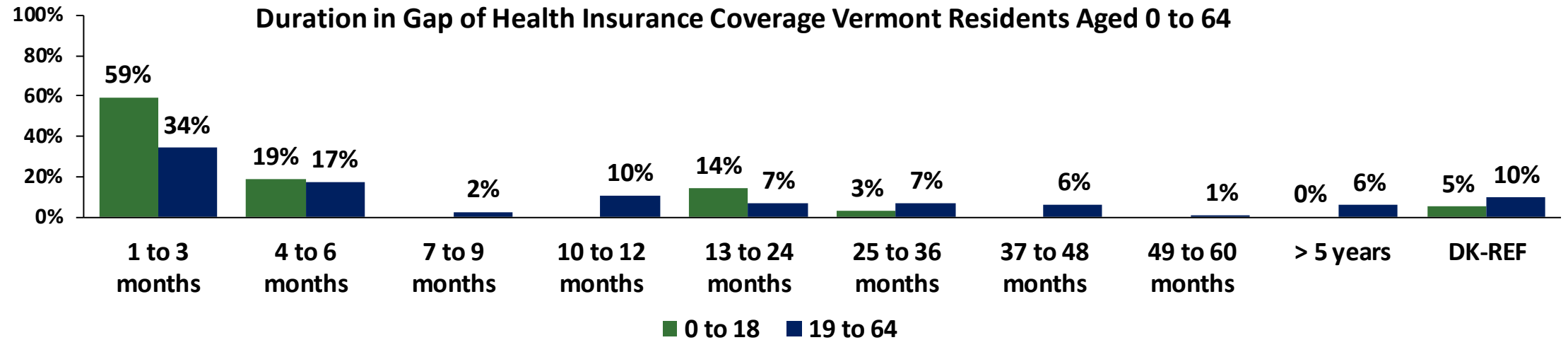
**Interruption in Health Insurance Coverage by Primary Type of Insurance
Vermont Residents Aged 0 to 64**



| Primary Insurance | Estimated Population |
|-------------------|----------------------|
| Private | 5,100 |
| Medicaid | 4,500 |
| Medicare | 100 |
| Military | 200 |

Duration of Gap in Health Insurance Coverage

More than half (59%) of children 0 to 18 years old (700), and a third (34%) of those adults 19 to 64 years old (3,000) experienced a gap of one to three months.

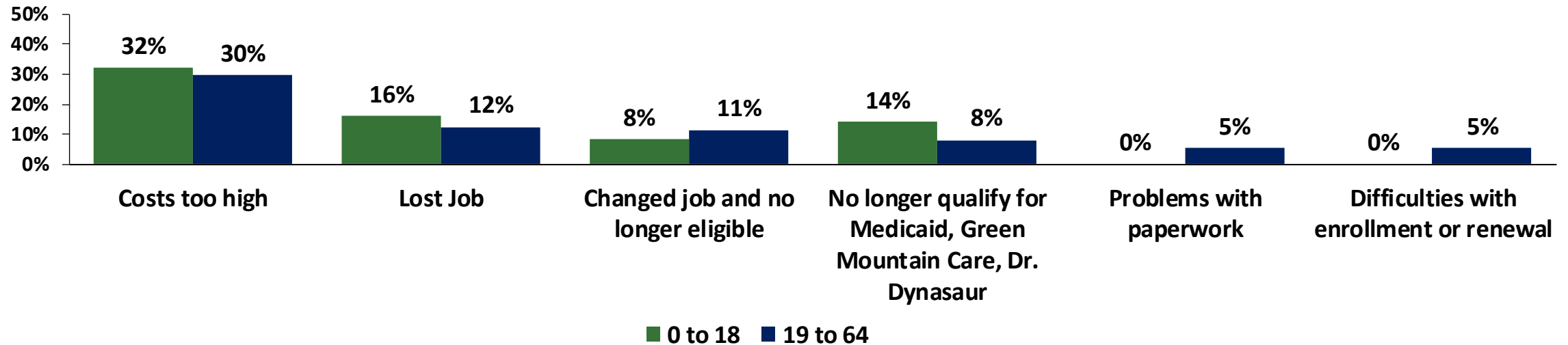


| Duration of Gap | Estimated Population by Age | |
|-----------------|-----------------------------|----------|
| | 0 to 18 | 19 to 64 |
| 1 to 3 months | 700 | 3,000 |
| 4 to 6 months | 200 | 1,500 |
| 7 to 9 months | 0 | 200 |
| 10 to 12 months | 0 | 900 |
| 13 to 24 months | 200 | 600 |
| 25 to 36 months | 0 | 600 |
| 37 to 48 months | 0 | 500 |
| 49 to 60 months | 0 | 100 |
| > 5 years | 0 | 500 |

Reason for Gap in Health Insurance Coverage

In 2021, cost of health insurance coverage was the most common reason for a gap in coverage, accounting for a third (32%) of health insurance gaps among 0 to 18-year-olds and three in ten adults 19 to 64 years old.

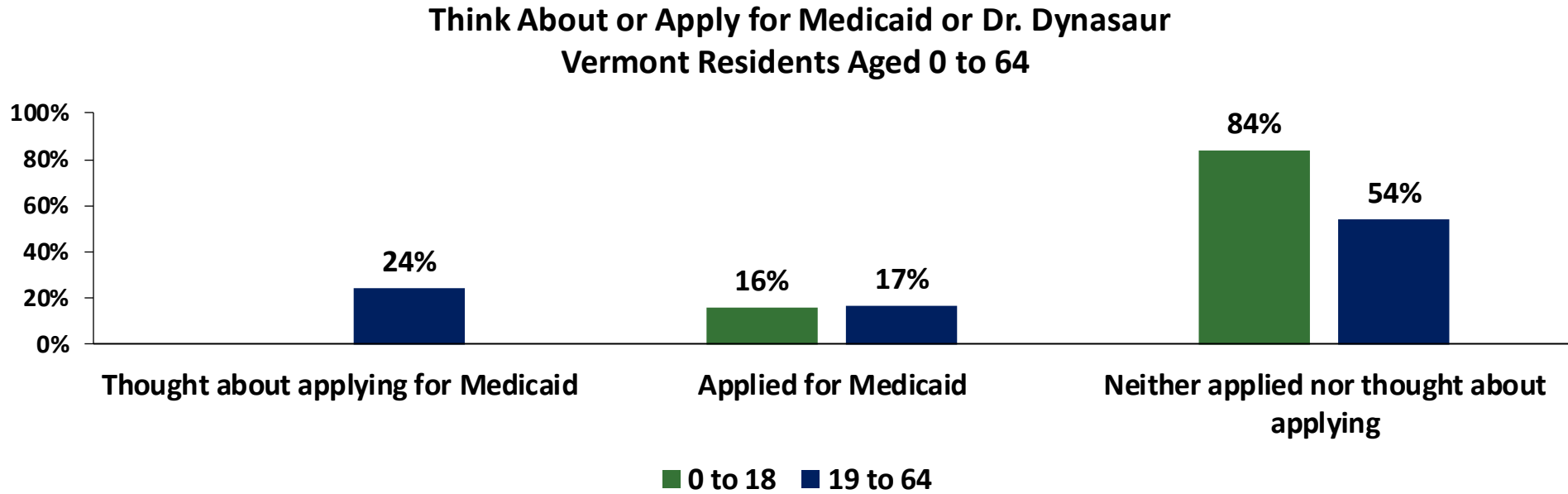
**Reason for Gap in Health Insurance Coverage
Vermont Residents Aged 0 to 64**



| Reasons | Estimated Population by Age | |
|--|-----------------------------|----------|
| | 0 to 18 | 19 to 64 |
| Cost is too high, increased, cost of premium, cannot afford | 400 | 2,600 |
| Person with health insurance lost job | 200 | 1,100 |
| Person changed employers and not eligible for insurance | 100 | 1,000 |
| Not eligible, no longer qualify for Medicaid, Green Mountain Care, Dr. Dynasaur | 200 | 700 |
| Failed to send in paperwork, problems with paperwork | 0 | 500 |
| Difficulties with enrollment or renewal through VT Health Connect or Green Mountain Care | 0 | 500 |

Think About or Apply for Medicaid or Dr. Dynasaur

The majority of those that experienced a gap in health insurance coverage in 2021 did not apply for Medicaid/Dr. Dynasaur or think about applying for these programs. Among those 0 to 18 years old with an interruption in coverage, none thought of applying, while only 24% (2,100) of 19 to 64 years old thought about applying for Medicaid.



| Response | Estimated Population by Age | |
|-----------------------------------|-----------------------------|----------|
| | 0 to 18 | 19 to 64 |
| Think about applying for Medicaid | 0 | 2,100 |
| Apply for Medicaid | 200 | 1,500 |
| Neither | 900 | 4,700 |



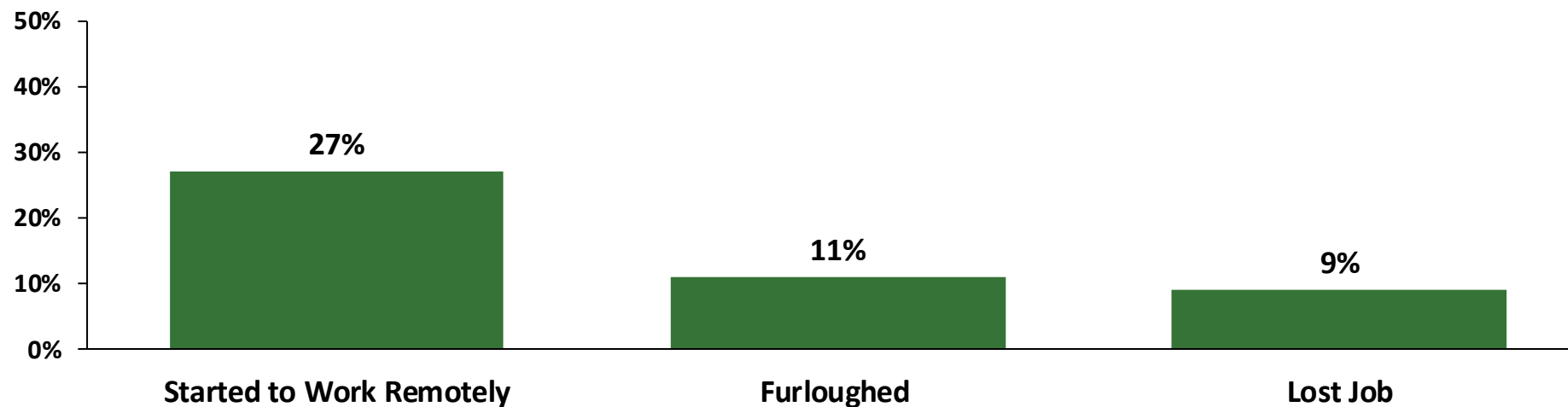
Impact of COVID-19



Working Remotely Due to COVID-19

Just over one-quarter (27%) of Vermont residents (102,200) indicate they started working remotely due to COVID-19. In terms of employment impacts, 11% (42,100) were furloughed, and 9% (34,600) lost their job due to COVID-19.

**Changes in Employment Status Due to COVID-19
Vermont Residents Aged 18 to 64**

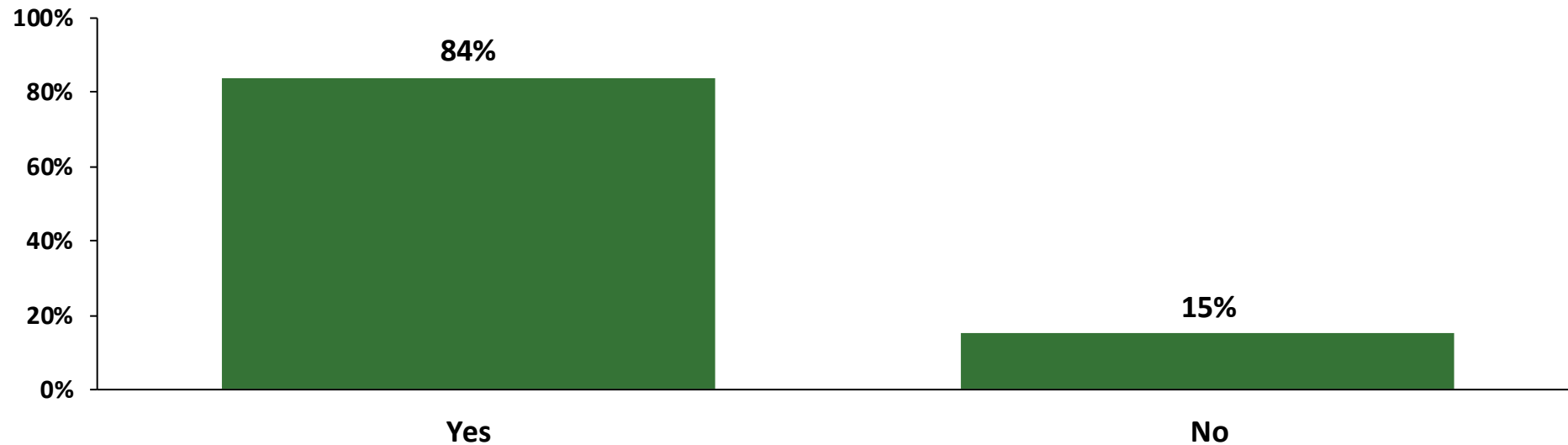


| Post COVID-19 Work Status | Estimated Population |
|---------------------------|----------------------|
| Started to Work Remotely | 102,200 |
| Furloughed | 42,100 |
| Lost Job | 34,600 |

Maintained Coverage While Unemployed or Furloughed Due to COVID-19

Among those that were either furloughed or lost their job due to COVID-19, 84% (59,200) were able to maintain their health insurance.

**Did Person Maintain Health Insurance Coverage while Unemployed?
Vermont Residents Aged 18 to 64**

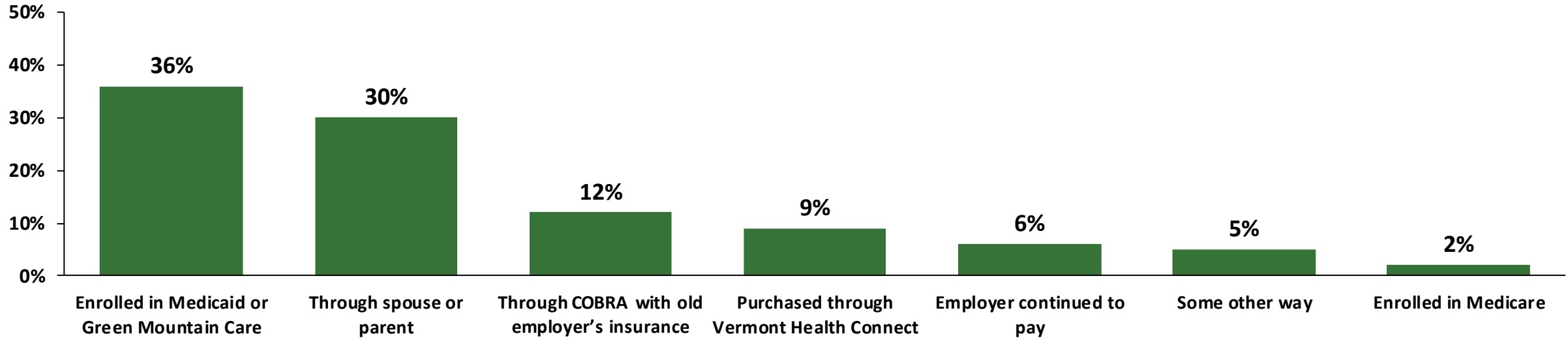


| Response | Estimated Population |
|----------|----------------------|
| Yes | 59,200 |
| No | 10,700 |

How Coverage was Maintained While Unemployed or Furloughed Due to COVID-19

Thirty-six percent (21,400) of Vermont adults 18 to 64 years old who lost their job due to COVID-19 and were able to maintain health insurance coverage did so by enrolling in Medicaid. An additional 30% (17,700) were able to obtain private health insurance coverage through a spouse or a parent, 12% (7,100) continued coverage through COBRA, and 9% (5,300) purchased private health insurance through Vermont Health Connect.

