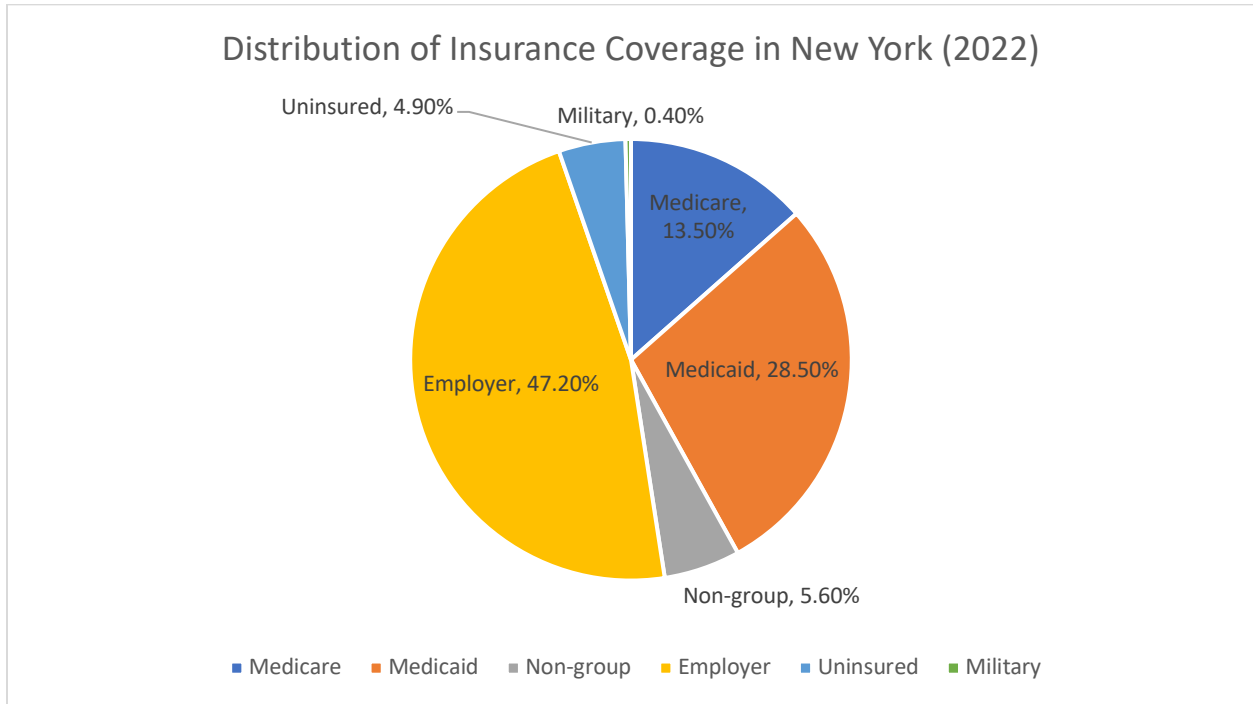


New York

Sources of Insurance Coverage



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

Medicare

In New York, [2.58 million](#) residents are enrolled in Medicare, 13.5.6% of the state's population (2022 data). Of those, [54%](#) are enrolled in a Medicare Advantage plan. For New Yorkers in the traditional Medicare program, the New York Department of Financial Services (DFS) regulates Medicare supplement plans and provides [consumer-facing](#) information about plan benefits and enrollee rights, as well as insurers authorized to sell Medicare supplement policies in the state.

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

In New York, about [5.47 million people](#) are enrolled in Medicaid or CHIP, 28.5% of the population (2022 data). New York adopted Medicaid expansion under the Affordable Care Act, which currently covers [2.5 million](#) low-income adults. New York covers its CHIP population both within Medicaid and through a separate CHIP program called [Child Health Plus](#). Child Health Plus covers children up to [405%](#) of the federal poverty level (FPL), the highest upper income eligibility limit in the country. New York's Medicaid program covers pregnant individuals as well as infants up to 223% FPL. Approximately [46%](#) of all births in New York are covered by Medicaid, and children and pregnant individuals are eligible for coverage regardless of [immigration status](#).

New York also operates a [Basic Health Program](#), which the state calls the [Essential Plan](#). The Essential Plan provides coverage for slightly higher income individuals (between 138%-200% of the federal poverty level), as well as certain low-income individuals who are ineligible for Medicaid. In 2023, the program covered approximately [1.22 million](#) New Yorkers.

In New York, most Medicaid and all Essential Plan enrollees receive benefits via private [managed care organizations](#). These insurers have contracts with the New York State Department of Health. A list of health plans participating in Medicaid, Child Health Plus, and the Essential Plan by county is available [here](#).

Employer-sponsored Insurance

In New York, [approximately 9.05 million people](#) are covered by employer-sponsored insurance (ESI), or 47.2% of the total state population (2022 data). Approximately [46.8%](#) of New York employers offer ESI. However, offer rates vary significantly by size of firm. In New York, 96.2% of firms with 50 or more employees offer ESI, while only 34.9% of firms with less than 50 employees offer ESI. In most states, firms with over 50 employees can purchase health coverage through the large group market. However, as of 2016, New York [expanded](#) the definition of the state's small group market to include firms with between 1 and 100 employees. As a result, non-grandfathered groups in New York with up to 100 employees purchase coverage through the small group market.

In New York, approximately [31.8%](#) of private sector businesses that offer health insurance self-fund at least one health plan. Of firms with 50 or more employees that offer health insurance, 52.4% self-fund at least one health plan.

