



Legislative Newsletter

Keeping members informed on federal & state legislative priorities.

June 2022

Dear Members,

The 2022 NH legislative session has ended. The House and Senate met on May 26, 2022, to vote on the bills that had gone to Committees of Conference and needed final votes to determine if they would pass or not. While this year's legislative session has been marked by a significant polarization between those advocating for greater individual liberty and those focused on supporting public health, we have seen many of the bills that were introduced to deal with COVID-related issues have either been voted inexpedient to legislate (ITL) or amended significantly. However, a few remain that we continue to advocate in opposition. Specifically, there are a couple bills that we are hoping the Governor decides to veto when they reach his desk. Any bills that are vetoed by the Governor will be considered by the full House and Senate on "Veto Override" day in September. It takes two-thirds of both bodies to override a Governor's veto.

While NHHA has been following many bills of interest to our members, the primary focus this year has been on the extraordinary number of anti-vaccine related bills. NHHA was instrumental in establishing the [Healthy 603 Coalition](#), which includes over 50 organizations that represent businesses, healthcare and non-profits that have a shared interest in working to defeat the vaccine-related bills that do not support public health and that do not allow for businesses to determine for themselves what vaccine requirements are best for their organizations. In addition, we have been working on workplace safety, reimbursement improvements to Medicaid labor/delivery services and streamlining the professional licensing and criminal background check processes.

We thank all of you who have been willing to reach out to your legislators to discuss these bills and share your perspective on why many of the COVID-related bills are so problematic. Your advocacy is very important to our collective efforts.

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



State Update

2022 New Hampshire Legislation

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.

HEALTHY 603 COALITION PRIORITY VACCINE-RELATED BILLS

HB 1003, prohibiting health care providers from refusing to provide care or services based on patient vaccination status.

This bill provides that a patient shall not be denied admission, care, or services based solely on the patient's vaccination status. NHHA **testified** in strong opposition to the bill when it was heard in the House Health, Human Services and Elderly Affairs committee on February 1, 2022. The bill was ultimately amended by the committee and was passed by the full House. The bill was heard in Senate Health and Human Services. NHHA **remains opposed** to the bill, as amended, as it is not necessary as hospitals do not refuse to provide care or services based on the patient's vaccination status.

NHHA Position: Oppose

MAY UPDATE: Passed by the Senate in late April. The bill now heads to the Governor's desk for consideration (i.e. sign into law, let it go into effect without his signature or VETO)

JUNE UPDATE: The bill was signed into law on May 20, 2022. The effective date of the law is May 20, 2022.

HB 1022, permitting pharmacists to dispense the drug ivermectin by means of a standing order.

HB 1022 would allow pharmacists to dispense ivermectin pursuant to a standing order entered into by licensed health care providers. NHHA **testified** in strong opposition to the bill when it was heard in House Health, Human Services and Elderly Affairs committee on January 18, 2022. The bill was ultimately passed by the full House and has crossed over to the Senate.

NHHA Position: Oppose

MAY UPDATE: Senate HHS committee heard the bill on April 13, 2022 and was voted on by the committee on April 27, 2022. The committee ultimately passed the bill on party lines (3-2) with an amendment that establishes a temporary (2 year) standing order for Ivermectin and establishes a commission to study the use of Ivermectin to treat COVID-19. NHHA remains strongly opposed to the amended bill and recommends a floor amendment to remove the standing order from the bill and move forward with a commission only. The full Senate is scheduled to vote on the bill on Thursday,

May 5, 2022.

JUNE UPDATE: *The full Senate passed the bill along party lines. The bill was amended slightly to require a person receiving the drug to sign an informed consent acknowledging there is no proven benefit to treat COVID-19 with Ivermectin but remains problematic and NHHA remains strongly opposed. Stakeholders are reaching out to the Governor's office to raise the concerns expressed by health care professionals and asking that he veto the bill.*

HB 1131, relative to facial covering policies for schools.

HB 1131 prohibits school boards and other public education agencies from adopting, enforcing, or implementing a policy that requires students or members of the public to wear a facial covering. While NHHA did not testify on this bill, other stakeholders did and raised concerns with the bill when it was heard in the House Education committee on February 25, 2022. The bill was ultimately passed by the full House, and it has crossed over to the Senate and was assigned to the Senate Health and Human Services (HHS) committee.

