



MEDICAID STORYBOOK

New Hampshire Stories About the Impact of Medicaid

MEDICAID IN NH

What is Medicaid?

Medicaid is health insurance for older adults in nursing homes, low-wage adults and children, pregnant women, veterans, and people with disabilities. It covers essential services like doctor visits, prescriptions, mental health services, cancer treatments, and long-term care, helping our residents access the care they need to get healthy, stay healthy, and live in our communities. Along with the positive impacts on health outcomes, Medicaid supports New Hampshire's economy, benefits our state budget, and strengthens our workforce.

over half of

nursing home residents

Scan the QR code to view the

interactive map and see your town's Medicaid enrollment.

Who Does Medicaid Cover in New Hampshire?

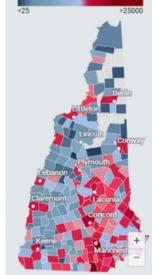
Over 187,000 New Hampshire residents are currently enrolled in Medicaid — that's 13% of our population. **Nearly half of enrollees are Granite State children**. New Hampshire Medicaid covers:

> 1 in 4 people with disabilities

22% of births

New Hampshire Medicaid Enrollment by City/Town

Enrollees on February 28, 2025. Total Enrollment of 186,920.



Source: Data from NH DHHS

Source: KFF Medicaid in NH Fact Sheet

veterans

1 in 4 NH

kids

Voters Overwhelmingly Support Medicaid and Oppose Cuts



of voters hold favorable views of Medicaid, regardless of political affiliation.

92%

of voters believe it's important that Americans are covered by health insurance.

Most Medicaid Recipients Work

92%

of adult Medicaid recipients are working, caregiving, managing health conditions, or attending school.

WHAT'S AT STAKE

Federal Concerns

The U.S. Congress is currently considering cuts to Medicaid as a means of financing a massive package of tax cuts through the budget reconciliation process. If enacted, the cuts will cause millions of people to lose their health insurance coverage through the Medicaid program. Some of the proposals currently being discussed at the federal level include:

► Reducing the Federal Match Rate for Medicaid programs

Medicaid is the single biggest source of revenue in the state, and in NH, under the Federal Medical Assistance Percentage (FMAP), the federal government matches 50% of costs for traditional Medicaid, 61% for some children's programs, and 90% for Medicaid Expansion. Congress is considering lowering the FMAP percentage, which will place more of the burden on states to finance their traditional and Medicaid Expansion programs.

> Activating NH's "Trigger Law," Eliminating the Granite Advantage Program

NH is one of several states that enacted a "trigger law" when it expanded Medicaid. If the federal government were to lower the 90% match for the Medicaid Expansion (Granite Advantage) population, the state's trigger law would go into effect, eliminating the expansion program within months. The ~60,000 Granite Staters insured by the Granite Advantage earn \$20,815 or less per year. How will these Granite Staters afford the skyrocketing costs of health insurance if this program goes away?

Implementing Per Capita Caps

Congress is considering setting per capita caps on federal matching funds for Medicaid - limiting the amount of federal funding provided to states for each Medicaid enrollee. Without states increasing spending to offset the loss of federal dollars, there would be implications for the entire health care system, including reduced Medicaid revenues for providers and higher uncompensated care costs.

State Concerns

> Work Requirements – Included in Federal & State Proposals

SB 134 aimed to set burdensome work requirements for Medicaid expansion recipients in NH. Research consistently shows that work requirements can cause significant numbers of people to lose their coverage, complicate access to care, and disproportionately harm those who need Medicaid the most. While SB 134 was retained, work requirements could still appear in the state budget and are under consideration at the federal level.

> Premiums and Cost-Sharing – Included in Governor & House Budget Proposals

The proposed premiums and cost-sharing measures for some families and individuals covered by Medicaid Expansion and CHIP would shift more costs to families and enrollees, imposing additional financial burdens and barriers to care. For a family of three making \$68,000 per year, the monthly premium could be over \$280 each month, with \$4 co-pays per prescription.