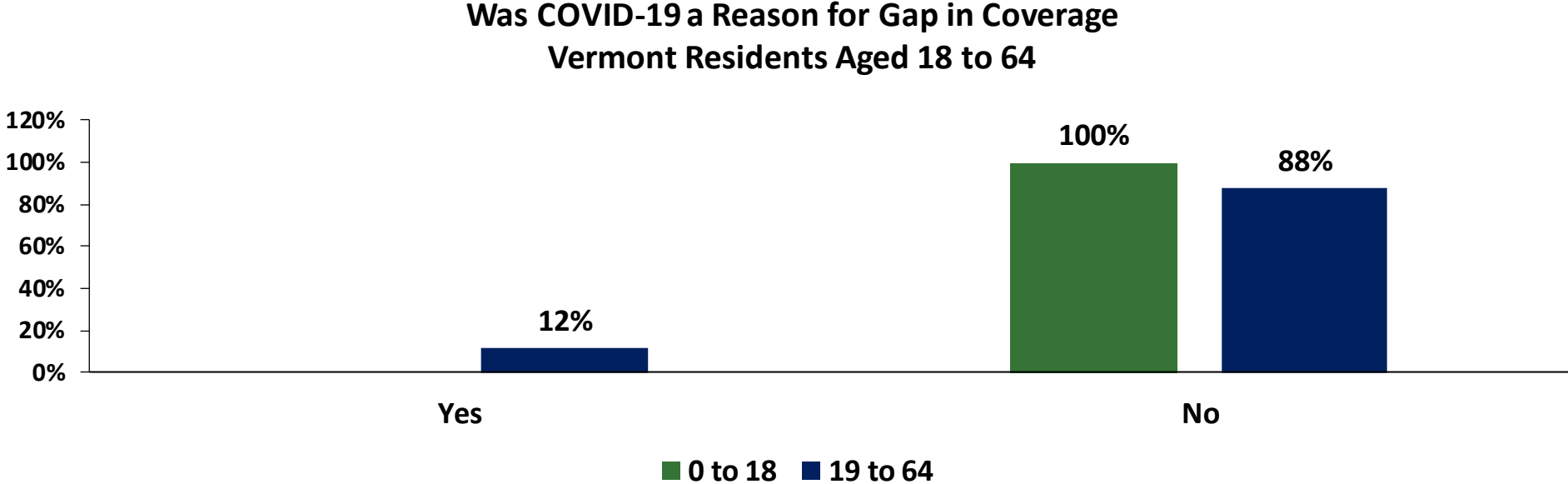
Maintain Coverage While Unemployed Due to COVID-19 Vermont Residents Aged 18 to 64



| Method of Maintaining Coverage | Estimated Population |
|---|----------------------|
| Enrolled in Medicaid or Green Mountain Care | 21,400 |
| Through spouse or parent | 17,700 |
| Through COBRA with old employer's insurance | 7,100 |
| Purchased through Vermont Health Connect | 5,300 |
| Employer continued to pay | 3,400 |
| Some other way | 2,800 |
| Enrolled in Medicare | 1,100 |

Was COVID-19 a Reason for Gap in Health Insurance Coverage

Among the 2% of Vermonters 19 to 64 years old that experienced a gap in their health insurance coverage, only 12% (1,100) indicated this gap was due to COVID-19.



| Estimated Population by Age | | |
|-----------------------------|---------|----------|
| Response | 0 to 18 | 19 to 64 |
| Yes | 0 | 1,100 |
| No | 1,100 | 7,700 |



Health Equity



Defining Populations at Risk

This section explores differences in access to care among several populations in Vermont that are sometimes missed when providing general population statistics due to their relatively small size. These populations frequently have less ability to access the care they need and more frequently experience barriers which can make it more difficult to remain healthy. This, in turn, makes it more difficult to maintain an income or health insurance, making care more difficult to access.

The following groups were explored:

- **Persons of Color:** Individuals who were reported as primarily Black/African American, Asian American, or Native/Indigenous Americans. There were not enough Hawaiian Native/Pacific Islander to report the population separately.
- **Ethnicity:** Individuals who were reported as belonging to any of the Hispanic or Latino/a groups, regardless of race.
- **Sexual Minorities:** Individuals over the age of 18 who were reported as being lesbian, gay, bisexual, or of any sexual identity other than straight, regardless of reported gender.
- **Gender Minorities:** Individuals who were reported as being transgender, non-binary, genderqueer, or any other gender identity other than cis, or whose reported gender and sex did not align, regardless of sexuality.
- **People Living with a Disability:** Individuals who were reported as having serious difficulty with any of a number of daily living tasks or functions.

Drawing Distinction – SOGI Minorities

Throughout this section we consistently separate individuals who are members of sexual orientation minority groups from those who are members of gender identity minority groups. While these groups are often presented as singular in political and media spaces, they are separate, non-exclusive and non-mutual groups. For example, an individual can be a member of a gender identity minority group and consider themselves straight, or an individual can have a sexual orientation besides heterosexual and be cis-gendered (that is, with a gender identity that aligns with their assigned sex).

It is particularly important to understand these groups independently within the subject of health care. These groups are likely to have different health care needs and experiences. An umbrella understanding of 'LGBTQIA+' individuals serves both sexual orientation and gender identity minorities poorly by failing to grasp important distinctions. Gender minority individuals, being a notably smaller population, are likely to have their needs missed if only this umbrella lens is used.

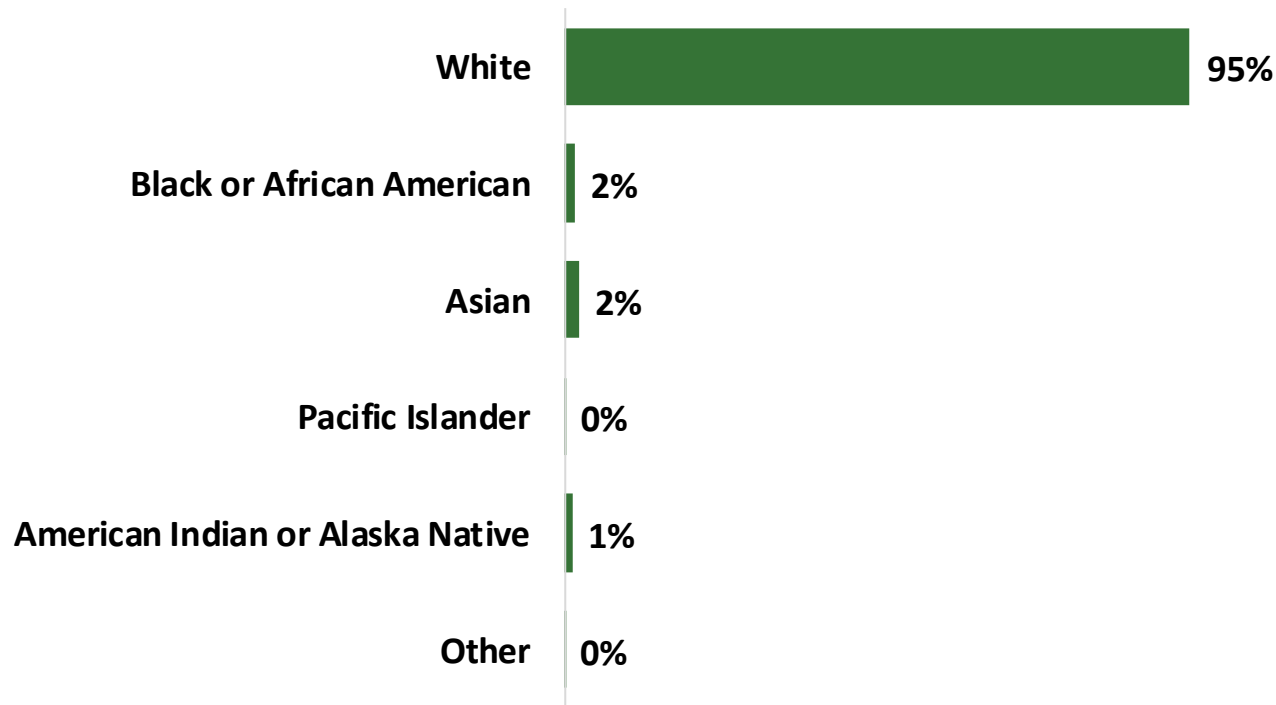
The Vermont Health Insurance Study is a rare instance of a random, representative sample survey which gathers information on enough individuals to provide meaningful insight into the experience of gender identity minority and sexual identity minorities understood as distinct groups.

Black, Indigenous and People of Color

Most Vermonters (95%) primarily identify as White. Vermonters who primarily identify as Black or Asian each make up about 2% of the population, while Vermonters who primarily identify as Indigenous Americans make up about 1%.

Based on the data collected, too few individuals who consider themselves Pacific Islanders or individuals who consider themselves members of an 'Other' race group are present in the data set to conduct health equity analysis for these racial groups.

Racial Groups



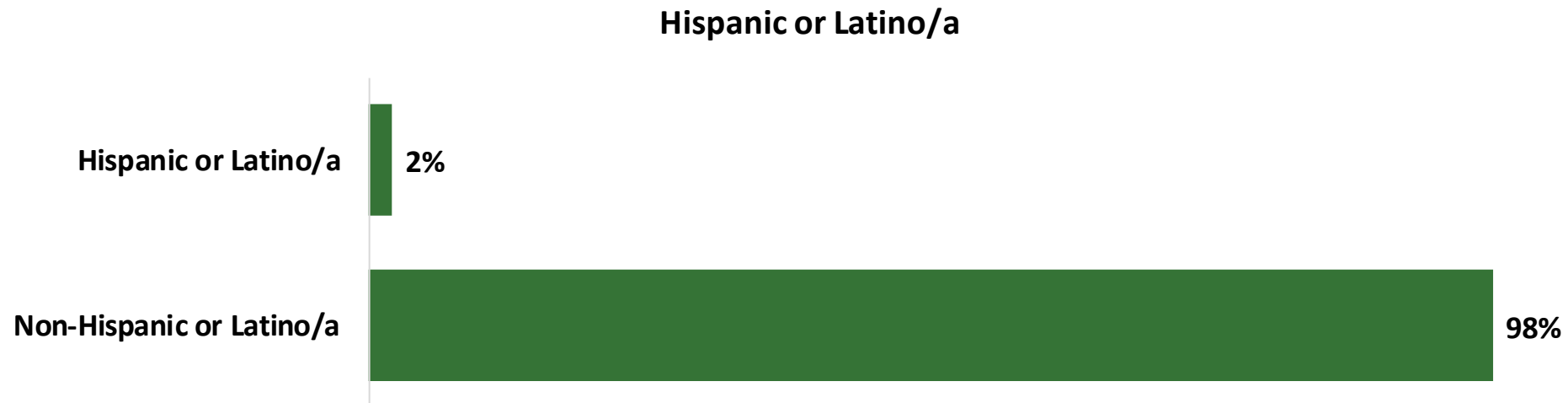
| Race* | Estimated Population |
|----------------------------------|----------------------|
| White | 586,500 |
| Asian | 14,000 |
| Black or African American | 10,100 |
| American Indian or Alaska Native | 7,500 |
| Pacific Islander | 600 |
| Other | 100 |

*Individuals were identified as BIPOC according to their primary race - that is, the first racial group mentioned when the respondent described the individual in the survey.

Ethnicity

About 2% of Vermonters are of Hispanic or Latin ethnicity.

Based on the data collected, there were not enough individuals to report on Hispanic or Latino/a minorities in more detail than as a single group. This is a limitation of the data.



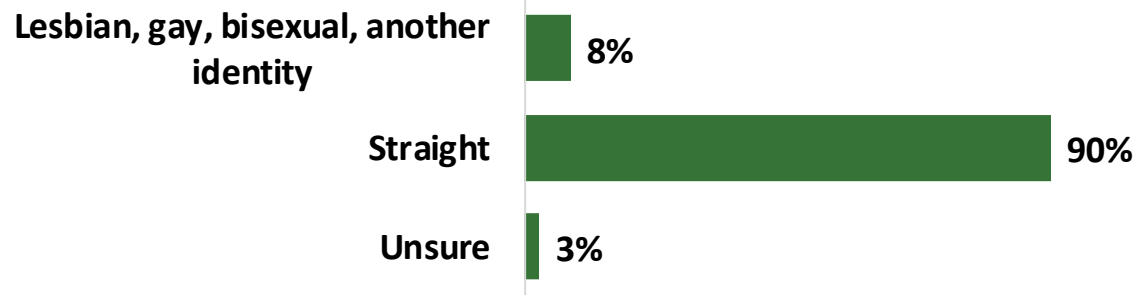
| Hispanic or Latino/a Ethnicity* | Estimated Population |
|---------------------------------|----------------------|
| Hispanic or Latino/a | 12,300 |
| Non-Hispanic or Latino/a | 606,500 |

*Individuals were identified as Hispanic or Latino/a if they responded they identified as any of a number of ethnic backgrounds. These are detailed further in the survey instrument.

Sexual Orientation and Gender Identity

Individuals who identify as lesbian, gay, bisexual, or another sexual minority identity make up about 8% of Vermonters. Individuals who identify as trans, genderqueer, non-binary, or otherwise not cis-gendered make up about 2% of Vermonters.

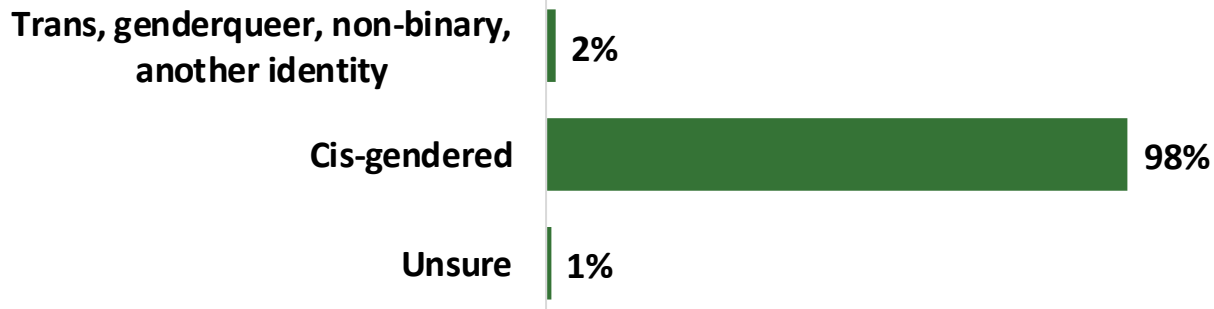
Sexual Orientation



| Sexual Orientation | Estimated Population |
|--|----------------------|
| Lesbian, gay, bisexual, another identity | 38,900 |
| Straight | 450,700 |
| Unsure | 12,600 |

Individuals were identified as sexual orientation minorities if they answered anything but 'straight' or 'heterosexual' when asked how they describe their sexual orientation.

Gender Identity



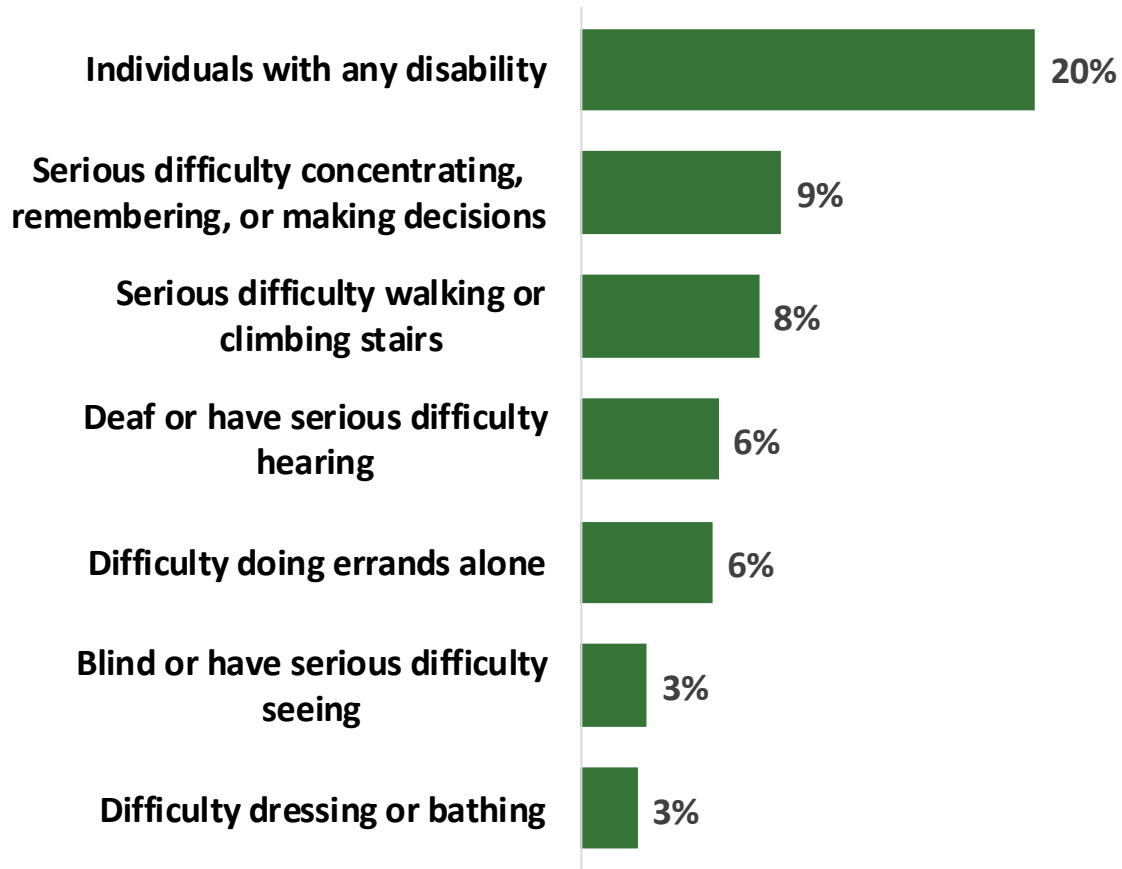
| Gender Identity | Estimated Population |
|--|----------------------|
| Trans, genderqueer, non-binary, another identity | 9,900 |
| Cis-gendered | 604,100 |
| Unsure | 4,700 |

Individuals were identified as members of a gender identity minority when they either explicitly stated they were non-cis-gendered or when their stated gender identity and their sex assigned at birth did not align.

Vermonters Living with a Disability

About 20% of Vermonters are living with a disability. These are most frequently difficulty concentrating, remembering, or making decisions, or difficulty walking or climbing up stairs.