NHHA Position: Oppose

MAY UPDATE: *Senate HHS committee heard the bill on March 30, 2022 and was voted on by the committee on April 20, 2022. The committee ultimately voted to pass the bill along party lines (3-2) with an amendment to remove civil penalties that were included in the House bill. The amendment also includes language that supports any state action regarding facial coverings, however public health advocates remain opposed to the bill. The full Senate voted along party lines (14-10) to pass the amended bill. The bill now goes back to the House Education committee for a recommendation to the full House for its next action (concur with Senate action, non-concur and request a committee of conference or non-concur and the bill effectively dies).*

JUNE UPDATE: *The full House voted on May 12, 2022, to concur with the Senate on the bill that had been amended in April. However, the Governor chose to veto the bill on May 20, 2022.*

HB 1210, relative to exemptions from vaccine mandates.

HB 1210 requires public employers, private employers, and postsecondary education institutions that receive public funds and mandate a vaccination or other inoculation procedure to accept an employee's or student's request for a medical, religious, or right of conscience exemption. NHHA **testified** in opposition to the bill, as introduced. In addition, NHHA also testified against the amendment, during the work session. The amended bill ultimately did pass the full House and crossed over to the Senate. NHHA and other stakeholders oppose the bill.

NHHA Position: Oppose

MAY UPDATE: *Senate Health and Human Services (HHS) committee heard the bill on April 20, 2022 and there was strong opposition to the bill by NHHA, BIA, NH Medical Society, NH Nurses Association and other stakeholders. Ultimately the committee voted 4-1 to refer the bill to Interim Study. The full Senate is scheduled to vote on the committee's recommendation for interim study on May 5, 2022.*

JUNE UPDATE: *The full Senate supported the committee recommendation for interim study on May 5, 2022. The House attempted to attach HB 1210 to a Senate bill (SB 407) and sent it back over to the Senate but the full Senate refused to concur with the amended version of SB 407 so HB 1210 did not pass.*

HB 1439, relative to hospital visitation policies.

HB 1439 allows, with limited exception, a patient to designate a parent, spouse, family member, or other caregiver to be present while the patient receives hospital care. NHHA **testified** in opposition to the bill when it was heard in House Health, Human Services and Elderly Affairs committee on January 24, 2022. There were a number of work sessions on the bill, in which NHHA participated. While the bill was amended slightly, we remain concerned with the bill because it limits the flexibility necessary for hospitals to set visitation policies in order to protect the health and safety of their patients, staff, and community. It passed the full House and crossed over to the Senate. The bill was assigned to the Senate Health and Human Services (HHS) committee.

NHHA Position: Oppose as introduced. Neutral as amended by the Senate

MAY UPDATE: Senate HHS committee heard the bill on April 6, 2022. NHHA testified that the bill should be amended to incorporate some of the bill into the Patients' Bill of Rights and remove other sections of the bill that we opposed. Ultimately the committee voted (5-0) to amend the bill to address NHHA's concerns. The full Senate voted on a voice vote to pass the bill as amended. The bill now goes back to the House Health, Human Services and Elderly Affairs committee for a recommendation to the full House of next action (concur with Senate action, non-concur and request a committee of conference or non-concur and the bill effectively dies).

JUNE UPDATE: The House did not concur with the Senate and requested a Committee of Conference. Ultimately the Senate version (that NHHA supported) was accepted by the House conferees and the full House. One minor change to the bill was to add the title of "Patient Support Act". The bill now is heading to the Governor's desk for action.

HB 1455, relative to state enforcement of federal vaccination mandates.

HB 1455 prohibits state enforcement of any federal law, order, or rule that requires an individual, as a condition of employment or any other activity, to provide proof of vaccination against COVID-19 or to submit more than once per month to COVID-19 testing. NHHA **testified** in opposition to the bill when it was heard in the House Health, Human Services and Elderly Affairs committee on January 25, 2022. The House ultimately passed the bill, and it crossed over to the Senate. The bill was assigned to the Senate Health and Human Services (HHS) committee.