> Medicaid Reimbursement Rate Cuts – Included in House Budget Proposal

A 3% cut to Medicaid reimbursement rates would limit health care providers' ability to serve patients in all areas including primary care, preventive services, behavioral health, and emergency care. This would further strain our health care system, reduce access to care for all NH residents, and potentially force some providers to limit Medicaid services or close their doors entirely.

Any cuts or changes to Medicaid policy will affect everyone in New Hampshire. Consequences include health care facility closures, increased uninsured rates, job losses, and reduced economic activity.

Learn more about the economic impact at NHNeedsMedicaid.com/Why-Medicaid-Matters.



Summarizing what Medicaid means for our family is not easy as it is not just something that is "nice to have," but absolutely critical for our physical, emotional and financial well-being. One of my twin sons was diagnosed in vitro with a congenital heart defect, which has led to many other medical and developmental challenges in his life. I don't think people realize how much insurance does NOT cover until you need it.

Without having Medicaid, my son would be limited in the amount of speech/occupational/physical therapy he would be eligible to receive. The number of visits that private insurance allows would not even cover a quarter of the year for him. We are able to see all 14 specialists at Boston Children's without worry that we are sacrificing the best care. **We are able to have all the necessary testing, surgeries, and procedures to ensure his health is stable.** We are lucky ones that live a commutable distance to the best doctors in the world. We would without a doubt hit a very unaffordable out of pocket maximum and be limited in who we could see and what was covered.

In February, my company that I had been working at for over 10 years closed its doors. We are now reliant on my husband's insurance. His employer is a very small company with not a lot of buying power making the costs and coverage not affordable. We have applied for Medicaid for our other twin son as well now that we are a single-income household and the premiums for private insurance are so high. I have been looking for work but cannot find something that can accommodate my schedule to take care of my son.

If we lost his Medicaid coverage, we would absolutely be devastated financially or have to choose to sacrifice his health. The list could go on and on why Medicaid is critical for families like ours and so many more, but at the end of the day the story is the same that health care should be a right and affordable for all regardless of circumstance.





Shannon Kurze

Silver Lake, NH

Medicaid is important to my family as both of my sons have coverage. In June of 2023, my oldest son was showing signs of what we thought was a pulled muscle. We saw multiple doctors, trying to figure out why the pain was getting worse and why he had developed a foot drop and was tripping when he walked. We spent time in our local emergency room, the walk-in clinic in our area, with his primary care doctor and even in an emergency room two hours away from home trying to get answers. After being seen by a pediatric orthopedic doctor who sent us to the ER at Concord Hospital and having the head pediatric doctor agree that there was something more than a pulled muscle, we were transported by ambulance to Boston Children's Hospital. Within a few hours at Children's, they found a tumor on his lumbar spine. The very next day they removed the tumor and he started the long journey of recovery, including needing to use a catheter in order to go to the bathroom and re-learn how to walk. We spent 13 days in Boston Children's Hospital for recovery and not but a month later we found out the tumor was Ewing's Sarcoma Cancer. Two days later his port was placed and the very next day he started his first round of chemotherapy medications. We just celebrated his one-year post treatment scan with clear results.

If he didn't have Medicaid, he would have never received the care he did. We would have lost everything we have to pay for the medical bills for all the specialists and different doctors he had been seen by. Medicaid helped save my son's life, I believe this with all my heart. Please think of the effects the cuts will have on families just like mine and reconsider funding Medicaid.





In 2014, my son was diagnosed in utero at 22 weeks with significant medical findings that later would impact his life. He is a medically complex child with physical disabilities. In that moment of diagnosis, I not only was to become a mother, but also a full-time medical caregiver. My career as I knew it had to be put on hold as we navigated hundreds of doctor's appointments and medical interventions over the last 10 years. After 14 surgeries, countless tests and appointments, our son is thriving in his community supported by us as his full-time caregivers and his staff at school.

