



# Legislative Newsletter

*Keeping members informed on federal & state legislative priorities.*

March 15, 2023

Dear Members,

The 2023 NH legislative session has been in full swing since early January, with a lot of energy around multiple bills. Both the House and the Senate have been busy dealing with many hearings on a variety of bills during the last three months.

The Governor unveiled his State Fiscal Year (SFY) 2024/2025 Budget proposal on Tuesday, February 14, 2023. While [HB 1](#) (operating budget and capital budget spreadsheets) was released immediately, [HB 2](#) (trailer bill with detailed policy proposals) was not released until March 1, 2023.

The House Finance Committee's work on the next biennium State Budget for SFY 2024/2025 has begun with agency presentations. The State Budget will take several months of review, discussion, and debate before it is finalized. The House Finance Committee divides their work into three divisions for the purposes of the budget review work. Division III is our priority, as they are solely focused on the Department of Health and Human Services (DHHS). There will be at least one public hearing on the budget.

NHHA [testified](#) on provisions in both HB 1 as well as HB 2 on March 13, 2023. There are very troubling policy proposals in HB 2 that directly impact hospitals relative to licensing requirements to establish Designated Receiving Facility (DRF) beds in each facility that comes in the wake of an order in federal court that found the state is failing its responsibility to care for our most vulnerable citizens and must finally to take action to cease its illegal practice of boarding patients experiencing a psychiatric crisis in hospital emergency departments. HB 2 also changes the requirement that a patient subject to an involuntary emergency admission (IEA) be transported immediately to the appropriate setting to receive needed care. HB 2 changes the effective date of the Workplace Violence Prevention and Health Care Workplace Safety Commission from July 1, 2023, to July 1, 2025. There is also an extensive number of proposed changes to the Office of Professional Licensure and Certification (OPLC) impacting a number of clinical licensing boards and elimination of some licenses.

While NHHA has been following many bills of interest to our members, the priority

focus areas this year have been on Medicaid Expansion reauthorization, the state budget, as well as bills to address workforce shortages and challenges with barriers to discharge from hospitals.

NHHA is coordinating our efforts with other stakeholders to ensure that Medicaid Expansion is reauthorized and the sunset provisions are removed meaning the Legislature would not have to come back to reauthorize it again and again. The program is scheduled to end in December 2023, so we need the legislature to pass SB 263 to ensure the Granite Advantage program continues without disruption. In addition, we continue to work on workplace safety with the introduction of SB 58, workplace violence protections.

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

### 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.

#### **ENERGY/ENVIRONMENT**

##### **[HB 300, prohibiting the disposal of certain food waste.](#)**

HB 300 defines food waste and prohibits its disposal in certain circumstances. The bill was heard in the House Environment and Agriculture committee on January 24, 2023. NHHA has been following the bill closely since the requirements outlined in the bill could impact our members. The bill passed the full House on February 14, 2023, and has been referred to House Finance, Division I, where a couple of work sessions have occurred. The bill has been retained in House Finance, Division I while other bills that could impact HB 300 are considered in the coming weeks.

**NHHA Position: Neutral**

#### **HEALTH CARE ACCESS**

##### **[HB 69, relative to direct payment and membership-based health care facilities](#)**

HB 69 exempts facilities operating with membership-based or direct payment business models from the special health care licensing requirement that the facility adopt a policy to assure that it provides services to all persons who require the services of the facility regardless of the source of payment. The bill was heard in the House Health, Human Services and Elderly Affairs committee on February 15,

2023. NHHA [testified](#) against the bill. The bill was considered by the full committee during the executive session on March 8, 2023, and the bill came out of committee without a recommendation since the vote was 10-10 Ought to Pass and a subsequent vote was 10-10 Inexpedient to Legislate (ITL). The full House will consider this bill in their upcoming session.