Specific Disabilities



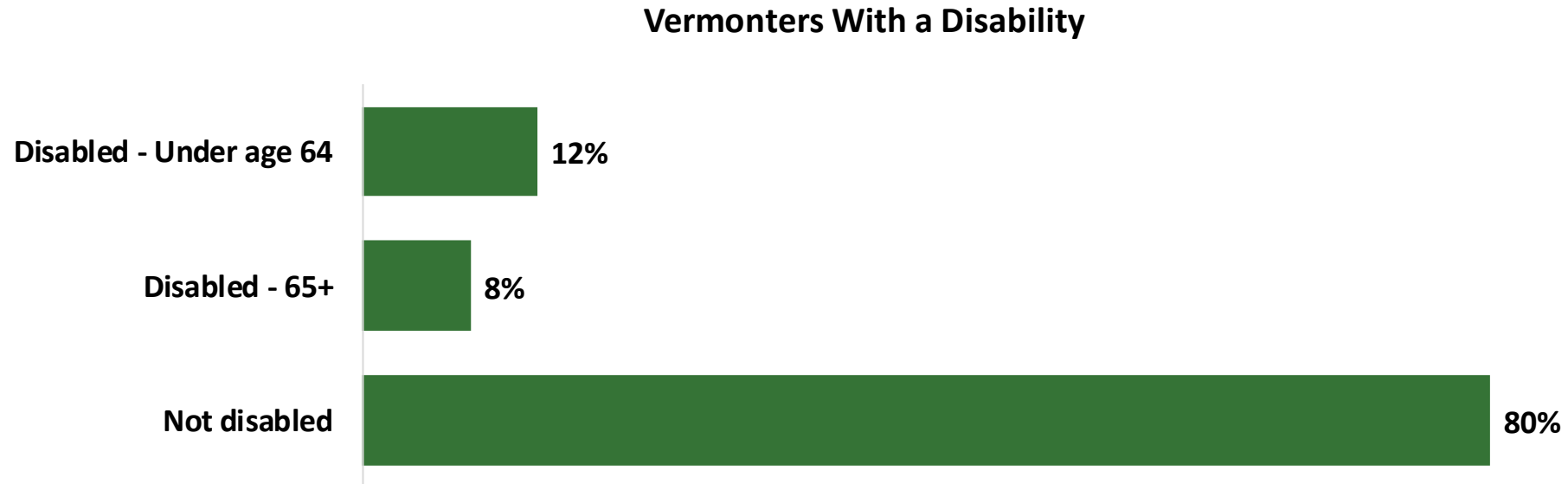
| Disability* | Estimated Population |
|--|----------------------|
| Disabled | 124,300 |
| Serious difficulty concentrating, remembering, or making decisions | 55,000 |
| Serious difficulty walking or climbing stairs | 48,700 |
| Deaf or have serious difficulty hearing | 37,700 |
| Difficulty doing errands alone | 36,100 |
| Blind or have serious difficulty seeing | 18,200 |
| Difficulty dressing or bathing | 15,500 |

*Individuals were identified as having a disability if they answered 'yes' to any of the six disability questions used. These questions were identical to the series used by the American Community Survey; see the complete survey instrument.

*Multiple responses accepted

Vermonters Living with a Disability by Age

Among all Vermonters, 12% are under the age of 65 and living with a disability. Eight percent are 65 years or older and are living with a disability. Four out of five Vermonters (80%) do not live with a disability, regardless of age.



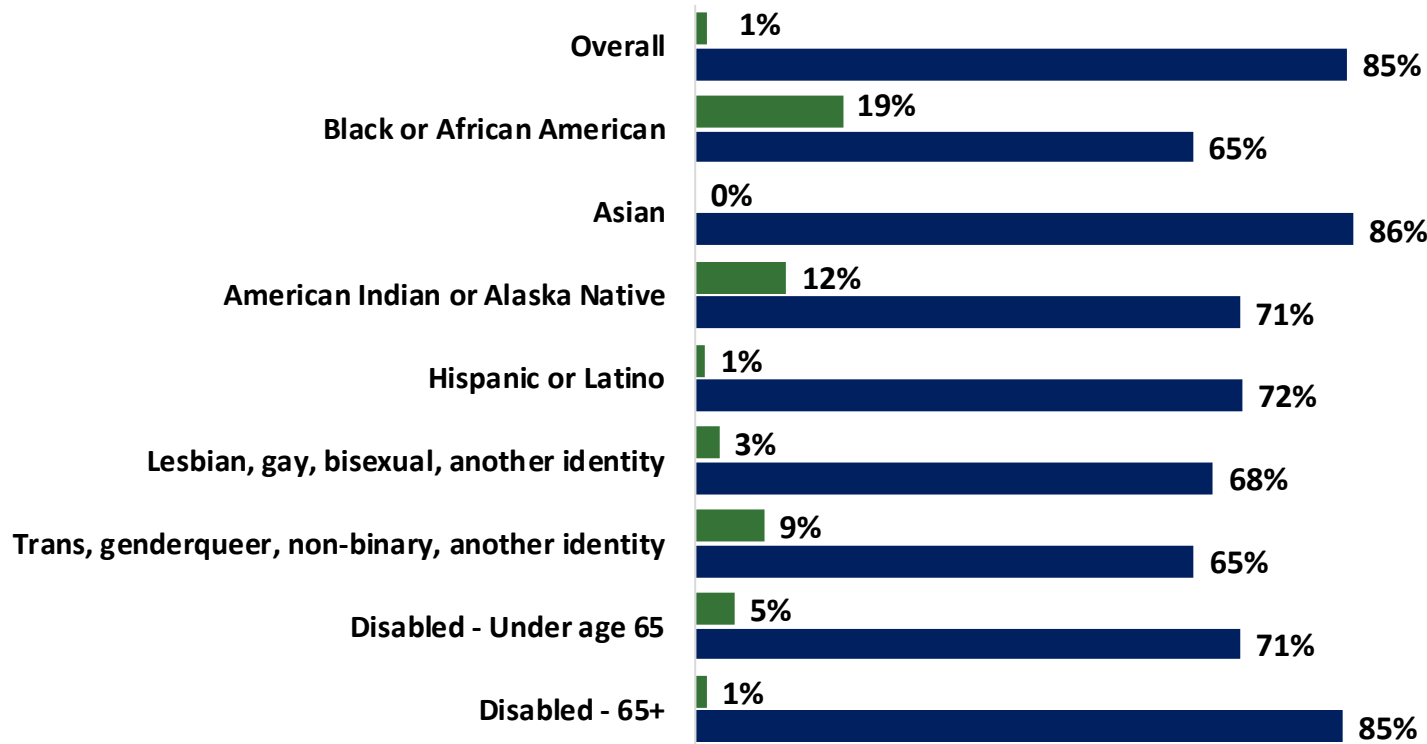
| Disability | Estimated Population |
|-------------------------|----------------------|
| Disabled - Under age 64 | 77,000 |
| Disabled - 65+ | 47,300 |
| Not disabled | 494,400 |

Experienced Discrimination or Prejudice during Health Care Encounters

Respondents in households with Black or African American individuals in 2021 were 14 times more likely to report experiencing discrimination or prejudice often during health care encounters than Vermonters overall. Respondents in households with a person of American Indian or Alaska Native descent or LGBT were also much more likely to report experiencing discrimination or prejudice during health care encounters. Black or African American, American Indian, Hispanic or Latino/a, sexual orientation and gender minority, those living with a disability under age 65 are all significantly less likely to report never experiencing prejudice or discrimination.

Percent who experienced discrimination or prejudice in health care

■ Often ■ Never

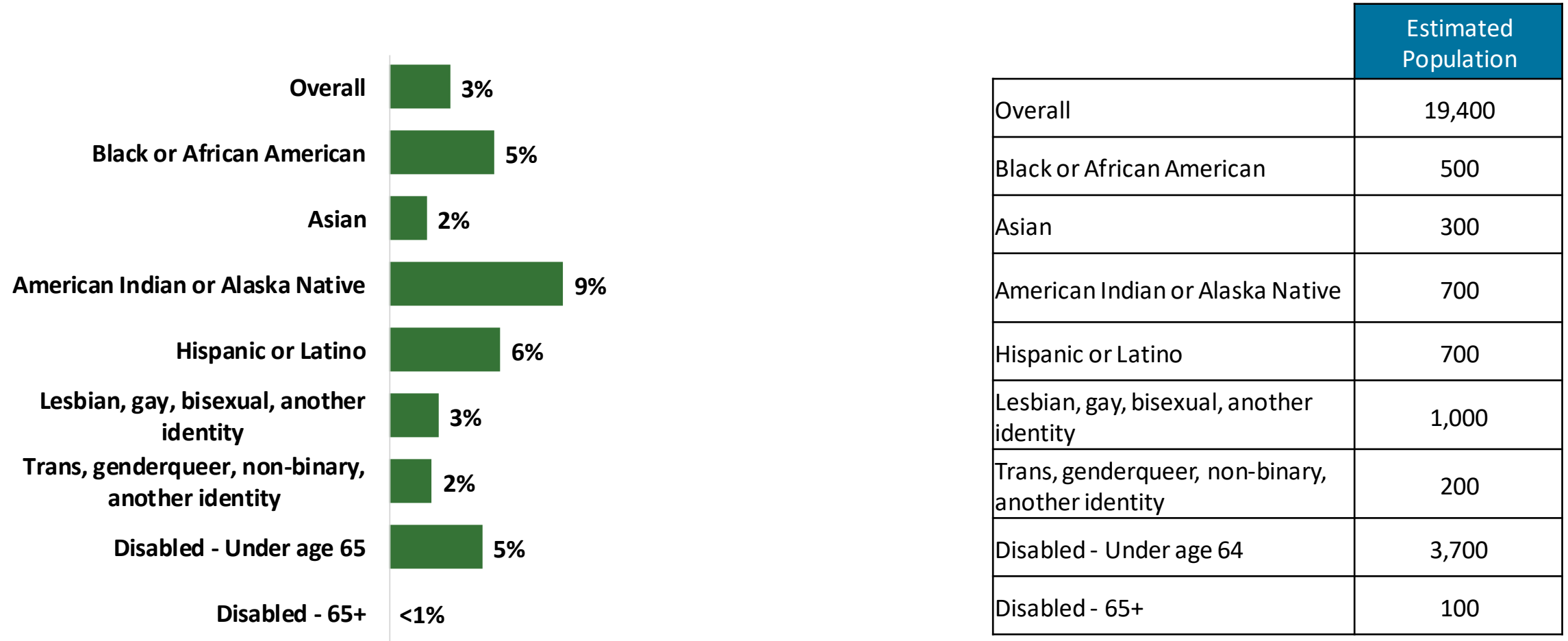


| | Estimated Population "Often" | Estimated Population "Never" |
|--|------------------------------|------------------------------|
| Overall | 8,500 | 528,000 |
| Black or African American | 2,000 | 6,600 |
| Asian | 0 | 12,000 |
| American Indian or Alaska Native | 900 | 5,300 |
| Hispanic or Latino | 200 | 8,800 |
| Lesbian, gay, bisexual, another identity | 1,200 | 26,400 |
| Trans, genderqueer, non-binary, another identity | 900 | 6,500 |
| Disabled - Under age 64 | 3,900 | 55,000 |
| Disabled - 65+ | 700 | 40,100 |

Uninsured Populations

American Indian or Alaska Natives are significantly more likely than Vermonters overall to be uninsured.

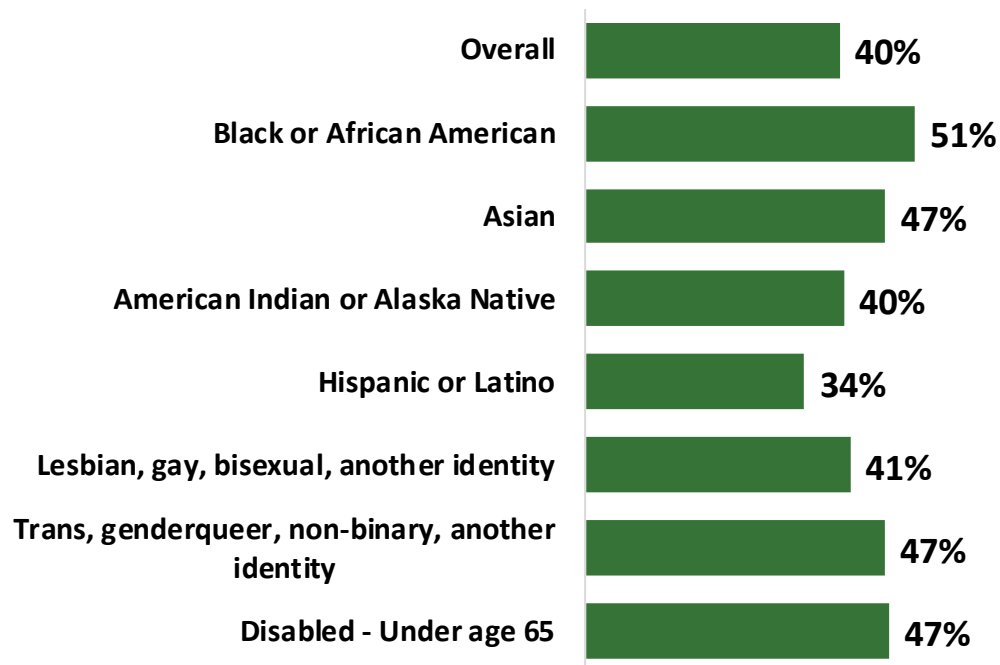
Percent Uninsured



Underinsurance* among those Under Age 65

Black or African Americans, gender identity minority (those identifying as Trans, genderqueer, non-binary, or another identity), and those living with a disability under the age of 65 in 2021 were more likely to be underinsured compared to other groups of Vermonters.

Percent Underinsured under Age 65



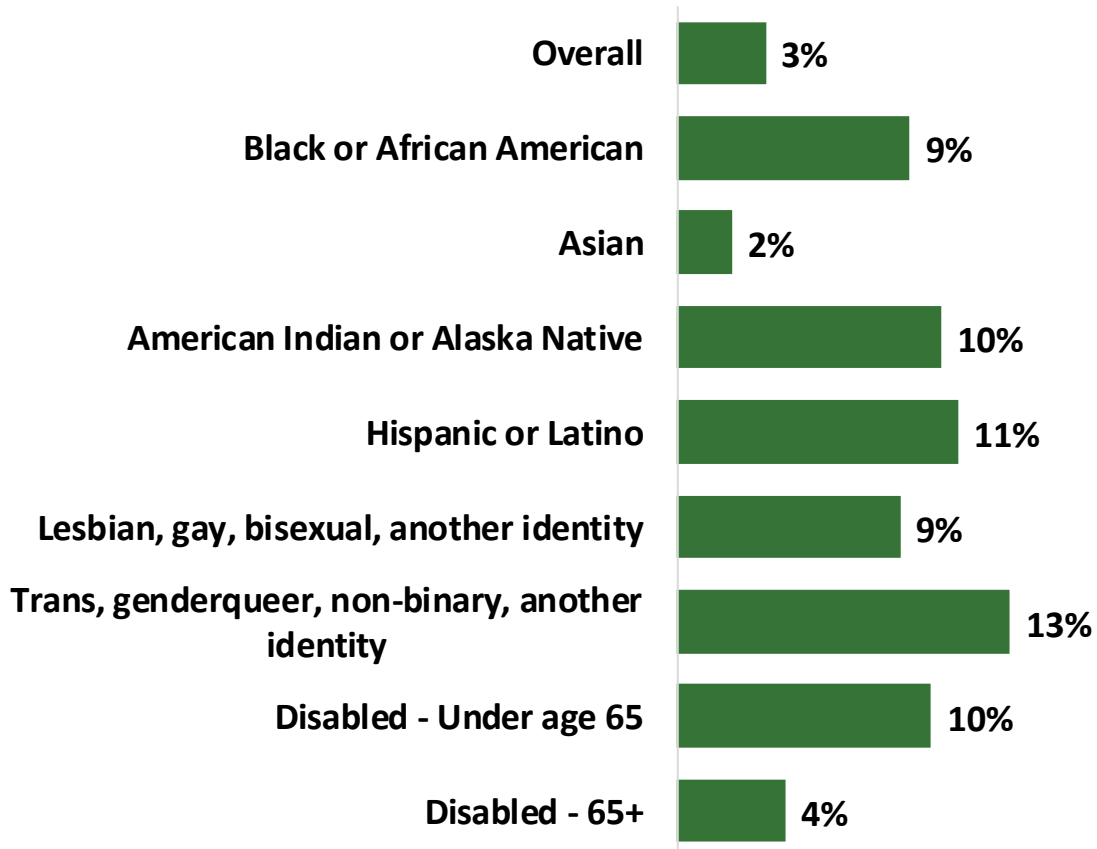
| | Estimated Population |
|--|----------------------|
| Overall | 187,837 |
| Black or African American | 4,625 |
| Asian | 5,798 |
| American Indian or Alaska Native | 2,213 |
| Hispanic or Latino | 3,577 |
| Lesbian, gay, bisexual, something else | 13,514 |
| Trans, genderqueer, non-binary, something else | 4,292 |
| Disabled - Under age 65 | 34,660 |

*In this report the underinsured are defined using the Commonwealth Fund model based on health plan deductible and all out-of-pocket health care expenses. Using this model, it is possible that people covered under benefit rich health plans can be classified as underinsured. There are other models that can be used to determine whether a person is considered underinsured.

Care Delayed due to Cost – Routine Care

Gender minority individuals were most likely to report missing routine medical care because they could not afford it. American Indian or Alaska Native, Hispanic or Latino/a, LGBT and people living with a disability under the age of 65 all report significantly higher rates of missing medical care because they could not afford it.

