New Hampshire

Sources of Insurance Coverage

![Distribution of Insurance Coverage in New Hampshire (2022)](chart)

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

Medicare

In New Hampshire, **252,800** residents are enrolled in Medicare, 18.6% of the state’s population (2022 data). Approximately **36%** of this group is enrolled in a Medicare Advantage plan. For New Hampshire residents in the traditional Medicare program, the New Hampshire Insurance Department regulates Medicare supplement plans and provides consumer-facing information about plan benefits and enrollee rights. A list of insurers authorized to sell Medicare supplement policies is available [here](#) (updated annually).

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

**181,500** New Hampshire residents are enrolled in Medicaid or CHIP, 13.4% of the population (2022 data). New Hampshire adopted Medicaid expansion under the Affordable Care Act (ACA) through a program called the “Granite Advantage Health Care Program,” which covers **92,000** low-income adults. Granite Advantage has so far required periodic reauthorization by the state legislature; however, as of 2023, lawmakers in New Hampshire are considering legislation to permanently reauthorize the program.

New Hampshire Medicaid covers children up to 323% of the federal poverty level (FPL), and approximately **23%** of births in the state are covered by Medicaid. New Hampshire also
operates a CHIP program as an expansion of Medicaid. Medicaid covers children age 0-18 up to 196% FPL, and CHIP provides coverage for uninsured children in households up to 323% FPL. Residents can apply for Medicaid through the state’s “NH EASY” platform.

In New Hampshire, 91% of Medicaid and CHIP enrollees receive benefits via private managed care organizations (MCOs). These insurers have contracts with the New Hampshire Department of Health & Human Services.

Employer-sponsored Insurance
In New Hampshire, 758,900 people are covered by employer-sponsored insurance (ESI), roughly 55.9% of the total state population (2022 data). Approximately 47.6% of New Hampshire employers offer ESI, though offer rates vary significantly by size of firm: 97.2% of large firms (50 or more employees) in the state offer health insurance, compared to only 31% of small employers (less than 50 employees).

Approximately 41% of private sector businesses that offer health insurance in New Hampshire self-fund at least one health plan. For large firms (50 or more employees) that offer health insurance, 60.7% self-fund at least one health plan.

Individual Market Insurance
Approximately 6.5% of New Hampshire residents are enrolled in the individual market (2022 data). In 2023, 54,557 individuals selected a plan through the Affordable Care Act Marketplace, which in New Hampshire is run by the federal government. It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

Individual market health insurance (both on- and off-Marketplace) in New Hampshire is regulated by the New Hampshire Insurance Department, which conducts oversight to ensure compliance with both federal and state health insurance laws.

Other Coverage
Some New Hampshire residents are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 1.1% of the state population or 15,200 individuals (2022 data).

The Uninsured
Approximately 4.5%, or 61,400 New Hampshire residents are uninsured (2022 data). New Hampshire has the 8th lowest uninsured rate in the country. Among the non-elderly population, Asian American and Hispanic residents have the highest uninsured rates (12.1% and 11.5%, respectively), followed by White residents (4.4%) and Black residents (3.9%). Lack of insurance is also highly correlated with income. Approximately 10.5% of people under 100% FPL are uninsured in New Hampshire, while just 2.9% of those at or over 400% FPL are uninsured.
State Regulators: New Hampshire

CMS is responsible for oversight of Medicare Advantage plans. The CMS Regional Office for New Hampshire is based in Boston. Media inquiries may be submitted here.

New Hampshire Insurance Department

New Hampshire’s Insurance Department regulates the business of insurance in the state. For health insurance companies, the agency 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 agency on a regular basis. A list of insurers authorized to sell health insurance in New Hampshire is available here.

- **Form review:** New Hampshire’s Insurance Department 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 New Hampshire’s Insurance Department, 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:** The agency 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 agency publishes notices of regulatory enforcement action here. Consumers can file complaints against insurers 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 Insurance Department operates New Hampshire’s external review system.

In an effort to improve transparency in the insurance market, New Hampshire’s Insurance Department also operates a consumer-facing tool called NH HealthCost™, which provides cost estimates for health care services offered at facilities in the state.
New Hampshire Department of Health & Human Services

New Hampshire’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 enrollment data by county is available here.

DHHS contracts with an external quality review organization to conduct federally mandated annual reviews of MCOs operating in New Hampshire, including assessments of quality, timeliness, and access to care. The results of these reviews are provided in reports published here. DHHS also publishes reports on a variety of other metrics concerning Medicaid quality, available here.

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.

A public advisory group called the New Hampshire Medical Care Advisory Committee (MCAC) advises DHHS on Medicaid policy and planning issues. DHHS also operates a consumer assistance program called ServiceLink, which includes New Hampshire’s State Health Insurance Assistance Program (SHIP) for Medicare beneficiaries seeking assistance navigating their coverage.

New Hampshire State Attorney General

The New Hampshire 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”)

Although New Hampshire’s health insurance Marketplace is run by the federal government, CMS 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 and agents and brokers in New Hampshire 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” portal on HealthCare.gov.