



2026 OPEN ENROLLMENT OVERVIEW

MARCH 2026

A LETTER FROM COVERME.GOV LEADERSHIP

The Department of Health and Human Services Office of Health Insurance Marketplace (OHIM) operates Maine's state-based marketplace, CoverMe.gov. The role of the state-based marketplace is to serve as a trusted resource to more easily compare plans, provide access to federal tax credits that help make coverage more affordable to most Mainers, and allow for the purchase of comprehensive coverage that provides peace of mind that it will be there when you need it.

CoverME.gov's fifth Open Enrollment as a state-based marketplace was impacted by several changes in federal policy, including Public Law 119-21 (H.R. 1), the Centers for Medicare and Medicaid Services' (CMS) Marketplace Integrity and Affordability Final Rule, and the expiration of the Enhanced Premium Tax Credits (EPTC) on December 31, 2025. The CoverME.gov team was committed to communicating these federal changes and their implications to our consumers in a clear, timely manner, while making operational updates to maintain compliance with all federal and state law. With increasing costs for health insurance, new administrative requirements and stricter eligibility criteria, Maine's marketplace saw a decrease in overall enrollments for 2026, while still managing to enroll more than 8,500 new consumers. Alongside our sister agencies within the Maine Department of Health and Human Services, our team has remained steadfast in efforts to make progress towards the State of Maine's goal to provide comprehensive health coverage to all Maine people.

Our priority is and remains Maine consumers – our family, friends, and neighbors, who do not have access to job-based health coverage and are not eligible for other forms of coverage. Navigating the health coverage landscape on your own can be confusing and stressful – knowing where to go, who to trust, and how to compare and choose coverage so that you know it will cover what you need, when you need it. And often also looming is the challenge of figuring out how to afford coverage, which was heightened in 2026 due to the federal expiration of EPTC. When faced with increases in premiums, which in many instances resulted in a doubling and tripling of monthly costs, tens of thousands of Mainers made the difficult decision to drop coverage.

The team continues to focus on identifying opportunities to reach Mainers in the ways we know work best for our communities, and to communicate with messages that are most relatable. Our team meets regularly with those that work directly with CoverME.gov consumers, attends local events, and hosts webinars with community and professional organizations that live and work in the communities we serve. During times of significant change and uncertainty, which was the case during this Open Enrollment Period, operating within a state-based marketplace model allowed us to adapt and quickly take action in ways that best responded to the current conditions and common questions that were arising.

As anticipated, the 2026 Open Enrollment Period was challenging and, in the end, health plan enrollment declined by nearly 10 percent compared to last year. I am grateful for the hard work of our collective open enrollment team – the OHIM employees, our vendors, the health insurance carriers, brokers, navigators, and dozens of community partners. OHIM fielded a high volume of calls, emails, and social media messages from worried consumers. Many times, we were able to help consumers find ways to remain in coverage. We are proud that these efforts supported nearly 59,000 Mainers successfully enrolling in health coverage. And, while overall enrollment in stand-alone dental coverage decreased by six percent from last year, more than 1,600 new consumers enrolled.

OHIM remains tremendously concerned about the Mainers who dropped coverage entirely, and the likely thousands of CoverME.gov consumers who have enrolled in plans with premiums or deductibles that they cannot afford for the entire plan year. These Mainers span all age groups and live in all areas of the state. Their household incomes also vary widely. The detrimental impacts on these individuals and families extend beyond their personal health. The impact will have ripple effects on our local economies through increases in health care bad debt and charity care, negative impacts on the health of our workforce, and reductions in available dollars to spend on goods and services in our communities. Our team will continue to monitor the impact and share information with the public and policymakers. In 2026, our goal is to increase resources available to consumers to help them better understand their policies and get the most value possible out of their coverage. Our north star remains the people of Maine and we are committed to finding ways to reduce the numbers of uninsured and underinsured residents in our state.



A handwritten signature in black ink that reads "Hilary Schneider".

Hilary Schneider
Director, Office of the Health Insurance Marketplace

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KEY TAKEAWAYS

Open Enrollment (OE) 2026 (November 1, 2025 – January 15, 2026) marked the fifth year Maine operated a state-based marketplace through CoverME.gov, after transitioning from a federally facilitated marketplace model.¹ This year open enrollment was marked by several federal legislative and regulatory changes, which limited plan and savings eligibility for certain Mainers, increased average costs, and encouraged the purchase of plans with lower premiums and higher out-of-pocket costs. Despite these new policy and operational headwinds, CoverME.gov remains committed to lowering Maine’s uninsured and underinsured rates and providing as many Mainers as possible with high quality and affordable health and dental coverage options.

For Plan Year 2026 (PY 2026), CoverME.gov is meeting the needs of nearly 59,000 Mainers, providing them with one-stop shopping for affordable health coverage. As the only place Mainers can go to get financial help to reduce the cost of private health insurance plans, CoverMe.gov provides essential coverage options to those who may otherwise go uninsured.

The expiration of Enhanced Premium Tax Credits (EPTC) for PY 2026 led to significant increases in premiums paid by enrollees, and a resulting overall decrease in enrollments. This year CoverME.gov saw the lowest overall enrollment in health plans during an OE since transitioning to a state-based marketplace in 2021. While the federal changes had a clear and measurable impact on enrollment for PY 2026, the flexibility allowed by the structure of a state-based marketplace, in terms of operational components and member marketing, outreach and communications, was especially important in ensuring CoverME.gov shoppers received the education and support required to make plan decisions amidst significant federal changes and rising plan costs. As such, Maine’s state-based marketplace continues to play a critical role in the state’s

¹ Maine operated off the federal marketplace from 2014-2020 plan years, transitioning to a hybrid federal-state marketplace for plan year 2021 and a state-based marketplace starting in plan year 2022.

ability to maintain an uninsured rate lower than the national average, despite having a relatively smaller proportion of its residents covered by employer-sponsored coverage.²

CoverME.gov is operated by the Office of the Health Insurance Marketplace (OHIM) at the Department of Health and Human Services (DHHS).

Highlights of the 2026 Open Enrollment:

- **New enrollees** – More than 8,500 Maine residents who didn't previously have insurance through the marketplace enrolled in coverage for 2026. While this is a decrease from the 11,000 new enrollees in 2025, it is a testament to the marketing and outreach efforts CoverME.gov undertook to reach and enroll new consumers in the midst of rising insurance costs and tightening eligibility for coverage and financial help.
- **More individuals enrolled in plans with higher out-of-pocket costs** – Nearly 60 percent of enrollees selected Bronze plans for 2026, compared to just under 50 percent in 2025. Silver plans, which have higher monthly premiums but lower out-of-pocket costs for the consumer, saw enrollment fall by approximately 30 percent.
- **Enhanced financial savings expired** – Those who remain eligible for financial help are paying a similar net premium in 2026 compared to 2025. This is largely attributable to more consumers purchasing Bronze plans, and the overall CoverME.gov population having lower household incomes in comparison to the population enrolled last year. For those ineligible for financial assistance, monthly premiums rose by 33 percent. Furthermore, 22 percent of enrollees are paying more than \$1,000 per month for their coverage (compared to 15 percent in 2025), and nearly 40 percent are paying premiums higher than \$500 per month (compared to 33 percent in 2025).

This report presents an overview of enrollment trends, the affordability of health insurance coverage through the marketplace, and key operational and marketing changes that took place during OE 2026.

² Kaiser Family Foundation State Health Facts, "Health Insurance Coverage of the Total Population," <https://www.kff.org/other/state-indicator/total-population/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Employer%22,%22sort%22:%22esc%22%7D>, accessed on February 20, 2025.

RECENT FEDERAL CHANGES IMPACTING OPEN ENROLLMENT 2026

In late June 2025, the Centers for Medicare & Medicaid Services (CMS) issued the Marketplace Integrity and Affordability Rule, creating new requirements for the federal and state-based Health Insurance Marketplaces. On July 4, 2025, Congress passed H.R. 1, which included provisions that further tighten marketplace eligibility and enrollment requirements. These regulatory and legislative changes were compounded by the expiration of the EPTC at the end of 2025. Originally established in 2021 to reduce the monthly costs of health insurance for consumers, these enhanced savings expired on December 31, 2025, without congressional action to extend them, and were not available to consumers on CoverME.gov for plan year 2026.