Delayed Care Due to Cost

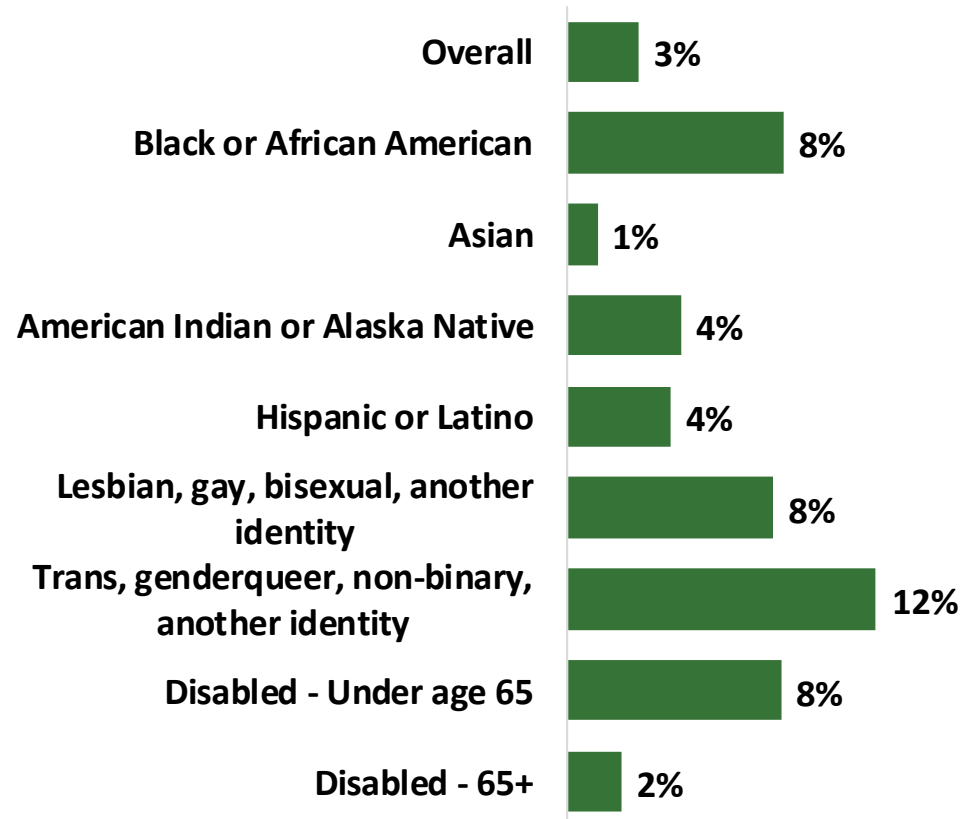


| | Estimated Population |
|--|----------------------|
| Overall | 21,500 |
| Black or African American | 900 |
| Asian | 300 |
| American Indian or Alaska Native | 800 |
| Hispanic or Latino | 1,400 |
| Lesbian, gay, bisexual, another identity | 3,400 |
| Trans, genderqueer, non-binary, another identity | 1,300 |
| Disabled - Under age 64 | 7,700 |
| Disabled - 65+ | 2,000 |

Care Delayed due to Cost – Medical Care

Gender identity minorities were most likely not to receive care from a doctor or surgery because they could not afford it (12%). People living with a disability under age 65, Black or African American, and LGBT were also more likely to not receive care because of cost than Vermonters overall.

Medical Care Delayed Due to Cost

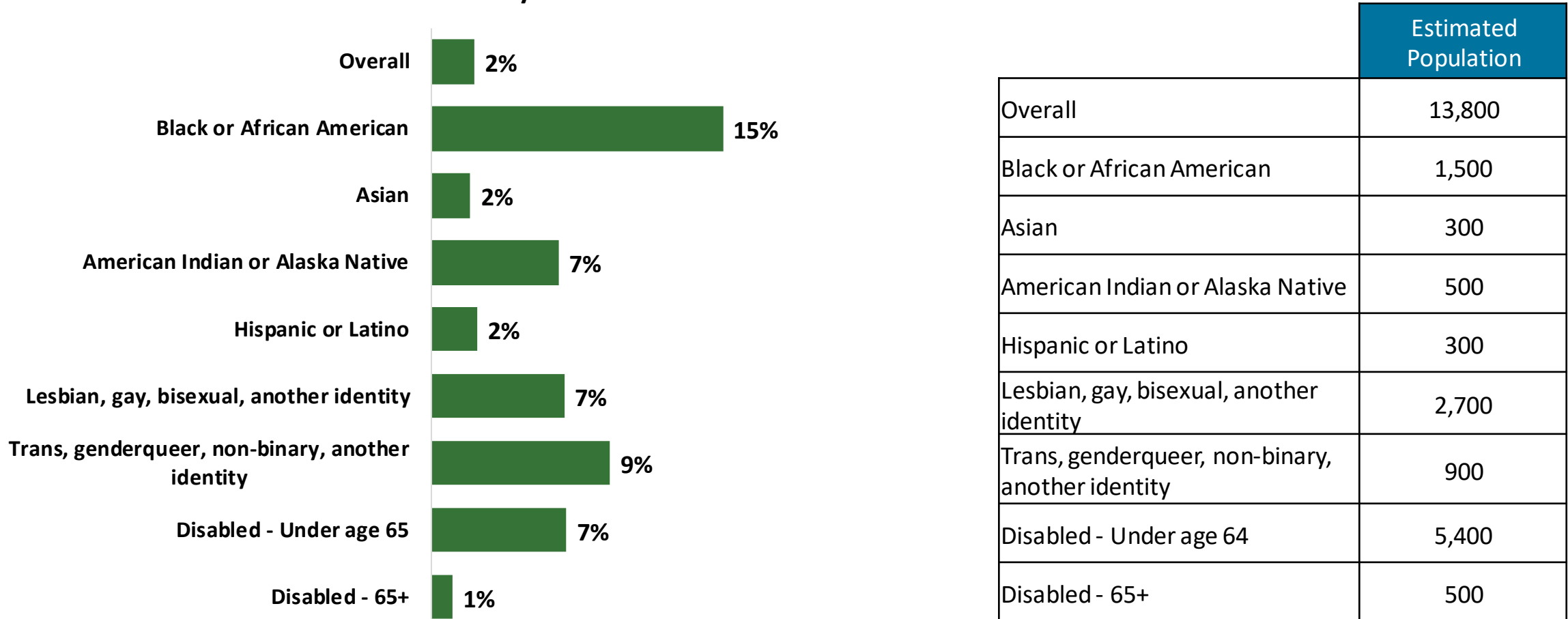


| | Estimated Population |
|--|----------------------|
| Overall | 16,700 |
| Black or African American | 800 |
| Asian | 200 |
| American Indian or Alaska Native | 300 |
| Hispanic or Latino | 500 |
| Lesbian, gay, bisexual, another identity | 3,000 |
| Trans, genderqueer, non-binary, another identity | 1,200 |
| Disabled - Under age 64 | 6,200 |
| Disabled - 65+ | 1,000 |

Care Delayed due to Cost – Mental Health Care

Black or African American Vermonters were the most likely to delay needed mental health care because of affordability issues (15%).

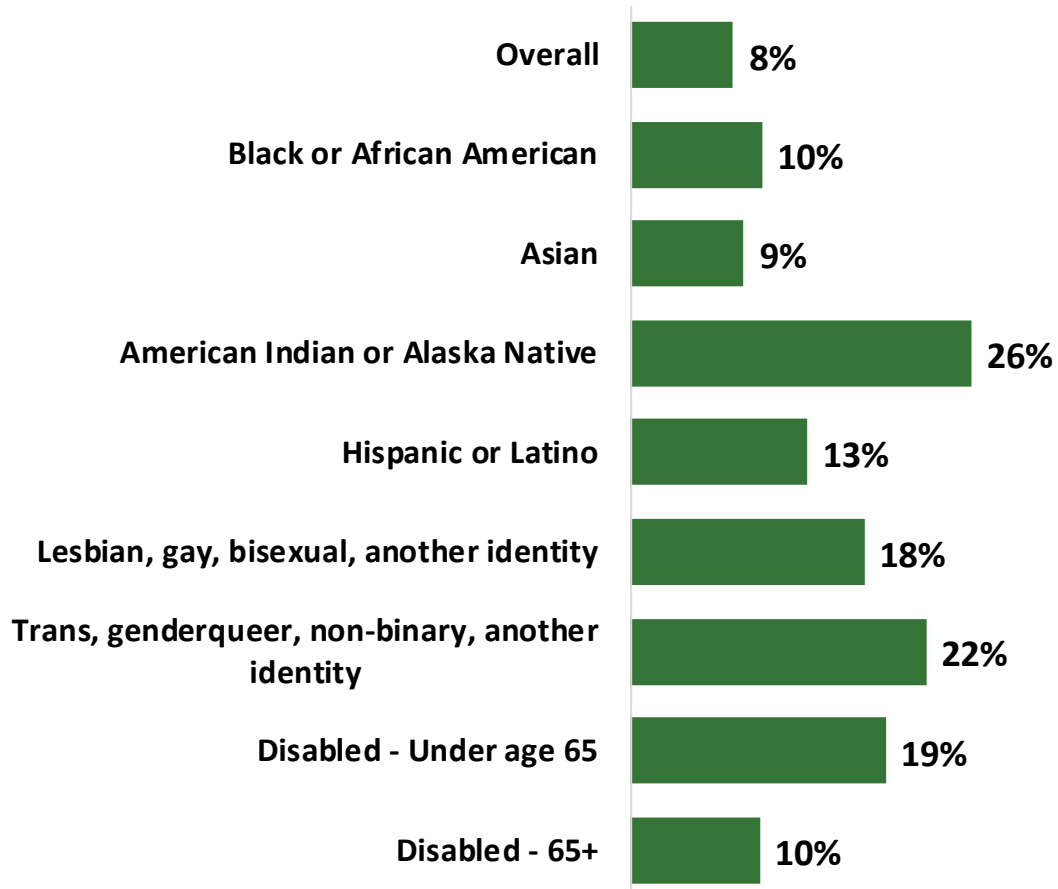
Mental Health Care Delayed due to Cost



Care Delayed due to Cost – Dental Care

American Indians in Vermont were most likely to delay needed dental care because of affordability issues (26%).

Dental Care Delayed due to Cost

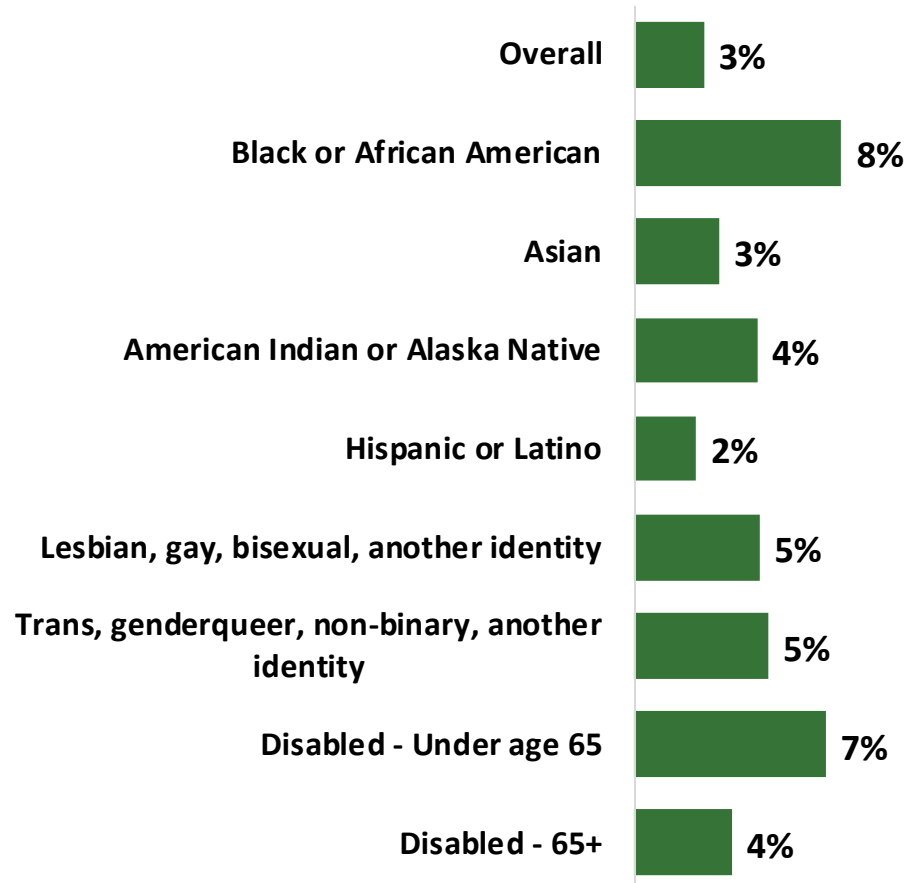


| | Estimated Population |
|--|----------------------|
| Overall | 47,800 |
| Black or African American | 1,000 |
| Asian | 1,200 |
| American Indian or Alaska Native | 1,900 |
| Hispanic or Latino | 1,600 |
| Lesbian, gay, bisexual, another identity | 6,900 |
| Trans, genderqueer, non-binary, another identity | 2,200 |
| Disabled - Under age 64 | 14,800 |
| Disabled - 65+ | 4,600 |

Care Delayed due to Cost – Diagnostic Tests

Black or African American (8%) and Vermonters under age 65 living with a disability (7%) were most likely to delay a diagnostic test because they could not afford it.

Diagnostic Tests Delayed due to Costs

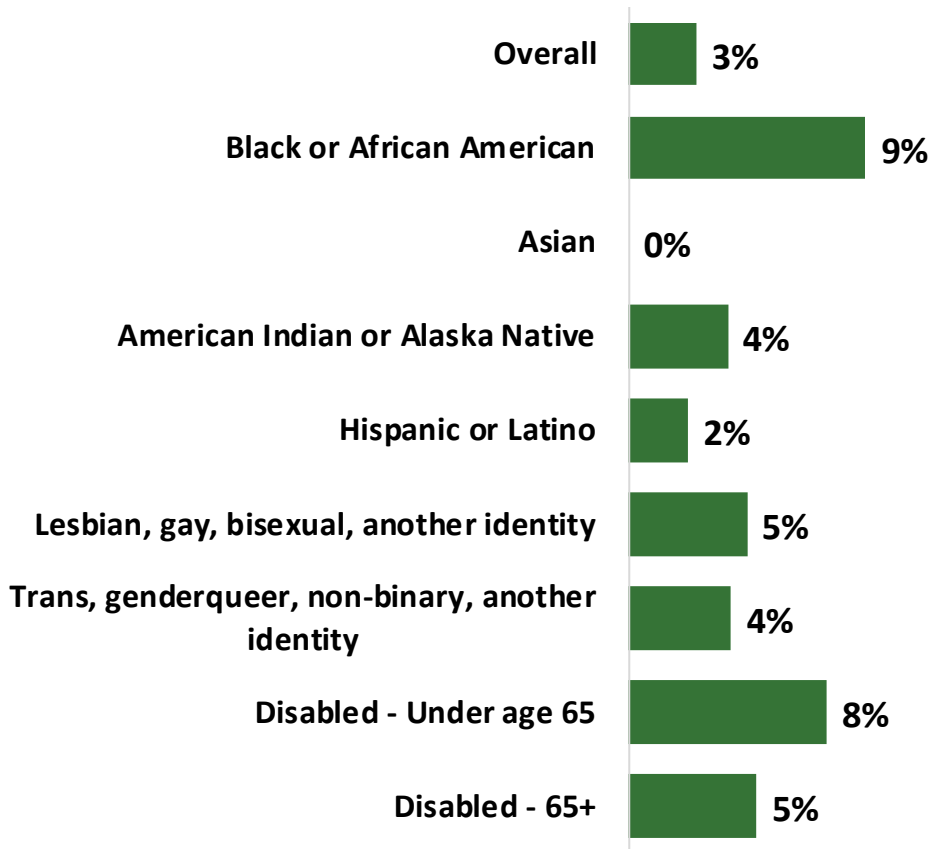


| | Estimated Population |
|--|----------------------|
| Overall | 15,600 |
| Black or African American | 800 |
| Asian | 400 |
| American Indian or Alaska Native | 300 |
| Hispanic or Latino | 300 |
| Lesbian, gay, bisexual, another identity | 1,800 |
| Trans, genderqueer, non-binary, another identity | 500 |
| Disabled - Under age 64 | 5,400 |
| Disabled - 65+ | 1,700 |

Care Delayed due to Cost – Prescription Medications

Black or African American (9%) and those living with a disability under age 65 (8%) were most likely not get needed prescription medication because they could not afford it.