**NHHA Position: Oppose**

## HEALTH CARE INFORMATION/PRIVACY

### [HB 47, relative to medical records attestations for organ donation eligibility.](#)

HB 47 requires the physician who treats a trauma patient who later dies of their injuries to attest in writing that the patient care team followed all advanced trauma life support protocols. The statement would become part of the medical record and would be required for organ donation eligibility. The bill was heard in the House Health, Human Services and Elderly Affairs committee on January 25, 2023. NHHA [testified](#) against the bill. The bill was ultimately voted Inexpedient to Legislate (ITL) by the committee and the full House in early February.

**NHHA Position: Oppose**

### [HB 406, relative to parental access to children's medical records.](#)

HB 406 would expand parents access to their 13 to 18-year-old children's medical records without their children providing a release to each medical provider. The bill was heard in the House Health, Human Services and Elderly Affairs committee on February 16, 2023. NHHA [testified](#) opposed to the bill, as drafted. The bill was considered during a recent executive session in committee, and they voted to retain the bill. The bill will remain in the committee and may be considered at a future date.

**NHHA Position: Oppose**

### [HB 587, relative to a New Hampshire first designation on the donor registry for anatomical gifts.](#)

HB 587 would add a checkbox to the Division of Motor Vehicles driver's license and nondriver's identification card application form. The checkbox, when marked, indicates a person has registered with the division of motor vehicles as an organ donor and that they want their organ donation to go to a New Hampshire resident-recipient before an out-of-state resident. This bill was heard in the House Health, Human Services and Elderly Affairs committee on January 25, 2023. NHHA signed in opposed to the bill. The bill was ultimately retained in committee so no additional action on the bill is likely this session.

**NHHA Position: Oppose**

### [SB 253, relative to parental access to a minor child's medical records.](#)

SB 253 is similar in intent to HB 406 (see above); however it is not as detailed as HB 406. The bill was heard in the Senate Judiciary committee on February 21, 2023. NHHA [testified](#) against the bill. The bill was ultimately rereferred to the committee, which essentially holds the bill in the committee for the time being and will likely wait to see if HB 406 crosses over to their committee and then they will consider the two bills together.

**NHHA Position: Oppose**

### [SB 105, relative to information collected by the division of vital records administration as part of the live birth worksheet.](#)

SB 105 removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother

affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently. The bill was heard in the Senate Executive Departments and Administration committee on February 1, 2023. NHHA [testified](#) on the bill. While we did not take a position on the bill, we did raise concerns about the opt-in requirements of the bill. The bill was ultimately voted Ought to Pass (OTP) out of the committee without the opt-in language being changed and will be considered by the full Senate in the coming days. There was an effort to reverse the OTP motion to allow the stakeholders to continue to work on the bill to address the ongoing concerns with the requirements of the mother to affirmatively consent to provide important health statistics for public health purposes. However, the bill ultimately passed the full Senate on a 21-3 vote. The bill now goes to Senate Finance where we will continue to work with stakeholders and the committee to make necessary changes to the bill to address our concerns.

**NHHA Position: Neutral**

## HEALTH COSTS

### [HB 389, relative to consumer protection relating to hospital price transparency.](#)

HB 389 would prohibit a hospital from pursuing a collection action for services provided if the hospital was not in compliance with certain federal price transparency laws. This bill was heard in the House Commerce and Consumer Affairs committee on January 26, 2023. NHHA [testified](#) against the bill. This bill had a subcommittee work session in February when the committee voted 7-0 to not move the bill forward. The full committee voted to ITL the bill during their March 8, 2023, executive session. The full House will take up this bill during their upcoming session.

