



Legislative Newsletter

Keeping members informed on federal & state legislative priorities.

August 26, 2024

Dear Members,

The 2024 legislative session ended on June 13, with numerous bills signed into law by the governor this summer. The New Hampshire Hospital Association (NHHA) tracked hundreds of bills and provided public testimony in dozens of House and Senate hearings. Outlined below is a list of law changes that affect hospitals as a result of the 2024 legislative session.

Among the comprehensive list of law changes below are statutes addressing policies affecting access to care and medical records, newborn screening, medical liability, prior authorization, scope of practice and professional licensure, public health, and workforce. For more information on all our tracked bills please visit <https://www.nhha.org/resources-reports/nh-legislation/>. Additionally, NHHA staff is available for any of your questions and would welcome an opportunity to share additional insight.

As a reminder, NHHA has two remaining outreach sessions intended to seek input from our members to inform our 2025 Advocacy Agenda. St Joseph Hospital will host the next outreach session on September 5 from 11:00 a.m. – 1:00 p.m. and Wentworth-Douglass Hospital will host the final outreach session on September 12 from 10:00 am. – 12 p.m. with a virtual option. Please reach out to Ben Bradley or Katie Lesnyk to register. It is your active involvement that enables us to be successful with our advocacy. Thank you for your continued support and engagement.

2024 New Hampshire Legislation

**New State Laws Affecting Hospitals
(as of August 26, 2024)**



ENERGY/ENVIRONMENT

HB 1649, relative to prohibiting certain products with intentionally added PFAS and relative to civil actions for PFAS contamination, and relative to settlement of lawsuits against manufacturers of PFAS for impacts to public drinking water systems

Chapter 349 of the Laws of 2024

HB 1649 amends **RSA 149-M** and **RSA 485-H** to prohibit the sale of certain products with intentionally-added PFAS chemicals. The product ban, which goes into effect on January 1, 2027, includes carpets and rugs, cosmetics, textile treatments, feminine hygiene products, food packaging and containers, juvenile products, upholstered furniture, and textile furnishings. There is an exemption for products regulated as drugs or medical devices by the United States Food and Drug Administration under the Federal Food, Drug, and Cosmetic Act.

Effective Dates:

Sections 4-9: October 1, 2024

Section 14 effective as provided in section 15

Remainder effective August 2, 2024

HEALTH CARE ACCESS

HB 619, to require a person to attain the age of majority for genital gender reassignment surgery

Chapter 213 of the Laws of 2024

HB 619 establishes **RSA 332-M**, prohibiting physicians from performing gender-affirming surgery on individuals under the age of 18. It also prohibits providers from referring patients under the age of 18 for gender-affirming surgery.

Effective Date: January 1, 2025

HB 1300, relative to terminal patients' right to try act

Chapter 124 of the Laws of 2024

HB 1300 amends **RSA 126-Z** and clarifies the eligibility criteria and definitions for patients who have already tried or are not a candidate for eligible U.S. Food and Drug Administration approved treatment options for their disease or condition.

Effective Date: January 1, 2025

SB 355, relative to newborn screening for cytomegalovirus

Chapter 282 of the Laws of 2024

SB 355 directs the commissioner of the Department of Health and Human Services (DHHS) to amend current rule He-P 3008.15 to require that individuals performing newborn hearing screenings include the result of a cytomegalovirus (CMV) test for any infant who does not pass the hearing test. The law allows parents to opt out of the CMV test. The law also requires that DHHS provides a report to the Health and Human Services Oversight Committee about the importance of early CMV detection.

Effective Date: January 1, 2025

HEALTH CARE INFORMATION/PRIVACY

HB 1245, relative to release of confidential records of a person appointed a guardian and relative to patient access to medical records

Chapter 265 of the Laws of 2024

HB 1245 amends [RSA 464-A:9](#), [RSA 464-A:39](#), and [RSA 464-A:40](#) to allow an appointed guardian to access and consent to the release of a person's medical records unless the terms of the appointment provide otherwise.

Additionally, HB 1245 includes the language of SB 400, which repeals and reenacts [RSA 332-I](#) to establish a new fee structure for medical records requests. The new law redefines "requestor" to include a patient's attorney, entitling them to same charges for requests at the patient rate.