NHHA Position: Oppose

MAY UPDATE: Senate HHS heard the bill on April 20, 2022. NHHA testified on the bill and raised continued concerns with the bill. The committee ultimately voted (3-2) to amend the bill to address the concerns raised by DHHS and NHHA. The full Senate is scheduled to vote on the amended bill on May 5, 2022.

JUNE UPDATE: The Senate passed the amended bill on May 5, 2022. The House concurred with the Senate and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action.

HB 1604, including state medical facilities in the statute providing medical freedom in immunizations.

HB 1604 requires state-owned hospitals and medical facilities that institute a vaccination requirement to grant an exemption on medical or religious grounds or as a matter of conscience. While the bill does not directly impact private hospitals and nursing homes, it is a very problematic bill for our state institutions and county nursing homes. The bill was heard in the House Health, Human Services and Elderly

Affairs committee on February 1, 2022. The bill passed the full House and then was assigned to the House Finance committee, where it was amended. The amended version remains problematic for the state institutions and county nursing homes.

NHHA Position: Oppose

MAY UPDATE: Senate Health and Human Services (HHS) heard the bill on April 14, 2022. The committee amended the bill to address a technical correction needed to ensure that this bill was not in conflict with CMS requirements for the state health care facilities and county nursing homes. The full Senate voted on a voice vote to pass the amended bill and then it was referred to Senate Finance. Senate Finance passed the bill on a unanimous vote and the bill is scheduled for a full Senate vote on May 5, 2022.

JUNE UPDATE: The Senate passed the bill on May 5, 2022. The House concurred with the Senate and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action.

HB 1606, making the state vaccine registry an opt-in program.

HB 1606 states that each patient, or the patient's parent or guardian if the patient is a minor, shall be given the opportunity to opt-out or opt-in to the immunization registry for each administered vaccine. NHHA **testified** in opposition to the bill when it was heard in the House Health, Human Services and Elderly Affairs committee on February 15, 2022. The bill ultimately was amended in the committee and passed the full House. The bill crossed over to the Senate and was assigned to the Senate Health and Human Services (HHS) committee.

NHHA Position: Oppose

MAY UPDATE: Senate HHS committee heard the bill on April 6, 2022. NHHA testified, raising continued concerns with the bill. Ultimately the committee voted to amend the bill to address some of the concerns raised by stakeholders. The full Senate is scheduled to vote on the bill on May 5, 2022.

JUNE UPDATE: The Senate passed the bill on May 5, 2022. The House concurred with the Senate and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action. Stakeholders are reaching out to the Governor's office to raise the concerns expressed by health care professionals and asking that he veto the bill.

SB 288, (New Title) establishing a committee to study the listing of immunizations for children.

SB 288, as introduced, prohibits the requiring of an immunization for COVID-19 for a child admitted or enrolled in any school or childcare agency. The bill was heard in the Senate Health and Human Services committee in early January 2022. NHHA **testified** in opposition to the bill. There was a lot of opposition by other stakeholders as well. Ultimately the bill was amended to establish a study committee to study the listing of immunizations for children. DHHS and other public health stakeholders are supportive of this approach.

NHHA Position: Support as amended

MAY UPDATE: House Health, Human Services and Elderly Affairs committee heard the bill on April 19, 2022, and ultimately voted to pass the bill on a unanimous vote (20-0) and it is scheduled for a vote by the full House on May 4 or May 5, 2022.

JUNE UPDATE: The House passed the bill on May 4, 2022. The bill was signed into law on June 7, 2022. The effective date of the law is June 7, 2022.

BEHAVIORAL HEALTH

HB 1622, relative to notice that a health care provider is no longer accepting new patients and relative to mental health parity.

HB 1622 requires contracts between health care providers and carriers to include a provision that the provider notify the carrier when the provider is no longer accepting new patients. The bill also requires coverage for biologically based mental illness to meet the access standards in RSA 420- J:7. The bill was amended extensively in the House. The bill has a section that raised some concerns for NHA. The bill added a requirement that providers notify the carrier within 30 days of no longer accepting new patients. Ultimately, after discussions with members, NHA determined that the provision was not problematic.

