

2020 NH Legislative Session Wrap Up

The COVID-19 pandemic caused the New Hampshire Legislature to reconfigure how they operated in order to continue their business during the 2020 Legislative Session. In a bizarre twist, New Hampshire House of Representatives [failed to extend the legislative deadlines past June 30th](#). Without an extension, any 2020 Senate Bill would die once it crossed over to the House. A solution was found by packaging multiple bills into larger omnibus bills that would only need a concur or non-concur vote from the House of Representatives and could be accomplished within the June 30th timeframe. The following is a breakdown of a few pieces of key legislation that has passed both chambers and awaits the Governor's signature.

Please let us know if you have any questions. If you are interested in getting involved with our advocacy work, don't hesitate to call or email NHMS Director of Advocacy, Mike Padmore, at (603) 858-4744 or Michael.Padmore@nhms.org.

NHMS Legislative Priority Levels

- 1 – Lead: Help lead advocacy on these bills.
- 2 – Collaborative: Work with coalition partners on these bills.
- 3 – Monitor: Monitor these bills, engaging with lawmakers and partners when necessary.

[HB 1639](#) - Omnibus legislation relative to health care

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

NHMS worked with a group of stakeholders ranging from NH Hospital Association, Dartmouth Hitchcock Medical Center, the NH Psychiatric Society, the NH Society of Physician Assistants, and others to push forward this bill and ensure that it encompassed a variety of health care policies, including reform to prior authorization, chronic pain treatment, physician assistant licensure, and mental health parity. We expect this bill to be signed by the Governor.

- 1. SB 531 – Clarifies the prior authorization procedures under group health insurance policies
- 2. SB 546 - Defines chronic pain for the purposes of the controlled drug prescriptions
- 3. SB 598 - Adds physician assistants to the law governing advance directives
- 4. SB 597 - Clarifies the licensure of physician assistants and provides for biennial renewal of and provides for biennial renewal of physician assistant licenses
- 5. SB 620 - Ensures coverage for certain biologically based mental illnesses

[HB 1623](#) - Relative to telemedicine

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

In the wake of the COVID-19 pandemic, NHMS heard loud and clear the need to have telemedicine visits reimbursed at the same level as in-person visits. This bill aims to do that, along with carrying over many of the facets outlined in the Governor's Emergency Order #8, including expanded site of service and increased reimbursed for audio only visits. It is anticipated that the technical component of telemedicine codes will be of substantial debate post pandemic on what is defined in the legislation as "reasonable compensation" that will likely require national recommendations through the [AMA/Specialty Society RVS Update Committee \(RUC\)](#) process to adjudicate. We expect this bill to be signed by the Governor.

1. Ensures reimbursement parity, expand site of service, and enable all providers to deliver services through telehealth for Medicaid and commercial health coverage
2. Including audio-only visits
3. Enables access to medication assisted treatment (MAT) in specific settings by means of telehealth services
4. Amends the Physicians and Surgeons Practice Act to expand the definition of telemedicine
5. Amends the Nurse Practice Act to expand the definition of telemedicine.
6. Enables the use of telehealth services to deliver Medicaid reimbursed services to schools

HB 1280 - Omnibus legislation relative to pharmaceutical reform

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

NHMS worked with a larger coalition made up of New Futures, AARP, NH Public Health Association, among others to pass a series of pharmaceutical reforms that would create a drug importation program from Canada, address cost transparency issues, and ensure coverage for vital medications such as insulin and epinephrine. We expect this bill to be signed by the Governor.

1. HB 1280 - Requires insurers to cap the total amount paid for prescription insulin for covered persons and provides that prescription insulin drugs not be subject to any deductible
2. SB 687 - Establishes a prescription drug affordability board to determine annual public payor spending targets for prescription drugs, develop and implement policies and procedures for the collection of prescription drug price data, implement a register of drug manufacturers for drug pricing data, and establish funding for the board by reasonable user fees and assessments
3. SB 685 - Establishes a wholesale importation program for prescription drugs from Canada by or on behalf of the state and establishes the New Hampshire prescription drug competitive marketplace
4. SB 688 - Clarifies the pricing of generic prescription drugs under the law governing consumer protection
5. SB 690 - Regulates prescription drug formulary changes during a contract year under the managed care law
6. HB 1281 – Requires insurance coverage for epinephrine auto-injectors

HB 1520 - Establishing the New Hampshire health professionals' program (PHP) administration fund

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

In early June, NHMS advocated against a PHP contract to an out-of-state vendor (driven by budget constraints in the state budget) that the NH Executive Council voted 0-5 not to support. Subsequently, the Medical Society helped draft an amendment introduced by Senator/Dr. Tom Sherman to create a PHP dedicated, non-lapsing fund to be supported through annual fees from the 13 participating board licensee which should create more equitable annual fees among the participating board licensees (likely about \$10, versus the current \$25 fee charged to physicians) that would not be subject to cyclical state budget fluctuations. Additional health and trade professions board licensees may be added in subsequent years. We expect this bill to be signed by the Governor.

Please note: It is anticipated that the NH Executive Council will review an expanded contract to the [NH Health Professionals Program](#) for 7 new health professions board licensees, in addition to the current 5 boards including the Board of Medicine, in mid-July with a renewal option for 5 years.

[HB 1266](#) - Makes temporary changes to the absentee voter registration, absentee ballot application, and absentee voting processes in response to the COVID-19 disease

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

This bill aims to make voting in New Hampshire's September primary election and November general election safer for voters by making the absentee process easier to access and submit. We expect this bill to be signed by the Governor.

[HB 687](#) - Relative to Extreme Risk Protection Orders

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

HB 687 establishes a procedure for issuing extreme risk protection orders to protect against persons who pose an immediate risk of harm to themselves or others. After being tabled last year so it could be studied further, HB687 was passed by both chambers and will go to the Governor's desk for his signature. We expect this bill to be vetoed by the Governor.

[HB 712](#) - Establishes a system of paid family and medical leave insurance

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

HB 712 aims 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. We expect this bill to be vetoed by the Governor.

[SB 179](#) – Pharmacist Administration of Vaccines

NHMS Position: Oppose Result: [Inexpedient to Legislate](#) Priority: 1

This bill was promoted by 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. NHMS urged them to reconsider this bill and instead focus on establishing a working vaccine registry for New Hampshire. Merck agreed and recommended that the Senate's Health and Human Services Committee.