

Health Insurance Changes – the BIG, the Bad and the Ugly



ODC's Insurance Assister, Melanie Clark, breaks down key changes at the federal level.

WITH THE PASSAGE of the Big Beautiful Bill Act and the end of provisions put in place as part of the 2021 American Rescue Plan Act, there are some BIG changes in health insurance eligibility and affordability coming down the pipeline. Many of the Medicaid changes—including more frequent renewals, work/volunteer requirements for certain Medicaid enrollees, and a decreased timeframe for retroactive coverage—are not slated to be implemented until the end of 2026 and 2027. Those enrolling in a qualified health plan through the health insurance marketplace, however, will see some significant changes starting THIS calendar year. They can expect significant pricing changes when they select coverage for 2026 on Vermont Health Connect during Open Enrollment (November 1, 2025 - January 15, 2026).

Key changes expected by December 31, 2025

THE enhanced premium tax credits originally enacted under the American Rescue Plan Act and extended by the Inflation Reduction Act will expire unless Congress acts to renew them. These tax credits dramatically lowered out-of-pocket costs by expanding premium assistance, providing a subsidy to reduce health insurance premiums bought through the marketplace. This isn't the only change:

- The "healthcare cliff" will return, meaning any individuals over 400% of the Federal Poverty Level (FPL) will no longer qualify for ANY premium assistance to put towards their healthcare plan.

- Lawfully present immigrants with incomes under 100% FPL will be barred from receiving premium tax credits.
- DACA recipients ("Dreamers") will again be ineligible to enroll in a qualified health plan.
- Individuals under 200% FPL will no longer have a continual open enrollment period, which has allowed them to get on a healthcare plan at any time throughout the calendar year.

These changes are slated to result in steeper premiums and less overall access to healthcare coverage in Vermont. These changes likely mean that many Vermonters will lose their coverage completely or will be forced to purchase a plan that requires higher out-of-pocket expenses in favor of lower monthly premiums. With all the changes coming this year, we are expecting this year's Open Enrollment to be busier than ever, with people needing to change plans to maintain access or affordability.

Enrollment Support for Those Over Age 65, Blind or Disabled

MELANIE currently offers health insurance counseling to those under age 65, in alignment with the population ODC serves. Those over age 65, or who are blind or disabled, typically have been referred to Age Well Vermont, which receives funding to serve these populations. These services are highly sought after, and Age Well has periods when they cannot keep up with the demand for their services, leaving an unmet need. To help meet this need, Melanie has taken a Medicare course and is training with other Medicare support providers to begin offering Medicare enrollment support, as well as support in applying for Medicaid for the Aged, Blind and Disabled. Her availability may be limited this year due to the significant expected changes related to Vermont Health Connect, and the unprecedented number of calls she has already received.

Volunteer Spotlight



Cindy Marshall

I RECENTLY REALIZED that I've been volunteering at the Open Door Clinic for 28 years! It all started when I saw an advertisement in the newspaper about ODC's work.

I learned they had never had a physical therapist volunteer before. I reached out and was connected with Sonia Olson, the clinic's founding director. That first visit made a lasting impression—and I've been going back ever since.

What keeps me coming back year after year is simple: the people. Everyone who walks through the doors—patients, staff, and volunteers—is there because they care. Many of the people we serve are going through difficult times, and I feel incredibly grateful to offer my support in any way I can.

But what's most beautiful is that while I go there to help others, I often feel like I receive just as much in return. The clinic has become a community for me. After 28 years, I know so many of the people involved, and I truly feel at home there.

Volunteering at the clinic has been one of the most rewarding parts of my life, and I'm honored to be part of such a compassionate and committed team."



Alyssa Rittendale

"THREE YEARS AGO, I saw someone interpret for a student at school and it inspired me to learn Spanish. I remember thinking, "I want to know how to do that!"

I began volunteering at ODC to gain exposure and practice speaking Spanish. I started out at the front desk, greeting patients by using a script of questions and answers in Spanish. More recently, I've helped out at outreach clinics, too.

These days, I not only get to practice my Spanish, but, even more importantly, I get to be part of a wonderful community of nurses, doctors, ODC staff, college interns, and fellow volunteers. This team provides such kind, respectful, and compassionate care for every patient who walks through the doors of the Open Door Clinic.

Each time I return from a Tuesday night clinic or an outreach event, I feel truly grateful—for the chance to support this incredible team and to be there for the patients who rely on us. I am always amazed by our patients as people: their culture, their kindness and work ethic. With all the hardship that they face, they are always so gracious and kind!

Volunteering has expanded my world and I am so grateful to have gotten to know everyone involved in supporting our patients."

