Dear Members,

The Governor's SFY 20/21 State Budget proposal -- HB 1 (operating budget and capital budget spreadsheets) and HB 2 (trailer bill with detailed policy proposals) -- included some proposals that we are supportive of, such as funding for building Designated Receiving Facility (DRF) bed capacity and establishing a separate behavioral health children's unit, but other omissions that are of great concern to us, including lack of sustainable rate increases for DRF beds.

The House Finance Committee's work on the next biennium State Budget (2020/2021) was completed last week with a partisan vote of 13-9 to pass their budget with amendments. The full House is expected to vote on the budget on April 11th. The House Finance Committee has made significant modifications to the Governor's proposed budget, including removing the Governor's proposal to fund the construction of a new forensic hospital and adding a capital gains tax to help fund more school aid. The House Finance Committee did make some positive changes, albeit minor, that we supported, including addressing the dedicated fund for the proceeds for the Governor's Commission on Alcohol and Other Drugs, as well as removing the repeal of the Graduate, Indirect Graduate Medical Education and Catastrophic Aid to Hospitals provisions. While no money was appropriated to these last three provisions, they remain as provisions in the DHHS budget, which allows for potential funding in the future. Once the budget is voted on by the full House, the process starts all over in the Senate Finance and Senate Ways and Means Committees. The biggest concern with the budget as it stands, is the lack of sustainable rate increases for DRF beds and increased capacity at New Hampshire Hospital to relieve the ongoing ED boarding crisis.

While NHHA has been following many bills of interest to our members, a priority focus area continues to be ensuring that the settlement agreement signed in 2018 regarding the Medicaid Disproportionate Share Hospital (DSH) payments due to hospitals is properly funded, which, to date, has been appropriately maintained in the budget. Our other major priority has been to ensure that the behavioral health crisis continues to be addressed by implementation of meaningful reforms to include increased inpatient capacity at New Hampshire Hospital, adequate reimbursement for designated receiving facilities (DRFs), funds to renovate DRFs and reimbursement for emergency room boarding and various reimbursement statutes are modified, among many other provisions, to ensure that hospitals are able to provide the patient care and access to services that are most needed.

Legislators have been working on funding various components of the 10-year Mental Health Plan by passing individual bills that address various recommendations in the plan but also incorporating other recommendations into the budget. The Senate has several bills that they have retained to attempt to incorporate more of these fiscal needs into their version of the budget once they begin their work, which will begin in earnest in the next couple of weeks.

All of the bills that NHHA is following can be found on our web site [here](#) and includes links to bill language, the prime sponsor, hearing dates/times and the status of the bill.
RECENT LEGISLATIVE ACTIVITY

Listed below are bills of particular importance to hospitals and health systems this year. NHHA is following many more bills, which will be included in future updates of the NHHA Legislative Newsletter.

BEHAVIORAL HEALTH

**SB 11, Relative to Mental Health Services and Making Appropriations Thereof**

SB 11 has several components relative to addressing the immediate behavioral health crisis to include:

- Authorizes the department of health and human services to use general surplus funds for increasing funding to Designated Receiving Facilities (DRFs) and voluntary inpatient psychiatric admissions
- Makes an appropriation to the department of health and human services for the purpose of renovating certain existing facilities.
- Provides for rulemaking for involuntary admission hearing requirements.
- Requires insurers to reimburse hospitals for emergency room boarding.

SB 11 was heard on January 22, 2019 in the Senate Health and Human Services (HHS) Committee. NHHA testified on the bill. The bill was amended slightly and was passed by the full Senate on January 31, 2019 then was referred to Senate Finance where additional modifications were made to address our concerns. The amended bill was passed 24-0 by the full Senate on February 21, 2019. The bill was heard in House Health and Human Services (HHS) Committee on March 26, 2019. NHHA testified in full support of the bill, as amended. There was a sub-committee work session on April 2, 2019 where the prime sponsor of the bill, Senator Tom Sherman (D-Rye) and the Senate Majority Leader, Senator Dan Feltes (D-Concord), spoke strongly in favor of the bill, describing the careful balance that was crafted in the Senate and the subcommittee subsequently voted 10-0 to recommend passage of the bill without any additional changes or amendments to the full committee. The full committee executive session is scheduled for April 9, 2019.  

