

QUALIFIED HEALTH PLANS (QHP) FOR VERMONT INDIVIDUALS AND FAMILIES

Flexible Health Plans Made for the Way Vermonters Live



As Vermont's only local, nonprofit health plan, we're dedicated to helping our neighbors get more for their healthcare dollar.

When you choose us as your health plan carrier, you'll have access to the largest network of providers and hospitals in Vermont, plus many across the U.S. and globally.

We have a range of options to fit your needs and budget. You may also qualify for financial help, including premium tax credits and cost-sharing reductions that may be available to lower the cost of our plans through Vermont Health Connect.

We're here to answer any questions, and support you and your family as you review our health plans and services.

Health Plans With Strong Value Built In

 **ACCESS TO A LOCAL AND NATIONAL NETWORK**
Get care from the largest network of trusted providers and hospitals throughout Vermont and nationwide.

 **\$0 PREVENTIVE HEALTH SERVICES**
Annual wellness visits, essential screenings, and standard immunizations are available in-network at \$0.* Download the preventive guide to check out the covered preventive services available at \$0. Visit bluecrossvt.org/preventive for more information.

 **PRESCRIPTION DRUG COVERAGE**
Get coverage and savings with our Vermont Blue RxSM pharmacy program, including pick-up and home delivery options. Plus, members can receive personalized one-on-one counseling to help get the most out of their medications.

 **EMERGENCY AND URGENT CARE**
No matter where an unexpected emergency happens, our members can access emergency and urgent services when needed in Vermont and across the country. No prior authorization required.†

* As defined by state and federal law.
† Services may be subject to cost-share, which is the amount members pay for medical, hospital, and pharmacy services. These amounts include:
• **Deductibles:** The amount members pay for services and medications before their plan begins to pay its share.
• **Coinsurance:** A percentage of costs (for example 20%) members will pay for covered services and medications after meeting their deductible.
• **Copayments:** The amount members pay for services and medications at the time of care.

Added Member Support For Better Health

-  **24/7 ACCESS TO TELEMEDICINE**
For secure access to convenient physical, mental health, and urgent care anytime, anywhere.
-  **BE WELL VERMONTSM PORTAL**
If age 21 or older, members can use our free wellness portal, Be Well Vermont, powered by Personify Health. Explore health tips and articles, wellness challenges, and more.
-  **AWARD-WINNING CUSTOMER SERVICE**
Solutions-focused support delivered by our Vermont-based team.

-  **COST TRANSPARENCY TOOL**
This helpful tool in our member portal shows your year-to-date out-of-pocket costs and provides details on provider and facility quality.
-  **BETTER BEGINNINGS[®] MATERNAL HEALTH PROGRAM**
Free maternal health and new family support with access to an experienced nurse, postpartum mental health resources, and even help to buy your car seat and breast pump.

 For additional information about our health plan benefits, coverage, and programs visit bluecrossvt.org/members.

How to Enroll

ENROLL WITH VERMONT HEALTH CONNECT
If you qualify for financial help, you can enroll in our health plans through Vermont Health Connect, the state's official health insurance marketplace.

 Call **(855) 899-9600**
Log in or create an account at VermontHealthConnect.gov

ENROLL DIRECTLY WITH BLUE CROSS VT
If you don't qualify for financial help through Vermont Health Connect for the calendar year and are looking to buy a health plan, you can shop and compare our plans at bluecrossvt.org/shop-plans.

 Call **(800) 255-4550 (TTY/TDD: 711)**
 Email consumersupport@bcbsvt.com

AFTER YOU'VE ENROLLED

- 1. Check Your Mailbox**
Your new Blue Cross VT ID card(s) will arrive in the mail. You'll need them to access care, fill prescriptions, and set up home delivery. You'll also receive an Outline of Coverage, providing an overview of your plan benefits.
- 2. Register Online at the Member Resource Center (MRC)**
Once your Blue Cross VT ID card(s) arrive, register for an online account to access your member portal at bluecrossvt.org/MRC, where you can view your plan details, coverage, claims, and more.
- 3. Get to Know Us**
Sign up for the monthly newsletter in the Member Resource Center at bluecrossvt.org/MRC. Find out about free community events throughout the year at bluecrossvt.org/community. Explore helpful blog content at bluecrossvt.org/blog.

Serving Vermonters since 1980

For more than 40 years, our mission has been to make healthcare work better for all Vermonters. Headquartered in central Vermont, we employ more than 400 of your friends, family, and neighbors. Our team is dedicated to improving the health and well-being of our communities.

You are the reason we're here. We work hard to make healthcare more affordable, understandable, and available for Vermonters. We take this responsibility seriously – our members are at the heart of everything we do.