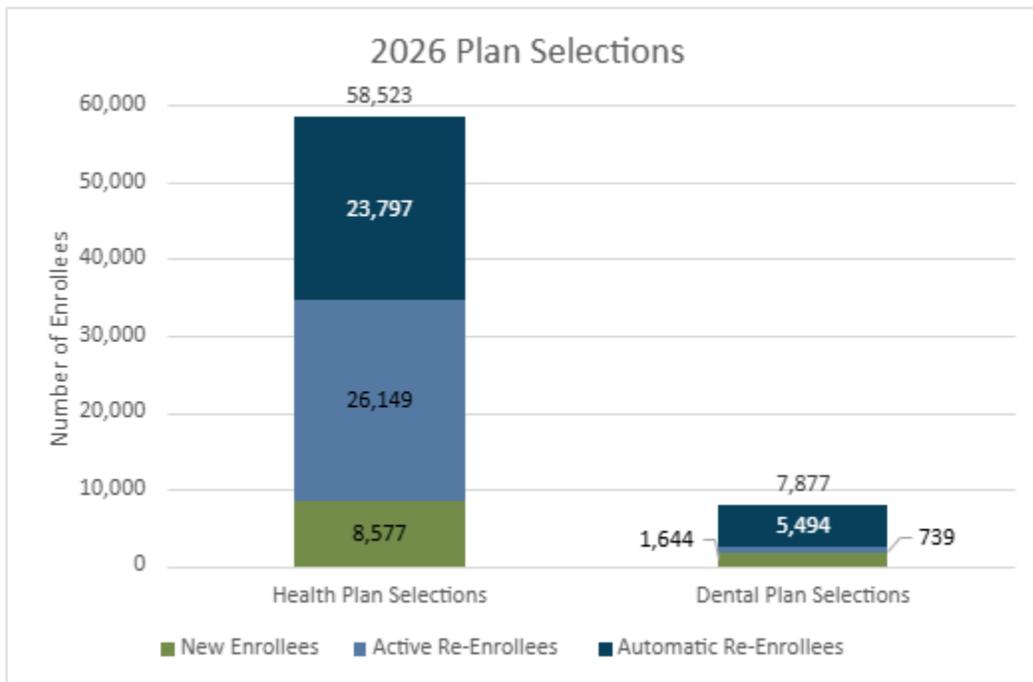
Key Federal Policy Changes Impacting OE 2026:

- **Limited eligibility for immigrants** – Effective August 25, 2025, the CMS Marketplace Affordability and Integrity Rule prevented Deferred Action for Childhood Arrivals (DACA) recipients from enrollment in a health plan through the health insurance marketplaces. Additionally, effective January 1, 2026, H.R. 1 eliminated financial help eligibility for lawfully present immigrants with income below 100% of the federal poverty level (FPL) who remain within the five-year waiting period for MaineCare eligibility due to immigration status. These changes limit the ability for immigrants in Maine to enroll in coverage through CoverME.gov
- **Expiration of EPTC** – On December 31, 2025, the EPTC passed by Congress in the American Rescue Plan in 2021 expired. These enhanced savings previously capped consumer spending on health insurance premiums at 8.5 percent, regardless of household income. For OE 2026, without the EPTC, households earning over 400% of the FPL (approximately \$63,000 for an individual and \$128,000 for a family of four) are no longer eligible for any financial help. This led to significantly higher premiums for many Maine residents, and thousands of Mainers dropping coverage due to affordability reasons.
- **Changes in HSA eligibility rules** – H.R. 1 changed Internal Revenue Service (IRS) rules governing the compatibility of health insurance plans and Health Savings Account (HSA) contributions. In past years, individuals could contribute to an HSA only if their health plan met minimum deductible and maximum out-of-pocket plan features updated by the IRS annually. In addition, HSA eligible plans could not have significant pre-deductible coverage. For 2026, however, all

Catastrophic and Bronze plans sold through the health insurance marketplaces are eligible for HSA contributions, regardless of plan deductibles and out-of-pocket maximums. This federal change encourages individuals to enroll in plans with lower premiums and higher out-of-pocket costs, a trend seen in CoverME.gov enrollment data for 2026. HSAs are most beneficial to consumers who require minimal health care services and have discretionary income to deposit into the accounts.

2026 OPEN ENROLLMENT TRENDS

Figure 1. 2026 Health and dental plan selections by enrollment type

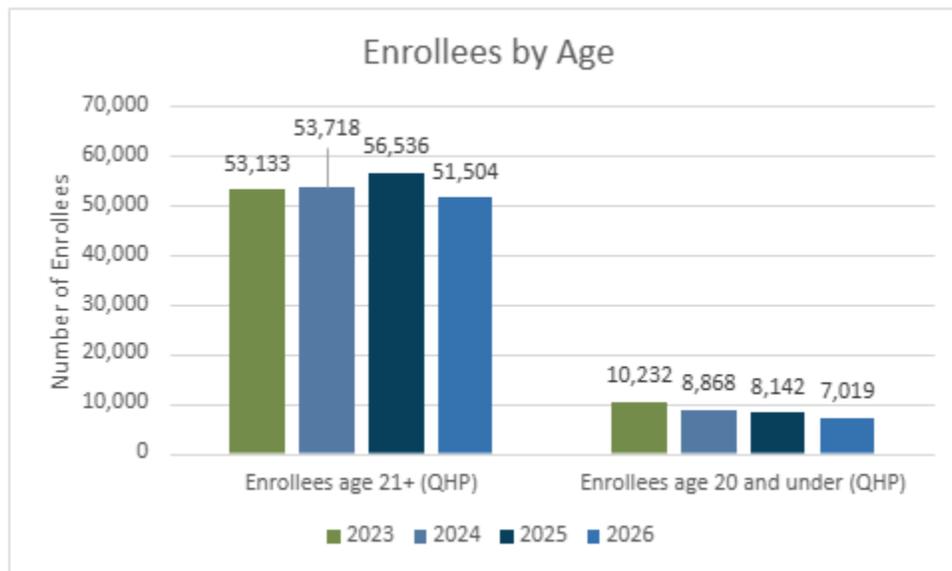


- Over 58,000 Mainers, including more than 8,500 new consumers, selected health insurance plans through CoverME.gov during OE 2026.** This is down approximately 24 percent from the more than 11,000 new consumers in 2025. Returning consumers who actively re-enrolled or were automatically re-enrolled in a plan represented the remainder, with a notable increase in active plan selections among re-enrollees. Specifically, over 50 percent of re-enrollees actively selected a plan, up from 33 percent in 2025, suggesting increased consumer engagement amid significant increases in premiums and more typical annual changes in plan options. Dental enrollments decreased by approximately six percent year-over-year in 2026, with nearly

8,000 consumers - including over 1,500 new consumers - selecting standalone dental plans through CoverME.gov during OE 2026.

- **Enrollment of children (under age 21) declined at a faster rate than that of adults (aged 21+), likely as more children continue to be eligible for MaineCare.** With overall enrollment down in 2026, the numbers of both adult and child enrollees decreased. For children aged 20 and under, enrollments decreased nearly 14 percent. For adults aged 21 and up, enrollments decreased by just under 9 percent. Enrollees under age 21 have been steadily declining since 2023, when the state began implementation of the Maine Legislature’s expansion of eligibility for MaineCare (Medicaid) coverage for children under age 21. As described in more detail on page 12, the successful growth in young adult enrollment experienced in 2025 was short-lived. In recent years, CoverME.gov has focused targeted messages and marketing tactics on younger adult populations to help stabilize the risk pool and to lower uninsured rates among a population that has been historically challenging to enroll in coverage. Cost pressures of increased premiums during this OE likely contributed to younger adults having the greatest proportional declines of coverage, further skewing CoverME.gov membership to older age groups. As a result, the average age of consumers enrolled in health coverage through CoverME.gov increased from 42.9 years of age to 43.3 years of age.

