



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

New Hampshire Medicaid Program

To: NH Medicaid Enrolled Critical Access Hospitals
From: NH Division of Medicaid Services Fee-for-Service Program
Date: January 9, 2026
Subject: Enhanced Reimbursement for Labor and Delivery DRGs under Peer Group 08

The Department of Health and Human Services is expanding the enhanced rate of reimbursement for maternity care to include all Medicaid enrolled critical access hospitals (CAH) in New Hampshire. The enhanced rate will be effective 1/1/2026. This initiative aims to support and sustain access to high-quality labor and delivery services in rural communities. The price per point will be consistent with the Coos County CAH Maternity rate as identified in the [NH State Plan Attachment 4.19-A](#). This enhanced rate will apply to the following Diagnosis-Related Groups (DRG)s:

- 768-770
- 776
- 779
- 783-798
- 805-807
- 817-819
- 831-833

To facilitate this enhanced payment, eligible CAHs must be enrolled under a second provider identification number associated with Peer Group (PG) Code 08. This group classification allows for higher reimbursement rates specific to maternity-related DRGs.

If there are questions on how one of the NH Medicaid Managed Care Organizations (MCO) handles the above information, please reach out to your MCO provider representative.

If there are any questions on this notice, please contact the Provider Relations Unit at (603) 223-4774 or (866) 291-1674.

Thank you,

NH Medicaid Provider Relations