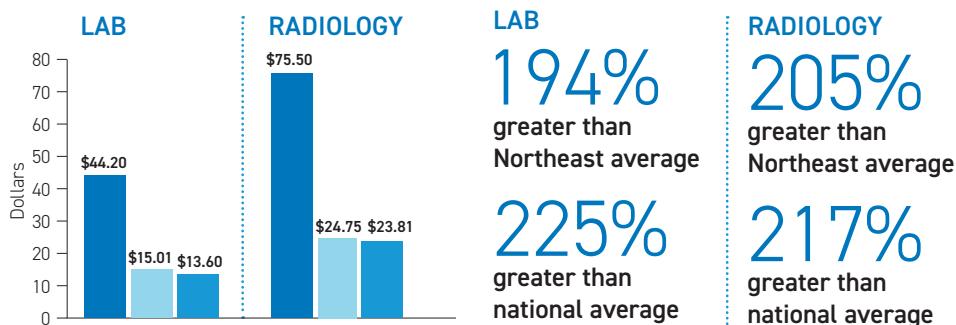


Vermonters can't wait. Reference-based pricing for labs and radiology can deliver immediate relief.

Outpatient lab and radiology services are costing Vermonters more than double the national average.

Outpatient Total Payment Per Member Per Month*



Outpatient lab and radiology unit costs as a percentage of Medicare costs.

LAB SERVICES**

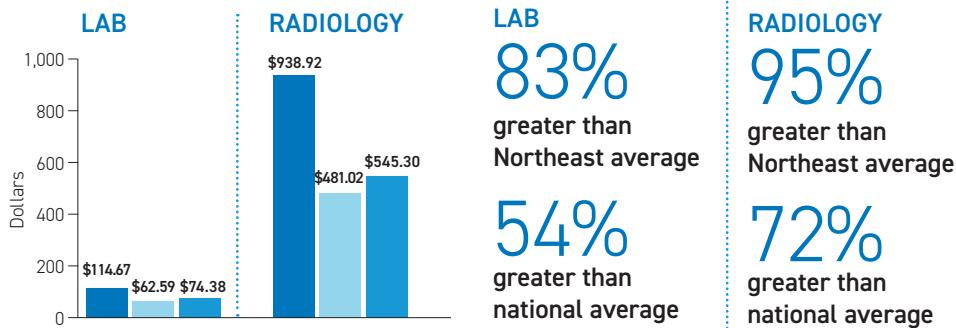
659% compared to Medicare

RADIOLOGY SERVICES**

1,129% compared to Medicare

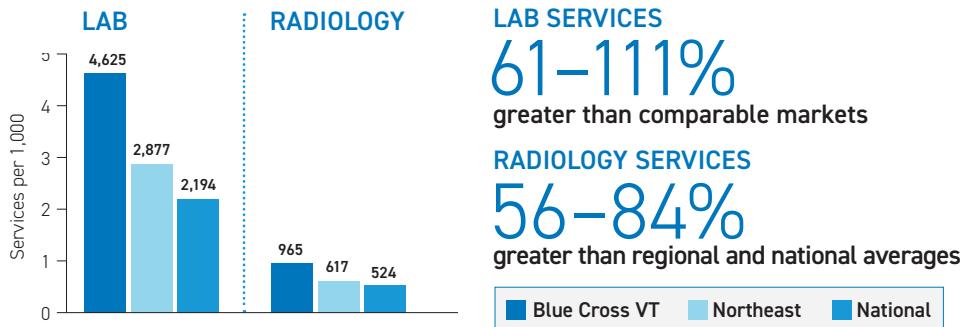
Vermont's unit costs far exceed benchmarks.

Outpatient Unit Cost Cost Per Service*



Outpatient lab and radiology services are utilized in Vermont at a higher rate than other markets.

Outpatient Utilization Services Per 1,000*


Take Action:
Target high-volume, high-variation services – quickly and responsibly.

By implementing reference-based pricing focused on these high-impact areas, we can provide immediate cost relief for Vermonters who need these services.

This approach can be implemented quickly and scaled responsibly to protect access, preserve quality, and recognize the essential role providers play in communities across Vermont.

Reference-based pricing offers a tangible, near-term step that demonstrates progress on affordability now.

* Claims incurred September 2024–August 2025 paid through November 2025. Excludes Medicare Primary.

** Data excludes Critical Access Hospitals and is limited to claims with a bill type beginning "13," hospitals in Vermont, and claims with positive allowed amounts.

These costs directly drive premiums and out-of-pocket expenses for Vermonters. Without addressing service prices, premium increases and system instability will continue.

As Vermonters committed to the health of Vermonters, let's continue the conversation.

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