Prescription Medication Not Received due to Cost

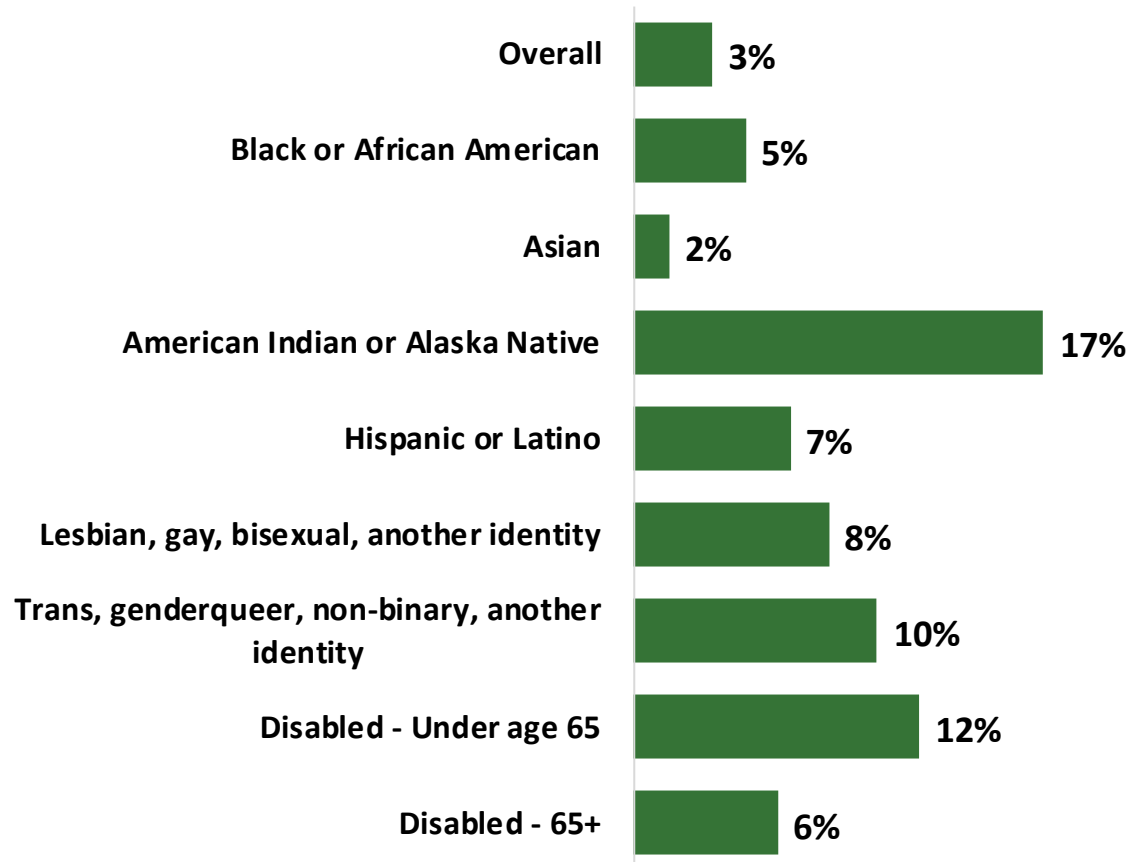


| | Estimated Population |
|--|----------------------|
| Overall | 16,400 |
| Black or African American | 900 |
| Asian | 0 |
| American Indian or Alaska Native | 300 |
| Hispanic or Latino | 300 |
| Lesbian, gay, bisexual, another identity | 1,800 |
| Trans, genderqueer, non-binary, another identity | 400 |
| Disabled - Under age 64 | 6,000 |
| Disabled - 65+ | 2,400 |

Care Delayed due to Cost – Medication Doses

American Indian or Alaska Natives in Vermont were notably more likely to indicate they skipped medication or took smaller doses to make medication last longer (17%) than Vermonters overall (3%).

Skipped or Took Smaller Doses of Rx Medication

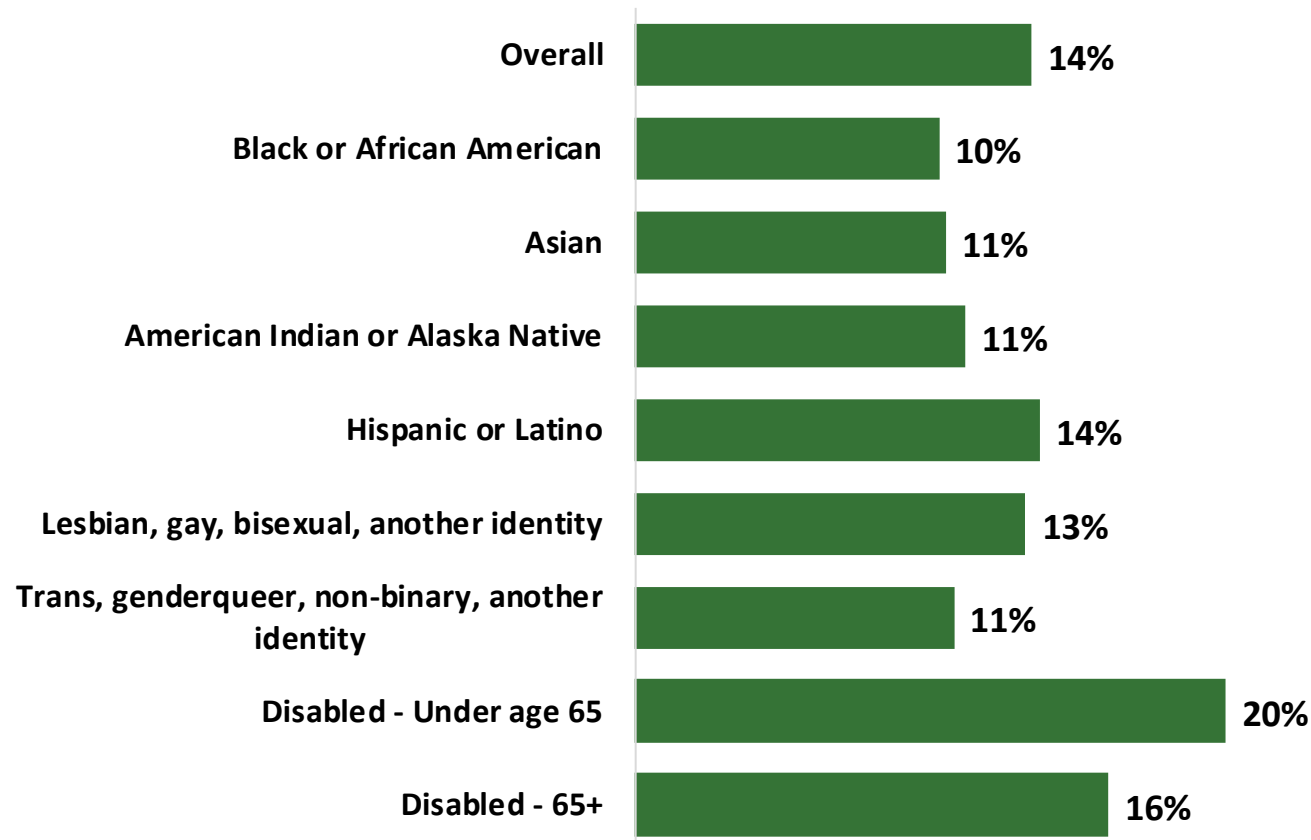


| | Estimated Population |
|--|----------------------|
| Overall | 20,600 |
| Black or African American | 500 |
| Asian | 200 |
| American Indian or Alaska Native | 1,300 |
| Hispanic or Latino | 800 |
| Lesbian, gay, bisexual, another identity | 3,200 |
| Trans, genderqueer, non-binary, another identity | 1,000 |
| Disabled - Under age 64 | 9,200 |
| Disabled - 65+ | 2,900 |

Problems with Medical Expenses – Large Bills

Vermonters living with a disability under the age of 65 were more likely (20%) to have received a medical bill of more than \$500 that had to be paid out-of-pocket in the last year compared to other populations.

Household receive single medical bill for more than \$500 that had to be paid out-of-pocket

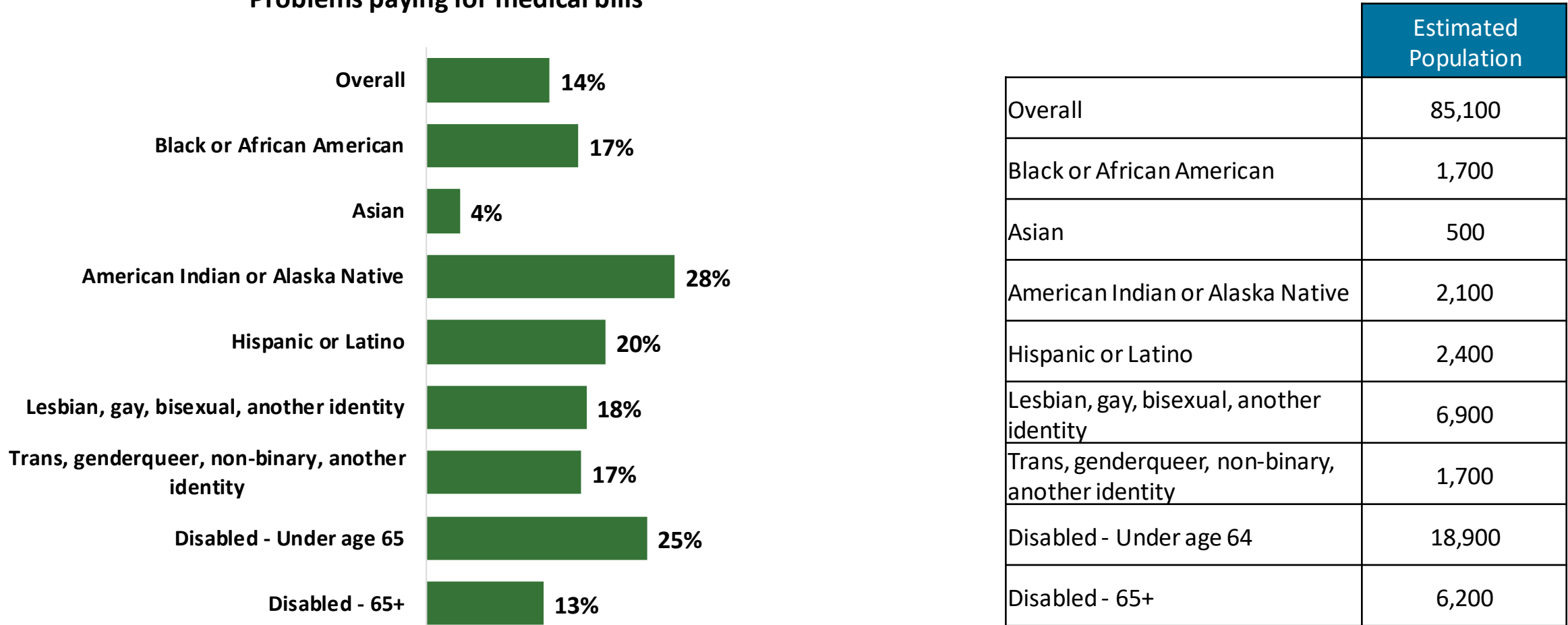


| | Estimated Population |
|--|----------------------|
| Overall | 84,300 |
| Black or African American | 1,100 |
| Asian | 1,500 |
| American Indian or Alaska Native | 800 |
| Hispanic or Latino | 1,700 |
| Lesbian, gay, bisexual, another identity | 5,200 |
| Trans, genderqueer, non-binary, another identity | 1,100 |
| Disabled - Under age 64 | 15,600 |
| Disabled - 65+ | 7,700 |

Problems with Medical Expenses – Problems Paying Bills

American Indian or Alaska Native Vermonters (28%) and Vermonters living with a disability under the age of 65 (25%) were more likely to live in a household where someone has had problems paying medical bills in the last year.

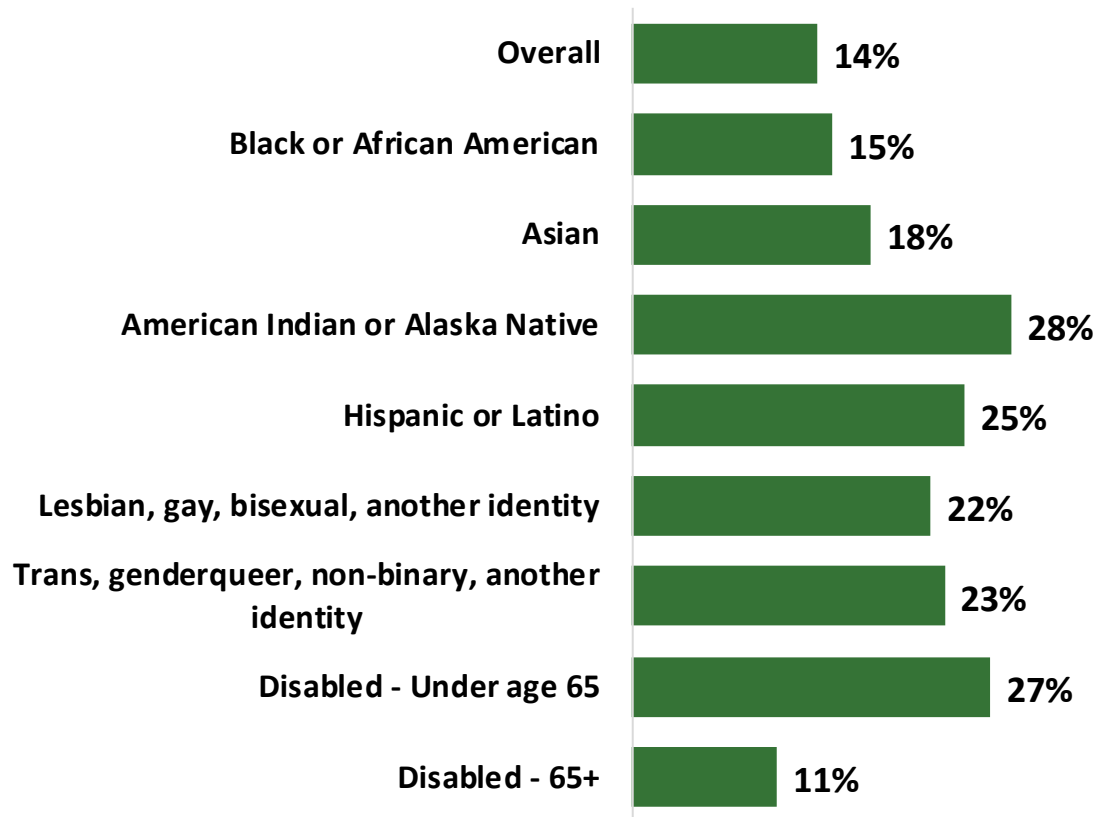
Problems paying for medical bills



Problems with Medical Expenses – Concern about Medical Debt

American Indian or Alaska Native Vermonters (28%) and Vermonters living with a disability under the age of 65 (27%) were most likely to live in a household where fear of medical debt has impacted medical care decision-making.

Fear of medical debt impacted household when making decisions to seek medical care

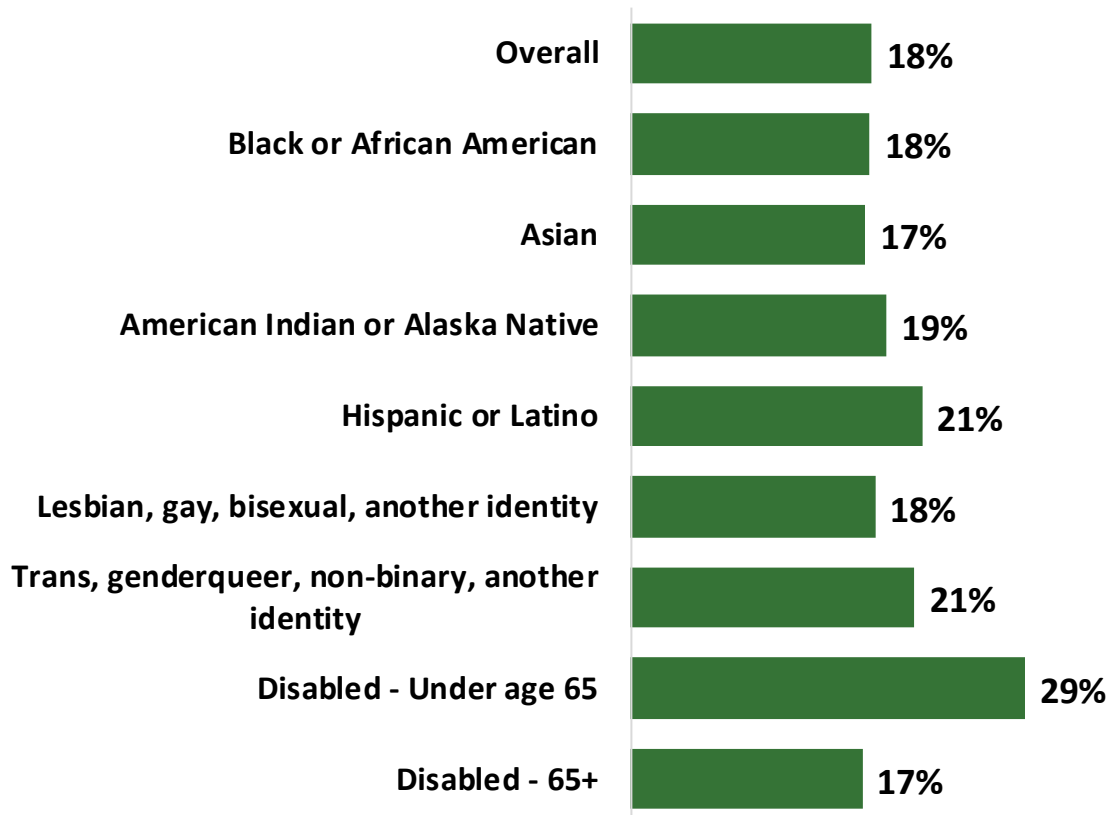


| | Estimated Population |
|--|----------------------|
| Overall | 86,000 |
| Black or African American | 1,500 |
| Asian | 2,500 |
| American Indian or Alaska Native | 2,100 |
| Hispanic or Latino | 3,100 |
| Lesbian, gay, bisexual, another identity | 8,700 |
| Trans, genderqueer, non-binary, another identity | 2,300 |
| Disabled - Under age 64 | 20,700 |
| Disabled - 65+ | 5,100 |

Problems with Medical Expenses – Past-Due Expenses

Vermonters living with a disability under the age of 65 (29%) were more likely than other Vermonters to live in a household that had medical debt that was past due, likely to become past due, or will be paid through a payment plan or financial assistance.

