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2025 Legislative Session Update

The health care dynamics shifted dramatically this year, with the boldest attempts to rein in costs in at least a decade. Blue Cross VT was actively involved in advocating for more affordable health care for Vermonters.

Together, the legislature, the administration, the Green Mountain Care Board (GMCB), and The Department of Financial Regulation (DFR) confronted the tremendous pressures on our health care system and passed four landmark health care bills:

H.482 (Act 49) An act relating to the GMCB authority adjusting a hospital's reimbursement rates and appointing a new hospital observer.

H.266 (Act 55) Pertains to the 340B prescription drug pricing program and caps hospital-administered drugs at 120% of the average sales price beginning in 2027.

S.126 (Act 68) Healthcare payment and delivery system reform bill that funds and implements reference-based pricing and system-wide health care planning initiatives.

H.35 (Act 2) Permanently unmerges the individual and group markets on the healthcare exchange.



Access to the Largest Network-of-Providers

- Our new Find-A-Doctor tool is now live on the Blue Cross VT website. This enhanced tool is mobile-friendly, features advanced search options, and integrates data from the BlueCard National Doctor and Hospital Finder tool—all of which make it easier for members to locate in-network care options. In addition, we are also launching a new and improved cost transparency tool later this year. These new tools can be accessed through our website, bluecrossvt.org, and within the Member Resource Center (MRC).
- BlueCard PPO is recognized as the largest and deepest discounted network in the nation, and is accepted by:

83% OF ALL DOCTORS

97% OF ALL NATIONWIDE HOSPITALS

99% PROVIDER PARTICIPATION IN VERMONT

A 2025 Milliman Total Cost of Care analysis found BlueCard PPO is the market leader, with a total cost of care that is 7% lower than national competitors.



Our Commitment to Vermont



Prioritizing Vermonters

As the State's only local, nonprofit health plan, our singular focus is to make healthcare work better for our fellow Vermonters. We understand the cost crisis and live it with our members every day. Healthcare is

complex, with many players and multiple cost-drivers, and we all need to do our part. That's why we're doing our part by investing in whole-person care and partnerships that improve outcomes for our members, support our providers, and strengthen our communities. Being nonprofit is a commitment to making healthcare dollars go further, because that is what Vermonters deserve.

Exceptional Local Customer Service

Employers and members highly value our Vermont-based customer service teams who provide answers and support, improving the overall healthcare experience for everyone. In fact, the team was recently awarded the 2024 Call Center of the Year among 500 small and mid-sized organizations by Service Quality Measurement Group (SQM).

With 240,000 members, our Berlin-based customer service call center manages more than 170,000 calls a year. Call center representatives are committed to creating positive member experiences and are ranked in the top 25 percent of the 500 leading North American call centers that SQM surveys. These awards highlight our Customer Service Team's excellence and the organization's dedication to delivering exceptional experiences for our members.

Partnering with You

We're big on partnering with brokers like you to better serve Vermont and provide greater value to employer groups and local businesses—because we are one, too. Whether it is a small or jumbo group, we offer dozens of plan options, multiple benefit designs, and rebate programs to help you craft tailored solutions to fit your clients' needs and budget.



Free Personal Health Support

Our personal health services are voluntary, free, and available to all our members. Our registered nurses and licensed clinicians provide members with help when dealing with issues such as medical care, mental health, end-of-life care, and substance use disorder treatment.

Learn how our team of nurses and mental health clinicians work with our members to help Vermonters feel better and live well. [Read our Blog](#)



Virtual Care Services

We offer telemedicine services through Amwell to provide our members with access to care 24/7, wherever they are. Children and adults can be treated for common conditions such as fever, cold, allergies, sinus infection, and more. To meet the increasing need for mental health and substance use disorder providers, we have partnered with Amwell, Valera Health, and Sondermind. Members can connect with a board-certified provider via live video through a secure telemedicine website or mobile app. Learn more at bluecrossvt.org/telemedicine.



2026 QHP Rate Filing

As hospital budgets and Vermont healthcare costs continue to surge, so must our health insurance premiums. This ensures we can cover the claims of our members. While we're optimistic about the progress we've made toward affordability, no significant regulatory or policy efforts have changed our current cost trajectory or tempered the ongoing cost increases. Our proposed 2026 rates account for the exceedingly high and still increasing hospital and drug prices, increased utilization and care, and a growing number of members with complex care needs.

Despite our rate differences, our members continue to choose our health plans because of important distinctions: They value our coverage, appreciate our service, and trust our brand. If you have questions about our rate filing, please speak with your account manager.

What to Expect Next

- Once our 2026 rates are finalized, you will receive an email with our rate chart for all available plans. We hope to have this available in September.
- Open enrollment begins November 1, 2025, and will end December 31, 2025.



Weight Loss Medications

Coverage Changes for GLP-1 Drugs FDA-Approved for Weight Management

Beginning January 1, 2026, Blue Cross Vermont will no longer cover prescription GLP-1 drugs that are FDA-approved for weight management, such as Wegovy®, Zepbound®, and Saxenda®, for our Qualified Health Plan (QHP) and Blue Edge Business members. We will continue to cover GLP-1 drugs prescribed as a treatment for members with Type 2 diabetes. Our fully insured, Blue Edge Classic, and ASO groups do have the option to cover GLP-1 medications if they desire.



Consumer Driven Health Care Products (CDHP) Update

Preferred Partner Advantages with HealthEquity®

HealthEquity offers Health Savings Accounts (HSA), Health Reimbursement Arrangements (HRA), and Flex Spending Accounts (FSA), with the following capabilities:

- HSA and HRA integrated billing
- Eligibility and claims file delivery connected with Blue Cross VT
- Members can access account balances by logging in through our Member Resource Center and connecting to their HealthEquity account.

Whether it's with our preferred partner or a vendor of your choice, we're here to help.



**BlueCross BlueShield
of Vermont**

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

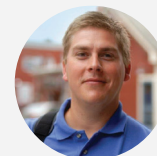


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