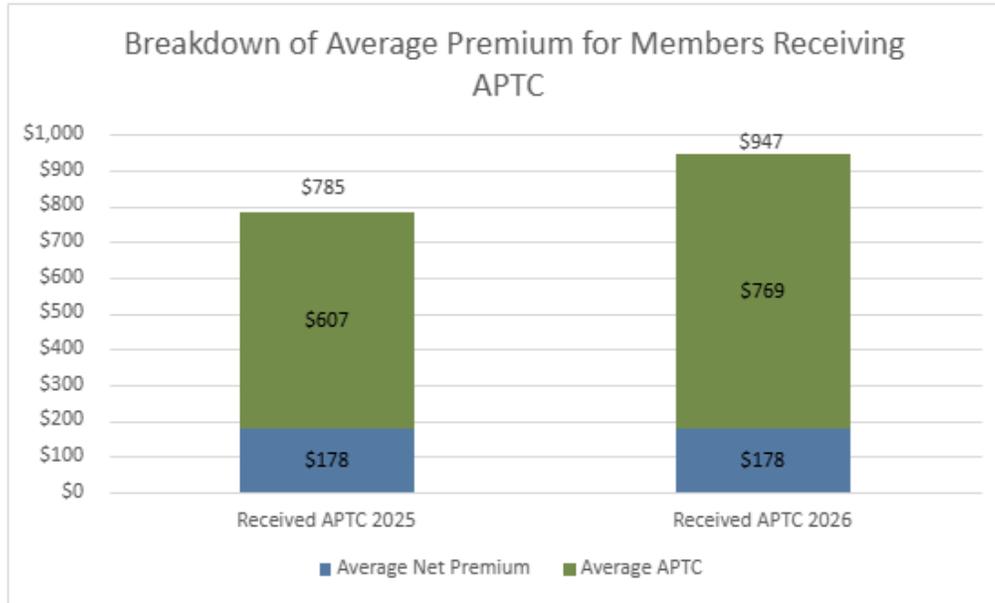
Figure 2. Enrollments by Age Group, 2023–2026



- **Enhanced financial savings expired at the end Of 2025. Some consumers were shielded from significant premium increases by original tax credits, while others saw significant increases in monthly premiums.** For 2026 plans, the average premium for those receiving Advance

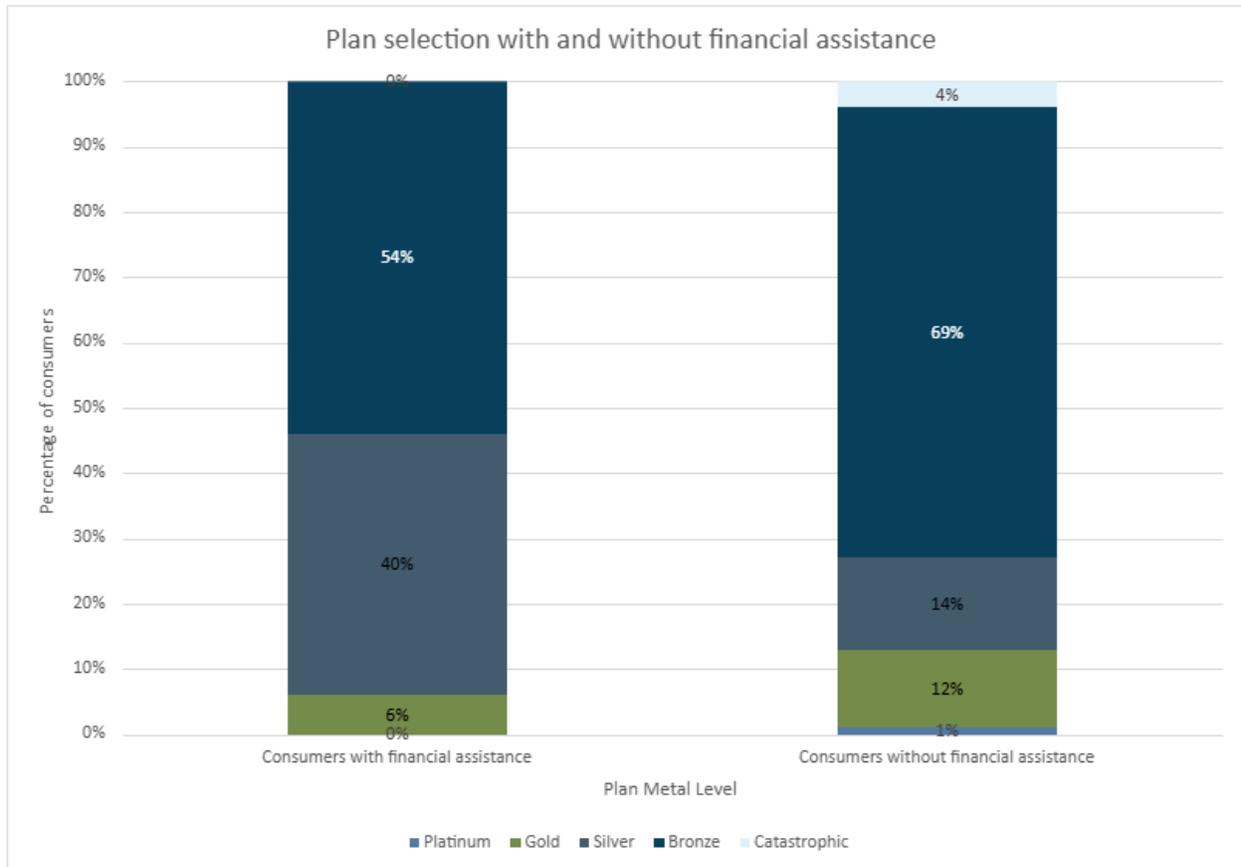
Premium Tax Credits (APTC) through CoverME.gov remained consistent, despite overall gross premiums increasing by more than 20 percent. This is due to significant shifts into plans with lower premiums and higher cost sharing for health services, an increase in the proportions of lower-income enrollees, and shifts in the age distribution of consumers.

Figure 3. Breakdown of total premium costs for consumers receiving APTC in 2025 and 2026



- Consumers with financial assistance chose more comprehensive coverage with lower out-of-pocket costs.** Nearly half of consumers who qualify for financial assistance towards monthly premiums chose to enroll in a plan that covers at least 70 percent of out-of-pocket costs (i.e., Silver, Gold, or Platinum plans). In comparison, only about 30 percent of consumers who do not receive premium assistance chose those plans. More than 70 percent of those who do not receive financial savings chose plans with the highest levels of deductibles and copays. This demonstrates that consumers are more likely to choose plans with lower deductibles and out-of-pocket costs for health care services and prescription medications when they can afford the monthly premiums of such plans.

Figure 4. Plan level selections by financial assistance status in 2026



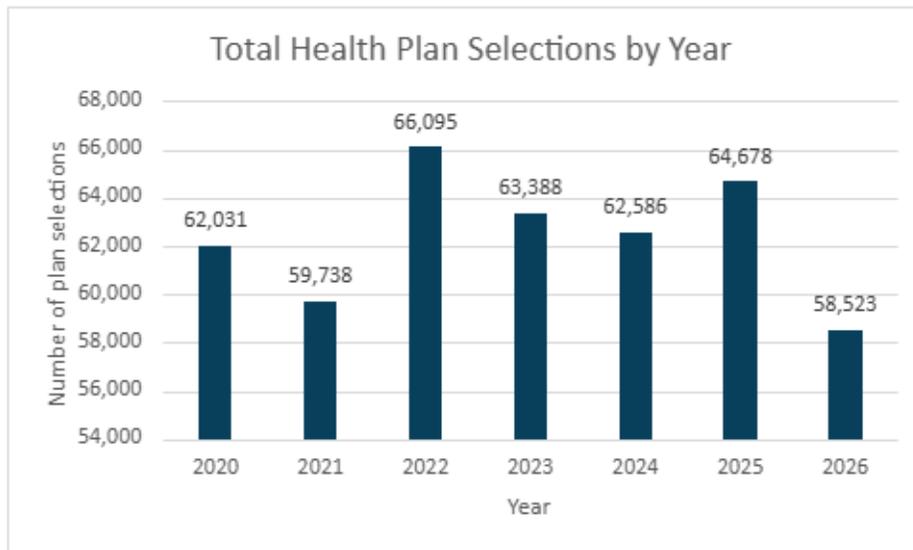
OPEN ENROLLMENT BY THE NUMBERS

OE 2026 ran from November 1, 2025, to January 15, 2026. Generally, plan selections made by December 15, 2025 resulted in coverage beginning January 1, 2026, and plan selections made by January 15, 2026 resulted in coverage starting on February 1, 2026.

