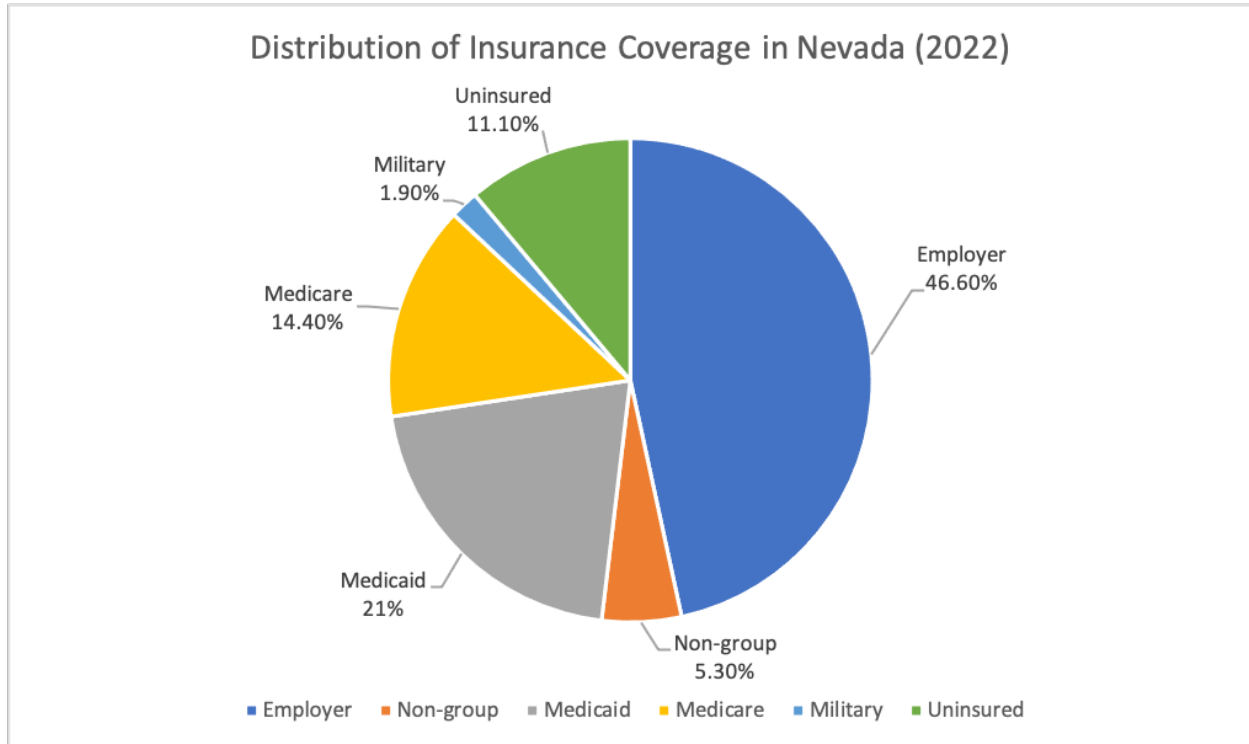


# Nevada

## Sources of Insurance Coverage



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

## Medicare

In Nevada, [448,800](#) residents are enrolled in Medicare, 14.4% of the state’s population (2022 data). Of those, [54%](#) are enrolled in a Medicare Advantage plan. For Nevada residents in the traditional Medicare program, the Nevada Division of Insurance (DOI) regulates Medicare supplement plans and provides [consumer-facing](#) information about plan benefits and enrollee rights. The list of insurers authorized to sell Medicare supplement policies is published annually in the DOI’s [Medicare Supplement Insurance Premium Comparison Guide](#).

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

[646,300](#) people are enrolled in Medicaid or CHIP in Nevada, 21% of the population (2022 data). Nevada adopted Medicaid expansion under the Affordable Care Act, and the Department of Welfare and Supportive Services administers the state’s Medicaid program through their “[Access Nevada](#)” portal. Nevada’s expanded Medicaid program covers [362,000](#) low-income adults. Nevada Medicaid covers children up to 205% of the federal poverty level (FPL). Approximately [44%](#) of all births in Nevada are covered by Medicaid.

Nevada's CHIP program is called "[Nevada Check Up](#)" (NCU) and is jointly funded and operated by the state and federal government. Medicaid covers infants and children aged 1-5 up to [165% FPL](#) (up to 138% FPL for older children) and NCU fills in for children aged 6-18 in households between 122% and 138% FPL.

Just over [75%](#) of Nevada's Medicaid and CHIP enrollees receive benefits via private managed care organizations (MCOs). These MCOs operate exclusively in the state's two largest counties, Clark and Washoe. MCOs in the state have contracts with the Nevada [Department of Health and Human Services](#).

### Employer-sponsored Insurance

In Nevada, [1.46 million](#) people are covered by employer-sponsored insurance (ESI), or 46.6% of the total state population (2022 data). Approximately [48.6%](#) of employers in Nevada offer ESI. However, offer rates vary significantly by size of firm. In Nevada, 96.9% of large firms (50 or more employees) offer ESI, while 31.6% of small employers (less than 50 employees) offer ESI.

Approximately [28.2%](#) of private sector businesses that offer health insurance in Nevada self-fund at least one health plan. 51.4% of large firms that offer health insurance self-fund at least one health plan.

### Individual Market Insurance

Approximately [5.3%](#) of Nevada residents are enrolled in the individual market (2022 data). In 2023, [96,379](#) Nevada residents selected a plan through [Nevada Health Link](#), which is Nevada's [state-based Marketplace](#) (SBM). 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 Nevada by the state's DOI, which conducts oversight to ensure compliance with both state and federal health insurance laws.