**NHHA position: Support**

**SB 177, Relative to the Use of Physical Restraints on Persons who are Involuntarily Committed.**

SB 177 clarifies when physical restraints may be used to transport a person being admitted to New Hampshire hospital or a designated receiving facility. The bill was heard on March 5, 2019 in the Senate Health and Human Services (HHS) Committee. NHHA testified on the bill and raised some concerns with the bill, as drafted. Based on our concerns, as well as other stakeholders, the bill was amended. The bill was passed by the full Senate on March 27, 2019 by voice vote. The bill now moves over to the House Health, Human Services and Elderly Affairs Committee. A hearing has not yet been scheduled.  

**NHHA position: Support as amended**

COMMUNITY BENEFITS/CHARITABLE TRUSTS

**HB 552, Relative to Transparency and Standards for Acquisition Transactions in Health Care**

HB 552 attempts to clarify the standards for acquisition transactions involving health care charitable trusts and the review required by the Director of Charitable Trusts. The bill was heard in House Judiciary Committee on January 24, 2019. NHHA testified that the bill, as introduced, would add additional criteria to the standards of review that the Director of Charitable Trusts would use to evaluate transactions involving health care charitable trusts. It is NHHA’s position that the Director already possesses the ability to review all applicable aspects of a transaction and questions the need for this legislation. NHHA is also concerned about the potential for the bill’s requirements to increase the cost of the transactions if outside expertise is required. This bill is quite similar to the bill that was introduced last year, SB 502, but was retained in House Commerce. HB 552 was amended by the House Judiciary committee and voted as Ought to Pass (OTP) as amended on a partisan vote of 11-8. The bill was voted on by the full House on March 7, 2019. NHHA continues to have concerns with the bill and will work with the Senate to ensure that necessary changes are made to mitigate these concerns. The bill has been assigned to the Senate Judiciary Committee, but a hearing has not yet been scheduled.  

**NHHA position: Oppose**
ENERGY/ENVIRONMENT

**HB 102, Relative to Municipal Ordinances Regarding the Use of Plastics**
HB 102 permits towns to adopt bylaws to regulate the distribution of single-use plastics. The bill was heard in the House Municipal and County Government Committee on March 6, 2019. NHHA testified that we had concerns with the bill, as introduced. The bill does not contemplate any reasonable exceptions to the proposed regulation and distribution of single-use plastics. Ultimately, the committee chose to retain the bill.

*NHHA position: Oppose as introduced*

**HB 558, Restricting the Distribution of Plastic Straws**
HB 558 would prohibit food service businesses from providing a single-use plastic straw to a customer unless specifically requested. The bill was heard in the House Commerce and Consumer Affairs Committee on March 6, 2019. NHHA testified that we had concerns with the bill, as introduced. The bill was amended to accommodate our concerns and "health care facilities" are not considered a "food service business", for the purposes of the bill definitions. The amended bill was passed by the full committee on March 8, 2019 and the full House on March 19, 2019. The bill now moves over to the Senate Commerce Committee, but a hearing has not yet been scheduled.

*NHHA position: Neutral as amended*

**HB 559, Enabling Municipalities to Ban Single-use Sources of Plastic Pollution**
HB 559 enables municipalities to prohibit the distribution, sale, and purchase of products that contribute to plastic pollution. The bill was heard in the House Municipal and County Government Committee on March 6, 2019. NHHA testified that we had concerns with the bill, as introduced. The bill does not contemplate any reasonable exceptions to the proposed regulation and distribution of single-use plastics. Ultimately, the committee chose to retain the bill.

*NHHA position: Oppose as introduced*

**HB 560, Relative to Single-use Carryout Bags**
HB 560 restricts the distribution of single-use carryout bags by stores and food service businesses. The bill was heard in the House Commerce and Consumer Affairs on March 6, 2019. NHHA testified that we had concerns with the bill, as introduced. After a sub-committee work-session the bill was passed by the full committee on March 8, 2019 and the full House on March 19, 2019. The bill now moves over to the Senate Commerce Committee. A hearing date has not yet been scheduled.