**NHHA Position: Oppose**

## HEALTH INSURANCE/OTHER INSURANCE

### [HB 513, relative to affordability and safety of clinician administered drugs.](#)

HB 513 would require a health plan to utilize the lowest cost method of reimbursement for clinician administered drugs and requires a health maintenance organization to cover clinician-administered drugs if the drug cannot reasonably be self-administered and is typically administered by a health care professional. The bill also prohibits a health maintenance organization from requiring that a pharmacy dispense medication to a patient with the expectation that the patient will transport it to a health care setting for administration by a health care professional. The bill was heard in the House Commerce and Consumer Affairs committee on February 15, 2023. NHHA [testified](#) on the bill. While we did not take a position on the bill, we did raise several concerns regarding the practice of white bagging and brown bagging that insurers employ. This bill has a subcommittee work session scheduled in the coming days and the full committee will consider the bill in a forthcoming executive session.

**NHHA Position: Neutral**

### [SB 72, relative to provider credentialing procedures.](#)

SB 72 would provide that a demographic change shall not result in a disruption in the network participation status of a health care provider. The bill also provides that the insurance commissioner may adopt rules relative to dispute resolution involving provider credentialing procedures. This bill was heard in the Senate Executive Department and Administration committee on January 25, 2023. NHHA [testified](#) in support of the bill. We asked the sponsor to introduce this bill on our

behalf to ensure that delays in provider credentialing are reduced. The bill was amended to respond to concerns raised by the carriers that addressed potential unintended consequences. The amended bill was considered and voted on by the entire committee on March 8, 2023. The full Senate will vote on the bill on March 16, 2023.

**NHHA Position: Support**

**[SB 82, relative to prompt payments for managed care.](#)**

SB 82 would further the notice requirements for denial or pending claims made by health carriers subject to the managed care law. The bill has been assigned to the Senate Health and Human Services committee and is scheduled for a hearing on March 15, 2023. NHHA requested this bill be filed to address ongoing concerns raised by our members regarding the delays in prompt processing and payment of claims by insurance carriers.

**NHHA Position: Support**

**[SB 131, relative to health care provider contract standards.](#)**

SB 131 would require that a health care provider manual be intended as an administrative tool and not as a way to change the terms of the provider contract or benefit plan. The bill was heard in the Senate Health and Human Services committee on Tuesday, February 15, 2023. NHHA **testified** in support of the bill. NHHA requested this bill be filed to ensure that the provider manual only be used as an administrative tool and not to effectuate unilateral and material changes to the provider contract. Ultimately, the committee decided to rerefer the bill since there were concerns raised by those opposed to the bill and no consensus could be achieved. The rerefer motion provides NHHA additional time to consider possible amendments to the bill for consideration at a later date. The full Senate will vote on the bill on March 16, 2023.

**NHHA Position: Support**

**[SB 173, relative to surprise medical bills.](#)**

SB 173 would require insurers to cover emergency services provided by non-participating providers in the same manner as if the services were provided by a participating provider and requires the insurer to pay the non-participating provider the out-of-network rate less any cost-sharing for the services provided. The bill prohibits surprise medical bills and balance billing. The bill is a request of the department of insurance, and they added provisions that go beyond the federal No Surprises Act to require that the department of insurance have the final word regarding dispute resolutions between the carriers and the providers. The bill was heard in the Senate Health and Human Services Committee on February 1, 2023. NHHA **testified** on this bill and raised concerns with the bill, as drafted. After discussions with stakeholders did not achieve a compromise position that was agreed upon by all, the bill was ultimately voted to be rereferred to the committee. This will likely result in no additional action on the bill this session. The full Senate voted to rerefer the bill on March 9, 2023.

**NHHA Position: Oppose**

## **LICENSING/CERTIFICATION**

**[HB 322, relative to establishing a committee to study the New Hampshire board of medicine.](#)**

HB 322 would establish a committee to study the New Hampshire Board of Medicine. The bill was heard in the House Health, Human Services and Elderly Affairs committee on February 8, 2023. NHHA **testified** in support of the bill. The



committee voted the bill Inexpedient to Legislate (ITL) on March 8, 2023. Their rationale was that there are other legislative vehicles that address the issues raised in HB 322. The full House will take up the bill in their upcoming session.