Effective Dates:

Sections 1-4 (records of a person appointed guardian): January 1, 2025

Remainder (fees for medical record requests) effective July 26, 2024

SB 573-FN, establishing a committee to study consent and confidentiality laws applicable to adolescent and young adult health care in New Hampshire

Chapter 90 of the Laws of 2024

SB 573 establishes the Committee to Study Consent and Confidentiality Laws Applicable to Adolescent and Young Adult Health Care in New Hampshire. The 5-legislator committee is directed to review current health care consent laws and confidentiality laws and solicit testimony from any person or organization with relevant information or expertise. The first meeting was held on August 22, 2024, and NHHA will be following the committee's work.

Effective Date: June 14, 2024

HEALTH INSURANCE/OTHER INSURANCE

HB 1081, relative to insurance payments to ambulance providers

Chapter 104 of the Laws of 2024

HB 1081 amends [RSA 415:6-q](#) and [RSA 415:18-v](#) to require that insurers reimburse ambulance service providers directly, rather than with a check sent to the insured individual. This streamlines the process for the individual and ensures that the ambulance service provider is reimbursed in a timely manner.

Effective Date: September 1, 2024

HB 1155, relative to insurance coverage for living organ donors

Chapter 64 of the Laws of 2024

HB 1155 amends [RSA 417:4](#) by inserting paragraph VIII-a after paragraph VIII to prohibit disparate treatment of a life insurance, long-term care insurance, or disability insurance policy holder based on their status as a living organ donor.

Effective Date: July 1, 2024

SB 173-FN, relative to surprise medical bills

Chapter 143 of the Laws of 2024

SB 173 inserts [RSA 358-T](#), “Prohibition on Balance Billing Covered Persons for Health Care Services” after RSA 358-S. This bill was a request of the Department of Insurance to include in state law the federal No Surprises Act (NSA). The bill incorporates in state law the same prohibitions as are included in the NSA regarding balance billing by out-of-network providers for covered services provided at an in-network facility and for covered emergency services. If open negotiations fail between the parties, the health care provider or facility has the option to utilize either a state or federal independent dispute resolution process.

Effective January 1, 2025

SB 177-FN, relative to health insurance coverage of prosthetics for children under 19 years of age

Chapter 144 of the Laws of 2024

SB 177-FN inserts [RSA 415:18-ff](#) after RSA 415:18-ee to require group insurance policies, health services corporations, and health maintenance organizations to provide insurance coverage for prosthetic devices, including activity-specific devices, for children under 19 years of age.

Effective Date: January 1, 2025

SB 557, relative to prohibiting discriminatory actions related to participation in the federal 340B Drug Pricing Program

Chapter 171 of the Laws of 2024

SB 557 establishes [RSA 415:15-a](#), “Discrimination Based on Participation in the Federal 340B Drug Pricing Program,” which prohibits a health insurer, pharmacy benefit manager, or other third-party payor from discriminating against an entity that participates in the federal 340B Drug Pricing Program.

Effective Date: September 1, 2024

SB 561-FN, relative to prior authorizations for health care

Chapter 172 of the Laws of 2024

SB 561 amends [RSA 420-J](#), “Managed Care Law,” to enact three reforms to prior authorization. First, the new law implements prior authorization determination timelines that require electronically submitted non-urgent prior authorization requests be approved or denied within 7 calendar days, and urgent prior authorization requests be approved or denied within 72 hours. If a determination is not made within these timelines, the prior authorization is considered approved. Second, the new law requires public metric reporting on prior authorization determinations. Each of these provisions in the law align with a newly finalized rule from the Centers for Medicare and Medicaid Services (CMS) on prior authorization. Finally, the new law codifies a peer-to-peer process that requires a health insurance carrier to provide access to an appropriate clinical resource for the provider to contact to advocate for their patient’s necessary care.

Effective Date: January 1, 2025

LICENSING/CERTIFICATION

HB 1188-FN, relative to qualifications for licensed nursing assistants

Chapter 120 of the Laws of 2024

HB 1188-FN amends **RSA 326-B:16** to allow the Board of Nursing to establish rules on the level of English proficiency required to be licensed as a licensed nursing assistant. The bill is intended to relax the English proficiency requirements.

Effective Date: September 1, 2024

MEDICAL LIABILITY

SB 462, relative to raising the cap on damages for wrongful death loss of consortium claims

Chapter 160 of the Laws of 2024

SB 462 increases the cap on damages for wrongful death loss of consortium claims in **RSA 556:12** from \$150,000 for a surviving spouse to \$500,000, and from \$50,000 for a minor child to \$300,000.