Household owed money for medical-related expenses that is now past due, likely to become past due, or will be paid through a payment plan or other financial assistance

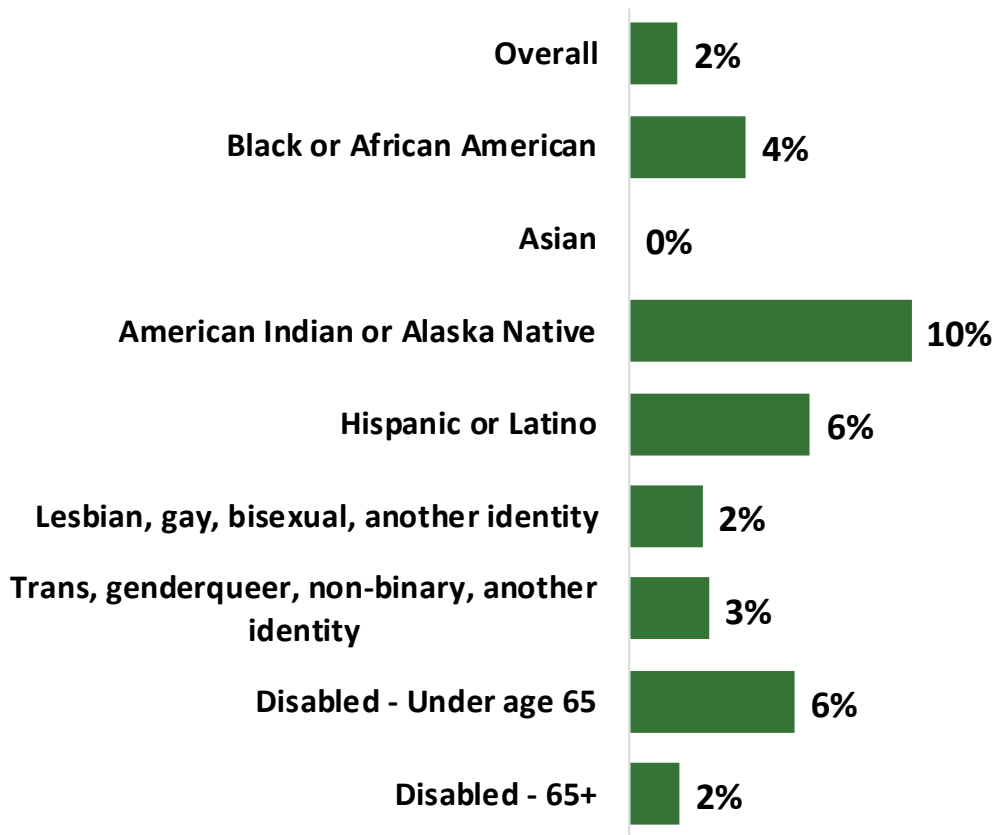


| | Estimated Population |
|--|----------------------|
| Overall | 110,200 |
| Black or African American | 1,800 |
| Asian | 2,400 |
| American Indian or Alaska Native | 1,400 |
| Hispanic or Latino | 2,600 |
| Lesbian, gay, bisexual, another identity | 7,000 |
| Trans, genderqueer, non-binary, another identity | 2,100 |
| Disabled - Under age 64 | 22,400 |
| Disabled - 65+ | 8,100 |

Problems with Medical Expenses – Unable to Pay for Basic Needs

Vermonters who are American Indian or Alaskan Native (10%) are most likely to be part of families that have been unable to pay for basic necessities because of medical bills.

Family has been unable to pay for basic necessities like food, heat or rent because of medical bills

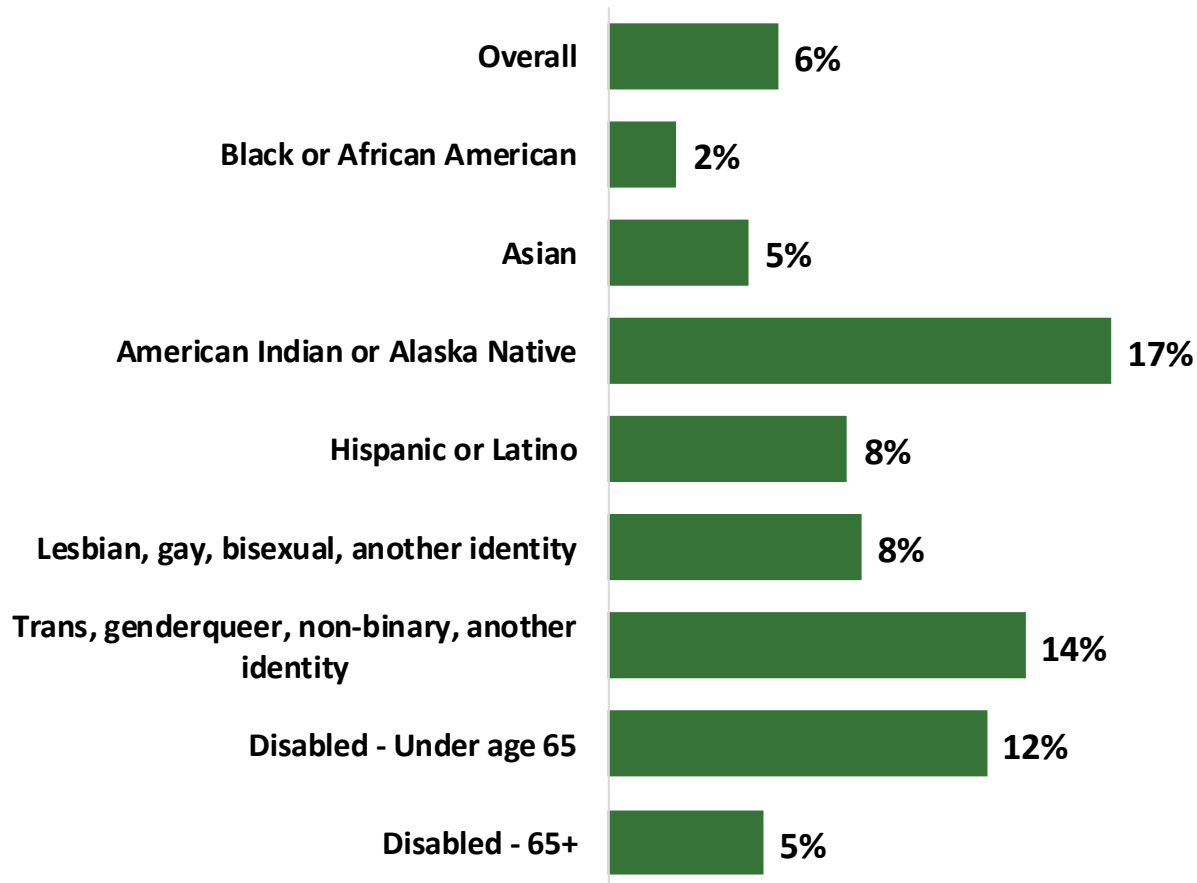


| | Estimated Population |
|--|----------------------|
| Overall | 10,100 |
| Black or African American | 400 |
| Asian | 0 |
| American Indian or Alaska Native | 700 |
| Hispanic or Latino | 800 |
| Lesbian, gay, bisexual, another identity | 1,000 |
| Trans, genderqueer, non-binary, another identity | 300 |
| Disabled - Under age 64 | 4,300 |
| Disabled - 65+ | 800 |

Problems with Medical Expenses – Used Savings

American Indian or Alaskan Native (17%), gender identity minority (14%), and those living with a disability under the age of 65 (12%) were more likely than Vermonters overall to be part of families that have used up all or more of their savings because of medical bills.

Family used up all or most of savings because of medical bills

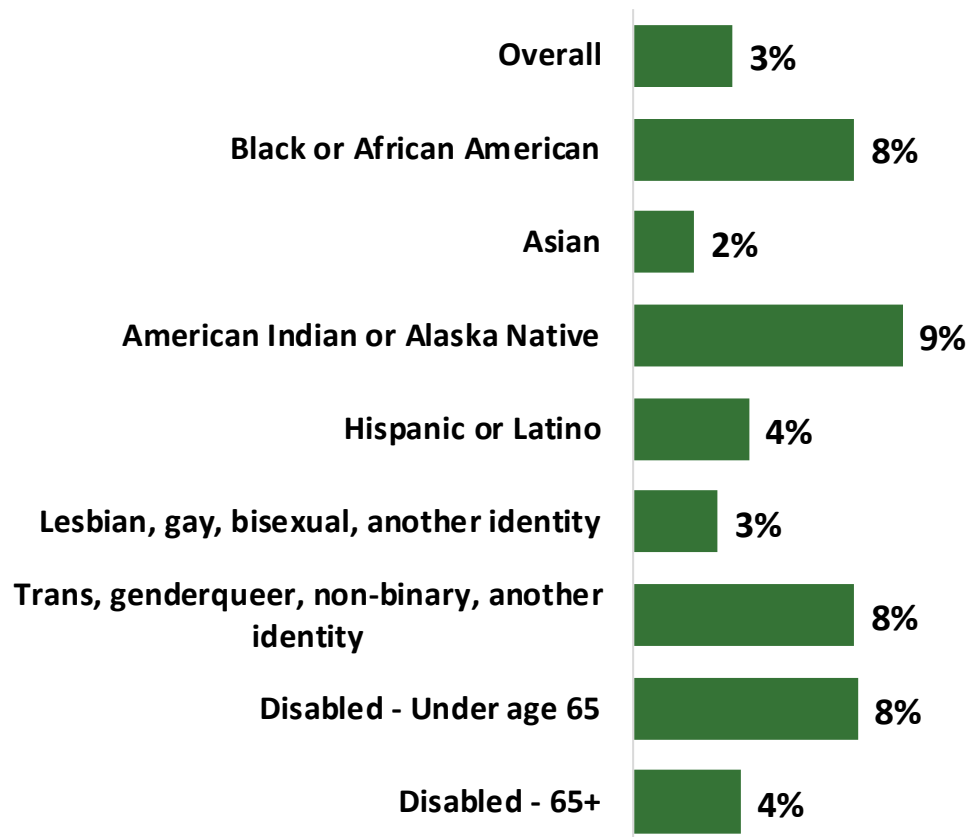


| | Estimated Population |
|--|----------------------|
| Overall | 34,500 |
| Black or African American | 200 |
| Asian | 600 |
| American Indian or Alaska Native | 1,200 |
| Hispanic or Latino | 1,000 |
| Lesbian, gay, bisexual, another identity | 3,200 |
| Trans, genderqueer, non-binary, another identity | 1,400 |
| Disabled - Under age 64 | 9,600 |
| Disabled - 65+ | 2,400 |

Problems with Medical Expenses – New Medical Debt

Vermonters who are American Indian or Alaska Native were more likely (9%) than other Vermonters to be part of families that have taken on new debt because of medical bills in the last 10 years.

Family had large credit card debt or had to take a loan or debt against the home because of medical bills

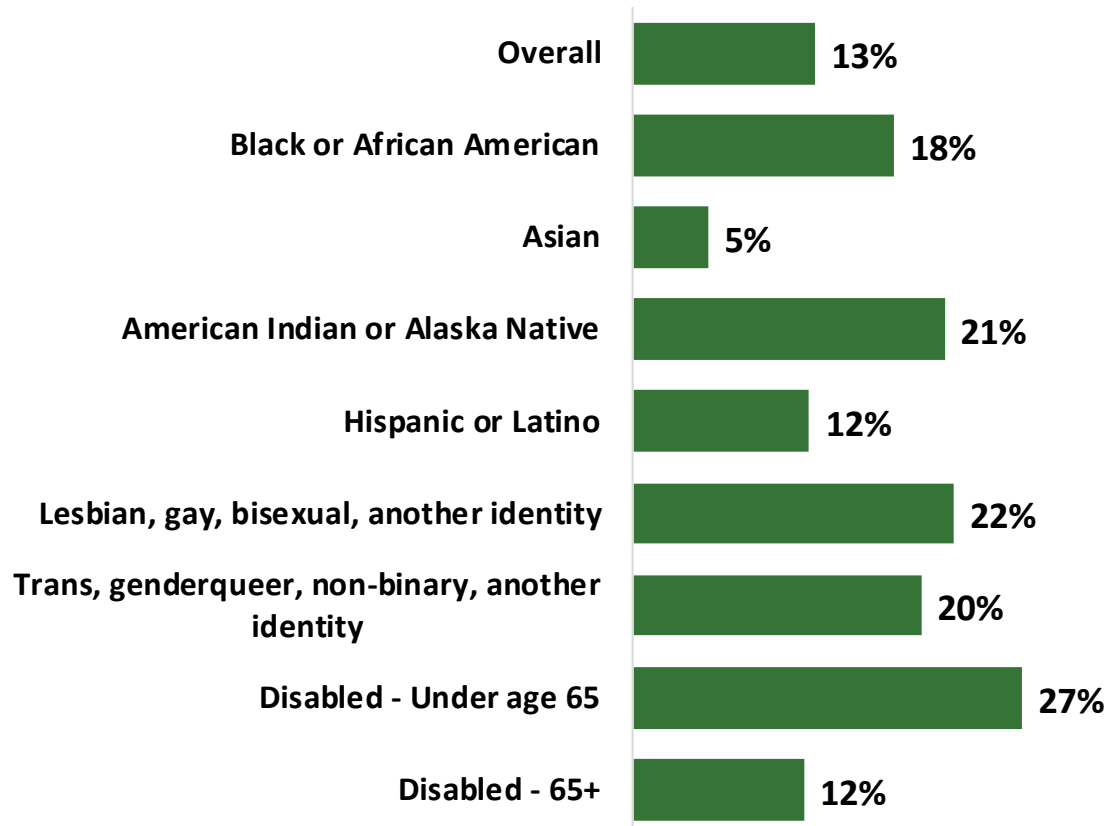


| | Estimated Population |
|--|----------------------|
| Overall | 21,000 |
| Black or African American | 800 |
| Asian | 300 |
| American Indian or Alaska Native | 700 |
| Hispanic or Latino | 500 |
| Lesbian, gay, bisexual, another identity | 1,100 |
| Trans, genderqueer, non-binary, another identity | 800 |
| Disabled - Under age 64 | 5,900 |
| Disabled - 65+ | 1,700 |

Problems Accessing Care – Could Not Find a Provider

Vermonters living with a disability under age 65 were most likely to have delayed care because they could not find a provider (27%).

During the past 12 months, has person ever delayed or not gotten physical or mental health care because they could not find a doctor or other health care provider

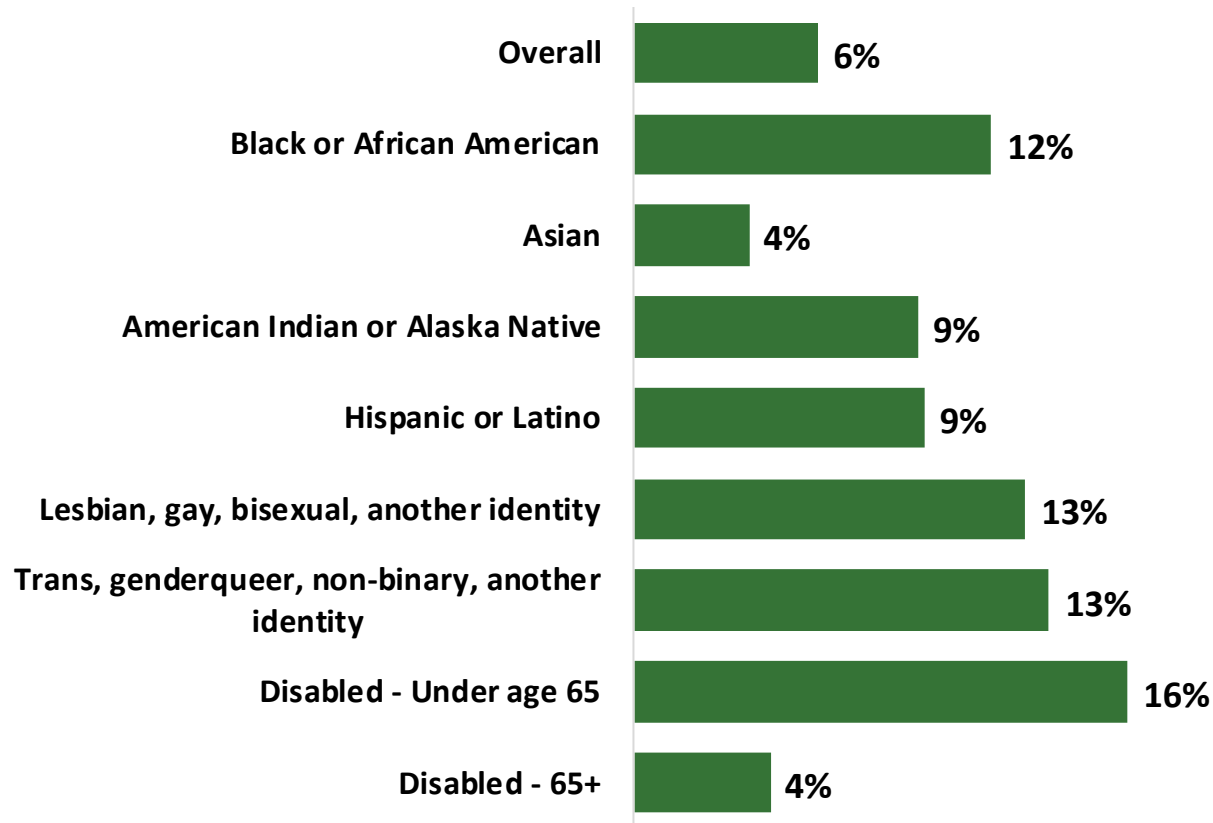


| | Estimated Population |
|--|----------------------|
| Overall | 77,500 |
| Black or African American | 1,800 |
| Asian | 700 |
| American Indian or Alaska Native | 1,600 |
| Hispanic or Latino | 1,500 |
| Lesbian, gay, bisexual, another identity | 8,600 |
| Trans, genderqueer, non-binary, another identity | 2,000 |
| Disabled - Under age 64 | 20,600 |
| Disabled - 65+ | 5,600 |

Problems Accessing Care – Insurance Acceptance

Those living with a disability under age 65 were most likely to say they could not find a provider who accepts their insurance (16%).