**NHHA Position: Support**

**HB 337, relative to directing the office of professional licensure and certification to provide notice of public meetings and an opportunity for comment from the public.**

HB 337 directs the Office of Professional Licensure and Certification to provide to the public notice of its meetings and an opportunity to comment in such meetings. The bill was heard in the House Executive Departments and Administration committee on January 19, 2023. The bill was amended to address concerns raised by the Office of Professional Licensure and Certification (OPLC). The bill ultimately was passed by the full committee and the full House. It was then referred to House Finance and the committee decided to rerefer the bill until other legislation is considered that is related to the HB 337.

**NHHA Position: Support**

**HB 426, relative to the regulation of pharmacists-in-charge and pharmacies.**

HB 426 would adjust how pharmacy permit holders are defined. The bill was heard in the House Commerce and Consumer Affairs committee on January 18, 2023. NHHA **testified** in support of the bill. There was a subcommittee work session on the bill and ultimately the full committee voted to pass the bill. The full House will take up the bill in their upcoming session.

**NHHA Position: Support**

**HB 445, relative to the operational funds of OPLC.**

HB 445 would make the Office of Professional Licensure and Certification fund a non-lapsing fund, a portion of which shall be used for capital expenditures and to lower fees.

The bill was heard in the House Executive Departments and Administration committee on January 25, 2023. The bill was ultimately passed by the full committee and then full House, then referred to the House Ways and Means committee. The House Ways and Means committee held a public hearing on March 7, 2023, and will be holding an executive session in the coming days.

**NHHA Position: Support**

**HB 454, relative to the membership and reporting responsibilities of the examining board of medicine.**

HB 454 designates one of the public members of the examining board of medicine as the public transparency advocate. The advocate is responsible for increasing public transparency of certain board functions and is directed to provide an annual report to the oversight committee on health and human services. The bill was heard in the House Health, Human Services and Elderly Affairs committee on February 8, 2023. The committee considered the bill during their executive session on March 8, 2023, and ultimately passed the bill. The full House will take up the bill in their upcoming session.

**NHHA Position: Neutral**

**HB 655, relative to the office of professional licensure and certification.**

HB 655 redefines the roles and responsibilities of the Office of Professional Licensure and Certification (OPLC) and for the boards and commissions. OPLC issues licenses, sets fees, provides legal and investigatory services, and presents administrative rules as advised by the boards and commissions. The bill

consolidates administrative authority for OPLC in a new chapter and repeals redundant provisions of law. The House Executive Departments and Administration committee heard the bill on February 8, 2023. There were numerous work sessions on HB 655 and it was amended to focus solely on OPLC operations. Ultimately the full committee passed the amended bill on March 8, 2023. The full House will take up the bill in their upcoming session.

**NHHA Position: Support**

**SB 49, relative to creating a dedicated, non-lapsing fund, and a biennial report of such fund, for OPLC.**

SB49 would make the Office of Professional Licensure and Certification fund a non-lapsing fund, a portion of which shall be used for capital expenditures and to lower fees, and mandates a biennial report be made on the expenditures of the fund. The bill was heard in the Senate Executive Departments and Administration committee on January 18, 2023. The committee amended the bill slightly and ultimately it was passed by the full committee and the full Senate. Senate Finance also considered the bill, and it passed out of Senate Finance and the full Senate on March 9, 2023. The bill will now move over to the House for consideration.

**NHHA Position: Support**

## **MEDICAID**

**HB 282, relative to including certain children and pregnant women in Medicaid and the children's health insurance program.**

HB 282 directs the Department of Health and Human Services to submit state plan amendments under Medicaid and Children's Health Insurance Program (CHIP) to provide coverage to children and pregnant women lawfully residing in the United States. The bill also makes an appropriation to the Department of Health and Human Services for this purpose. The bill was heard in the House Health, Human Services and Elderly Affairs committee on February 1, 2023. NHHA signed in support of the bill. The committee ultimately passed the bill, and the full House passed it on February 22, 2023. The bill was referred to House Finance for further consideration.

