



**THE STATE OF NEW HAMPSHIRE
INSURANCE DEPARTMENT**

21 SOUTH FRUIT STREET SUITE 14
CONCORD, NEW HAMPSHIRE 03301

Christopher R. Nicolopoulos
Commissioner

David J. Bettencourt
Deputy Commissioner

Bulletin

Docket No: INS 21-028-AB

To: All Health Carriers
From: Commissioner Christopher R. Nicolopoulos, Esq. *CRN.*
Date: May 7, 2021
Re: Coordination of Benefits with Medicare in Group Health Plans

The purpose of this bulletin is to provide additional guidance to health carriers regarding coordination of benefits (“COB”) with Medicare in group health plans. All group health plans in New Hampshire must comply with the New Hampshire Administrative Rule Part Ins 1904 Group Coordination of Benefits. Ins 1904.04(d)(3) prohibits the use of a COB provision to reduce the benefits allowed when “[a] person is or could have been covered under another plan, except with respect to *Part B of Medicare* (emphasis added).” The rule only exempts Medicare Part B and does not exempt Medicare Part A.

The Department understands that the New Hampshire Benchmark Plan includes language regarding COB with Medicare. The Department interprets the Benchmark Plan, when read in conjunction with Ins 1904.04(d), to allow the insurer to reduce benefits in group health plans with respect to Medicare Part B only. A group health plan may only coordinate benefits with Medicare when Medicare is or would be the primary payer in accordance with federal rules.

Given that there are many factors to consider in each COB situation, health carriers should ensure that their application of COB provisions complies with New Hampshire law. All future product submissions for group health plans containing a COB provision must ensure that the policy language clearly states COB only occurs with Medicare Part B.