



The State of New Hampshire Insurance Department

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FOR IMMEDIATE RELEASE

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New Hampshire Insurance Department Commends Proposed Changes to Federal Healthcare Regulations and Advocates for State Flexibility

CONCORD, NH (January 11, 2024) – The New Hampshire Insurance Department (NHID) has submitted comments to the Centers for Medicare & Medicaid Services (CMS) in response to the proposed Notice of Benefit and Payment Parameters for 2025. The comments, conveyed in a letter dated January 8, 2024, express support for certain proposed changes while highlighting concerns and advocating for flexibility in other areas.

The NHID supports the Department of Health and Human Services (HHS) proposed changes that clarify when state-mandated benefits would be subject to defrayal by the states. The simplification of the benchmark plan selection process is also endorsed by NHID, echoing the sentiments expressed by the National Association of Insurance Commissioners (NAIC). The NHID believes these changes will provide states with increased flexibility and discretion, removing unnecessary administrative barriers.

“The proposed changes align more closely with the plain language and intent of 42 USC 18031 (d)(3), allowing states greater flexibility in addressing essential health benefits,” said New Hampshire Insurance Commissioner DJ Bettencourt. “The current rule places unnecessary restrictions on states, and we appreciate efforts to streamline this process.”

However, New Hampshire expresses reservations about the proposal to further limit the availability of non-standardized plans, particularly in markets with limited competition. The state emphasizes the importance of promoting competition by allowing issuers the flexibility to design and market innovative plans that meet market needs.

“New Hampshire wishes to encourage competition, especially in markets where competition is already limited,” said Deputy Commissioner Keith Nyhan. “We urge HHS to thoroughly study the state-by-state impact of such limits before implementation, and consider exceptions for states, like New Hampshire, where there are fewer issuers in the market.”

In the letter, the NHID emphasizes the need for a more holistic approach tailored to individual state needs. While not currently a State-Based Marketplace (SBM), New Hampshire recommends a state-focused strategy in developing and implementing network adequacy requirements.

“States are better positioned to regulate network adequacy, understanding the unique healthcare landscapes and needs of their residents,” said Jason Dexter, Life and Health Director at the NHID. “We advocate for a framework that evaluates whether state standards are well-designed to ensure services are accessible without unreasonable delay, without presupposing that federal requirements are the only effective approach.”

New Hampshire stresses its commitment to innovative approaches, citing its unique model of evaluating service types rather than provider types when assessing network adequacy. The state's approach uses data from an all-payors claims database to quantitatively verify the availability of key services within specified time and distance standards.

“The NHID remains committed to working collaboratively with federal agencies to ensure healthcare policies align with the best interests of New Hampshire residents,” concluded Commissioner Bettencourt.

The New Hampshire Insurance Department Can Help

The New Hampshire Insurance Department’s mission is to promote and protect the public good by ensuring the existence of a safe and competitive insurance marketplace through the development and enforcement of the insurance laws of the State of New Hampshire. Contact us with any questions or concerns you may have regarding your insurance coverage at 1-800- 852-3416 or (603) 271-2261, or by email at consumerservices@ins.nh.gov. For more information, visit <https://www.nh.gov/insurance>.

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