**NHHA Position: Support**

**HB 565, relative to expanding Medicaid to include certain postpartum health care services.**

HB 565 would expand Medicaid to include certain postpartum health care services and makes an appropriation to the Department of Health and Human Services for this purpose. The bill was heard in the House Health, Human Services and Elderly Affairs committee on February 1, 2023. NHHA signed in support of the bill. The full committee could not reach consensus, so the bill left the committee without a recommendation. The full House ultimately passed the bill and it was referred to the House Finance committee for further consideration.

**NHHA Position: Support**

**SB 36, relative to systems of care for healthy aging.**

SB 36 would expand the state's systems of care for healthy aging, increase access to home and community-based services, and expand the role of the office of the long-term care ombudsman. The bill was heard in the Senate Health and Human Services committee on January 18, 2023. NHHA signed in support of the bill. Ultimately the committee voted to amend the bill and pass the bill. The full Senate will take the bill up in their upcoming session.

**NHHA Position: Support**

### SB 175, relative to Medicaid coverage for mothers.

SB 175 would:

- Mandate that the Department of Health and Human Services extend Medicaid coverage for pregnant women to 12 months postpartum, to cover doula services, to cover lactation services, and to cover donor breast milk for eligible infants, and creates appropriations thereof.
- Establish minimum workplace supports for nursing mothers.
- Appropriate money to the Department of Health and Human Services to support healthy outcomes for caregivers and children.
- Establish a commission to study home visiting programs for all parents of newborns and young children.
- Mandate the Department of Health and Human Services establish a network of early childhood behavioral health supports.

The bill was heard in the Senate Health and Human Services committee on February 8, 2023. NHHA signed in support of the bill. The committee ultimately passed the bill with an amendment. The full Senate passed the bill and referred the bill to Senate Finance.

**NHHA Position: Support**

### SB 263, extending the New Hampshire granite advantage health care program and reestablishing the commission to evaluate the effectiveness and future of the New Hampshire granite advantage health care program.

SB 263 would:

- Reestablish and revise the membership and duties of the commission to evaluate the effectiveness and future of the New Hampshire granite advantage health care program. The commission is repealed November 1, 2028.
- Extends the New Hampshire granite advantage health care program by removing the prospective repeal of the program that was to take effect on December 31, 2023, and does not set a future sunset date.
- Removes the transfer of funds from the alcohol abuse prevention and treatment fund to the granite advantage health care trust fund.

The bill was heard in the Senate Health and Human Services committee on February 22, 2023. NHHA **testified** in support, along with the Chair of the NHHA Advocacy Task Force. The full committee passed the bill, and the full Senate passed the bill (24-0) on March 9, 2023 and referred the bill to the Senate Finance committee.

**NHHA Position: Support**

## **MEDICAL LIABILITY**

### SB 65, establishing a committee to study the medical screening panel process and temporarily pausing the screening panel process.

SB 65, as introduced, would establish a committee to study the medical screening panel process and temporarily suspends the medical screening panel process. The bill was heard in the Senate Health and Human Services committee on January 25, 2023. NHHA **testified** in support of the bill. Unfortunately, the committee chose to amend the bill to completely repeal the medical screening panels. The full Senate voted to pass the bill, as amended, in early February. The bill now moves over to the House for consideration.

**NHHA Position: Oppose as amended**



## PUBLIC HEALTH/HEALTH PROMOTION

### [HB 222, to require the use of seat belts during the operation of motor vehicles.](#)

HB 222 would require the use of seat belt restraints for all occupants when operating motor vehicles. The bill was heard in the House Transportation committee on February 21, 2023. The full committee considered the bill during their executive session on March 7, 2023, and ultimately voted 11-9 to not pass the bill. The full House will take this bill up in their upcoming session.