TOTAL OPEN ENROLLMENT PLAN SELECTIONS

During OE 2026, 58,523 Mainers selected health plans on CoverME.gov. Enrollment dropped by nearly 10 percent from OE 2025. This represents the lowest enrollment since Maine transitioned to a state-based marketplace.

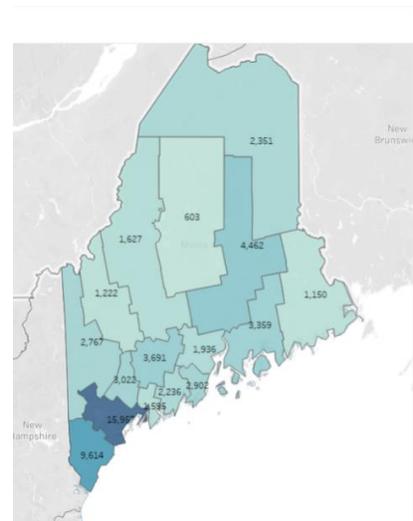
Figure 5. Total Health Plan Selections, 2020–2026



CONSUMER DEMOGRAPHICS

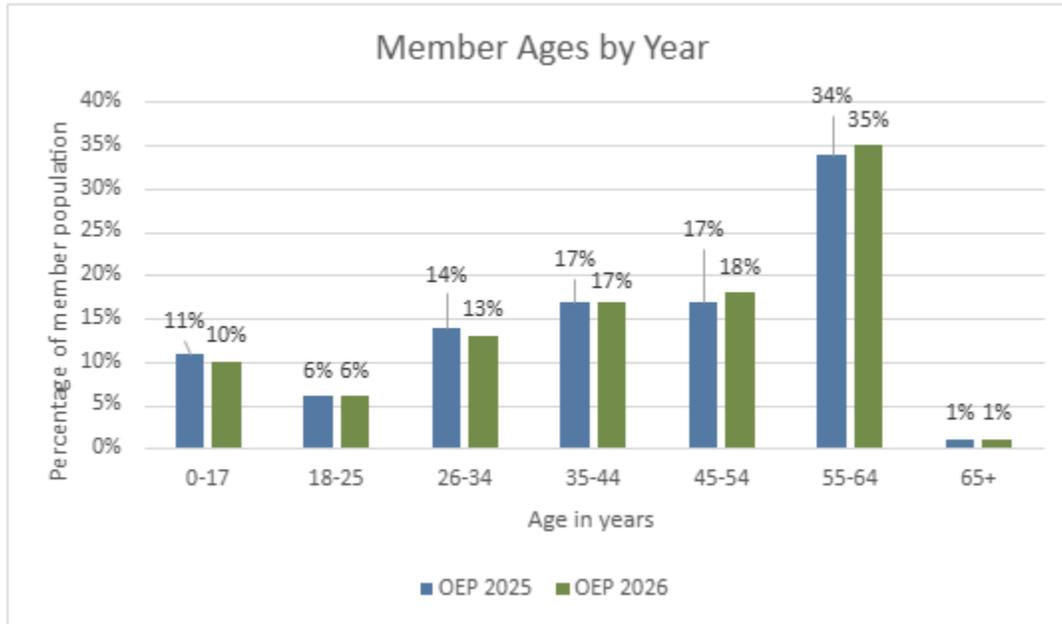
The most populated counties - Cumberland and York - had the highest numbers of enrollments in the state. However, Knox County had the highest number of enrollments per capita, followed by Lincoln, Hancock, and Cumberland counties.

CoverME.gov members continue to be predominately female, and more than half of enrollees are over age 45. Enrollment by age demographics remained relatively consistent from 2025 to 2026. Two of the younger demographic groups - ages 0-17 and 25-34 - each saw a decrease of one percentage point from PY 2025. Two of the older demographic groups - ages 45-54 and 55-64 - each saw an increase of one percentage point. These changes are likely tied to the expiration of federal EPTC, increases in premium costs, and the historical trend of younger adults being more likely to go uninsured.



46% Male 54% Female

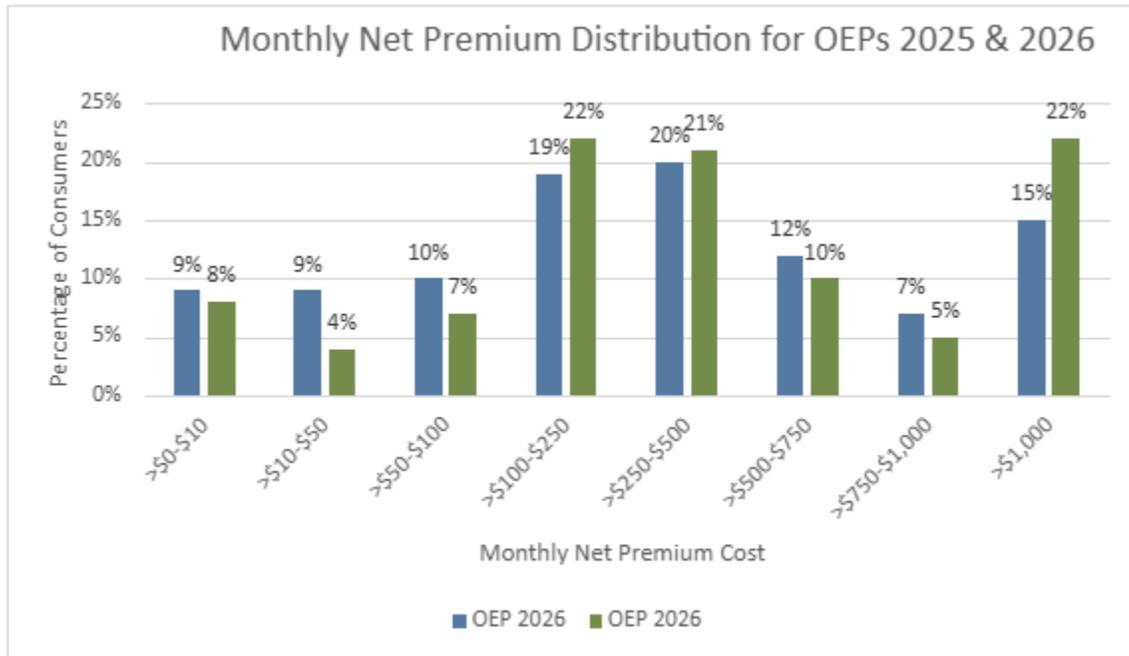
Figure 6. Percentage of member population by age in 2025 and 2026.



While not all enrollees choose to include race on their application, the CoverME.gov consumer population continues to include Mainers who identify as multi-racial, White, Asian, Black/African American, Native Hawaiian/Pacific Islander, and American Indian/Alaska Native.

