

2019 Legislative Session Wrap Up

The New Hampshire Medical Society (NHMS) has tracked and been active on 153 individual pieces of legislation during the 2019 legislative session of the [New Hampshire General Court](#). The Medical Society helped impact legislation during public hearings with over 260 physicians giving testimony, but also focused on developing relationships and connections between lawmakers and physicians, and other stakeholders to share their perspective on key issues.

The following is a number of priority bills reported by issue area that the Medical Society worked on this year. A comprehensive table of bills tracked and acted upon can be found at [NHMS 2019 Legislative Session Bill Table \(by Priority\)](#). If you have any questions or are interested in becoming more involved with our advocacy work, please contact Mike Padmore, Director of Advocacy, at (603) 858-4744 or Michael.Padmore@nhms.org.

Legislative Priority Levels

Our Legislative Committee, in consultation with the Council, reviews all related legislation before NH General Court and prioritizes NHMS activity of these bills in the following manner:

- 1 – Lead: NHMS to help lead advocacy on these bills;
- 2 – Collaborative: NHMS to work with coalition partners on these bills; and
- 3 – Monitor: NHMS to monitor these bills throughout the session, engaging with lawmakers and other stakeholders when necessary.

Access to Care

[House Bill 508 – Direct Primary Care](#)

NHMS Position: Support Result: Signed by Governor Priority: 1

This bill was introduced in order to set up regulations for and study the practice of Direct Primary Care in New Hampshire. NHMS worked with the New Hampshire Department of Insurance, New Hampshire Board of Medicine, and direct primary care advocates to outline the need for regulation and answer questions for lawmakers.

[House Bill 528 – Insurance Reimbursement for Emergency Medical Services](#)

NHMS Position: Support Result: Signed by Governor Priority: 1

This bill builds on the prudent layperson standard to limit retrospective denials of emergency room services by insurance carriers, requiring that any such retrospective review include consideration of presenting symptoms.

[Senate Bill 58 – 3D Mammography](#)

NHMS Position: Support Result: Signed by Governor Priority: 1

The need for this bill was arose when an individual insurance carrier in New Hampshire was not abiding by a law established by previous legislation, to reimburse for 3D mammography as the standard of care over 2D mammography. This bill aimed to give the Department of Insurance a mechanism to reprimand bad actors. NHMS worked with the New Hampshire Hospital Association, the New Hampshire Department of Insurance, a number of insurance carriers, and a few key NHMS members to make this bill a reality.

Senate Bill 290 – Granite Advantage Work Requirement Benchmarks

NHMS Position: Support Result: Signed by Governor Priority: 3

The state of Arkansas faced a number of challenges implementing and enforcing their Medicaid Expansion “work requirement”, due to thousands of cases of beneficiaries being disenrolled from their health care coverage due to challenges submitting required waivers. In many cases, the challenges were out of the beneficiaries’ control, such as poor internet service. The bill aimed to set up benchmarks for New Hampshire’s Medicaid Expansion program that would eliminate the work requirement if more than 500 beneficiaries were to lose coverage. NHMS supported this bill because we oppose work requirements and any similar barriers to individuals receiving health care insurance.

Public Health**House Bill 237 – NH Rare Disease Council**

NHMS Position: Support Result: Signed by Governor Priority: 2

This bill was introduced by the New Hampshire Rare Disorders Association to create a Rare Disease Advisory Council to study rare diseases and how to best serve patients with them. NHMS worked with NHRDA and the NH Department of Health & Human Services to pass this bill and find physicians and other experts willing to serve on the council.

House Bill 200 & House Bill 490 – Tick-Borne Illnesses Bills

NHMS Position: Oppose Result: ITL Priority: 1

HB490 and HB200 were two bills that aimed to legislate how physicians treat tick-borne illnesses. NHMS worked with the Department of Health & Human Services to outline the dangers of these bills and recommend ITL to the House’s Health & Human Services Committee.