Person delayed or not gotten physical or mental health care because they could not find a doctor or other health care provider who accepts their insurance

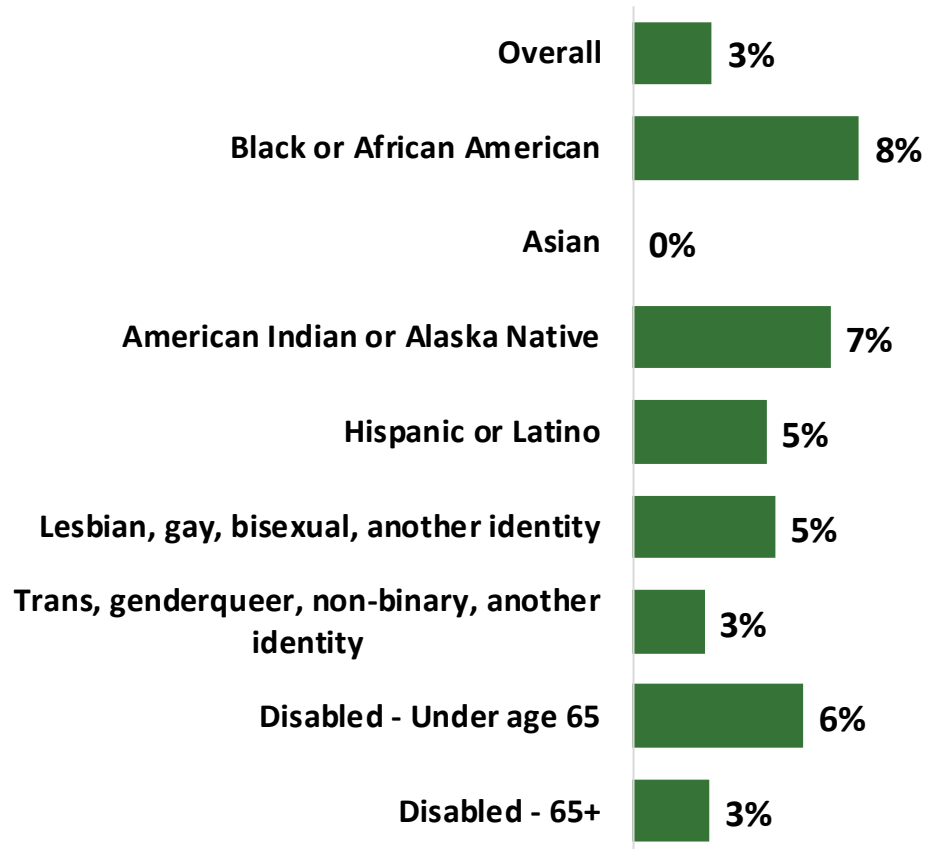


| | Estimated Population |
|--|----------------------|
| Overall | 37,000 |
| Black or African American | 1,200 |
| Asian | 500 |
| American Indian or Alaska Native | 700 |
| Hispanic or Latino | 1,200 |
| Lesbian, gay, bisexual, another identity | 4,900 |
| Trans, genderqueer, non-binary, another identity | 1,300 |
| Disabled - Under age 64 | 12,300 |
| Disabled - 65+ | 2,100 |

Problems Accessing Care – Changes in Health Insurance

Black or African American Vermonters are the most likely to have had difficulty getting care because of changes in their insurance (8%).

Delayed or not gotten physical or mental health care because changes in their health insurance resulted in their health care provider no longer accepting their insurance

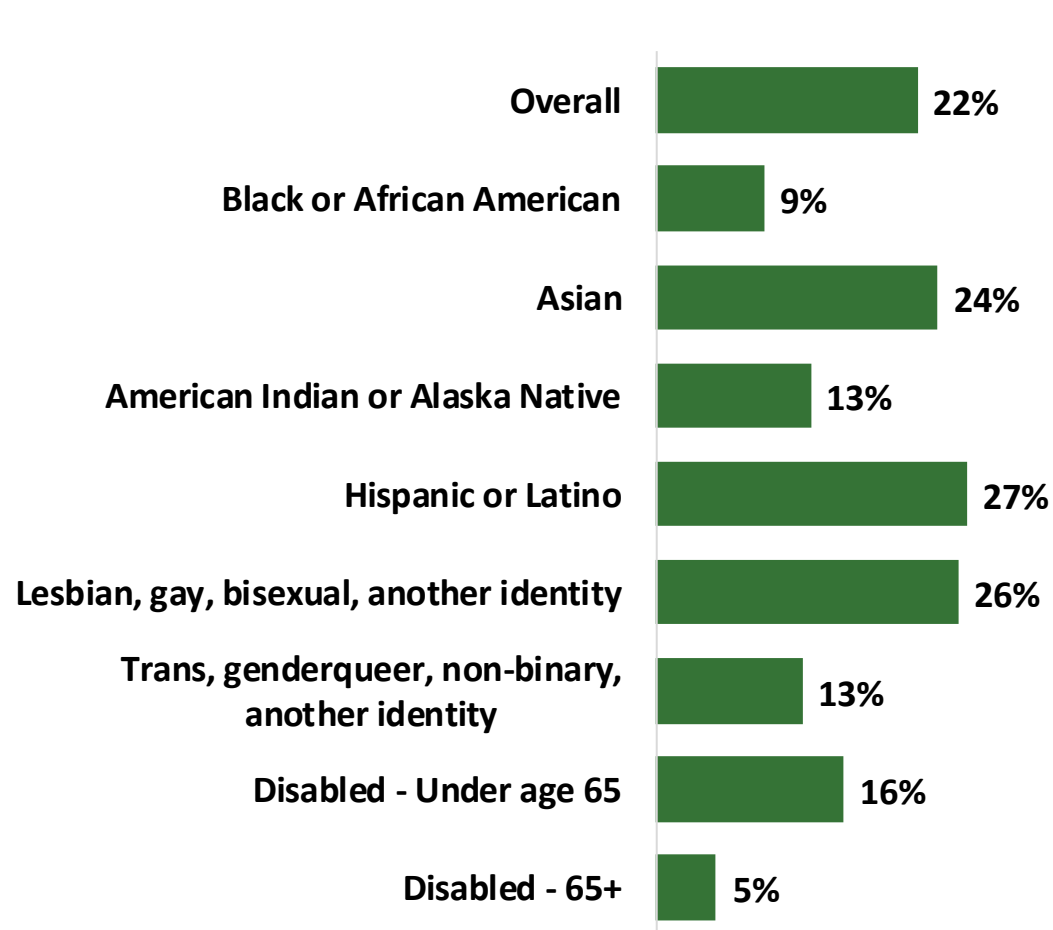


| | Estimated Population |
|--|----------------------|
| Overall | 18,000 |
| Black or African American | 800 |
| Asian | 100 |
| American Indian or Alaska Native | 500 |
| Hispanic or Latino | 600 |
| Lesbian, gay, bisexual, another identity | 2,000 |
| Trans, genderqueer, non-binary, another identity | 300 |
| Disabled - Under age 64 | 4,800 |
| Disabled - 65+ | 1,300 |

COVID-19 Equity – Working Remotely

Vermonters who are Black or African American were less likely to be working remotely due to COVID-19 (9%), compared to other Vermonters.

Working remotely due to COVID-19

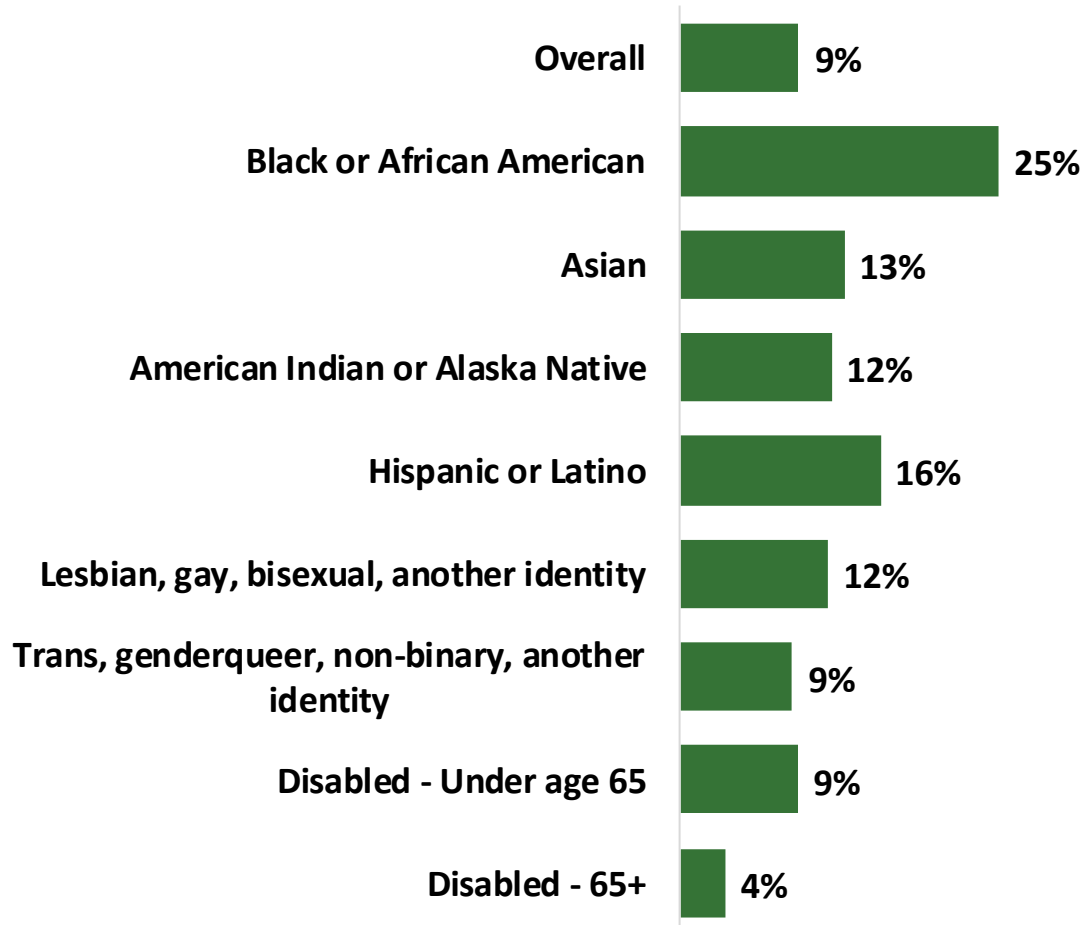


| | Estimated Population |
|--|----------------------|
| Overall | 112,300 |
| Black or African American | 700 |
| Asian | 2,700 |
| American Indian or Alaska Native | 800 |
| Hispanic or Latino | 2,400 |
| Lesbian, gay, bisexual, another identity | 10,100 |
| Trans, genderqueer, non-binary, another identity | 1,000 |
| Disabled - Under age 64 | 10,800 |
| Disabled - 65+ | 2,400 |

COVID-19 Equity – Furlough due to COVID-19

Black Vermonters were more likely than Vermonters overall to have been furloughed due to COVID-19 (25%).

Furloughed all or part of the time during COVID-19

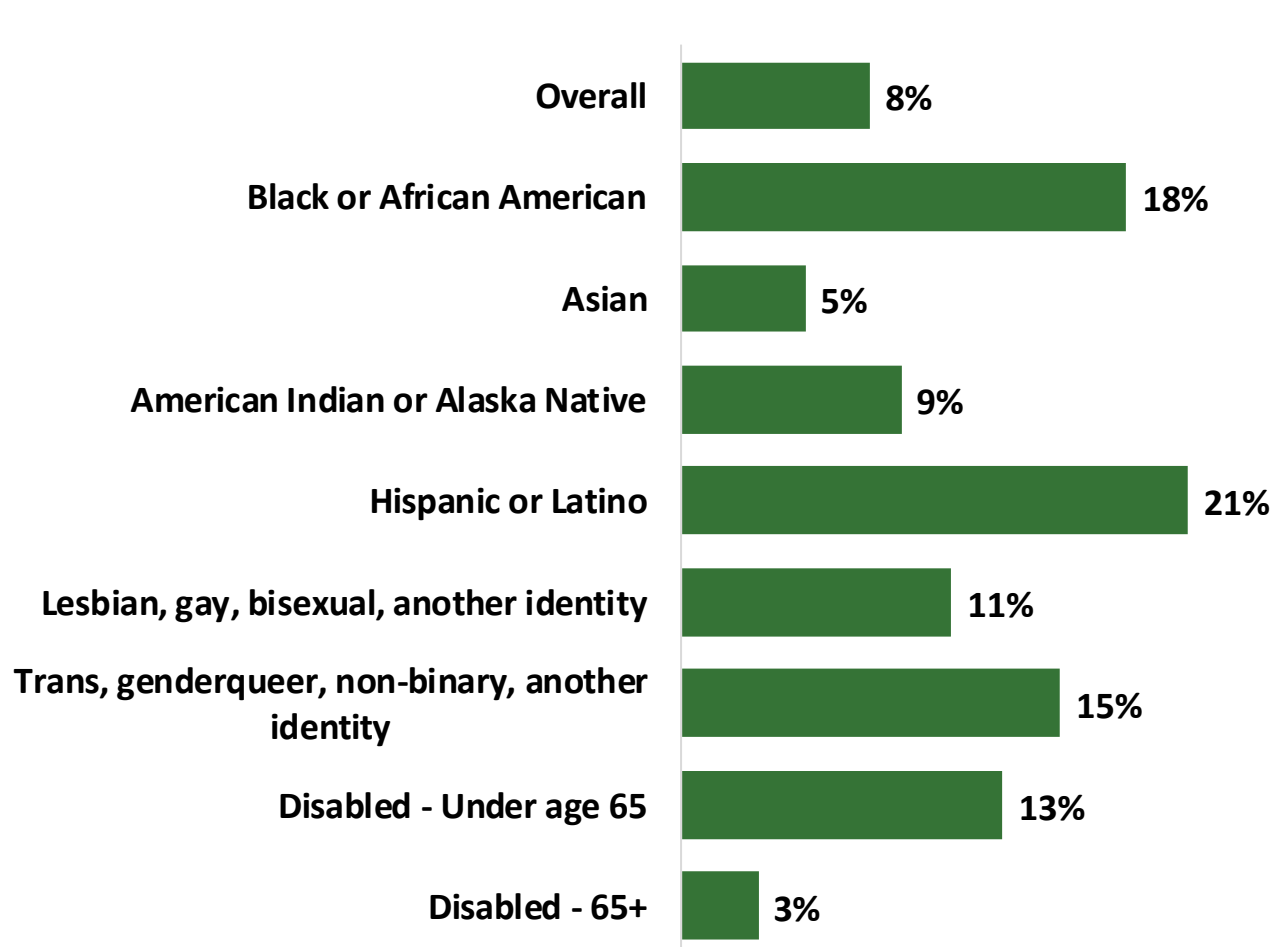


| | Estimated Population |
|--|----------------------|
| Overall | 47,600 |
| Black or African American | 2,000 |
| Asian | 1,500 |
| American Indian or Alaska Native | 700 |
| Hispanic or Latino | 1,400 |
| Lesbian, gay, bisexual, another identity | 4,600 |
| Trans, genderqueer, non-binary, another identity | 700 |
| Disabled - Under age 64 | 6,300 |
| Disabled - 65+ | 1,700 |

COVID-19 Equity – Job Loss

Hispanic and Latino Vermonters (21%) and Black Vermonters (18%) were most likely to have lost their job due to COVID-19.