AFFORDABILITY OF PLANS

Figure 7. Distribution of monthly net premium costs in 2025 and 2026



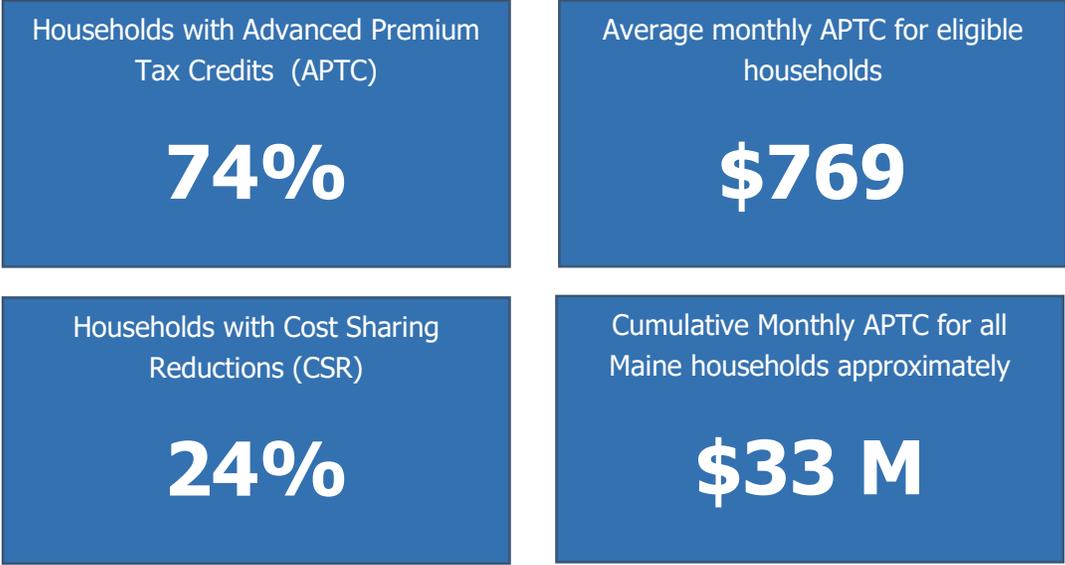
A key feature of health insurance marketplaces is that premium and cost-sharing subsidies are available for some households, based on household income. These subsidies were more limited in OE 2026 due to the expiration of the EPTC, which were available from 2021 through 2025. This type of financial assistance helps individuals and families afford private health insurance coverage if they do not have access to affordable health coverage through an employer and they do not qualify for other health coverage programs, like MaineCare or Medicare. During OE 2026, nearly 3 out of 4 CoverME.gov enrollees who selected plans qualified for - and utilized - APTC to lower their monthly premiums. This was a decrease from 85 percent in 2025.

For enrollees receiving APTC, the average net monthly premium is \$178. Without financial assistance, the average gross monthly premium for this group would have been \$913. By comparison, the average monthly premium paid by members who do not receive APTC is \$811. This represents an increase of more than 30 percent for those not receiving financial assistance in 2025.

Silver, Gold, and Platinum plans typically have higher premiums and lower cost-sharing requirements than Bronze and Catastrophic plans. The higher average gross premium for those receiving APTC indicates that access to these subsidies allows Mainers to choose plans with higher monthly premiums and lower out-of-pocket costs (like Silver, Gold, and Platinum plans), thereby helping them afford care with fewer concerns for cost-sharing responsibilities.

The amount of federal healthcare tax credits Maine households leveraged by enrolling in health insurance coverage through CoverME.gov is equivalent to approximately \$33.5 million in savings per month, or more than \$400 million annually.

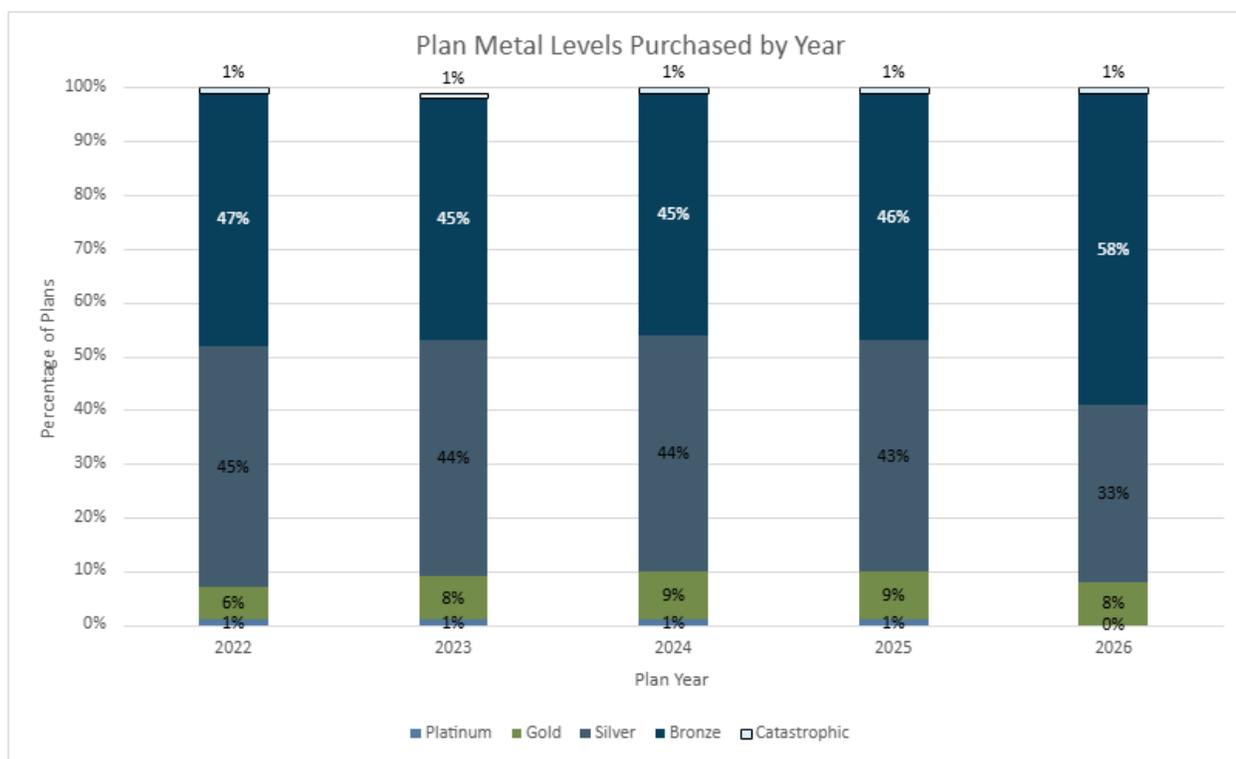
Some members who are eligible for APTC are also eligible to receive additional financial assistance that helps lower out-of-pocket costs like deductibles, copays, and coinsurance called “Cost-Sharing Reductions” (CSRs). CSRs are only available for individuals and families who meet income eligibility and choose to purchase a Silver plan. Because CSRs are additional savings available only when enrolled in a Silver plan, they allow and encourage eligible consumers to enroll in coverage that offers lower out-of-pocket costs, including lower deductibles and out-of-pocket maximums. During OE 2026, nearly 1 out of 4 consumers enrolled in plans with CSRs.



PLAN SELECTIONS BY METAL LEVEL

Except for Catastrophic coverage,³ health plans offered on CoverME.gov are categorized into four metal levels: Bronze, Silver, Gold, and Platinum. Higher metal level plans generally have a higher monthly premium but cover more of an individual’s out-of-pocket healthcare expenses. Metal levels indicate how consumers and insurance plans split the cost of health care expenses, with the higher metal level plans offering lower cost-sharing levels for consumers. This year, CoverME.gov saw plan selection shift significantly towards Bronze plans, which have higher out-of-pocket costs for consumers. CoverME.gov saw a 12-percentage point increase in Bronze plan enrollment and a 10-percentage point decrease in Silver plan enrollment.

Figure 8. Changes in plan selection by metal level from 2022 to 2026



Consumers receiving APTC, on average, chose health plans with lower out-of-pocket costs and higher gross monthly premiums than those who do not receive APTC. This year’s data shows this trend amplified following federal policy changes – individuals and families were less likely to select Silver, Gold, or Platinum plans with higher monthly

³ Catastrophic plans are only available to individuals aged 30 or younger or those who qualify for a hardship or affordability exemption.

premiums as a result of tightening eligibility requirements for financial help and increased average premiums. Instead, consumers opted for Bronze plans with lower monthly premiums and higher out-of-pocket costs.