NHA Position: Neutral

MAY UPDATE: Senate Health and Human Services (HHS) heard the bill on April 14, 2022. The committee ultimately passed the bill with a unanimous vote, and it was passed by the full Senate on April 21, 2022 on a voice vote. The bill now heads to the Governor's desk for consideration (i.e. sign into law, let it go into effect without his signature or VETO)

JUNE UPDATE: The bill was signed into law on May 20, 2022. The effective date of the law is January 1, 2023.

HEALTH CARE ACCESS

HB 1390, relative to access to language translation services in telemedicine.

HB 1390 requires language access services for limited-English proficient speakers and deaf or hard of hearing individuals when healthcare services are provided through telemedicine. The bill was amended by both the House and the Senate. The amendment that passed the Senate committee is acceptable to NHA.

NHA Position: Support as amended

MAY UPDATE: House policy committee (Health, Human Services and Elderly Affairs) has yet to recommend action (i.e. concur or non-concur and request a committee of conference).

JUNE UPDATE: The House concurred with the Senate and the bill passed on May 12, 2022. The bill is heading to the Governor's desk for action.

SB 390, relative to telemedicine and telehealth.

This bill revises the definition of telemedicine and telehealth in the context of the practitioner patient relationship. NHA did **testify** on the bill and initially had concerns with the bill due to the changes it makes to the requirement for a face-to-face exam prior to utilizing telemedicine. However, the amended bill addressed the concerns we raised, and the bill passed the full Senate and crossed over to the House. The bill was assigned to the House Health, Human Services and Elderly Affairs (HHSEA) committee.

NHA Position: Neutral as amended

MAY UPDATE: House HHSEA committee heard the bill on April 19, 2022. The committee voted unanimously to amend the bill to provide further clarity. NHA remains neutral on the bill. The bill is now scheduled for a House vote on May 4, 2022.

JUNE UPDATE: The House passed the amended bill on May 4, 2022. The Senate concurred with the House and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action.

HEALTH CARE INFORMATION/PRIVACY

HB 1662, related to privacy obligations of the department of health and human services.

HB 1662 establishes a data privacy and information technology security governance board within the Department of Health and Human Services to oversee data privacy risk calculation and risk mitigation efforts, as well as provides for two employees within the department to accomplish these objectives. The original bill, as introduced, was problematic and NHHA **testified** in opposition to the bill. However, the bill was amended in the House Health, Human Services and Elderly Affairs committee and the section that NHHA was opposed to was removed from the bill.

NHHA Position: Neutral as amended

MAY UPDATE: The Senate Health and Human Services committee heard the bill on April 14, 2022, and ultimately passed the bill on a unanimous (5-0) vote. The full Senate voted to pass the bill on a voice vote and referred it to the Senate Finance committee. Senate Finance voted to pass the bill and the full Senate is scheduled to vote on the bill again on May 5, 2022.

JUNE UPDATE: The Senate passed the bill on May 5, 2022 but added a number of non-germane amendments to the bill which the House did not concur with and requested a Committee of Conference. The conferees could not agree on final bill language and the entire bill died in Committee of Conference.

SB 311, relative to access to drivers' license information for healthcare and motor vehicle related business purposes.

SB 311 permits motor vehicle related businesses and health care providers to obtain personal information from driver's licenses or nondriver's identification cards with the consent of the license holder, provided that the businesses meet certain restrictions regarding the collection, retention, and use of such information. NHHA requested this bill be introduced to address a concern raised by our members relative to the inability to scan drivers' licenses to assist in fraud detection. NHHA **testified** in support of the bill when it was heard in Senate Transportation committee on January 25, 2022. Ultimately the bill was passed with an amendment by the full Senate in mid-March and crossed over to the House. The bill was assigned to the House Transportation committee.

NHHA Position: Support

MAY UPDATE: The House Transportation committee heard the bill on April 12, 2022. NHHA testified in strong support of the bill. Unfortunately, the committee ultimately voted unanimously (18-0) to find the bill Inexpedient to Legislate (ITL) due to concerns raised about the privacy of driver's license information. The full House will vote on the bill on May 4th or May 5th.

JUNE UPDATE: The House voted to ITL the bill on May 4, 2022. However, the sponsor has already discussed with NHHA an opportunity to reintroduce the bill in 2023.

HEALTH INSURANCE/OTHER INSURANCE

SB 287, relative to balance billing for certain health care services.