Effective Date: January 1, 2025

PUBLIC HEALTH/HEALTH PROMOTION

SB 559-FN, relative to the New Hampshire vaccine association

Chapter 307 of the Laws of 2024

SB 559 amends **RSA 126-Q:1, III-X** and **RSA 126-Q:4, II(c)** to include the respiratory syncytial virus (RSV) biological product (monoclonal antibody) to the New Hampshire Vaccine Association, with the intent of making it easier to obtain for children. The new law allows the NH Vaccine Association to bulk purchase the RSV treatment at a lower cost using funding from health insurance carrier assessments, like the existing mechanism for purchasing other preventative vaccines.

Effective Date: July 26, 2024

WORKFORCE / LICENSING & CERTIFICATIONS

SB 402, relative to allowing pharmacists to administer influenza, COVID-19, and other FDA licensed vaccines without explicit approval from the general court

Chapter 354 of the Laws of 2024

SB 402 amends **RSA 318:16-b** to allow pharmacists, pharmacy interns, or licensed advanced pharmacy technicians under the supervision of an on-site immunizing pharmacist to administer influenza and COVID-19 vaccines available to the public. The provider must hold a current license or registration to practice in New Hampshire, possess at least \$1,000,000 of professional liability insurance coverage, have completed approved training specific to the administration of the influenza and COVID-19 vaccines, have a current certificate in basic cardiopulmonary resuscitation, provide to the board evidence of compliance, provide notice to the

primary care provider of the patient, record the vaccination in the state vaccine registry, submit reports of any adverse reactions to the CDC Vaccine Adverse Event Reporting System (VAERS), and review the vaccine registry or other vaccination records before administering the vaccine.

Effective Date: October 1, 2024

SB 403-FN, relative to the health care workforce

Chapter 289 of the Laws of 2024

SB 403 establishes **RSA 326-N**, “Community Health Workers.” This chapter creates a voluntary process for certifying community health workers (CHWs). It also requires the commissioner of DHHS to submit a Medicaid state plan amendment to allow for reimbursement for services provided by CHWs. Under this new law, access to CHW services within the health care system should expand and bridge gaps in care for patients who need that level of support.

The law also makes clarifications to **RSA 326-B:27**, “Nurse Practice Act,” and extends deadlines for the Commission on the Interdisciplinary Primary Care Workforce.

Effective Dates:

Section 6: January 1, 2025

Remainder effective upon passage

HB 1079, relative to critical incident stress management team members and establishing a rural and underserved area educator incentive program and making an appropriation therefor

Chapter 326 of the Laws of 2024

HB 1079 amends **RSA 153-A:17-a** to add “hospital emergency department personnel” to the list of qualifying professionals that may utilize critical incident stress management (CISM) and crisis intervention services and be protected from civil negligence when information is exchanged with the services within the law.

Effective Date: October 1, 2024

HB 1222, relative to physician assistant scope of practice and establishing a committee to research physician assistant scope of practice

Chapter 264 of the Laws of 2024

This law starts by amending the definitions of “collaboration,” “participating physician,” and “physician assistant” in **RSA 328-D:1**. Next, it clarifies physician assistant scope of practice in **RSA 328-D:3-b**, requiring that physician assistants with fewer than 8,000 post-graduate clinical practice hours practicing without at least one New Hampshire licensed physician in the group, practice, or health system must enter into a written collaboration agreement with a New Hampshire licensed physician. For those with more than 8,000 post-graduate clinical practice hours who intend to practice medicine in a setting without at least one New Hampshire licensed physician, they may apply to the Board of Medicine for a waiver of the collaboration agreement requirement. Lastly, it establishes the Committee to Research Physician Assistant Scope of Practice. The committee has not yet scheduled its first meeting, and NHA does not have a seat. However, we will be following the proceedings of the committee.

Effective Dates:

Section 6: January 1, 2027

Remainder effective July 26, 2024

HB 1585, relative to the position of certified assisted living medication aide and relative to the state loan repayment program for qualified nursing professionals, and making an appropriation therefor

Chapter 344 of the Laws of 2024

HB 1585 makes an appropriation of \$300,000 to DHHS for the state loan repayment program (SLRP), specifically for qualified nursing professionals, and directs DHHS to provide a report to the legislature with a budget proposal for a student loan forgiveness program that would cover nurses that are not traditionally covered by the current program.

Additionally, HB 1585 amends **RSA 326-B**, “Nurse Practice Act,” to define a certified assisted living medication aide (CALMA) and regulate the position.

Effective Dates:

Sections 1-6: October 1, 2024

Remainder effective August 2, 2024

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