(800) 255-4550 (TTY/TDD: 711)
consumersupport@bcbsvt.com | bluecrossvt.org

    [@bluecrossvt](https://bluecrossvt.org)

Blue Cross and Blue Shield of Vermont (Blue Cross VT) does not discriminate on the basis of race, color, national origin, age, disability, genetic information, gender identity, sex, ethnicity, sexual orientation, or HIV-Status..

 For free language-assistance services, call (800) 247-2583.
Pour obtenir des services d'assistance linguistique gratuits, appelez le (800) 247-2583.
Para servicios gratuitos de asistencia con el idioma, llame al (800) 247-2583.



**BlueCross
BlueShield**
of Vermont

An Independent Licensee
of the Blue Cross and
Blue Shield Association.

Questions? Contact us at:
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consumersupport@bcbsvt.com
bluecrossvt.org/QHP

284.517 (09/2026)

2027 INDIVIDUAL & FAMILY QUALIFIED HEALTH PLANS & PREMIUMS CHART

Orange numbers indicate a change for 2027 plans

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			Health spending accounts	Deductible		Out-of- pocket maximum	Medical cost-share(s)						Deductible	Out-of- pocket maximum	Prescription drugs cost-share(s)		Cost of monthly premiums before any financial help from Vermont Health Connect (VHC). Subsidies may be available with VHC.					
			Health Savings Account (HSA)*	Medical deductible is doubled for plans with two or more people	Deductible type ¹	Medical out-of-pocket maximum is doubled for plans with two or more people	Preventive care ²	Primary care, mental health, or provider visits for substance use disorder treatment	Specialist visits with diagnosis of heart disease or diabetes ³	Specialist visits ⁴	Urgent care	Emergency room care	Outpatient & inpatient hospital services	Prescription drug deductible is doubled for plans with two or more people	Prescription drug out-of-pocket maximum is doubled for plans with two or more people	Wellness medications ⁵ (generic/preferred/ non-preferred brands)	Prescription drugs (generic/preferred/ non-preferred brands)	Individual-only	Married Couple	Parent + Child(ren)	Family	
Vermont Preferred Plans	GOLD			\$1,550	Aggregate ¹	\$5,650	\$0	Combined 4, 8, or 12 \$0 office visits, then deductible, then \$20	Four \$0 office visits per member, then deductible, then \$40	Deductible, then \$40	\$60	Deductible, then \$250	Deductible, then \$750	Combined with medical	\$1,750	\$5/\$50/ 50% ⁵	Deductible, then \$5/40%/ 50%	\$1,372.95	\$2,745.90	\$2,649.79	\$3,857.99	
	SILVER 		<div>VHC BCBSVT</div>	\$3,750	Aggregate ¹	\$9,850 ⁶	\$0	Combined 4, 8, or 12 \$0 office visits, then deductible, then \$30	Four \$0 office visits per member, then deductible, then \$50	Deductible, then \$50	\$70	Deductible, then \$450	Deductible, then \$1,750	Combined with medical	\$1,750	\$5/\$50/ 50% ⁵	Deductible, then \$5/40%/ 50%	<div>VHC BCBSVT</div> \$1,126.79	\$2,253.58	\$2,174.70	\$3,166.28	
	BRONZE			\$10,900	Aggregate ¹	\$10,900 ⁶	\$0	Combined 4, 8, or 12 \$0 office visits, then deductible, then \$0	Four \$0 office visits per member, then deductible, then \$0	Deductible, then \$0				Combined with medical	Combined ⁸	\$15/\$50/ 50% ⁵	Deductible, then \$0	\$951.04	\$1,902.08	\$1,835.51	\$2,672.42	
Vermont Select Plans	GOLD CDHP			\$3,700	Aggregate ¹	\$3,700	\$0	Deductible, then \$0						Combined with medical	\$1,750	\$5/\$50/ 50% ⁵	Deductible, then \$0	<div>VHC BCBSVT</div> \$1,349.98	\$2,699.96	\$2,605.46	\$3,793.44	
	SILVER CDHP 		<div>VHC BCBSVT</div>	\$6,525	Aggregate ¹	\$6,525 ⁶	\$0	Deductible, then \$0						Combined with medical	\$1,750	\$15/\$50/ 50% ⁵	Deductible, then \$0	<div>VHC BCBSVT</div> \$1,107.08	\$2,214.16	\$2,136.66	\$3,110.89	
		\$6,500	\$6,500 ⁶	\$1,493.07		\$2,986.14												\$2,881.63	\$4,195.53			
	BRONZE CDHP			\$9,000	Aggregate ¹	\$9,000 ⁶	\$0	Deductible, then \$0						Combined with medical	Combined ⁸	\$25/ 40% / 50% ⁵	Deductible, then \$0	\$948.66	\$1,897.32	\$1,830.91	\$2,665.73	
Standard Plans	PLATINUM			\$700	Stacked ¹	\$2,650 ⁷	\$0	Three \$0 office visits per member, then \$15	\$30		\$40	Deductible, then \$100	Deductible, then 10%	\$0	\$1,750 ⁷	\$10/\$50/50%		<div>VHC BCBSVT</div> \$1,686.45	\$3,372.90	\$3,254.85	\$4,738.92	
	GOLD			\$1,700	Stacked ¹	\$6,000 ⁷	\$0	Three \$0 office visits per member, then \$20	\$55		\$65	Deductible, then \$150	Deductible, then 35%	\$400 individual/ \$800 family	\$1,750 ⁷	\$15/deductible, then \$60/50%		\$1,390.86	\$2,781.72	\$2,684.36	\$3,908.32	
	SILVER 		<div>VHC BCBSVT</div>	\$3,500	Stacked ¹	\$11,300	\$0	Three \$0 office visits per member, then \$40	\$90		\$100	Deductible, then \$250	Deductible, then 50%	\$550 individual/ \$1,100 family	\$1,750	\$15/deductible, then \$70/50%		<div>VHC BCBSVT</div> \$1,141.21	\$2,282.42	\$2,202.54	\$3,206.80	
	BRONZE			\$6,450	Stacked ¹	\$11,100	\$0	Deductible, then \$35	Deductible, then \$90		Deductible, then \$100	Deductible, then 50%		\$1,100 individual/ \$2,200 family	\$1,750	\$15/deductible, then \$85/60%		\$947.78	\$1,895.56	\$1,829.22	\$2,663.26	
	BRONZE INTEGRATED			\$12,000	Stacked ¹	\$12,000	\$0	Three \$0 office visits per member, then \$40	\$100		Deductible, then \$0			Combined with medical	Combined ⁸	\$25/deductible, then \$0		\$974.81	\$1,949.62	\$1,881.38	\$2,739.22	
	SILVER CDHP 		<div>VHC BCBSVT</div>	\$2,500	Aggregate ¹	\$7,500 ⁶	\$0	Deductible, then 10%	Deductible, then 35%						Combined with medical	\$1,750	\$10/\$40/50% ⁵	Deductible, then \$10/\$40/50%	<div>VHC BCBSVT</div> \$1,183.61	\$2,367.22	\$2,284.37	\$3,325.94
				\$1,596.45	\$3,192.90	\$3,081.15	\$4,486.02															
	BRONZE CDHP			\$6,300	Aggregate ¹	\$7,800 ⁶	\$0	Deductible, then 50%						Combined with medical	\$1,750	\$12/40%/60% ⁵	Deductible, then \$12/40%/60%	\$1,016.38	\$2,032.76	\$1,961.61	\$2,856.03	

