

**Dirigo Health Exchange
Proposed Voucher Subsidy Structure**

**\$406 Base premium
5% employer contrib**

Discount Rates

	Single	EE + Sp	EE+ Ch	Fam
B	\$ 30.00	\$ 35.00	\$ 35.00	\$ 45.00
C	\$ 75.00	\$ 100.00	\$ 100.00	\$ 125.00
D	\$ 180.00	\$ 240.00	\$ 240.00	\$ 300.00
E	\$ 330.00	\$ 440.00	\$ 440.00	\$ 550.00

FPL Levels

	HH Size →	1	2	3	4
B	150%	\$ 16,245.00	\$ 21,855.00	\$ 21,855.00	\$ 27,465.00
C	200%	\$ 21,660.00	\$ 29,140.00	\$ 29,140.00	\$ 36,620.00
D	250%	\$ 27,075.00	\$ 36,425.00	\$ 36,425.00	\$ 45,775.00
E	300%	\$ 32,490.00	\$ 43,710.00	\$ 43,710.00	\$ 54,930.00

Rate Expressed as % of FPL Level income

	Single	EE + Sp	EE+ Ch	Fam
B	2%	2%	2%	2%
C	4%	4%	4%	4%
D	8%	8%	8%	8%
E	12%	12%	12%	12%

Agency Subsidy PMPM \$262

Members Covered 2,700