

New Hampshire - State Required Benefits

Benefit	Name of Required Benefit	Market Applicability	Citation Number
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	Outpatient Contraceptive Services	Group only, each insurer that issues or renews any group, blanket accident or health insurance policy or certificate providing benefits for medical or hospital expenses	RSA 415:18-i, RSA 420-A: 17-c, RSA 420-B: 8-gg
Bariatric Surgery	Obesity & Morbid Obesity / Bariatric Surgery	All fully insured insurance policies and certificates	RSA 415:6-o, 415:18-t, 420-A:2, 420-B:20
Prenatal and Postnatal Care	Newborn Children Covered from Birth	All fully insured insurance policies and certificates	RSA 415:22, RSA 420-B: 8-j
Delivery and All Inpatient Services for Maternity Care	Pregnancy, Delivery and Postpartum Coverage	Each health insurance policy that provides maternity benefits for hospital expense, medical surgical expense, or major medical expense	RSA 417-D: 2-a
Mental/Behavioral Health Outpatient Services	Coverage for Mental or Nervous Conditions and Treatment for Chemical Dependency Required	Any group, blanket accident, or health insurance policy providing benefits for medical or hospital expenses (and HMOs)	RSA 415:18-a IV (a); RSA 415:18-a I(c)
Mental/Behavioral Health Outpatient Services	Coverage For Certain Biologically Based Mental Illnesses	Any policy of group or blanket accident or health insurance and each nonprofit health service corporation under RSA 420-A and health maintenance organization under RSA 420-B providing benefits for disease or sickness in the state of New Hampshire	RSA 417-E:1
Mental/Behavioral Health Inpatient Services	Services Rendered at a Community Mental Health Center or Psychiatric Residential Program	Each insurer of group, blanket accident or health insurance policy providing benefits for medical or hospital expenses	RSA 415:18-a III (b)

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Mental/Behavioral Health Inpatient Services	Coverage For Certain Biologically Based Mental Illnesses	Group or blanket accident or health nonprofit health service corporation under RSA 420-A and health maintenance organization under RSA 420-B providing benefits for disease or sickness in the state of New Hampshire	RSA 417-E:1
Substance Abuse Disorder Outpatient Services	Coverage for Mental or Nervous Conditions and Treatment for Chemical Dependency Required	Any group, blanket accident, or health insurance policy providing benefits for medical or hospital expenses	RSA 415:18-a IV (a); RSA 415:18-a I(c)
Substance Abuse Disorder Inpatient Services	Coverage for Mental or Nervous Conditions and Treatment for Chemical Dependency Required	Any group, blanket accident, or health insurance policy providing benefits for medical or hospital expenses, and HMOs	RSA 415:18-a IV (a); RSA 415:18-a I(c)
Habilitation Services	Coverage For Treatment Of Pervasive Developmental Disorder Or Autism	All group policies, contracts, and certificates issued or renewed on or after January 1, 2011	RSA 417-E:2
Durable Medical Equipment	Artificial Limb Coverage	Each insurer that issues or renews an individual, group, blanket accident, or health insurance policy or certificate providing benefits for medical or hospital expenses	RSA 415:6-j, RSA 415:18-n
Durable Medical Equipment	Scalp Hair Protheses	Each insurer that issues or renews any group, blanket accident, health service corporation or health insurance policy or certificate providing benefits for medical or hospital expenses and which provides coverage for outpatient services	RSA 415:18-d, RSA 420-A: 14, RSA 420-B: 8-f
Hearing Aids	Coverage for Hearing Aids	All group policies, contracts, and certificates issued or renewed on or after January 1 2011. Includes individual policies, HMO's, Health Service Corporations, and certificates for delivery. Does not apply to Medicare and Medicare Supplement plans	RSA 415:6-p, RSA 415:18-u, 420-B:20, 420-A:2

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Preventive Care/Screening/Immunization	Mammography & for Testing for Occult Breast Cancer	All policies of accident and health insurance providing benefits for hospital expense, medical-surgical expense, or major medical expense	RSA 417-D: 2
Bone Marrow Transplant	Bone marrow testing	All fully insured insurance policies and certificates	RSA 415:6-m; 415:18-r; 420-A: 2; 420-B: 20 III
Reconstructive Surgery	Reconstruction Surgery as a Result of Mastectomy	Every insurer that provides coverage for mastectomy surgery	RSA 417-D: 2-b
Clinical Trials	Coverage for Qualified Clinical Trials	All Group hospital and medical expense policies. Medicare and CHIP plans excluded	RSA 415:18-l
Dental Anesthesia	CHILDREN - Certain Dental Procedures Performed At Dental Office	Applies only to dental insurers that provide benefits for oral surgical procedures	RSA 415:18-h
Dental Anesthesia	Certain Dental Procedures Performed At Dental Office	Applies only to dental insurer or other similar entity, including Delta Dental under RSA 420-F, that issues or renews any policy of group insurance providing benefits for oral surgical procedures	RSA 415:18-h
Dental Anesthesia	Coverage for Dental Procedures: Medical or Hospital Group	Any group or blanket accident or health insurance policy or certificate providing benefits for medical or hospital expenses	RSA 415:18-g, RSA 420-A: 17-b, RSA 420-B: 8-ee
Diabetes Care Management	DIABETES - Diabetes Services and Supplies	Individual, group, blanket policy, HMO's	RSA 415:6-e, RSA 415:18-f, RSA 420-A: 17-a, RSA 420-B: 8-k
Early Intervention Services	CHILDREN - Early Intervention Therapy Services For Children	All fully insured insurance policies and certificates	RSA 415:6- n, 415:18-s, 420-A:17-g, 420-B:8-r
Inherited Metabolic Disorder - PKU	CHILDREN - Nonprescription Enteral Formulas	All fully insured insurance policies and certificates	RSA 415:6-c, RSA 415:18-e, RSA 420-A: 17, RSA 420-B: 8-ff
Off Label Prescription Drugs	Off-Label Prescription Drugs	All fully insured insurance policies and certificates that include coverage for prescription drugs	RSA 415:6-g, RSA 415:18-j