

SB 484-FN - AS INTRODUCED

2026 SESSION

26-2047

05/09

SENATE BILL ***484-FN***

AN ACT prohibiting Medicaid premiums and limiting Medicaid expansion cost sharing.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Watters, Dist 4; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Sen. Long, Dist 20; Sen. Prentiss, Dist 5; Sen. Altschiller, Dist 24; Rep. Wallner, Merr. 19; Rep. Weber, Ches. 5; Rep. Simpson, Rock. 33; Rep. Telerski, Hills. 11; Rep. Hakken-Phillips, Graf. 12

COMMITTEE: Finance

ANALYSIS

This bill repeals premium requirements under the New Hampshire granite advantage health care program and the children's health insurance program. The bill authorizes the department of health and human services to establish cost sharing under expanded Medicaid not to exceed \$5 per service.

Explanation: Matter added to current law appears in ***bold italics***.
Matter removed from current law appears ~~[in brackets and struckthrough.]~~
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty-Six

AN ACT prohibiting Medicaid premiums and limiting Medicaid expansion cost sharing.

Be it Enacted by the Senate and House of Representatives in General Court convened:

- 1 1 Short Title. This act shall be known as "The Lowering the Cost of Health Care Act of 2026".
- 2 2 New Section; New Hampshire Granite Advantage; Cost Sharing. Amend RSA 126-AA by
- 3 inserting after section 2-a the following new section:
- 4 126-AA:2-b Cost Sharing; Maximum. Beginning October 1, 2028, subject to federal limitations,
- 5 any cost sharing requirement established under the granite advantage health care program, with
- 6 respect to care or an item or service furnished to a specified individual, shall not exceed \$5.
- 7 3 Appropriation; Department of Health and Human Services; State Medicaid Program. The
- 8 sum necessary to compensate the department of health and human services for the reduction in
- 9 funding for the state Medicaid program resulting from repeal of the premium requirements pursuant
- 10 to section 4 of this act is hereby appropriated to the department of health and human services for the
- 11 biennium ending June 30, 2027. The governor is authorized to draw a warrant for said sum out of
- 12 any money in the treasury not otherwise appropriated.
- 13 4 Repeal. The following are repealed:
- 14 I. RSA 126-AA:2-a, relative to premiums under the New Hampshire granite advantage
- 15 health care program.
- 16 II. RSA 126-A:3, IX, relative to premiums under the children's health insurance program.
- 17 5 Effective Date. This act shall take effect July 1, 2026.

SB 484-FN- FISCAL NOTE
AS INTRODUCED

AN ACT prohibiting Medicaid premiums and limiting Medicaid expansion cost sharing.

FISCAL IMPACT: This bill does not authorize new positions.

| Estimated State Impact | | | | |
|-------------------------------|--|----------------|----------------|------------------|
| | FY 2026 | FY 2027 | FY 2028 | FY 2029 |
| Revenue | \$0 | (\$16 million) | (\$16 million) | (\$15.7 million) |
| <i>Revenue Fund(s)</i> | Granite Advantage and CHIP premium revenue deposited into the Granite Advantage trust fund and the state general fund, respectively. | | | |
| Expenditures* | \$0 | \$16 million | \$0 | \$0 |
| <i>Funding Source(s)</i> | General Fund, possible Liquor funds. (See below for discussion of funding sources for the Granite Advantage Program) | | | |
| Appropriations* | \$0 | \$16 million | \$0 | \$0 |
| <i>Funding Source(s)</i> | General Fund | | | |

*Expenditure = Cost of bill

*Appropriation = Authorized funding to cover cost of bill

METHODOLOGY:

This bill repeals premium requirements for the Granite Advantage and Children's Health Insurance Programs. In addition, the bill makes a general fund appropriation in FY27 of the amount necessary to fill the resulting revenue shortfall. The premiums were established in HB 2 from 2025 (the budget trailer bill), and were anticipated to generate a combined \$16 million in revenue in FY27 and subsequent years. (Granite Advantage premiums were expected to raise \$5 million per year, while CHIP premiums were expected to raise \$11 million per year.) The bill is therefore expected to result in a general fund appropriation of \$16 million in FY27.

It should be noted that, per RSA 126-AA:3, the Granite Advantage trust fund is prohibited from accepting state general funds. For this reason, although the Department of Health and Human Services could accept the \$5 million general fund appropriation attributable to the loss in Granite Advantage premiums, it will not be able to spend those funds on the program itself. Instead, any shortfall in funding will be covered via an automatic transfer of Liquor funds pursuant to RSA 126-AA:3, VI. If interpreted strictly as drafted, therefore, the bill may inadvertently result in both a \$5 million appropriation and a \$5 million transfer of Liquor funds taking place in FY27.

In addition to the impact on premiums, the bill stipulates that any cost sharing requirement established under the Granite Advantage program shall not exceed \$5. The Department of estimates that the Program has approximately 540,000 encounters per year, of which approximately 17 percent will be subject to cost-sharing requirements once imposed. This will result in revenue of approximately \$459,000 per year. As cost-sharing cannot be implemented until October 1, 2028 under federal law, the Department assumes that approximately \$344,000 will be generated in FY29. Although this bill does not *mandate* cost sharing, but rather caps the amount of any cost sharing mechanism, for the purposes of this fiscal note the revenue generated is considered to be a result of the bill.

AGENCIES CONTACTED:

Department of Health and Human Services