Lost a job due to COVID-19

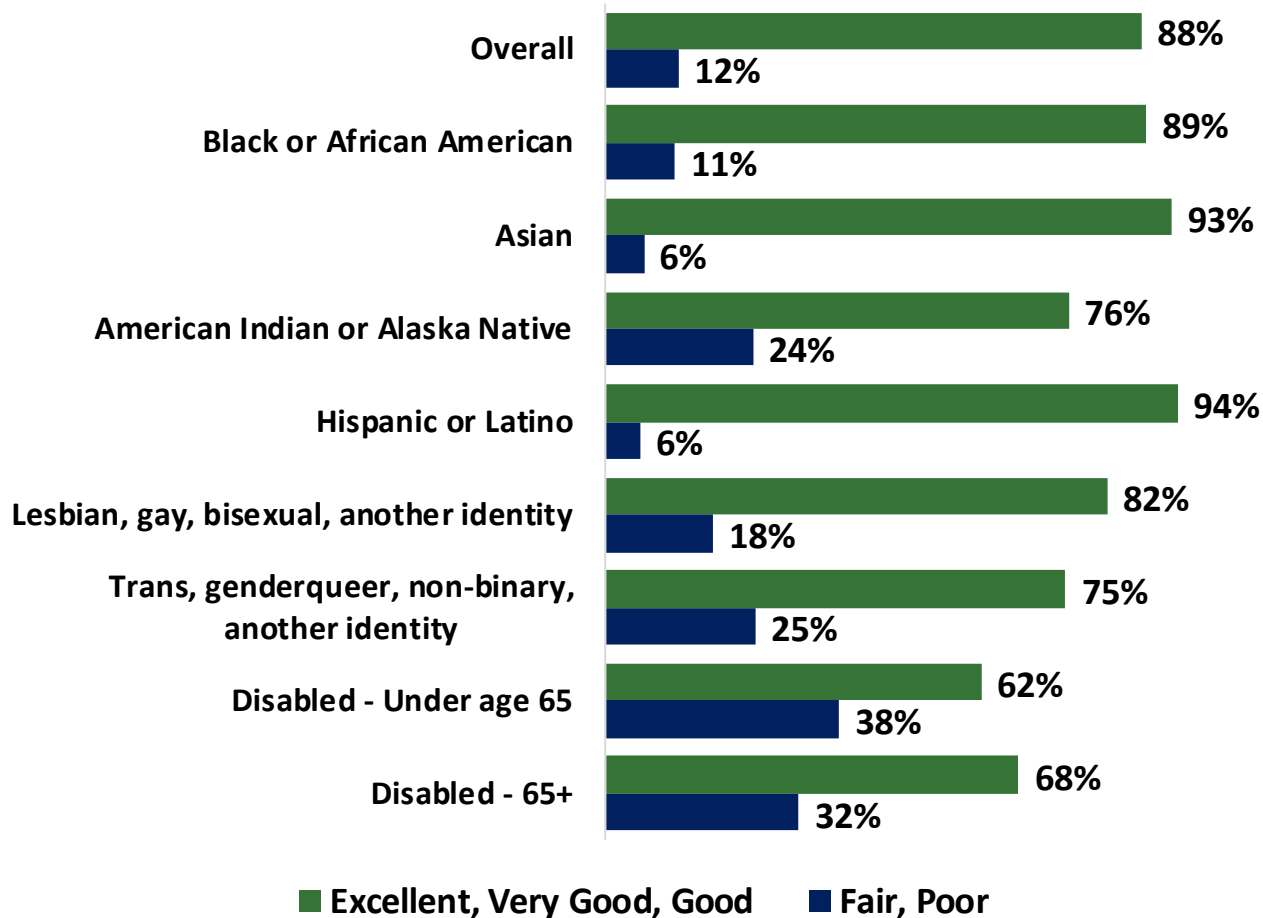


| | Estimated Population |
|--|----------------------|
| Overall | 38,500 |
| Black or African American | 1,400 |
| Asian | 600 |
| American Indian or Alaska Native | 500 |
| Hispanic or Latino | 1,800 |
| Lesbian, gay, bisexual, another identity | 4,300 |
| Trans, genderqueer, non-binary, another identity | 1,200 |
| Disabled - Under age 64 | 8,800 |
| Disabled - 65+ | 1,500 |

General Equity – General Health Status

Vermonters living with disabilities, gender identity minority Vermonters, and American Indian Vermonters were all less likely than others to consider their health excellent, very good or good.

General State of Health

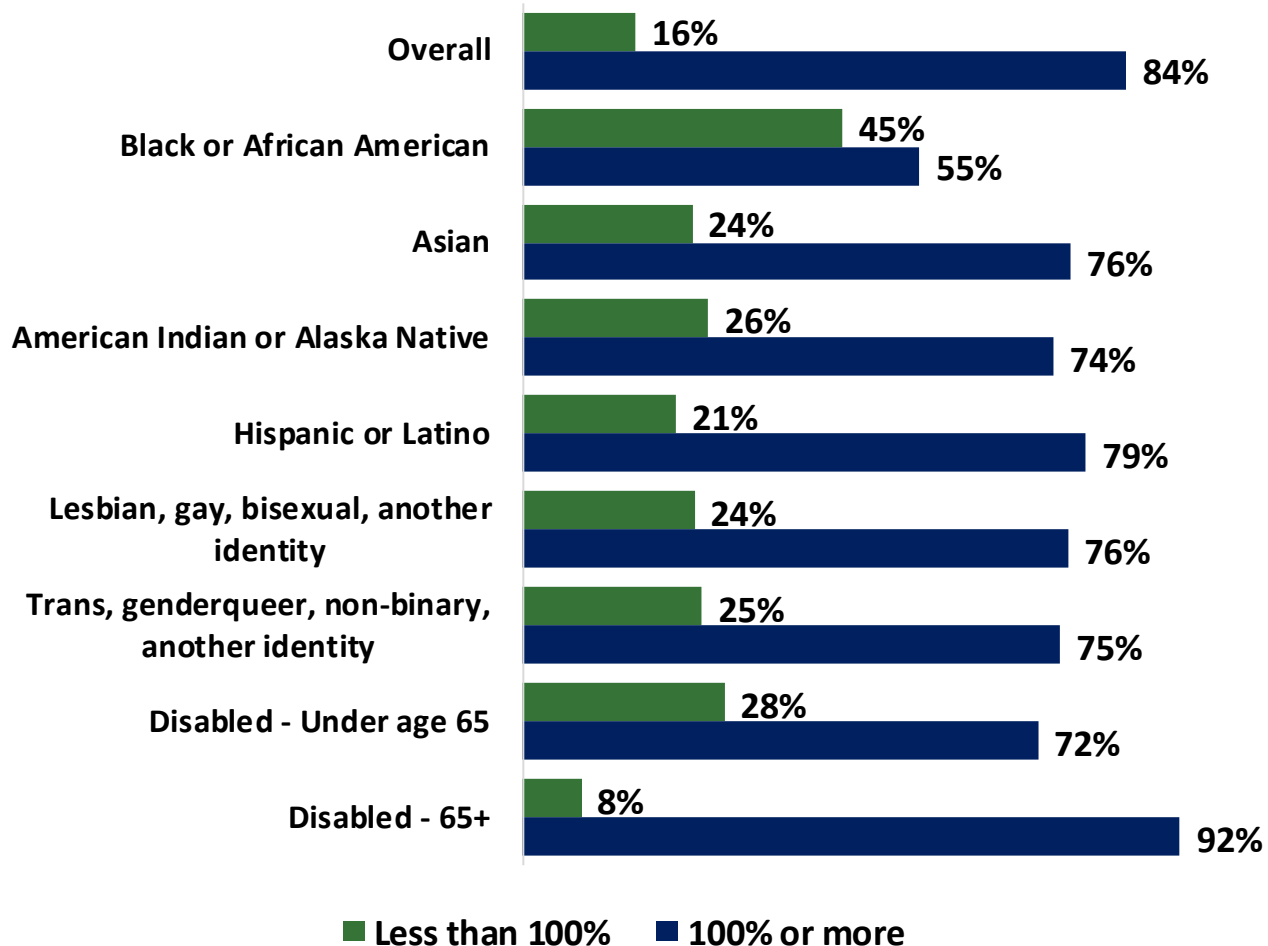


| | Estimated Population Excellent, Very Good, Good | Estimated Population Fair, Poor |
|--|---|---------------------------------|
| Overall | 543,500 | 73,900 |
| Black or African American | 8,900 | 1,100 |
| Asian | 13,000 | 1,000 |
| American Indian or Alaska Native | 5,700 | 1,800 |
| Hispanic or Latino | 11,500 | 700 |
| Lesbian, gay, bisexual, another identity | 32,000 | 6,900 |
| Trans, genderqueer, non-binary, another identity | 7,500 | 2,400 |
| Disabled - Under age 64 | 47,400 | 29,500 |
| Disabled - 65+ | 32,100 | 15,000 |

General Equity – Households in Poverty

Black or African American Vermont families were more likely than other Vermonters have incomes beneath 100% of the federal poverty level (45%).

Annual income as a percentage of Federal Poverty Level



| | Estimated Population Less than 100% | Estimated Population More than 100% |
|--|-------------------------------------|-------------------------------------|
| Overall | 97,500 | 521,200 |
| Black or African American | 4,500 | 5,600 |
| Asian | 3,300 | 10,700 |
| American Indian or Alaska Native | 1,900 | 5,500 |
| Hispanic or Latino | 2,600 | 9,600 |
| Lesbian, gay, bisexual, another identity | 9,300 | 29,600 |
| Trans, genderqueer, non-binary, another identity | 2,500 | 7,500 |
| Disabled - Under age 64 | 21,700 | 55,400 |
| Disabled - 65+ | 3,900 | 43,400 |



Trends



Trends and Outliers

Trends

The Vermont Household Health Insurance Survey (VHHIS) has been completed periodically since the early 2000's. In comparing responses to questions that are asked in multiple iterations of the survey, trends emerge. This section highlights some of those trends. Additional comparisons over time will be published in an addendum to this report. In addition, readers are welcome to review previous survey results online at:

<https://www.healthvermont.gov/stats/surveys/household-health-insurance-survey>

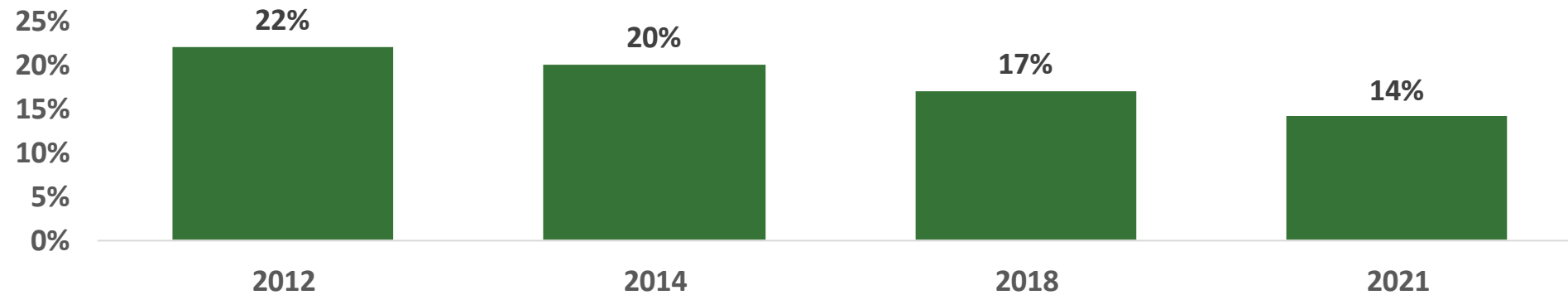
Pandemic-related Outliers

The Vermont Household Health Insurance Survey was updated in 2021 to include questions to examine the impact of the COVID-19 pandemic. In addition, some data that might not seem to be overtly related to the pandemic will often turn out to be related to the pandemic or the public health emergency response, rather than to long-term trends.

Problems Paying Medical Bills

Vermonters were significantly less likely to have problems paying medical bills in 2021 than in 2012, 2014, or 2018.

During the past 12 months, were there times that there were problems paying for medical bills for anyone in your household? All Vermonters, by Year



| | Estimated Population by Year |
|----------|--|
| Response | All Vermonters (Insured and Uninsured) |
| 2012 | 140,050 |
| 2014 | 124,023 |
| 2018 | 107,009 |
| 2021 | 85,141 |

Medical Bills and Savings

Vermonters were significantly less likely to use up all or most of their family’s savings in 2021 than in 2018, the first year this question was asked in the survey).

During the past 12 months, has your family used up all or most of your savings because of medical bills? All Vermonters, by Year

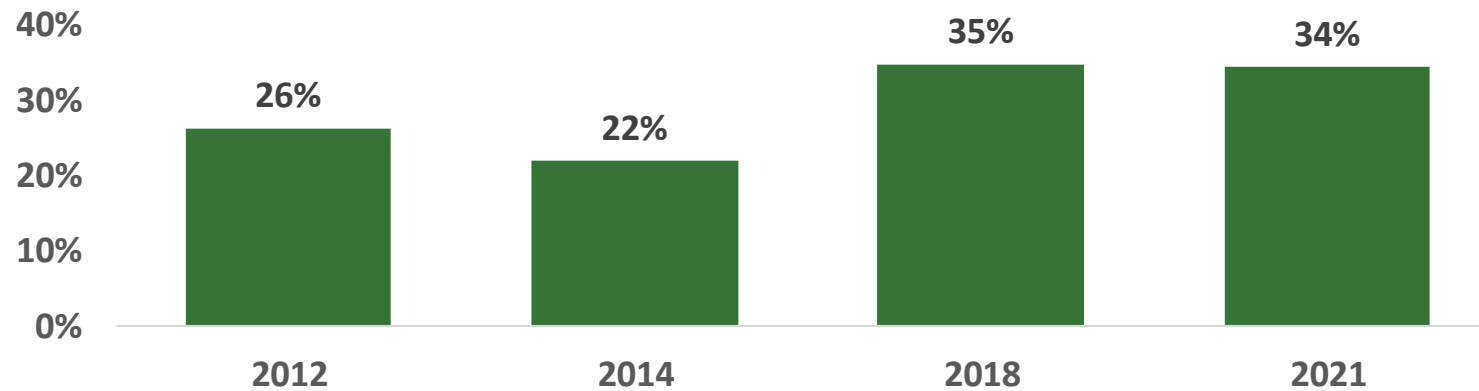


| | Estimated Population by Year |
|----------|--|
| Response | All Vermonters (Insured and Uninsured) |
| 2018 | 56,579 |
| 2021 | 34,547 |

Health Savings Accounts

Vermonters were significantly more likely to have a health savings account (HSA) in 2018 and 2021 than in 2012 or 2014. Over one-third (34%) of Vermonters 18 to 64 years old with private insurance report having an HSA in 2021.

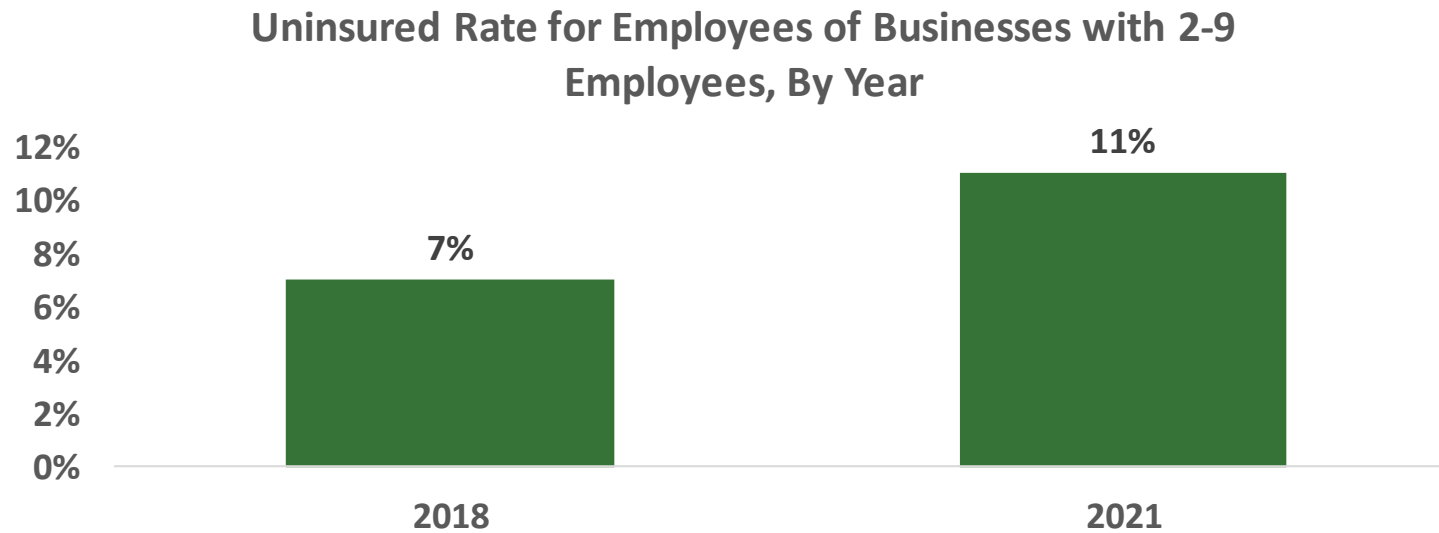
**Does person have a Health Savings Account of HSA?
All Vermonters, by Year**



| Estimated Population by Year | |
|------------------------------|----------------|
| Response | All Vermonters |
| 2012 | 97,180 |
| 2014 | 76,775 |
| 2018 | 116,297 |
| 2021 | 109,193 |

Uninsured Rate by Employer Size

In 2021, 11% of employees of businesses with 2-9 employees lacked health insurance, compared to 7% in 2018.



| | Estimated Population by Year |
|----------|------------------------------|
| Response | Uninsured Vermonters |
| 2018 | 3,500 |
| 2021 | 4,500 |

The 2021 Vermont Household Health Insurance Survey is sponsored by the Vermont Department of Health.



<https://www.healthvermont.gov/stats/surveys/household-health-insurance-survey>



The report was prepared by the research team at Market Decisions Research of Portland, Maine.