How do we stack up? ODC and the NAFC

OPEN DOOR CLINIC is one of over 1,400 member clinics and pharmacies across the U.S. that comprise the National Association of Free & Charitable Clinics (NAFC) and form a critical part of America's healthcare safety net. The mission of the NAFC is to build healthy communities for all through quality, equitable, accessible healthcare. Like other members of the NAFC, ODC receives relatively little federal funding, operating primarily through the generosity of donors, partners, and volunteers. Nationwide, free clinics like ODC tend to disproportionately serve people of color and women (see below).

ODC Director Heidi Sulis and Clinical and Program Director Julia Doucet recently attended the NAFC annual conference for the first time. "While all attendees were free clinics sharing many common denominators, it was remarkable and inspirational to learn about the differences in our models of care," says Heidi. Julia and Heidi hope to attend next year's conference in Washington, D.C.

In 2024, ODC:

- cared for 1,311 distinct patients
564 (43%) of them were new
- 64% were people of color, vs 9.8% of Addison County residents
- 36% were female, vs 49.9% of Addison County residents

The total ODC workforce was 141

- 129 (92%) were volunteers, who contributed >3,000 hrs, 1.5 FTE*
- 12 (8%) were paid employees, who worked >12,000 hrs, 6 FTE
 - 17% worked full time
 - 83% were women

As an organization

- ODC saw a 6% increase in demand year over year
- Served 594 Spanish speakers
- Offered interpretation for 2,219 patient interactions
- Helped 403 people enroll in patient financial assistance programs

In 2024, the NAFC:

- cared for 1.7 million distinct patients
654,000 (38%) of them were new
- 59% were people of color, vs 42% of the U.S. population
- 55% were female, vs 49.8% of the US population

The total free clinic workforce was 205,200

- 189,000 (92%) were volunteers
- 16,200 (8%) were paid employees
 - 66% worked full time
 - 82% were women

As organizations

- 81% of free clinics saw increased demand
 - > ½ of clinics saw a 10-20% jump
- 85% served Spanish speakers
- 68% offered on-site or remote interpretation
- 52% helped people enroll in patient financial assistance programs



*FTE = Full Time Equivalents, ≈2,000 hrs/yr

Data sources: ODC, NAFC, U.S. Census

Patient Story: Bridging the Gap Back to Medicaid Enrollment

AS A SINGLE MOM, Kelly* has been doing everything she can to keep her head above water. Her son, Jordan*, has been struggling—not just in school, but also outside of it. Recently, Jordan has had a few run-ins with the law, leading Kelly to feel even more overwhelmed, exhausted, and stressed than usual. This stress reached its peak when Kelly went to the pharmacy to pick up her refills and was told her Medicaid was no longer active. Kelly was embarrassed as people stood in line behind her. She didn't have the money to pay out of pocket and had to tell the pharmacist she couldn't afford the prescriptions, even though she desperately needed them.

Kelly reached out to Open Door Clinic's Insurance Assister, Melanie Clark, with whom she had worked in the past. They learned that Kelly's Medicaid had lapsed because she forgot to complete her renewal paperwork. Between her part-time job, constant bills, caring for Jordan, and managing her household, the deadline slipped through the cracks. Melanie worked with Kelly to complete the renewal with no changes, but when asked to send in income verification, Kelly forgot that she had worked additional hours during the previous month to cover a shift for a sick co-worker. These additional hours put Kelly just above the Medicaid threshold, leaving her ineligible for coverage and, crucially, without access to her needed prescriptions. Knowing that our partners at HOPE offer low-income county residents one-time vouchers to help with the cost of prescriptions, we worked with Kelly to get a voucher. She was able to fill her prescriptions until she could be re-screened and re-enrolled in Medicaid the following month.

Life gets busy and, unfortunately, Kelly's story isn't unique. It shows how frequent Medicaid renewal requirements can unintentionally punish families who are already stretched thin. Confusing paperwork and strict deadlines can create barriers that lead to lapses in coverage. With the upcoming transition from annual to twice-yearly Medicaid renewals, we can expect even more people to experience gaps in healthcare coverage. Given these changes, it is more important than ever that Open Door Clinic continue to provide health insurance enrollment support, as well as medical care to people experiencing these unexpected gaps in health insurance coverage.

*Not their real names.

Time Capsule: Care That Helps Patients Flourish



BEFORE OUR PATIENT Danilo returned home to Southern Mexico in 2018, he brought the team orchids as a thank-you for their care of his health.



SEVEN YEARS LATER, our office and our team have changed, but one of the orchids has bloomed again! We hope Danilo is flourishing, as well.