Nebraska

Sources of Insurance Coverage

*Source: KFF, Health Insurance Coverage of the Total Population, 2022*

**Medicare**

In Nebraska, 276,900 residents are enrolled in Medicare, 14.5% of the state’s population (2022 data). Of those, 29% are enrolled in a Medicare Advantage plan. For Nebraskans in the traditional Medicare program, Nebraska's Department of Insurance regulates Medicare supplemental plans.

**Medicaid and the Children’s Health Insurance Program (CHIP)**

In Nebraska, 300,300 people are enrolled in Medicaid or CHIP, 15.7% of the population (2022 data). Nebraska has adopted Medicaid expansion under the Affordable Care Act. Medicaid expansion currently covers approximately 66,000 low-income adults.

In Nebraska, the CHIP program operates as an expansion of Medicaid, through a program called Heritage Health. Via Medicaid, Nebraska covers infants 0-1 up to 162% FPL, children 1-5 years of age up to 145% FPL, and children 6-18 years of age up to 133% FPL. The state uses the CHIP program to cover children in households with income up to 218% FPL. Approximately 35% of all births in Nebraska are covered by Medicaid. Nebraska’s Department of Health & Human Services manages the Medicaid and CHIP programs.

**Employer-sponsored Insurance**

In Nebraska, 1.03 million people are covered by employer-sponsored insurance (ESI), or 53.9% of the total state population (2022 data). Approximately 41.2% of Nebraska employers offer
ESI. However, offer rates vary significantly by size of firm. In Nebraska, 95.5% of large firms (50 or more employees) offer ESI, while only 25.8% of small employers offer ESI.

In Nebraska, approximately 47.7% of private sector businesses that offer coverage self-fund at least one health plan. For large firms (50 or more employees) that offer coverage, 59.8% self-fund at least one health plan.

**Individual Market Insurance**
Approximately 7.4% of Nebraska residents are enrolled in the individual market (2022 data). In 2023, 101,490 Nebraskans selected a plan through the Affordable Care Act Marketplace, which in Nebraska is run by the federal government and 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 Nebraska by the Department of Insurance.

**Other Coverage**
Some Nebraskans are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 1.8% of the population, or 34,800 residents.

**The Uninsured**
Approximately 6.8% or 129,300 Nebraska residents are uninsured (2022 data). This is better than the national average of 8.5%. Among the non-elderly, people of color are significantly more likely to be uninsured in Nebraska than White people. Hispanic residents have the highest uninsured rate (19.4%), followed by American Indian/Alaska Native residents (19.3%) and Black Nebraskans (11.5%). Approximately 5.7% of White residents are uninsured. Lack of insurance is also highly correlated with income. Approximately 13.8% of people under 100% FPL are the uninsured in Nebraska, while 4.5% of people over 400% FPL are uninsured.
State Regulators: Nebraska

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for Nebraska is based in Kansas City. Contact information is available here.

Nebraska Department of Insurance (DOI)
The Nebraska DOI regulates the business of insurance in the state. For health insurance companies, DOI is responsible for:

- **Licensure**: All insurers operating in the state must demonstrate that they are financially solvent and capable of paying claims. After initial licensure, companies must file financial information with the DOI annually. Financial overview information about companies licensed in Nebraska is available here.
- **Form review**: DOI reviews health insurers’ contracts and covered benefits to ensure that they comport with state and federal laws, including state benefit mandates.
- **Rate review**: Health insurers are required to submit proposed premium rates to DOI for review on an annual basis. Company-specific information to support proposed rates in the individual and small-group markets is available here.
- **Marketing**: DOI is responsible for oversight of insurers’ marketing tactics and discouraging unfair or deceptive tactics. DOI 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 Nebraska is available here. Company market share data from 2022 is available here.
- **Enforcement**: DOI has authority to enforce state and federal insurance laws. Their enforcement tools can range from requesting a corrective action, issuing a cease and desist order, imposing fines, or seeking an injunction. Consumers can submit complaints about their insurance company, agents or brokers here. Data on complaints filed against Nebraska licensed companies are available here. The DOI refers disputes about hospital and other provider bills to the Nebraska Attorney General’s Office.
- **Appeals**: Under the Affordable Care Act, insurers must provide enrollees with the right to an external, independent appeal. DOI manages the external review process for insured individuals.

Nebraska Department of Health & Human Services

The Nebraska Department of Health & Human Services (HHS) runs the state’s Medicaid and CHIP programs. HHS contracts with three statewide managed care organizations (MCOs) to deliver physical health, behavioral health, and pharmacy benefits to Medicaid and CHIP enrollees. The program is called Heritage Health. Information about benefits provided by each MCO is available here, and financial audits of each company are available here.

Nebraska Attorney General’s Office

Nebraska’s Attorney General represents the state in court when there is an action against an insurance company, entity, or individuals engaged in potentially fraudulent activity. The
department also investigates unfair or illegal business practices. The DOI refers consumers to the Attorney General’s Office when they have a billing dispute with a hospital or other provider; complaints may be submitted here.

Other Sources of Information

Health Insurance Navigators, Agents and Brokers (collectively, “consumer assisters”) Although Nebraska’s health insurance Marketplace is run by the federal government, CMS provides grants to local organizations called “Navigators” that are tasked with assisting consumers determine eligibility for subsidized coverage programs and helping them with post-enrollment questions. Nebraska-based health insurance agents and brokers perform similar consumer assistance functions, and 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 the “Find Local Help” search portal on HealthCare.gov.