Beginning in 2026, Nevada is expected to offer a [Public Option](#) on their individual market. After being selected through a statewide competitive procurement process, insurance carriers will administer Nevada's Public Option plans. All Nevada residents will be eligible to purchase coverage through the Public Option.

### Other Coverage

Some Nevada residents are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers [1.9%](#), or 59,600 residents (2022 data).

### The Uninsured

Approximately [11.4%](#), or 351,500 Nevada residents are uninsured (2022 data). Despite expanding Medicaid and Marketplace coverage through the Affordable Care Act, Nevada has

the [6<sup>th</sup> highest](#) uninsured rate in the nation. Among the nonelderly population, people of color are significantly more likely to be uninsured in Nevada than White people. Hispanic residents have the highest [uninsured rate](#) (20.8%), followed by American Indians and Alaska Natives (20.4%), Black (12.7%), and Asian American residents (9.7%). White residents have the lowest uninsured rate (8.2%) among all racial groups. Lack of insurance is also highly correlated with income. Approximately [19.9%](#) of people under 100% FPL are the uninsured in Nevada, while only 6.6% of people at or over 400% FPL are uninsured.

## State Regulators: Nevada

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for Nevada is based in San Francisco. Media inquiries may be submitted [here](#). Nevada's Department of Health & Human Services operates a [State Health Insurance Assistance Program](#) (SHIP) for Medicare beneficiaries seeking assistance navigating their coverage.

### Nevada Division of Insurance (DOI)

Nevada's 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's [Corporate and Financial Affairs Section](#) on a regular basis.
- **Form review:** Nevada's DOI reviews health insurers' contracts and covered benefits to ensure that they comport with state and federal law, including the Affordable Care Act (ACA), Mental Health Parity and Addiction Equity Act (MHPAEA), Health Insurance Portability & Accountability Act (HIPAA), No Surprises Act, as well as state benefit mandates and network adequacy standards.
- **Rate review:** Health insurers offering plans to individuals and small employers (with fewer than 50 employees) must submit [proposed premium rates](#) to Nevada's DOI, and the agency has the authority to review and require adjustments before rates can be used. The state does not have the authority to mandate rate changes by insurers offering plans to large employers (with 50 or more employees).
- **Marketing:** Nevada's DOI is responsible for oversight of insurers' marketing tactics and discouraging unfair or deceptive tactics. The agency is also responsible for the licensing and oversight of health insurance agents and brokers.
- **Enforcement:** The agency has authority to enforce state and federal insurance laws. Enforcement tools can range from requesting a corrective action, issuing a cease-and-desist order, imposing fines, or seeking an injunction. The DOI publishes notices of regulatory enforcement action [here](#). Consumers can file complaints against insurers [here](#). The state makes some consumer complaints received and investigated by the DOI publicly 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 DOI's [Consumer Services Section](#) operates Nevada's external review system.

### Nevada Department of Health & Human Services

Nevada's Department of Health & Human Services (DHHS) runs the state's Medicaid and CHIP programs, and manages the contracts with the managed care organizations (MCOs) that deliver Medicaid and CHIP benefits. A list of participating MCOs is available [here](#), and relevant contact information is available [here](#). DHHS maintains an [online data hub](#) which provides a variety of information regarding Medicaid in Nevada, including eligibility and enrollment data, MCO caseloads, and average Medicaid application processing times.

DHHS contracts with an external quality review organization to conduct federally mandated annual reviews of MCOs operating in Nevada, including assessments of quality, timeliness, and access to care. The results of these reviews are provided in reports published [here](#). Nevada's [Quality Control Unit](#) also conducts monthly quality assessments of the state's Medicaid program to ensure accuracy of eligibility and payment determinations.

DHHS can take enforcement action against an MCO if it fails to meet its contract obligations. Enforcement actions can include requiring the MCO to pay damages or to implement a corrective action plan. The agency can also suspend all or part of new member enrollments or suspend or terminate the MCO's contract.

An office within DHHS, the [Office for Consumer Health Assistance](#) (OCHA), is available to help educate consumers about their rights and responsibilities under their health care plans. OCHA also helps resolve billing disputes between patients and providers and/or hospitals. The Division of Health Care Financing and Policy within DHHS also operates a number of advisory [boards and committees](#) associated with Nevada's Medicaid program, including, for example, the "Medicaid Reinvestment Advisory Committee," which [publishes](#) company-specific plans for community investment.

### Nevada State Attorney General

The Nevada Attorney General's Office represents the state in court when there is an action against an insurance company, entity, or individuals engaged in potentially fraudulent activity. The Attorney General's Office accepts complaints from consumers who confront problems related to medical billing or insurance, and can sometimes help resolve issues. Complaints can be submitted [here](#).

### Other Sources of Information

Health Insurance Navigators, Agents and Brokers (collectively, "consumer assisters")

Nevada's health insurance Marketplace ([Nevada Health Link](#)) provides grants to local organizations called "Navigators" that are tasked with assisting consumers determining eligibility for subsidized coverage programs and helping them with post-enrollment questions.

Health insurance agents and brokers in Nevada 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 Enrollment Assistance”](#) page on the Nevada Health Link website.

*GEORGETOWN*  
*UNIVERSITY*

*McCourt School of Public Policy*

**CENTER ON  
HEALTH INSURANCE  
REFORMS**