*NHHA position: Neutral*

HEALTH CARE INFORMATION/PRIVACY

**SB 111, Relative to the Collection of Health Care Data**
SB 111 clarifies the collection of health care data by the department of health and human services (DHHS). The bill is specific to the uniform health care facility discharge data set referred to as the "hospital discharge data". The bill was requested by DHHS to address some concerns they had with the release of such data to other state agencies as well as other users, to include the hospitals. The bill was heard in the Senate Executive Departments & Administration (ED&A) Committee on March 13, 2019. NHHA testified in support of the bill. Our members have been very frustrated with the lack of available discharge data due to DHHS' concerns with the statute regarding release of the data. The bill was amended slightly but passed by the full committee and the Senate on a voice vote on March 27, 2019. The bill now moves over to the House Health, Human Services and Elderly Affairs Committee. The bill has not yet been scheduled for a hearing.

*NHHA position: Support*
HEALTH INSURANCE/OTHER INSURANCE

**HB 528, Relative to Insurance Reimbursement for Emergency Medical Services**

HB 528 is a bill that NHHA requested be filed. The bill requires insurers to consider the presenting symptoms in addition to the final diagnosis when determining whether to cover and pay for emergency services. NHHA **testified** to the challenges hospitals have faced relative to patient’s access to emergency services and coverage for such services. The House Commerce committee amended the bill, but the bill’s original intent remains intact. The committee passed the bill unanimously and the full House passed it on February 27, 2019. The bill was heard in the Senate Commerce Committee on March 26, 2019. NHHA **testified** in support of the bill, as amended. The committee voted ought to pass 5-0 on April 3, 2019. The bill now moves to the full Senate for a vote on April 11, 2019. **NHHA position: Support**

**SB 58, Relative to Reimbursement Rates for Low-dose Mammography Coverage**

SB 58 clarifies the reimbursement rates for low-dose mammography screenings. NHHA requested this bill be introduced to further clarify that the intent of the law to cover 3-D mammograms is consistently being followed by all carriers. NHHA **testified** in strong support of the bill. This bill ensures that providers of low-dose mammography screening shall be reimbursed at rates accurately reflecting the resource costs specific to each modality, including any increased cost of a 3-D breast tomosynthesis. The bill was passed unanimously by the Senate Commerce Committee and then by the full Senate on February 14, 2019. The bill was assigned to the House Commerce Committee, but a hearing has not yet been scheduled. **NHHA position: Support**

**SB 258, Relative to Telemedicine and Telehealth Services**

SB 258 adds definitions to and clarifies the statute governing telemedicine and Medicaid coverage for telehealth services. The bill was heard in the Senate Health and Human Services Committee on March 5, 2019. NHHA **testified** in support of the bill. The bill was amended slightly to address some technical issues that needed to be corrected. The bill passed out of the full committee and the Senate on a voice vote on March 21, 2019. The bill has been referred to the House Health, Human Services and Elderly Affairs Committee, but is not yet scheduled for a hearing. **NHHA position: Support**

LICENSING/CERTIFICATION

**HB 615, Relative to the Regulation of Pharmacies and Pharmacists**

HB 615 makes various changes to the regulation of pharmacies and pharmacists by the board of pharmacy, including procedures of the board, exceptions to possessing prescription drugs, license expirations and renewals, and establishing the licensure of drug distribution agents. NHHA **testified** in support of the bill, as introduced. We did suggest some changes to the bill regarding the timing of biennial license renewals. The House Executive Departments and Administration (ED&A) Committee did amend the bill and it passed out of committee and the full House on a voice vote. It now moves on to the Senate ED&A Committee for a hearing in the coming weeks. **NHHA position: Support**