Cost-share for each health plan above is based on the individual-only membership type. Plan benefits may change for married couple, parent + child(ren), or family membership types.

*Explore pairing a Health Savings Account (HSA) with your health plan, visit bluecrossvt.org/QHP-HSA.

- **Silver plans through Vermont Health Connect (VHC) cost more than Gold plans. We encourage you to shop and compare all health plan options available to determine which plan may be best for you or your family.** Silver plans have different monthly premiums, depending on if you enroll through Blue Cross and Blue Shield of Vermont (**BCBSVT**) or Vermont Health Connect (**VHC**). If you're interested in purchasing a Silver plan, the monthly premiums are lower if you enroll in a Silver Reflective plan directly with us, but you will not be eligible for financial help (subsidies). To verify your eligibility before you enroll, visit VermontHealthConnect.gov. Plan details for Enhanced Silver (cost-sharing reduction) plans through Vermont Health Connect (VHC) are not shown in the above. For more information about these plans, visit bluecrossvt.org/QHP or VermontHealthConnect.gov.

¹For **Stacked** deductibles, once a member meets their deductible, the health plan pays accordingly, even for married couple, parent + child(ren), or family plans. For **Aggregate** deductibles, once all members on the health plan meet their collective deductible, the health plan pays accordingly. ²Visit bluecrossvt.org/preventive for the full list of preventive services covered at \$0 cost to you. ³Specialist visits include cardiologist, endocrinologist, nephrologist, ophthalmologist, or podiatrist only. ⁴Cost-share may vary for chiropractic and outpatient physical therapy. See the Summary of Benefits and Coverage (SBC) at bluecrossvt.org/QHP. ⁵Deductible is waived for wellness medications on our Vermont Preferred and Consumer-Directed Health Plans (CDHP). Visit bluecrossvt.org/formulary-lists and click on the "NPF Wellness List" to view our available wellness medications. ⁶Regardless of all other cost-share, if one person's out-of-pocket cost reaches \$12,000 in a year, we begin paying 100% of the allowed amount for that person's covered services and supplies. ⁷Medical and prescription drug out-of-pocket limits are separate. ⁸This plan does not include a separate prescription drug out-of-pocket maximum. All covered medical and pharmacy expenses accumulate to the overall combined out-of-pocket maximum.