This bill modifies insurance coverage to reflect changes in federal law and clarifies coverage related to emergency services. The bill was heard in the Senate Health and Human Services Committee on February 2, 2022. NHHA **testified** that we had some concerns about the bill, as introduced, and asked to work with the NH Insurance Department (NHID) on a potential amendment. Stakeholders held several meetings with NHID to try and reach a compromise. The final amendment that was passed out of the committee includes only the parts of the bill that everyone could agree on.

NHHA Position: Support as amended

MAY UPDATE: House Commerce committee heard the bill on April 13, 2022. The committee held a work session and ultimately decided to refer the bill to Interim Study. The bill is scheduled for a full House vote on May 4th or May 5th.

JUNE UPDATE: The House voted to send the bill to Interim Study on May 4, 2022. The only action that could occur this session is for the House Commerce committee to recommend or not recommend the bill be introduced in the next session.

LICENSING/CERTIFICATION

HB 1044, relative to direct payment and membership-based health care facilities.

HB 1044 exempts facilities operating with membership-based or direct payment business models from certain special licensing provisions. NHHA **testified** in opposition to this bill when it was heard in House Health, Human Services and Elderly Affairs committee on January 25, 2022. The bill is very problematic and allows health care facilities to bypass the requirement of treating all patients, regardless of their ability to pay. The bill was amended by the House committee and ultimately passed by the full House to include “membership-based business models”. The bill crossed over to the Senate and was assigned to the Senate Health and Human Services committee.

NHHA Position: Oppose

MAY UPDATE: Senate HHS heard the bill on March 30, 2022. NHHA testified in opposition to the bill. The committee voted (4-1) to refer the bill in Interim Study and the full Senate voted (20-4) to support the committee recommendation of Interim Study. An amendment is being offered on floor of the House this week to attach HB 1044 to an unrelated bill, SB 430.

JUNE UPDATE: The House did pass SB 430 with HB 1044 attached as a floor amendment. However, the Senate did not concur with the House’s action and so HB 1044 did not move forward.

SB 228, relative to the regulation and practice of physician assistants.

SB 228 modifies the regulation of physician assistants. This bill, as amended, modifies the regulation of physician assistants, and requires physician assistants to provide patient services in collaboration with one or more New Hampshire licensed physicians who are in a similar area of medicine as the physician assistant. Additionally, this bill requires that practicing physician assistants shall maintain adequate professional liability insurance coverage. The bill was heard in the Senate Executive Departments and Administration committee on January 27, 2022. The committee amended the bill, based on feedback from stakeholders, and

the amended bill passed the full Senate in mid-March. It crossed over to the House and was assigned to the House Executive Departments and Administration (ED&A) committee.

NHHA Position: Support as amended

MAY UPDATE: House ED&A committee heard the bill on April 11, 2022. The committee voted unanimously (17-0) to pass the bill. The full House voted on a voice vote to support the committee recommendation. The bill now heads to the Governor's desk for consideration (i.e. sign into law, let it go into effect without his signature or VETO).

JUNE UPDATE: The bill was signed into law on June 7, 2022. The effective date of the law is August 6, 2022.

SB 277, relative to emergency or temporary health care licenses.

SB 277 extends the expiration date for the emergency professional licensing process, the licensing of out-of-state pharmacies as temporary mail-order facilities, and the emergency or temporary licensing of health care workers enacted in SB155-FN (2021) and extends the repeal dates of those provisions. The bill was heard in Senate Finance and passed the committee and full Senate in early February and has crossed over to the House. The bill was assigned to the House Executive Departments and Administration (ED&A) committee.

NHHA Position: Support

MAY UPDATE: House ED&A heard the bill on April 11, 2022. The committee held a couple work sessions and the committee voted (19-0) to amend the bill to support flexibility with professional clinical licenses. The full House is scheduled to vote on the amended bill on May 4th or May 5th.

JUNE UPDATE: The House passed the bill on May 4, 2022. The Senate concurred with the House and passed the bill on May 12, 2022. The bill was signed into law on June 3, 2022. The effective date of the law is June 3, 2022.