**SB 273, Relative to the Regulation of Nursing Assistants by the Board of Nursing**

SB 273 would change the regulation of licensed nursing assistants to certified nursing assistants and makes administrative changes for the board of nursing. NHHA **testified** that we have concerns with the bill, as introduced, specifically about the unintended consequences of changing this position from licensed back to certified and the potential financial impact on all nurse licensees. Most of the testimony from stakeholders was not in support of the bill. Testimony suggested the issue be further studied. The Senate ED&A committee heard the bill on February 6, 2019 and was voted ought to pass with an amendment that changes the bill to a study committee, which we support. The bill was assigned to the House ED&A Committee and a hearing was held on April 2, 2019. A committee work session is scheduled for Wednesday, April 10, 2019. **NHHA position: Support as amended**
**SB 80, Relative to Applicants to the Board of Mental Health Practice from Other States, Membership on the Board of Mental Health Practice, and Insurance Credentialing of Out-of-State Mental Health Practitioners and Psychologists**

SB 80 requires the board of mental health practice to issue an interim license to qualified applicants from other states while awaiting final approval or denial of the application. The bill also adds 2 members to the board of mental health practice. The bill also clarifies the procedure for insurance credentialing of out-of-state mental health practitioners and psychologists applying for state licensure. The bill was heard in the Senate Executive Departments and Administration (ED&A) Committee on March 13, 2019. The bill was amended to include language that ensures the mental health practitioners have the insurance law protections that other health care providers receive. The bill was passed by the full Senate on March 27, 2019 on a voice vote. The bill was referred to the House Health, Human Services and Elderly Affairs Committee and will be heard on April 9, 2019. *NHHA position: Support as amended*

**SB 97, Relative to Special Health Care Services Licenses and Establishing a Committee to Study Providing Certain Health Care Services While Ensuring Increased Access to Affordable Health Care in Rural Areas of the State**

SB 97 clarifies rulemaking regarding special health care services licensing. This bill also establishes a committee to study providing certain health care services while ensuring increased access to affordable health care services in rural areas of the state. The bill was heard in the Senate Executive Departments and Administration (ED&A) Committee on March 13, 2019. NHHA testified in support of this high priority bill. Unfortunately, there was a significant amount of opposition to the bill; specifically, the section regarding clarification of the Critical Access Hospital (CAH) provisions. DHHS insisted that this bill was necessary to ensure that the commissioner had the necessary resources and authority to administer the law, as required by law. However, municipalities, the state employee association, State employee's insurance trust, Anthem insurance company and ConvenientMD Urgent Care Centers saw this provision as an attempt to restrict the introduction of low cost urgent care centers in rural areas and as a result, the bill had to be amended to ensure that at least one of the provisions in the original bill was preserved. The special health care services provision remains in the bill and the remainder of the bill establishes a study committee focused on providing health care services in rural areas of the state, with a focus on ensuring increased access to affordable care. While NHHA is deeply disappointed with the outcome of the bill, we are pleased that the bill did not get re-referred or voted inexpedient to legislate, essentially killing the bill for this session of the Legislature. The amended bill was passed by the full Senate on March 28, 2019. It now moves over to the House and has been assigned to the Health, Human Services and Elderly Affairs Committee. The hearing on the bill has not yet been scheduled. *NHHA position: Support as amended*

**MEDICAID**

**HB 725, Including Medicaid Care Organizations Under the Managed Contractor Requirements for Provider Care Law**

HB 725 would insure that the Medicaid managed care organizations are following the relevant prompt payment and credentialing standards that all other insurers in New Hampshire must follow. NHHA requested this bill be introduced. NHHA testified in support and that we would work on an amendment with the committee and sponsor due to a drafting error in the original bill text. The House Commerce Committee amended the bill and passed it with a very strong vote of 19-1. The bill was passed by the full House on March 7, 2019 by voice vote. The bill has been assigned to the Senate Commerce Committee, but no hearing has been scheduled yet. *NHHA position: Support*
**SB 5, Making an Appropriation to the Department of Health and Human Services for Medicaid Provider Rates for Mental Health and Substance Misuse and Emergency Shelter and Stabilization Services**