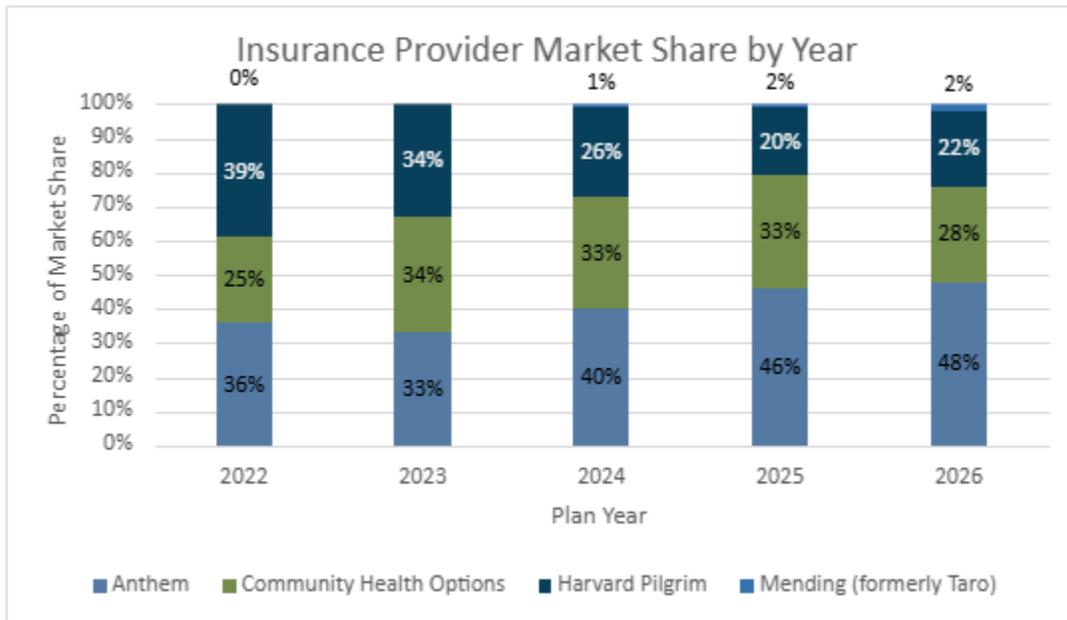
Research shows that higher out-of-pocket costs can lead to individuals and families delaying and avoiding care, including preventive and necessary care. In addition, high medical out-of-pocket costs can result in medical debt for some households. Financial assistance available through Maine's state-based marketplace can help keep Mainers healthy, prevent medical debt, and free up financial resources for other household needs and expenditures.

The expiration of EPTC in 2026 directly contributed to the increase in Bronze and Catastrophic plan selections, which may contribute to greater financial strain for Mainers. While some of those who purchase high-deductible plans can afford the deductible in the event they need significant health care services, it is likely that many of the households who moved into Bronze plans in 2026 made this choice because they could not afford higher premiums but wanted coverage to protect them from medical bankruptcy if faced with a serious health event or diagnosis. If these families need health care services, they may not be able to pay the associated out-of-pocket costs, and may incur medical debt or seek hospital charity care. Increases in hospital bad debt and charity care will further strain Maine's fragile health care system - especially in rural areas - and will result in higher health care costs for all Mainers.

MARKET SHARE BY CARRIER

CoverME.gov's Plan Selection tool allows consumers to compare plans across health insurance carriers. Clear Choice plan design makes it easier for consumers to compare plans with the same levels of coverage and out-of-pocket costs, so that consumers can more easily compare plans based on factors such as monthly premiums, provider networks, and customer service. This helps increase competition among health insurance carriers, demonstrated by shifts in market share for OE 2026.

Figure 9. Changes in market share by insurance provider from 2022 to 2026



During OE 2026, Anthem and Harvard Pilgrim increased their market share by two percentage points, while Community Health Options declined by about five percentage points. Mending (formerly Taro) maintained a two percent share of the market.

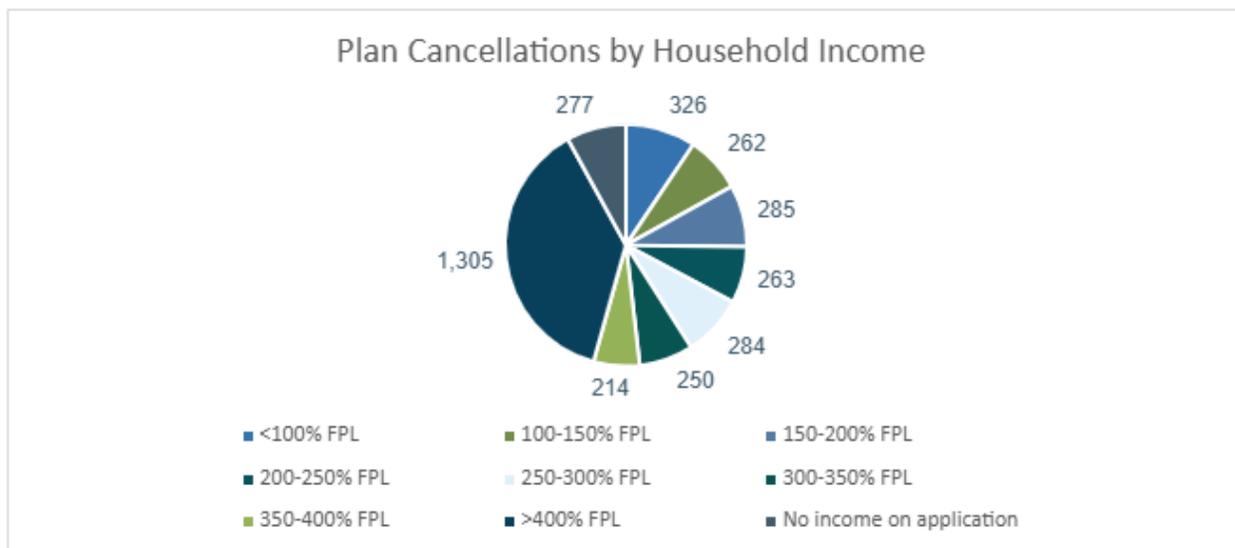
PLAN CANCELLATIONS

During OE 2026, CoverME.gov recorded more than 8,500 plan cancellations. Around 5,000 of these cancellations were attributed to consumers relocating out of Maine or finding health coverage through another source such as an employer, Medicare, or MaineCare. However, nearly 3,500 discontinued coverage due to unaffordability of monthly premiums or another reason, suggesting they are going uninsured.

An analysis of cancellations cited for affordability reasons reveals a direct correlation with changes in financial help eligibility. Therefore, it is not surprising that most cancellations were among those who were eligible for financial help in 2025 but became ineligible in 2026. Specifically, those earning over 400% FPL – \$62,600 annually for an individual and \$128,600 for a family of four – represented nearly 40 percent of plan

cancellations in 2026.⁴ These households became ineligible for any financial help available through CoverME.gov in 2026 due to the expiration of EPTC.

Figure 10. Number of plan cancellations by household income in 2026



The affordability crisis for health coverage in 2026 is demonstrated throughout plan cancellation data. More than half of the consumers who cancelled health coverage for 2026 faced monthly premiums exceeding \$750. Notably, the majority of these cancellations were seen with Bronze plans. As discussed earlier in the report, Bronze plans have relatively lower monthly premiums, with greater out-of-pocket costs and cost-sharing requirements. High rates of cancellations for Bronze plans are indicative of rising unaffordability across the health insurance marketplace, even for metal levels designed to offer lower monthly premiums.

More than 25 percent of those who cancelled coverage for 2026 due to affordability reasons had been enrolled in marketplace coverage for at least five years. More than a third are younger than 35 years old and they are more likely to live in Knox, Kennebec, Lincoln, Oxford, Penobscot, Somerset or Piscataquis counties.

Notably, 90 percent of plan cancellations were among consumers who did not work with a broker or enrollment assister in 2025 or 2026. While CoverME.gov

⁴ When you add those households for which we do not have income data, the percentage reaches nearly 50%. It is likely that these households also have incomes greater than 400% FPL as there is no need to include financial information on your application for coverage if you know you do not qualify for financial assistance.

communications strongly encouraged consumers to seek the help of a local expert prior to terminating coverage, the high prevalence of cancellations within the self-enrolled population indicates that many consumers may be unaware of all options available to them, including the free support of a local broker or enrollment assister, who could help ensure the application accuracy and make corrections as needed that could preserve affordability. When supported by a local expert like a broker or enrollment assister, some consumers realize they can find ways to continue affording coverage. The prevalence of consumer cancellations among the self-enrollment population points to the value of brokers and enrollment assisters in helping consumers navigate rising premium costs and uncertainty around changes to the health insurance marketplace. This data reaffirms the value of consumers getting support from experts, especially during times of significant change.