SB 330, establishing a committee to study and make recommendations relative to the office of professional licensure and certification and the licensure of professions under boards, councils, and commissions within the office; relative to the boxing and wrestling commission; and relative to the expiration of terms of the board of foresters' members.

SB 330 establishes a committee to study and make recommendations relative to the Office of Professional Licensure and Certification, and the licensure of professions under boards, councils, and commissions within the office. The bill was heard in the Senate Executive Departments and Administration committee and was amended to address concerns of the agency as well as stakeholders. The bill was passed by the full Senate and crossed over to the House. The bill was assigned to the House Executive Departments and Administration (ED&A) committee.

NHHA Position: Support as amended

MAY UPDATE: House ED&A heard the bill on April 11, 2022. The committee amended the bill, but NHHA continues to support the amended bill. The committee voted to support the bill on a unanimous (19-0) vote. The full House is scheduled to vote on the amended bill on May 4th or May 5th.

JUNE UPDATE: The House passed the amended bill on May 4, 2022. The Senate concurred with the House and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action.

SB 382, relative to licensure requirements for telehealth services.

SB 382 clarifies licensure requirements for healthcare professionals providing services by means of telemedicine or telehealth. This bill is a small but important change that requires professionals licensed in other states to be licensed in New Hampshire while providing remote telehealth to patients in New Hampshire. This allows local NH boards to maintain control over the licensure process and ensure that all professional standards are met. The bill was heard in the Senate Executive Departments and Administration and was supported by the full committee.

NHHA Position: Support

MAY UPDATE: House Executive Departments and Administration (ED&A) heard the bill on April 19, 2022. The committee voted to support the bill (13-6). The full House is scheduled to vote on the bill on May 4th or May 5th.

JUNE UPDATE: The House voted to pass the bill on May 4, 2022. The bill was signed into law on June 7, 2022. The effective date of the law is August 6, 2022.

MEDICAID

HB 103, establishing a dental benefit under the state Medicaid program.

HB 103 requires the commissioner of the Department of Health and Human Services to solicit information and to contract with dental managed care organizations to provide dental care to persons under the Medicaid managed care program. HB 103 is a carryover bill from 2021 that was retained in House Health, Human Services and Elderly Affairs committee and worked on further this session. It is a similar bill to the Senate companion bill, see SB 422 below. There are some differences between the two bills, to include the appropriation and HB 103 has a more limited scope of benefit coverage. The bill was passed by the House committee and then the full House and then House Finance. The bill crossed over to the Senate and was assigned to the Senate Health and Human Services (HHS) committee.

NHHA Position: Support

MAY UPDATE: Senate HHS heard the bill on March 30 and ultimately passed an amendment to ensure that HB 103 and SB 422 are the same. The full Senate passed the bill as amended on a unanimous vote (24-0) and then the Senate Finance committee voted to pass the bill as well. The full Senate is scheduled to vote on the bill on May 5, 2022.

JUNE UPDATE: The Senate passed the bill on May 5, 2022 and ultimately the House concurred with the Senate version of the bill. The bill is heading to the Governor's desk for action.

SB 422, establishing an adult dental benefit under the state Medicaid program.

SB 422 requires the commissioner of the Department of Health and Human Services to solicit information and to contract with dental managed care organizations to provide dental care to persons under the Medicaid managed care program. The bill also appropriates the settlement funds received by the state from its settlement with the Centene Corporation to the Department of Health and Human Services for the purpose of funding the non-federal share of the adult dental benefit program and to complete the Medicaid Care Management SFY 20 Risk Corridor calculation. The bill was heard in Senate Health and Human Services committee on February 16, 2022 and was passed by the full Senate and then by

Senate Finance.

NHHA Position: Support

MAY UPDATE: House Finance heard the bill on April 5, 2022. There were a number of division work sessions and the full House Finance committee passed (16-3) the amended bill. The full House is scheduled to vote on the bill on May 4th or May 5th.

JUNE UPDATE: The House passed the bill on May 4, 2022. The Senate concurred with the House amended bill, which is identical to HB 103 (see above). The bill is now heading to the Governor's desk for action. This bill and HB 103 will be combined ultimately to ensure that there is consistency in the statutory language.