This bill makes an appropriation to the department of health and human services for Medicaid provider rates for mental health and substance misuse and emergency shelter and stabilization services. NHHA signed in support of the bill. The Senate HHS Committee amended the bill and passed it unanimously. It also passed the full Senate on a unanimous vote. The Senate Finance Committee amended the bill further and the full Senate passed it unanimously on February 14, 2019. The bill was assigned to the House Finance Committee and had a hearing on March 11, 2019 and then a work session on March 22, 2019. The bill will likely be considered by the budget writers when the entire budget is being negotiated once the Senate has completed its work. The funding contemplated in the bill will likely make its way into those discussions. **NHHA position: Support**

**PRESCRIPTION DRUGS**

**HB 284, Relative to Biennial Controlled Substance Inventories Conducted Under the Controlled Drug Act**

HB 284 would align NH’s statutory language for biennial inventories of controlled substances with federal regulatory language. NHHA requested this bill be introduced. NHHA testified in support of the bill. The bill was heard in the House Health, Human Services and Elderly Affairs and was amended, with NHHA's support, by the committee and passed unanimously. The bill was passed by the full House on February 14, 2019. The bill was heard in the Senate HHS Committee on March 19, 2019 and was passed 5-0 by the committee and then passed by the full Senate by a voice vote March 27th. The bill now moves on to the Governor for signature in order to be enacted into law. **NHHA position: Support**

**HB 359, Relative to Warning Labels on Prescription Drugs Containing Opiates**

HB 359 would require any drug which contains an opiate dispensed by a health care provider or pharmacy to have a red cap and a warning label regarding the risks of the drug. The bill was heard in the House Commerce Committee and there was much debate about the bill, as introduced. The bill was amended to require a red sticker be placed on the opiate container instead of a red cap as originally requested. The bill was passed out of committee as amended and passed the full House on a voice vote on March 7, 2019. The bill then was sent to the Senate Health and Human Services (HHS) Committee and was heard on March 26, 2019. There remains significant opposition to the bill from the NH Society of Health System Pharmacists, Chain Drug Stores, Independent Pharmacists and the Board of Pharmacy. NHHA is also opposed but did not testify during the hearing. It was suggested by some committee members that the bill could be re-referred to study to allow the Board of Pharmacy to continue with its rulemaking, which is focused on patient counseling as the education tool, and stakeholder input. The bill will be considered by the full committee in the weeks ahead. **NHHA position: Oppose**

**HB 717, Prohibiting Prescription Drug Manufacturers from Offering Coupons or Discounts to Cover Insurance Copayments or Deductibles**

HB 717 prohibits, with limited exceptions, prescription drug manufacturers from offering coupons or discounts to cover insurance copayments, or deductibles. NHHA testified in opposition to the bill. We have many concerns with how this bill could negatively impact patient’s access to prescription drugs. The bill was heard in the House Commerce and Consumer Affairs Committee on March 5, 2019. After several work-sessions, the full Commerce Committee voted to amend the bill and pass it. The full House passed the bill on March 19, 2019. The bill now moves over to the Senate and has been referred to the Senate Commerce Committee. A hearing on the bill has not yet been scheduled. **NHHA position: Oppose**
**SB 120, Relative to the Controlled Drug Prescription Health and Safety Program**

SB 120 makes changes to the controlled drug prescription health and safety program (also known as the Prescription Drug Monitoring Program or PDMP), including:

I. Transferring the program from the board of pharmacy to the office of professional licensure and certification (OPLC).

II. Authorizing the program to share certain information with other state departments.

III. Update the PDMP Advisory Committee composition and duties.

The bill was heard in the Senate Health and Human Services Committee on March 12, 2019. The bill was debated at length with multiple stakeholders weighing in with concerns and suggested amendments. Ultimately, the committee chose to amend the bill to narrow its focus to ensure that the PDMP moves from the Board of Pharmacy to the OPLC and moves the operation of the advisory council under OPLC as well. While NHHA would have preferred a much more comprehensive bill to address electronic transmission and sharing of PDMP data to healthcare provider Electronic Medical Records (EMR), it was determined that it would be best to take an incremental approach to reforming the PDMP program. The bill was passed by the full committee on March 20, 2019 and then by the full Senate on March 27, 2019. The bill moved over to the House and referred to the Health, Human Services and Elderly Affairs Committee. The bill will be heard on April 10, 2019. **NHHA position: Support as amended**