Reproductive Health**Senate Bill 279 – Fertility Treatment Insurance Coverage**

NHMS Position: Support Result: Signed by Governor Priority: 1

This bill aimed to require insurers issuing or renewing group health insurance policies to cover fertility treatment. This legislation marks the culmination of advocacy efforts since 1986.

House Bill 124 – Reproductive Health Facility Buffer Zone Repeal

NHMS Position: Oppose Result: ITL Priority: 2

This bill aimed to repeal an established law that created a buffer zone around reproductive health care facilities. NHMS worked with Planned Parenthood, the American College of Obstetrics and Gynecology, and a number of NHMS members to push back on this bill. It received a resounding ITL recommendation and died on the House floor.

Immunizations**Senate Bill 179 – Pharmacist Administration of Vaccines**

NHMS Position: Oppose Result: Rereferred Priority: 1

This bill was introduced by representatives of Merck Pharmaceuticals to expand the ability for pharmacists to administer vaccines to adults. NHMS intervened at an early stage to push back on this bill, outlining the challenges that physicians are already having in receiving patient vaccine information from pharmacists and without a working vaccine registry in the state.

Cannabis, Tobacco, & Vaping

House Bill 481 – Commercialization of Cannabis

NHMS Position: Oppose Result: Rereferred by Senate Judiciary Committee Priority: 2

This bill was introduced by the cannabis industry to allow for the commercial sale of cannabis products in New Hampshire. NHMS worked with a coalition of allies to oppose this legislation. NHMS had dozens of members testify during public hearings and many more contact their legislators over the phone. This bill would have allowed for the cannabis industry to have a dangerous amount of authority in setting up the commercial process in New Hampshire and didn't allow for enough public health input. The Senate Judiciary Committee agreed with this and decided that the bill needed to be reworked over the next year. NHMS will continue to be engaged on this bill as it heads into the 2020 legislative session.

House Bill 511 – Restricting Youth Access to Vaping Products

NHMS Position: Support Result: Signed by Governor Priority: 2

This bill was introduced because of the vaping epidemic that is sweeping across schools in New Hampshire. Prior to this bill, vaping products were relatively unregulated compared to tobacco products. This bill aims to reclassify vaping products under the same statute that regulates tobacco products to ensure that vendors cannot sell vaping products to minors.

Firearm Safety

There were four main pieces of legislation dealing with firearm safety this year. HB109, HB514, HB564 passed both the House and Senate along party lines and await the Governor's signature, while HB687 was retained in the House Criminal Justice Committee for further study.

House Bill 109 – Background Checks

NHMS Position: Support Result: Enrolled Priority: 2

Requires background checks for commercial firearms sales.

House Bill 514 – Waiting Periods for Firearm Purchases

NHMS Position: Support Result: Enrolled Priority: 2

Imposes a waiting period between purchase and delivery of a firearm.

House Bill 564 – Gun Free Schools

NHMS Position: Support Result: Enrolled Priority: 3

Prohibits carrying a firearm on public school property, including buildings, grounds, school buses, and vans

House Bill 687 – Extreme Risk Protection Orders

NHMS Position: Support Result: Retained by House Criminal Justice Committee Priority: 3

Establishes a procedure for issuing extreme risk protection orders to protect against persons who pose an immediate risk of harm to themselves or others

Human Resources

[House Bill 712 & Senate Bill 1 – Paid Family & Medical Leave](#)

NHMS Position: Support Result: Vetoed by Governor Priority: 2

House Bill 712 and Senate Bill 1 aimed to create a paid family & medical leave insurance program for New Hampshire. NHMS worked with a variety of advocacy organizations to outline the need for this program and the benefits it would offer families across the state. NHMS provided a valuable perspective for lawmakers on how this program would impact the communities our members serve. Senate Bill 1 was passed by the House and Senate but was vetoed by Governor Sununu. HB712 was retained and written into the House's budget proposal. However, it was taken out during budget negotiations between the House and Senate. Senate Bill 1 will have a veto override vote in September where the members of House and Senate will have an opportunity to pass the bill with 2/3 majority in both chambers. Unfortunately, we expect this will not be successful.

