



VERMONT DEPARTMENT OF HEALTH

## 2025 You First Program Eligibility

**Residence:** Must live in Vermont

**Age:** Must be over 21 years old

- Our heart health program is available for members ages 35-64.

**Insurance status:** Can be uninsured, have Medicaid, Medicare, or have private health insurance (including Vermont Health Connect)

- Members with Medicare Part B are not eligible for payment of clinical services.

**Screening Need:** You have (or have had) breasts or a cervix, or need preventative breast or cervical cancer screenings.

- Transgender, non-binary and intersex Vermonters are eligible to receive services through You First. Call 1-800-508-2222 or [visit our website](#) to learn more.

**Income:** 250% of the federal poverty level, based on number in household

### 2025 Income Guidelines:

Number in Household	Annual maximum	Monthly maximum	Weekly maximum
1	\$39,125	\$3,260	\$752
2	\$52,875	\$4,406	\$1,017
3	\$66,625	\$5,552	\$1,281
4	\$80,375	\$6,698	\$1,546
5	\$94,125	\$7,844	\$1,810
6	\$107,875	\$8,990	\$2,075

Phone: 1-800-508-2222  
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 YouFirstVT.org

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