**QUALITY & PATIENT SAFETY**

**SB 26, Relative to the New Hampshire Health Care Quality Assurance Commission**

SB 26 would change the name of the New Hampshire Health Care Quality Assurance Commission to the New Hampshire Health Care Quality and Safety Commission. This bill also removes the prospective repeal of the commission. NHHA requested the bill be introduced and testified, along with the Foundation for Healthy Communities, in strong support of the legislation. The bill was heard in the Senate ED&A Committee and, based on discussion during the hearing, the bill was amended to ensure that the New Hampshire Hospital was included as a member of the commission. The bill was passed unanimously by the committee and by the full Senate on February 14, 2019. The bill was referred to the House Health, Human Services and Elderly Affairs Committee and a hearing was held on April 3, 2019. The NHHA and FHC testified in support of the bill. There was no opposition and the bill will likely be considered by the entire committee in the next week. **NHHA position: Support as amended**

**SB 119, Directing Hospitals to Develop an Operational Plan for the Care of Patients with Dementia**

SB 119 requires hospitals licensed under RSA 151 to complete and implement an operational plan for the recognition and management of patients with dementia or delirium in acute-care settings. Under this bill, each hospital shall keep the plan on file and make it available to the bureau of health facilities administration, department of health and human services, upon request. NHHA testified that we support the amendment that was introduced at the hearing. The NHHA worked with the Alzheimer's Association for several months on the language of the proposed bill and we appreciated the sponsor of the bill agreeing to amend the bill. The bill was heard in the Senate HHS Committee on February 19, 2019 and was voted on by the full Senate on March 7, 2019 and was passed on a voice vote. The bill now moves over to the House Health, Human Services and Elderly Affairs Committee. A hearing date is pending. **NHHA position: Support as amended**
**WORKFORCE**

**HB 253, Relative to Criminal Records Checks in the Employee Application**

HB 253 would prohibit employers from asking a job applicant about his or her criminal history prior to an interview. NHHA *testified* that we had some concerns with the bill language. The bill does exempt hospitals from the prohibition, but the language is not as clear as it could be. The House Labor Committee amended the bill and the full House passed the amended bill on February 14, 2019. The bill now heads to the Senate Commerce Committee. There is another bill, SB 100, that is similar to HB 253 that will also be heard in Senate Commerce. The two bills will be reconciled in the future. **NHHA position: Neutral**

**HB 637, Relative to Criminal Background Checks by Employers and Public Agencies**

HB 637 requires the division of state police to maintain an electronic database containing public criminal history record information which would be accessible to an individual, and to a state agency to obtain public criminal history record information about applicants for positions or as a condition for occupational licensure. The bill also removes the notarization requirement for requesting a criminal history records check for purposes of employment and occupational licensing. The bill is being requested by the Department of Safety and is a companion bill to SB 173 (see below). There are minor differences between the two bills, but they will likely get addressed during a committee of conference, if not earlier, when the bills cross over to the other body. NHHA *testified* in strong support of the bill. HB 637 was heard in the House Criminal Justice and Public Safety Committee and it passed unanimously and then passed the full House on February 27, 2019. The bill was referred to the Senate Judiciary Committee and the hearing was held on April 2, 2019. NHHA *testified* in support of the bill. The committee will consider this bill in the coming weeks. **NHHA position: Support**

**SB 90, Relative to Certain Disclosures by Health Care Provider Facilities**

SB 90 is a bill that NHHA requested be introduced. This bill extends immunity to staff licensed by the division of health professions, office of professional licensure and certification, to disclose certain employment information. NHHA *testified* to the importance of this bill as the current law does not cover other health care entities, such as independent physician practices and hospital-affiliated but separate legal health care entities. The Senate Judiciary Committee heard the bill on January 29, 2019, but ultimately chose to re-refer the bill back to the committee, which essentially means they are retaining it and will consider it later in the year. **NHHA position: Support**

