Delaware

Sources of Insurance Coverage

Medicare
In Delaware, approximately 182,100 residents are enrolled in Medicare, about 18% of the state’s population (2022 data). Of those, 31% are enrolled in a Medicare Advantage plan. For Delaware residents in the traditional Medicare program, the Department of Insurance regulates Medicare supplemental plans and provides consumer-facing information about these plans.

Medicaid and the Children’s Health Insurance Program (CHIP)
In Delaware, about 191,800 residents are enrolled in Medicaid or CHIP, around 20% of the population (2022 data).

*Source: KFF, Health Insurance Coverage of the Total Population, 2022*
Delaware adopted Medicaid expansion under the Affordable Care Act and covers childless adults under age 65 up to 138% of the federal poverty level (FPL). It currently covers around 93,000 low-income adults (June 2023 data).

Medicaid covers children up to 217% FPL. Approximately 37% of all births in Delaware are covered by Medicaid (June 2023 data). In Delaware, the CHIP program is operated as an expansion of Medicaid and a separately funded program.

Medicaid also covers pregnant women up to 217% FPL.

In Delaware, most Medicaid enrollees receive benefits via private managed care organizations (MCOs). These insurers have contracts with the Delaware Department of Health and Social Services (DHSS), through the Division of Medicaid & Medical Assistance (DMMA).

**Employer-sponsored Insurance**

In Delaware, approximately 498,300 people are covered by employer-sponsored insurance (ESI), or 50% of the total state population (2022 data). Approximately 51.2% of private-sector establishments in Delaware offer ESI. However, offer rates vary significantly by size of firm. In Delaware, 96% of large firms (50 or more employees) offer ESI, while only 35.2% of small employers offer ESI.

In Delaware, approximately 34.7% of private sector businesses that offer health insurance self-fund at least one health plan. For large firms (50 or more employees) that offer health insurance, 61.3% self-fund at least one health plan.

**Individual Market Insurance**

Approximately 5% of Delaware residents are enrolled in the individual market (2022 data). In 2023, 34,742 Delaware residents selected a plan through the Affordable Care Act Marketplace, which in Delaware is run by the federal government and is accessible through HealthCare.gov. It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

Individual market health insurance (both on- and off-Marketplace) is regulated in Delaware by the Department of Insurance.

**Other Coverage**

Some Delaware residents are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 1%, or roughly 10,200 residents (2022 data).

**The Uninsured**

Approximately 6%, or 54,600 Delaware residents are uninsured (2022 data), which is lower than most states’ uninsured rates.
Among the non-elderly population: People of color are significantly more likely to be uninsured in Delaware than White people. Hispanic residents have the highest uninsured rate (18.5%), followed by multiracial residents (9.8%) and Black residents (7.0%). White residents have the lowest uninsured rate among all racial groups (4.0%). Lack of insurance is also highly correlated with income. Approximately 14.2% of people under 100% FPL and 12.9% of people between 100-199% FPL are the uninsured in Delaware, while just 4.0% of people at or above 400% FPL are uninsured.

State Regulators: Delaware
The CMS Regional Office for Delaware is based in Philadelphia. Media inquiries may be submitted here.

Delaware Department of Insurance
The Department of Insurance regulates the business of insurance in Delaware. For health insurance companies, the Department of Insurance is responsible for:

- **Licensure**: All insurers operating in the state must obtain a certificate of authority. Insurers must demonstrate that they are financially solvent and capable of paying claims. After initial certification, companies must file financial information with the Department of Insurance. Financial examination reports are available here.
- **Form review**: The Department of Insurance reviews health insurers’ contracts and covered benefits to ensure that they comport with state and federal law.
- **Rate review**: Health insurers must submit proposed premium rates to the Department of Insurance, and the agency has the authority to review and require adjustments.
- **Enforcement**: The Department of Insurance has authority to enforce state and federal insurance laws. Enforcement tools can range from issuing a cease and desist order, imposing fines, or seeking an injunction. The Department of Insurance reports the results of company market conduct examinations here. Consumers can file complaints against insurers here.
- **Marketing**: The Department of Insurance is responsible for oversight of insurers’ marketing tactics and discouraging unfair or deceptive tactics. The Department is also responsible for the licensing and oversight of health insurance agents and brokers. A database of agents and brokers licensed to do business in Delaware is available here.
- **Appeals**: Under the ACA, insurers must provide enrollees with an internal review of adverse benefit decisions and the right to an external, independent appeal. The Department of Insurance administers Delaware’s external review system (called the “Independent Health Care Appeals Program”), and provides information to enrollees seeking an appeal here.
- **Managed Care Organizations**: The Department of Insurance also has regulatory authority over Managed Care Organizations (MCOs), which contract with the Department of Health and Social Services (DHSS). MCOs must file financial statements
with the Department of Insurance annually. The Department of Insurance also has enforcement authority over MCOs, and can take actions including monetary penalties, issuing cease and desist orders, and seeking an injunction.

Delaware Department of Health and Social Services (DHSS).
Delaware’s Department of Health and Social Services (DHSS) runs the state’s Medicaid program, and manages the contracts with MCOs that deliver Medicaid in Delaware. The division responsible for this is the Division of Medicaid & Medical Assistance (DMMA). A list of participating MCOs is available [here](#).

DMMA also contracts with an external organization to review MCO performance. Public information on MCO performance measures is available [here](#).

However, regulatory authority over MCOs is held by the Department of Insurance.

Delaware Attorney General
The Delaware Attorney General (AG) enforces consumer protection laws related to the provision of health insurance and health services. Consumers can file complaints against a business [here](#). The Insurance Commissioner has the authority to seek enforcement of insurance laws through the AG, and where criminal prosecution is involved, the Commissioner must refer the matter to the AG.

Other Sources of Information
Health Insurance Navigators, Agents and Brokers (collectively, “consumer assisters”)
The federal government provides grants to local organizations called “Navigators” that are tasked with assisting consumers, determining eligibility for coverage affordability programs, and helping consumers with post-enrollment questions. Delaware-based insurance agents and brokers perform similar consumer assistance functions, but they are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through [this page](#) on the federal Marketplace website.