SB 401, (New Title) relative to Medicaid reimbursement rates for hospital birthing services; relative to an impact study of birthing service closures on rural communities; and establishing a committee to study actions necessary for preserving access to labor and delivery services in rural New Hampshire communities.

SB 401 increases the Medicaid reimbursement rate for hospital birthing services; directs the commissioner of business and economic affairs to secure funding for an impact study of birthing service closures on rural communities; and establishes a commission to study the actions necessary for preserving access to labor and delivery services in rural New Hampshire communities. The bill was heard in Senate Health and Human Services committee on January 26, 2022 and NHHA **testified** in strong support of the bill, as did a couple of our hospital members. The bill was amended to add the commission, which NHHA also supports. The bill passed the committee and full Senate and was sent over to Senate Finance.

NHHA Position: Support

MAY UPDATE: Senate Finance amended the bill completely and removed the Medicaid reimbursement rates section of SB 401. SB 430 was amended to include the Medicaid reimbursement rates for hospital birthing services. The full Senate passed the amended bill SB 430. SB 430 is a large bill that DHHS requested. SB 430 was heard by House Health, Human Services and Elderly Affairs on April 12, 2022. The bill ultimately was passed by the full House and referred to House Finance. House Finance had several division work sessions and supported the bill unanimously (20-0) and the Medicaid reimbursement rates for hospital birthing services was not amended. The full House is scheduled to vote on the bill on May 4th or May 5th.

JUNE UPDATE: Due to the changes the House made to SB 430, the Senate did not concur with SB 430 but the language in SB 430, including the Medicaid reimbursement rates for hospital birthing services was included in an unrelated bill, HB 1661 and, after a number of Committee of Conference meetings, HB 1661 ultimately passed both the Senate and the House. HB 1661 is now heading to the Governor's desk for action.

PUBLIC HEALTH/HEALTH PROMOTION

SB 419, (New Title) establishing a commission to study the delivery of public health services in New Hampshire through regional public health networks.

SB 419 establishes a commission to study the delivery of public health services in New Hampshire through regional public health networks and continued development of coordinated responses to public health incidents and emergencies in New Hampshire. The bill passed the Senate and was assigned to the House Health, Human Services and Elderly Affairs (HHSEA) when it crossed over to the House.

NHHA Position: Support

MAY UPDATE: House HHSEA committee heard the bill on April 19, 2022. A technical amendment was supported by the committee and the committee voted to unanimously (20-0) support the bill. The full House is scheduled to vote on the bill on May 4th or May 5th.

JUNE UPDATE: The House passed the bill on May 4, 2022. The Senate concurred with the House and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action.

WORKFORCE

HB 1659, relative to criminal history background checks for certain health care workers.

HB 1659 establishes the provision for temporary employment in a residential care facility or as a licensed nursing assistant by persons awaiting the results of a criminal history background check. The bill was heard in the House Health and Human Services and Elderly Affairs committee on January 24, 2022 and NHHA **testified** in support. This bill was amended initially by the sponsor to include the section on criminal background checks that will streamline the process for hospitals and health care facilities. The full House passed the bill and it had a **hearing** in the Senate Health and Human Services (HHS) committee on March 16, 2022.

NHHA Position: Support

MAY UPDATE: Senate HHS voted unanimously (5-0) to pass the bill and the full Senate passed the bill on a voice vote on April 21, 2022. The bill now heads to the Governor's desk for consideration (i.e. sign into law, let it go into effect without his signature or VETO).

JUNE UPDATE: The Governor signed the bill into law on May 20, 2022. The law is effective on May 20, 2022.

SB 459, relative to a health care facility workplace violence prevention program.

SB 459 requires health care facilities to implement and maintain workplace violence prevention programs and establishes the health care workplace safety commission. This bill also permits law enforcement to arrest an individual without a warrant in certain circumstances related to health care workplaces. NHHA **testified** in Senate Health and Human Services on March 9, 2022 that we are in strong support of the bill. The bill was amended slightly but we continue to be in support of the bill. SB 459 is a result of months of work by the Study Committee on Workplace Safety that NHHA and the Foundation for Healthy Communities participated in as well as other stakeholders. The end result is a bill that all parties support. The bill passed Senate Finance committee on March 22, 2022 and the full Senate. The bill crossed over to the House.