**SB 100, Relative to Discrimination in Employment Based on Criminal Background Checks**

SB 100 prohibits discrimination in employment based on criminal background checks. NHHA was approached by the supporters of the bill and worked with us to ensure that we could support the bill, which we do. The bill was heard in the Senate Commerce Committee on March 5, 2019. The committee amended the bill slightly and then passed it on a voice vote. The full Senate passed the bill on March 28, 2019. The bill now moves over to the House and has been referred to the House Labor, Industrial and Rehabilitative Services Committee. A hearing on the bill has not yet been scheduled. **NHHA position: Support**

**SB 173, Relative to Criminal History Background Checks by Employers and Public Agencies**

SB 173 is the companion bill to HB 637 (see above). The bill was requested by the Department of Safety and would require the division of state police to maintain an electronic database containing criminal history record information which would be accessible to an individual, and to a state agency to obtain public criminal history record information about applicants for positions or as a condition for occupational licensure. The bill also removes the notarization requirement for requesting a criminal history records check for purposes of employment and occupational licensing. NHHA testified in support of the bill. SB 173 was heard in the Senate ED&A Committee on January 30, 2019. The bill was amended and passed by the committee and full Senate on March 14, 2019. The bill was referred to the House Criminal Justice and Public Safety Committee and a hearing was held on April 2, 2019. NHHA *testified* in support of the bill. The committee will consider this bill in the coming weeks. **NHHA position: Support**
**STATE UPDATE**

**SB 308, Relative to the Health Care Workforce and Making Appropriations Therefor**

SB 308 has several components that addresses concerns that impact health care workforce shortages to include:

- Increases Medicaid provider rates.
- Requires certain health care professionals to complete a survey collecting data on the primary care workforce.
- Requires the department of health and human services to amend the income standard used for eligibility for the "in and out" medical assistance policy.
- Permits the department of safety to contract with a private agency to process background check applications and requires the department to accept and process background check applications online.
- Amends the definitions and services covered through telemedicine.
- 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.
- Makes an appropriation to the governor's scholarship program for scholarships to students majoring in a health care field and to post-secondary educational institutions to develop and enhance programs of study offered in health care.

The bill was heard in the Senate ED&A Committee on February 13, 2019. The bill was voted on by the committee and the full Senate in mid-March 2019. The bill was then referred to the Senate Finance Committee and passed by the committee. SB 308 was passed by the full Senate, which then voted "lay the bill on the table," which was intentional by the legislators to ensure that the bill can be considered as part of the budget when the Senate begins their deliberations in the coming weeks. **NHHA position: Support**

**FEDERAL UPDATE**

**Affordable Care Act:** Twenty-four state hospital associations, including the New Hampshire Hospital Association, joined together in support of intervenor defendants in an amicus brief to urge the Fifth Circuit to reverse its decision that the ACA is unconstitutional. The state hospital associations collectively argued that innovative programs and initiatives for delivering higher-quality, more coordinated care that have become an integral part of the U.S. health care system over the past nine years and that would be eliminated under the district court’s decision. The ruling puts health coverage at risk for tens of millions of Americans, including those with chronic and pre-existing conditions, while also making it more difficult for hospitals and health systems to provide access to high-quality care. The amicus brief was filed on April 1, 2019.

**Washington Visits:** Hospital representatives will be joining us April 7-9 in Washington DC during the American Hospital Association Annual Meeting. The AHA Annual Meeting provides a great opportunity to meet health care colleagues from across the country and to learn about policies and strategies that support high quality patient care for those that we serve every day. A highlight of our time in Washington includes individual visits to our congressional delegation on the Hill. Those meetings are great opportunities to share information about our member hospitals and discussions about a variety of topics including the ACA compared to Medicare for All, rural health care, surprise medical bills, prescription drug prices, healthcare workforce issues, Medicare and Medicaid reimbursement challenges, and mental health and substance use disorder initiatives. Please contact Kathy Bizarro-Thunberg at kbizarro@nhha.org if you have any questions about federal advocacy opportunities.

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