Legal Process

[Senate Bill 296 – Live Medical Testimony in Courts](#)

NHMS Position: Support Result: Signed by Governor Priority: 3

The New Hampshire Association for Justice approached NHMS early on in the legislative process to discuss this bill and reach an agreement. NHMS was concerned about the broad scope of the original text of the bill and worked with NHAJ to narrow the language. Once agreed, NHMS moved forward in support of the bill.

Mental Health

[Senate Bill 11 – Emergency Room Boarding](#)

NHMS Position: Support Result: Signed by Governor Priority:2

This bill aimed to allocate funds to help alleviate challenges concerning emergency room boarding for psychiatric patients by: 1) Authorizing the department of health and human services to use general surplus funds for designated receiving facilities and for voluntary inpatient psychiatric admissions; 2) Making an appropriation to NH-DHHS for the purpose of renovating certain existing facilities; 3) Provides for rulemaking for involuntary admission hearing requirements; and 4) Requires insurers to reimburse certain facilities for emergency room boarding.

[Senate Bill 177 – Patient Restraints](#)

NHMS Position: Support Result: Signed by Governor Priority:3

This bill aimed to clarify the process around when physical restraints may be used to transport a person being admitted to New Hampshire hospital or a designated receiving facility. The final legislation was a compromise with local and state police on granting greater options by medical transport and without customary restraints resulting from physician orders.

Workforce Development

Senate Bill 308 – Health Care Workforce

NHMS Position: Support Result: Written into budget proposal Priority: 2

This bill aimed to bolster the health care workforce in a few different ways. Advocates decided to write this language into the budget rather than try to pass an individual bill.

1. Increases the Medicaid provider rates.
2. Requires certain health care professionals to complete a survey or an opt-out form for collecting data on the primary care workforce.
3. Requires the department of health and human services to amend the income standard used for eligibility for the "in and out" medical assistance policy.
4. Permits the department of safety to contract with a private agency to process background check applications, and requires that background check applications are done online.
5. Amends the definitions and services covered through telemedicine.
6. Makes appropriations to the department of health and human services, rural health and primary care section to establish new positions and programs to develop and enhance the state's healthcare workforce.
7. Provides funding for scholarships to students majoring in a health care field and to postsecondary educational institutions to develop and enhance these programs.

State Budget (Ongoing Negotiations)

This June, Governor Sununu vetoed the House and Senate's joint budget proposal. A continuing resolution has been passed, signed, and put into effect to maintain the previous budget's funding levels. Over the course of the two months, there will be ongoing negotiations between the House, Senate, and Governor's office to reach a solution. There are a number of health care programs written into the budget that are at risk of losing funding if not included in the final budget.

Medicaid Rates

Supports our communities, health care workforce, and health care capacity by increasing rates across the board by 3.1% each year. The investment of over \$50 million in state funds will leverage an additional \$50 million federal match.

Women's Health Care

Fully funds family planning services provided by Planned Parenthood and our community health centers, including birth control, STD testing, and cancer screenings, in response to the threat from the Trump administration under Title X rule changes. Repeals the state-level Hyde amendment.

Opioid Use Disorders & Mental Health

Protects Medicaid expansion by ensuring the Medicaid expansion trust fund is solvent, protecting access to health care for thousands who need it in these crises. Creates a new 25-bed Secure Psychiatric Unit. Incorporates many of the provisions of Senate Bill 11 to address the ER boarding crisis. Moves the children out of New Hampshire Hospital to a better setting with several safeguards, renovates the remaining space to add capacity to help solve the ER boarding crisis. Incorporates Senate Bill 14, creating a statewide children's mobile crisis and intervention unit. Supports Senate Bill 313 from 2018 (Medicaid expansion reauthorization) to support behavioral health rates, needed to ensure provider capacity to combat the opioid and mental health crises.