NHHA Position: Support

MAY UPDATE: House Health, Human Services and Elderly Affairs committee heard the bill on April 12, 2022. NHHA testified in support of the bill as did the NH Nurses Association. The committee passed the bill (12-9) but there was a House floor amendment that removed the warrantless arrest section of the bill. The bill was then referred to House Finance where there were several division work sessions that resulted in an amendment that passed the full House Finance committee on an 18-2

vote. NHHA and NHNA support the amended bill despite the fact that the warrantless arrest section is not included as we both believe the need for a commission is a priority. The full House is scheduled to vote on the amended bill on May 4th or May 5, 2022.

JUNE UPDATE: The House passed the amended bill on May 4, 2022. The Senate concurred with the House and passed the bill on May 12, 2022. The bill is heading to the Governor's desk for action.



Federal Update

With limited time left in Congress' legislative schedule to devote to legislative priorities before upcoming mid-term elections, our focus remains on COVID-19 relief, extending the Medicare sequester, supporting inclusion of Medicare extenders such as Medicare Dependent Hospital and COVID-19 waiver flexibilities.

Inpatient Prospective Payment Rule Comments Due 6/17/22

The Centers for Medicare and Medicaid Services (CMS) April 18 issued its inpatient prospective payment system (PPS) and long-term care hospital (LTCH) **proposed rule** for fiscal year (FY) 2023. The rule affects inpatient PPS hospitals, critical access hospitals (CAHs), LTCHs and PPS-exempt cancer hospitals. Comments on the proposed rule are due to CMS by June 17.

The AHA has developed a model comment letter that hospitals and health systems can use to assist with submitting their own inpatient PPS comments to CMS. **[Click here](#)** to download the model letter. The letter includes language detailing concerns with the proposed payment update, as well as proposed cuts to disproportionate share hospital and outlier payments. Please note that there are opportunities for hospitals to add your own perspectives and information about how the inpatient PPS will impact your hospital or health system. All comments must be submitted before 5 p.m. EDT on June 17. Electronic comments should be submitted at <http://www.regulations.gov> by following the instructions under the "submit a comment" tab. Please refer to file code "CMS-1771-P" when submitting your letter. NHHA will also be submitting a comment letter on behalf of our membership modeled after AHA's detailed comment letter.

Safety from Violence for Healthcare Employees (SAVE) Act of 2022

Reps. Madeleine Dean, D-Pa., and Larry Bucshon, M.D., R-Ind., recently introduced the Safety from Violence for Healthcare Employees (SAVE) Act of 2022, legislation that would extend to health care workers federal protections against workplace violence, similar to those afforded to aircraft and airport employees. There have been numerous studies that have shown an increase in physical violence and verbal abuse against healthcare workers that are outlined in the American Hospital Association's **[fact sheet](#)**. New Hampshire's hospitals and health care providers are,

unfortunately, not immune to dealing with violent and intimidating behavior and we truly believe that our healthcare workers should have safe environments to work in to deliver care. NHHA has reached out to both Congresswoman Kuster and Congressman Pappas to be co-sponsors of this important legislation.

Legislation Aimed at Travel Nurse Industry

Sen. Kevin Cramer, R-N.D., recently introduced AHA-supported legislation that would direct the Government Accountability Office to study the travel nursing industry's business and payment practices, including their impact on workforce shortages and potential price gouging during the COVID-19 pandemic. "Many hospitals and health systems are facing significant financial and operational concerns as a result of the unsustainable rates charged by travel nurse staffing agencies," AHA said in a **letter of support**. A House companion bill is under consideration.

Federal Trade Commission Launches Inquiry into PBMs

The Federal Trade Commission (FTC) will launch an inquiry into the prescription drug middleman industry, requiring the six largest pharmacy benefit managers to provide information and records regarding their business practices within 90 days, the agency **announced** recently. FTC said the inquiry will scrutinize the impact of vertically integrated PBMs on the access and affordability of prescription drugs. AHA last month **urged** the FTC to investigate certain practices by health plans and pharmacy benefit managers, commonly referred to as "white bagging," which disallow health care providers from procuring and managing the drugs they administer to patients. White bagging has been a priority issue for NHHA, and we applaud the FTC's inquiries.

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