We rely on full disability Medicaid to cover the astronomical costs our primary insurance does not cover like feeding tubes, formula, a feeding pump, medical dressing supplies, diapers, equipment and more. Medicaid also covers the loss of income our family has suffered since I had to take on full-time caregiving responsibilities. As his mother, I am also paid during those times I act as his medical caregiver. This allows him to remain in his community supported, rather than cost the state taxpayers more money to place him in a home, where care and personal attention would be limited. My role has given our son the advantage to participate in his community and school with support, and have a full-filling life, like any child deserves.



Nashua, NH

As the legal guardian of my disabled daughter, I know firsthand that **Medicaid is the only way she can access the necessary medical and mental health care she needs to survive**. Medicare alone doesn't cover all costs, and purchasing a higher-benefit plan would take away the limited funds she relies on just to live and meet basic needs. Social Security isn't enough. At the end of the day, rent must be paid first—leaving very little room for anything else. Medicaid is vital for my daughter's survival.

> I have cared for my daughter since she became disabled at age 30 —she is now 48. The reporting requirements and documentation can be overwhelming, but I am willing to do whatever it takes to keep her covered. While I am at retirement age now, I still worry about what the fate of the Medicaid Program will look like. What happens when I am no longer able to care and advocate for her?

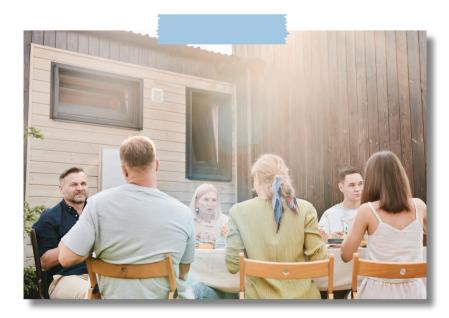


Tim Weeks Keene, NH

For 15 years, I struggled with serious mental health challenges and was completely disconnected from my family. I didn't see them in person, talk to them on the phone, or even communicate via texting and emails. That was due to mental health challenges I struggled with. It was a time when I was defined by my illness.

When I first came to Monadnock Family Services in 2011, like many others, I was put on the Adult Team. At that time there were no signs that my symptoms were getting better. This led the clinicians to hand me over to the Assertive Community Treatment (ACT) team, where I got the help I needed on a weekly and even daily basis. The team set me up with a psychiatrist, a case manager, a therapist, a peer specialist, and a supported employment worker. All of these providers, while working together, slowly saw improvement in my mental state. **I** was finding my own way during a dark time without any outside support. Because of Medicaid I was able to receive these services at no cost.

Today, because of the help I got through the services provided, I've reconnected with my family. Now they are my biggest support outside of the agency. I see my mom on a weekly basis and my siblings over the holidays and during the summer. In addition to reconnecting with them I feel like I have a place in the community. **Finally my life is opening up.** I have my own apartment, a vehicle, and a job. I go to the local YMCA. **Most importantly, I no longer feel defined by my illness. I feel accepted.**





The ability to access affordable and quality healthcare for myself and my children is the only reason I was able to rise from poverty and obtain a graduate degree so I could go on to help other as a clinical mental health counselor. Please understand that it takes people time to move from a place of financial vulnerability, and taking away their healthcare does nothing to help.

Cathie Schofield

New Durham, NH

My son has struggled with mental illness since he was very young, with his first suicide attempt being at the age of seven. After years of challenges including treatment refusal, arrest, and hospitalization, the case managers at the hospital helped him apply for Social Security Disability and Medicaid.

Upon his discharge, he was connected to the Acute Care Team (ACT) with the Community Mental Health Center and the Mental Health Court. This was life changing for my family! **My son was getting the treatment he needed, which was also followed by the court! I was able to be "just" his mother for the first time since we had begun this journey.**

The ACT Team ensured he attended appointments, followed his treatment plan, and maintained services like Medicaid. **They helped him to get a job and worked out transportation. They even helped him find an apartment and a roommate and helped him to pay his rent.** I had someone to talk to if I had concerns and we all worked as a team to support him and keep him safe. Because I wasn't having to harp on him to take medications, go to therapy, and get a job, we were able to build on our relationship, which had badly deteriorated by then.