Plan cancellations for OE 2026 illustrate the impact of federal policy changes, particularly the expiration of EPTC. The loss of these savings has had a measurable impact on CoverME.gov's enrollment for 2026 and has impeded OHIM's mission to provide high-quality and affordable coverage to as many Mainers as possible. These changes will likely have a lasting impact on the uninsured and underinsured rates across the state which, in the longer term, may manifest in increased medical debt and financial strain for those who have been priced out of marketplace health coverage.

OUTREACH AND MARKETING

Marketing and consumer outreach were critical components of the CoverME.gov strategy during OE 2026. In a year marked by significant federal policy changes, including the expiration of EPTC and new eligibility restrictions, outreach and communication efforts were designed to maximize statewide reach, educate consumers, reduce barriers to enrollment, and support both member retention and new enrollment during a dynamic and uncertain coverage year.

CAMPAIGN OBJECTIVES

The OE 2026 marketing campaign was designed to address a key barrier that communications efforts can directly influence: access to clear, accurate, and timely information. While affordability, federal eligibility rules, and user experience also impact enrollment decisions, marketing efforts focused on ensuring Maine consumers had the

information needed to understand their options so that they could make fully informed decisions.

The OE 2026 marketing campaign had three primary goals:

- Raise awareness among individuals who may not know about CoverME.gov or who may have forgotten about it since a previous enrollment period
- Provide practical, actionable information to both new and returning consumers to help them understand coverage options and complete enrollment
- Reinforce the value of having health coverage and encouraging consumers to take steps to obtain or maintain it.

Campaign communications focused on educating consumers about:

- Federal tax credits and financial assistance, including changes around the expiration of EPTC
- Continued availability of APTC and financial support for the majority of Mainers
- CSRs for eligible households
- Eligibility requirements and federal policy updates
- Types of plans available (Bronze, Silver, Gold, Platinum, and Catastrophic)
- How to compare plans using CoverME.gov tools
- How to enroll online, by phone, with free local assistance, or via paper application

Given the increased complexity and rising costs faced by many consumers, the communications were intentionally designed not only to inform consumers in a clear, relatable, and supportive way, but also to help them make informed plan selections that best meet their health and financial needs.

BRANDING AND MESSAGING STRATEGY

The OE 2026 campaign sought to reinforce CoverME.gov's role as Maine's trusted and unbiased one-stop shop for comprehensive health coverage and financial help. Branding positioned the marketplace as a reliable place where Mainers can compare vetted plans, access federal financial assistance, and receive free local support.

The campaign acknowledged that shopping for health insurance can be confusing and, in 2026, more financially challenging for many households. Advertisements and

outreach materials combined relatable seasonal Maine themes – such as shoveling snow, chopping wood, ATV-ing, snowboarding, and lobstering – alongside clear information about financial savings, coverage options, and enrollment assistance/local support. The overall strategy aimed to ensure that consumers understood both how to enroll and why maintaining coverage is important for their health and financial security.

TIMELINE AND CAMPAIGN COMPONENTS

Marketing and outreach efforts began prior to the OE start date, largely due to the known changes and complexities of this particular OE. Below is an overview and timeline of key marketing and outreach activities.

- **August 2025:** Initial email and direct mail postcard outreach to current members and targeted audiences
- **September 2025:** Launch of community outreach events and traditional advertising placements; ongoing direct-to-member communications
- **October 2025:** Full campaign launch, including digital advertising, search engine optimization, and multi-platform paid media; ongoing direct-to-member communications
- **November 2025 – January 2026:** Sustained advertising, earned media engagement, and targeted consumer communications throughout OE, as well as ongoing outreach events.

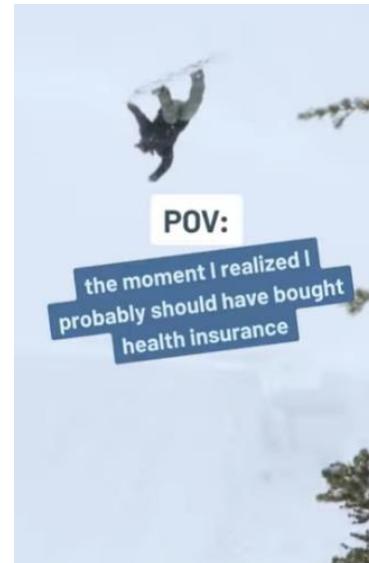
The campaign utilized a phased approach and a coordinated mix of traditional media, digital marketing, sponsorships, earned media, direct consumer communications, and community engagement to ensure consumers received messages in a timely and digestible way.

DIGITAL MARKETING

Digital outreach was an important part of CoverME.gov’s effort to target specific audiences and reach Mainers where they spend time — online, on social media, and on streaming platforms. These efforts helped increase awareness of OE, explain financial changes and assistance availability, and direct consumers to visit CoverME.gov to explore their options.

To maximize the efficacy of this campaign, CoverME.gov used a variety of digital tools to appeal and relate to a Maine audience of both new and returning consumers. These efforts included:

- Ads on social media, streaming channels, and sports gaming platforms (JamLoop and Twitch)
- Search engine optimization so that consumers searching for health insurance information in Maine could easily find CoverME.gov
- Partnership with the Maine Mariners that included scoreboard advertising, e-newsletter mentions, partner page banners, and a three-part no cost social media collaboration
- Local influencer engagement to expand reach to new audiences
- Short, easy-to-understand videos explaining financial savings and coverage options
- Relatable, trend-based content to increase engagement and visibility (ex: "Holy Airball," "Me when...", "You seem happier...", and "the moment I realized...")
- Short-form video testimonials of CoverME.gov consumers of varying ages and demographics



Results

- 805,685 impressions from streaming sports and gamer advertising
- Meta Ads achieved over five million impressions
- 21,510 Instagram impressions through a collaboration with the Maine Mariners
- Approximately 25,000 impressions through collaboration with a local influencer

Digital advertising ensured consistent statewide visibility throughout OE and helped drive consumers to the CoverME.gov website for additional information.

EMAIL AND DIRECT CONSUMER OUTREACH

Email and direct consumer outreach was a central component of the OE strategy. These communications provided personalized, timely information to both new and returning consumers, helping them understand any actions they needed to take.

Ahead of OE 2026, OHIM ran a multi-part consumer education campaign to communicate upcoming changes and increase transparency. Three specific changes - the anticipated end of EPTCs, increasing premium prices, and changing cut-offs for APTCs - were expected to have a significant impact on plan affordability and enrollment. To give consumers ample time to prepare for the changes, OHIM's four-part consumer education campaign ran from early August 2025 to the end of October 2025. Email communications and postcards were sent to members to notify them of upcoming changes and were personalized by consumer FPL and APTC eligibility status. Additionally, OHIM developed four one-minute videos of Director Hilary Schneider using plain language to discuss upcoming changes and resources (such as free broker and navigator support) available to consumers. Videos were posted to YouTube and shared via email communications as well as on a website page created specifically to share updates regarding the numerous 2026 changes: www.CoverME.gov/2026.

Additionally, CoverME.gov conducted 44 segmented, multi-touch email campaigns targeted to specific consumer groups, including:

- Members who needed to actively re-enroll
- Members who were automatically re-enrolled
- Consumers eligible for CSR if they selected a Silver plan
- Individuals who began but did not complete an application
- Young adults turning age 26 and aging off a parent's plan
- Consumers not automatically re-enrolled

Thousands of direct mail postcards were also distributed statewide to increase awareness and encourage enrollment action.

Results

- Average email open rate of 73 percent — approximately 30 percent higher than the [healthcare industry average of 43.75 percent](#)
- Average click-through rate of 13 percent — seven percentage points higher than the previous OE

Strong engagement metrics reflect the effectiveness of targeted, personalized communication in driving enrollment activity and encouraging active plan selection among returning members.

OUTREACH EVENTS AND SPONSORSHIPS

To increase visibility in communities across Maine and directly engage residents who may not have access to employer-sponsored coverage, CoverME.gov participated in targeted sponsorships and in-person outreach events throughout OE.