Individual Market Insurance

Approximately [5.6%](#) of New York residents are enrolled in the individual market (2022 data). In 2023, [214,052](#) New Yorkers selected a plan through the Affordable Care Act Marketplace, which in New York is run by the state and called [NY State of Health](#). 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 by New York's [Department of Financial Services](#) or the [New York State Department of Health](#), depending on the insurance carrier.

Other Coverage

Some New Yorkers are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE of U.S. Veterans Administration), which covers [0.4%](#), or 74,500 residents.

The Uninsured

Approximately [4.9%](#), or 1.01 million New York residents are uninsured (2022 data). New York has the [11th lowest](#) uninsured rate in the country. Among the non-elderly, people of color are more likely to be uninsured than White people, though racial coverage disparities are less

pronounced in New York than in many other states. American Indian/Alaska Native residents have the highest [uninsured rate](#) (12.1%), followed by Hispanic residents (10.6%), Asian and Black residents (both at 5.6%). White residents have the lowest uninsured rate (3.8%) among all racial groups. Lack of insurance is also correlated with income and geography. Approximately [9.3%](#) of people under 100% FPL are uninsured in New York, while just 3.2% of people over 400% FPL are uninsured.

Additional Data Sources

The New York State Department of Health routinely publishes enrollment data for [Medicaid](#) and [Child Health Plus](#), and NY State of Health publishes enrollment data for the [Essential Plan and Qualified Health Plans \(QHPs\)](#). Most data are available by month and county.

State Regulators: New York

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for New York is based in New York City. Contact information is available [here](#).

New York Department of Financial Services

The [New York Department of Financial Services](#) (DFS) regulates the insurance business in the state of New York. For the health insurance companies under its purview, DFS is responsible for:

- **Financial health:** 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 DFS on a regular basis. Information about examination reports of health insurance companies is publicly available [here](#).
- **Form review:** DFS 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.
- **Rate review:** Health insurers offering plans to individuals and small employers must submit proposed premium rates to DFS, and the agency has the authority to review and require adjustments before rates can be used. The Department does not have authority to review rates for large employer plans (with over 100 employees). Information about insurers' proposed rates is available [here](#).
- **Marketing:** The Department is responsible for oversight of insurers' marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses insurance agents and brokers.
- **Enforcement:** DFS has authority to enforce state and federal insurance laws. The Department investigates and helps resolve complaints on behalf of consumers. Enforcement tools can range from requesting a corrective action, issuing a cease and desist order, imposing fines, or seeking an injunction. The Department maintains a database of enforcement actions against companies [here](#). Consumers or providers can learn about how to file complaints against insurers [here](#).

- **Appeals:** Under the Affordable Care Act, insurers must provide enrollees with an internal review of adverse benefit decisions and the right to an external, independent appeal. DFS operates New York’s external review system, and provides information to enrollees seeking an appeal [here](#).

The public can search for insurance companies operating in New York [here](#). Health insurers offering products in the state must submit [data](#) to DFS on health care claims, appeals, and denials on a quarterly and annual basis. DFS also publishes annual “[Consumer Guides to Health Insurers](#),” which include data on consumer complaints, enrollee satisfaction, and successful appeals for the health plans that are regulated by DFS.

New York State Department of Health

The [New York State Department of Health](#) (DOH) administers the state’s Medicaid, Child Health Plus, and Essential Plan programs, and manages the contracts with the managed care organizations (MCOs) that deliver benefits under these programs. A list of health plans participating in Medicaid, Child Health Plus, and the Essential Plan by county is available [here](#).

DOH conducts numerous reviews of MCOs, including assessments of quality, performance, and access to care. The results of these reviews are published [here](#).

DOH is responsible for overseeing the marketing and business practices of all MCOs operating in New York, as well as the marketing and business practices of individual market insurers that are not regulated by DFS. DOH also monitors [provider network adequacy](#) for all commercial market plans in the state.

DOH can conduct an enforcement action against an MCO or other insurer if it fails to meet its contract obligations. Enforcement actions can include requiring the MCO or insurer 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 or insurer’s contract.

New York Attorney General’s Office

The New York 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 related to health care issues can be submitted [here](#).

Other Sources of Information

[Health Insurance Navigators, Agents and Brokers](#) (collectively, “consumer assisters”)

New York’s health insurance Marketplace (NY State of Health) 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. New York-

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. You can search for consumer assisters [here](#).

Community Service Society of New York (CSS)

Through their “[Navigator Network](#)” and “[Facilitated Enrollment for the Aged Blind and Disabled](#)” program, CSS partners with local organizations and small businesses throughout the state to help New Yorkers access affordable health insurance. CSS also runs the State Independent Consumer Assistance Program, under Section 1002 f the Affordable Care act, called [Community Health Advocates](#) (CHA). CHA is an all-payer ombudsman program that helps individuals, families, and small businesses enroll in non-Marketplace coverage, use their health insurance and troubleshoot medical issues, and file complaints and appeals. CSS also runs the [Community Health Access to Addiction and Mental Healthcare Project](#) (CHAMP) ombudsman program for people facing insurance issues related to mental health and substance use disorders, and the [Independent Consumer Advocacy Network](#) (ICAN) ombudsman program for consumers in [Managed Long Term Care](#) programs. CSS publishes research on various health care access issues in New York, available online [here](#).

GEORGETOWN
UNIVERSITY

McCourt School of Public Policy

**CENTER ON
HEALTH INSURANCE
REFORMS**