He is now well managed with medication, no longer needs disability payments or Medicaid because he has a wonderful full-time job and is preparing to go to school. He is happily married, with two beautiful children. He and his wife own their own home. Our relationship is so much healthier and he will often call or text just to say hello or tell me he loves me.

> None of this would have been possible without these programs – not only did they give him time and support to manage his illness and become a productive citizen, but I believe **they saved his life, and I know they saved my family**.





Kristina Amyot

Rochester, NH

Medicaid made it possible for me to go to Hope on Haven Hill for treatment when I needed help the most. Every other treatment center I tried would only allow me 28 days—nowhere near enough time for real recovery for substance use disorder. Without thousands of dollars to continue treatment, I was denied extended care, left without aftercare, and eventually found myself incarcerated.

But Medicaid changed that. It allowed me to stay at Hope on Haven Hill for six months—time I desperately needed to focus on recovery and the health of my child. I gave birth to my daughter, graduated from Hope, and moved into their sober living facility, where I lived for two years. Medicaid ensured that I had access to therapy and critical medical care without worrying about treatment expenses. It gave me a foundation to rebuild my life.

Later, I secured employment and private insurance—but when I was laid off, I returned to Medicaid. It helped me again, allowing me to stay afloat until I found a new job at SOS Recovery Community.

Medicaid allows families like mine to survive, to recover, and to contribute to our communities. Losing it isn't just an inconvenience; it can mean the difference between stability and crisis. We need to protect and expand Medicaid, not limit it.

Claudia Dery

Peterborough, NH

For more than 30 years, my husband has lived with relapsing-remitting multiple sclerosis. Until five years ago, I didn't know much about Medicaid. That changed when my husband suffered several significant MS exacerbations that led to hospital and rehab stays. **Doctors told us he could no longer be home alone — difficult news to hear as I was still years away from retirement and working full-time as a teacher.**

Thanks to Medicaid, my husband was approved for the **Choices for Independence program, which allows him to attend the Monadnock Adult Day Program three days a week and receive in-home care through Ascentria In-Home Care on the other two days**. Medicaid also enables me to provide caregiving for my husband while receiving financial support and health insurance — making it possible for me to retire at 62. None of this would be possible without Medicaid.



Medicaid expansion was a lifeline for me, granting access to the health insurance I so desperately needed. It allowed me to enter a year-long treatment program, which was crucial for my reintegration into the community and ultimately returning to work. **After achieving my first year of sobriety, I was able to secure stable housing for myself and my two children. Without Medicaid, I would have struggled to save for an apartment, jeopardizing our well-being and stability.** Even while working at Burger King, Medicaid was there to support me, and I began to envision a brighter future. Eager for a career change, I applied for a position with AmeriCorps—an opportunity that opened the door for me to work at Navigating Recovery. For over two years now, I've been off Medicaid, and my children no longer require it either. Medicaid was a critical support system during a challenging time in our lives. It provided us with the foundation needed to rebuild and thrive. I am profoundly grateful for this program, as I often reflect on where we would be without it. Please consider the impact Medicaid has on families like mine; it can truly change lives.

Matt Fortier

Claremont, NH

As a foster parent, I've witnessed firsthand how critical Medicaid is for the health and well-being of the most vulnerable among us—babies, infants, and toddlers in foster care. **These children often come from situations of neglect, trauma, or other crises, and Medicaid ensures they have access to the medical care, therapy, and basic necessities they urgently need to recover and thrive.** For foster parents like me and countless others, we open our homes and hearts to care for these children, not for financial gain but because we believe every child deserves a chance.

Without Medicaid, we simply couldn't afford to provide the level of care these kids deserve. **Cuts to Medicaid would mean foster babies might go without essential health services, formula, or even basic check-ups.** It would mean that foster families—people who are just trying to do good—would be left struggling to meet the needs of these children.