Activities

- Sponsorship of the Maine Mariners, including scoreboard advertising, e-newsletter placements, partner page banners, social media collaboration, onsite tabling events, and promotional giveaways (160,001 impressions)
- Advertising presence at University of Maine athletic events
- In-store Screenvision CVS placements across 16 counties (751,235 impressions)
- Participation in webinars and community outreach events statewide
- Targeted engagement with agricultural, fishing, service industry, and hospitality populations

These efforts were designed to reach self-employed individuals, seasonal workers, rural residents, and other populations less likely to have access to job-based coverage. Community-based visibility complemented statewide media placements and ensured that messaging reached Mainers in trusted, familiar settings.

TRADITIONAL AND EARNED MEDIA

Traditional and earned media played a central role in ensuring statewide awareness during a year of significant federal policy changes and rising premiums, as many Mainers still rely heavily on the radio and TV to get their news and engage with culture.

Activities

- Broadcast, cable, and streaming television advertisements
- Broadcast and streaming radio advertising statewide
- Out-of-home transit advertising, including bus wraps, bus shelter signage, and interior transit cards
- Multilingual translations to reach the new Mainer audience
- Radio interviews with local stations statewide
- Distribution of two press releases

Results

- Almost 20 million impressions generated through traditional media placements
- 4.3 million impressions from out-of-home transit advertising alone

These placements ensured consistent statewide visibility across all audience segments and reinforced clear messaging about financial assistance, enrollment deadlines, and the availability of free local help. Earned media interviews provided additional opportunities to explain federal policy changes, affordability impacts in greater depth, and the purpose and value of CoverME.gov.

WEBSITE ACTIVITY

The CoverME.gov website serves as the central hub for consumer education, plan comparison, and enrollment. It is the place consumers can go to for all their Maine health coverage needs.

Results

- 336,526 total visits during OE (a decrease of nearly 32 percent from 2025)
- 191,644 unique users (an increase of 22 percent year-over-year)

While overall visit volume declined — consistent with reduced overall enrollment and affordability challenges — the increase in unique users suggests expanded reach to new audiences and more targeted engagement. Consumers accessed key resources like the Plan Comparison Tool and information on enrollment options, financial assistance, and local support.

In a year defined by rising costs because of federal policy changes and the expiration of enhanced federal financial assistance, CoverME.gov continued to serve as a trusted, unbiased marketplace and an essential access point for federal premium tax credits. A coordinated, multi-channel outreach strategy helped ensure Maine residents received accurate information and enrollment support, even as affordability challenges contributed to overall enrollment declines.

BROKER AND ASSISTER COMMUNITIES

A key function of CoverME.gov is the certification and training of brokers and enrollment assisters who aid consumers throughout the application and enrollment processes. During OE 2026, 144 Maine Enrollment Assisters and 656 certified brokers were available to provide health insurance enrollment support at no cost to the consumer. These resources address a critical need for Maine residents seeking personalized, one-on-one help applying for MaineCare or a Marketplace plan, and are especially helpful for those looking for in-person help near their home or workplace.

Brokers and assisters who need to recertify are provided with a shortened, focused annual training for OE, while new brokers and assisters need to complete full training and pass a final exam, in addition to maintaining the current professional licensing requirements overseen by the Bureau of Insurance.

OPERATIONAL INNOVATIONS

For OE 2026, OHIM remained focused on improving consumer experience through the Consumer Assistance Center (CAC) and the CoverME.gov platform. These efforts were aimed at improving efficiency of operations and the overall consumer experience.

CONSUMER ASSISTANCE EXPERIENCE IMPROVEMENTS

Overall, call volume for CoverME.gov's Consumer Assistance Center decreased approximately three percent, compared to 2025. Average calls handled per day decreased by nearly 10 percent in 2026, with an average of 504 calls per day (compared to an average of 558 per day in 2025). The decrease in overall and average daily call volume may be attributed to enhancements the CAC made to chat functionality. A self-service, 24/7 chat function was added, and 40 percent of the nearly 2,000 chats received during OE were handled entirely through this new self-service chat capability.

The CAC remains the primary resource for consumers seeking help and guidance from trained customer service representatives about enrollment, shopping for plans, eligibility, and more. To ensure accessibility, assistance is available by phone and online chat functionality, and the center was open 8:00am – 8:00pm on weekdays, as well as

some extended evening and weekend hours prior to major deadlines throughout OE. During OE 2026, the CAC received 27,686 calls with an average wait time of only 23 seconds.

To further improve service quality, CoverME.gov worked with the CAC to introduce a performance-based incentive program to reward exceptional service for Maine’s consumers. Additionally, the CAC increased utilization of the triage and transfer protocol that was introduced in 2025 and expanded in 2026. The process captures consumer contact information and their reason for calling before moving the consumer to a specialized transfer queue that connects them more quickly with the right representative. This process also allows the call center to collect important information necessary for callbacks if calls were abandoned or dropped. This expansion allowed representatives to manage consumer expectations and provide necessary reassurance during high-volume periods, ensuring all residents received support regardless of temporary increases in wait times.

Consumer satisfaction

Consumer satisfaction with the Consumer Assistance Center’s performance remained high, with overall satisfaction ratings of 92 percent, a one percent difference from the 2025 OE.

Consumer Satisfaction Surveys					
	Plan Year 2022	Plan Year 2023	Plan Year 2024	Plan Year 2025	Plan Year 2026
October	77% 848 calls received	94% 3,453 calls received	93% 4,610 calls received	92% 4,867 calls received	94% 4,739 calls received
November	84% 13,881 calls received	93% 10,144 calls received	94% 10,539 calls received	94% 9,019 calls received	91% 8,712 calls received
December	87% 17,623 calls received	94% 13,240 calls received	92% 15,079 calls received	93% 13,543 calls received	92% 13,194 calls received
January 1-15 (1/16 in 2024)	89% 7,256 calls received	94% 5,507 calls received	94% 6,788 calls received	92% 5,900 calls received	91% 5,223 calls received

The CAC handled an average of 504 calls per day during OE 2026. As expected, the first major OE deadline day (December 15), saw the highest single-day volume, with representatives answering 1,859 calls between 8:00am and 10:00pm. Call volume on this initial deadline day increased by 95 percent from the previous year. This was likely due to consumer awareness of federal policy and changing costs, as well as ongoing member communication initiatives encouraging members to work closely with the call center and available consumer resources.

CONSUMER ASSISTANCE CENTER RESPONSIVENESS

2025 Call Center Performance	
Calls Received	27,686
Calls Abandoned	277
Chats Received	1,898
Chats Abandoned	0
Average Wait Time	23 seconds
Average Call Handle Time	8 minutes, 38 seconds
Outbound Calls	5,462

PLATFORM IMPROVEMENTS

Prior to the beginning of OE 2026, the CoverME.gov online eligibility and enrollment platform was streamlined to make it easier for consumers to navigate. All existing features were maintained, but much of the plan and application information was consolidated for a simplified user experience.

The platform’s user interface (UI) underwent targeted modifications for PY 2026:

- Streamlining the CoverME.gov interface to make it easier to view household details and active applications on a single, unified page.
- Adding several dropdown instructions throughout the application to aid consumers seeking self-service enrollment.
- Allowing consumers, brokers, and assisters to make edits to an individual consumer’s information without going through the full application and the entirety of the household detail.

Security enhancements were also made ahead of OE 2026. Effective August 7, 2025, a 14-character minimum password requirement was mandated for all administrative users, including CAC representatives and OHIM staff.

Additionally, new mobile device functionality was added. Consumers who included “text” as a preference for communications now receive an automated SMS notification when a message or notice is uploaded to their CoverME.gov account, and individuals are now able to reset their CoverME.gov password using their mobile device.

CONCLUSION AND ACKNOWLEDGEMENTS

OHIM is pleased to present this report to outline our fifth Open Enrollment as Maine’s State-Based Marketplace. CoverME.gov continues to be a place for Mainers to shop for high quality, comprehensive health insurance, find assistance, and receive financial help. OE 2026 presented new challenges to be addressed, several operational improvements, and a renewed appreciation for the value of a state-based marketplace in helping Maine consumers navigate a changing healthcare landscape.

OHIM would like to once again thank the partners that made a successful fifth year of CoverME.gov possible.