I can't imagine telling a foster parent they can't afford the formula or medical attention a baby in their care needs. I can't imagine telling a foster child that the care they depend on is no longer there. Medicaid isn't just a program; it's a promise to care for those who are most in need. **Cuts to Medicaid would break that promise and leave foster families and children in an impossible situation.**



Elizabeth Young

Concord, NH

My daughter's journey with complex regional pain syndrome (CRPS) and Ehlers-Danlos syndrome, among other conditions, began **unexpectedly at age 11**. These conditions have left her in constant pain and requiring extensive medical care, including weekly infusions and regular doctor visits. **Without Medicaid's coverage, I would not be able to afford her medications, wheelchair, or the personal care assistance she needs to maintain a basic quality of life.**

Working as her caregiver is not just a job; it's a necessity that allows me to be present for her daily needs, appointments, and treatments. Without this flexibility, I would be forced to work additional jobs outside the home, leaving my daughter without the care she requires to function independently at home.

Medicaid's support through the CFI waiver has been transformative. It has provided us with stability, ensuring my daughter receives the care she needs while allowing me to maintain a modest living. **Despite the financial challenges and the lack of accessible housing options, we have managed to create a safe and nurturing environment thanks to this crucial program.**

Cutting Medicaid funding would devastate families like mine. The consequences would be dire, potentially leading to increased hospitalizations or even a nursing home placement, which is not suitable for a young adult striving for independence and pursuing higher education.

Keith Plunske

Concord, NH

As a Case Manager under the CFI Waiver program, I help provide services to between 40-45 clients so that they can stay in their homes and be as independent as possible. For example, a woman who needs help with transferring and showering applies for CFI, and when she is accepted, she is referred to a CFI case management agency. Within two weeks, the woman meets with a case manager, and services can be sought. With some luck, the case manager can find staffing for the woman. Now your daughter, sister, mother, or grandmother can stay in her home and remain as independent as possible. This has the added benefit of keeping her out of a nursing home, where she would almost certainly be unhappy.

In the course of helping this one woman, three people are directly supported with a livable wage, as well as eight other individuals indirectly. In addition, the state saves tens of thousands of dollars by ensuring that this woman is not sent to a nursing home.

PROTECT NH MEDICAID IS SUPPORTED BY

AARP New Hampshire ABLE NH Addiction Recovery Coalition of NH American Academy of Pediatrics – NH Chapter American Cancer Society Cancer Action Network -NH Chapter American Heart Association American Lung Association in New Hampshire Ammonoosuc Community Health Services, Inc. Amoskeag Health Archways Ascentria Care Alliance **Bi-State Primary Care Association** Breathe New Hampshire Catholic Charities New Hampshire **Coos County Family Health Services** Crotched Mountain Community Care Dartmouth Health **Disability Rights Center - NH** Engage NH Equality Health Center Families in Transition GateHouse Treatment Granite State Home Health & Hospice Association Granite State Independent Living Hope for NH Recovery Keene Serenity Center Kent Street Coalition Lakes Region Community Services LeadingAge Maine & New Hampshire Monadnock Worksource, Inc. MWV Supports Recovery NAMI New Hampshire National Association of Social Workers - NH Chapter

Navigating Recovery of the Lakes Region New Futures NH Charitable Foundation NH Academy of Family Physicians NH Alcohol & Drug Abuse Counselors Association NH Commission on Aging NH Community Behavioral Health Association NH Health Care Association NH Hospital Association **NH Hunger Solutions** NH Legal Assistance NH Medical Society NH Nurse Practitioner Association NH Nurses Association NH Oral Health Coalition NH Psychiatric Society NH Psychological Association NH Public Health Association North Country Health Consortium Northeast Delta Dental Planned Parenthood of Northern New England **Revive Recovery Resource Center** RS Consulting, LLC Safe Harbor Recovery Center Seacoast Mental Health Center, Inc. SOS Recovery Community Organization Southern NH Area Health Education Center Strategies for Disability Equity **TLC Recovery Programs** Waypoint White Horse Recovery Centers



NH Medicaid Matters has collected more than 40 stories from around the Granite State. More stories are available upon request.

NH Medicaid Matters is a group of organizations committed to protecting New Hampshire's Medicaid programs, a critical source of health insurance for over 187,000 of our residents.