**NHHA Position: Support**

### [HB 386, relative to child passenger restraints.](#)

HB 386 would lower the age which a child passenger must be restrained by a child restraint system from 7 to 4. The bill was heard in the House Transportation committee on February 7, 2023. NHHA signed in opposed to the bill. The full committee ultimately voted the bill Inexpedient to Legislate (ITL). The full House voted the bill ITL on March 9, 2023.

**NHHA Position: Oppose**

### [SB 118, requiring children under the age of 2 years to be restrained in a motor vehicle.](#)

SB 188 requires children under the age of 2 years old to be restrained in a rear facing child restraint in a motor vehicle. The bill was heard in the Senate Transportation committee on January 24, 2023. NHHA signed in support of the bill. The bill was ultimately voted Ought to Pass by the full committee. The full Senate voted to pass the bill and now the bill moves on to the House for their consideration.

**NHHA Position: Support**

### [SB 145, relative to New Hampshire housing champion designation for municipalities and making appropriations therefor.](#)

SB 145 establishes a New Hampshire housing champion designation program, including a housing production municipal grant program, and a housing infrastructure municipal grant and loan program. The bill also establishes positions within the Department of Business and Economic Affairs and makes appropriations for the programs. The bill was heard in the Senate Commerce committee on February 14, 2023. NHHA signed in support of the bill. The bill was ultimately voted Ought to Pass by the full committee. The full Senate will take this bill up during their upcoming session.

**NHHA Position: Support**

### [SB 234, directing the department of health and human services to develop a public awareness campaign on brain health, Alzheimer's disease, and related dementias and making an appropriation therefor.](#)

SB 234 directs the Department of Health and Human Services to develop a public awareness campaign on brain health, Alzheimer's disease, and related dementias and makes an appropriation to the department for this purpose. The bill was heard in the Senate Health and Human Services committee on February 16, 2023. NHHA signed in support of the bill. The bill was amended slightly, and the full committee ultimately voted Ought to Pass. The full Senate passed the bill, referred it to the Senate Finance committee, which also passed it. The full Senate will take the bill up at their upcoming session.

**NHHA Position: Support**

## QUALITY/PATIENT SAFETY

### [SB 58, relative to arrests without a warrant while in the care of a medical professional on the premises of a residential care or health care facility.](#)

SB 58 authorizes a law enforcement officer to arrest a person without a warrant for interfering with the provision of medically necessary health care services. The bill was heard in the Senate Judiciary committee on January 17, 2023. NHHA had requested this bill be re-introduced this year since it did not pass in 2022. NHHA [testified](#) in strong support of the bill, as did a number of our hospital security professionals. The bill was voted ITL by the majority of the committee (3-2), however, efforts to clarify the intent of the bill have resulted in an agreement to reverse the committee's recommendation on the Senate floor so that an amendment can be introduced and voted on.

**NHHA Position: Support**

### [SB 185, relative to protective services for vulnerable adults and the definition of abandonment.](#)

SB 185 would add the definition of abandonment to the protective services to adults subdivision of RSA 161-F on elderly and adult services. The bill was heard in the Senate Judiciary committee on February 7, 2023. NHHA had requested this bill be introduced and [testified](#) in support of the bill. Due to other legislative vehicles that better address the concerns SB 185 attempted to clarify, the sponsor, with NHHA's support, asked the bill be rereferred to the committee. The full committee voted to rerefer the bill and the full Senate agreed to this action.

**NHHA Position: Support**

## WORKFORCE

### [SB 86, relative to health care workforce development and making appropriations therefor.](#)

SB 86 is a complex, multi-section bill. It would:

- Direct the Department of Health and Human Services to increase Medicaid provider rates and makes an appropriation for this purpose.
- Establish a community health worker certification program in the Office of Professional Licensure and Certification and make an appropriation to OPLC for this purpose.
- Direct the Department of Health and Human Services to issue an RFP to expand access to health services in rural and underserved areas of the state and makes appropriations to the department for this purpose.

The bill was heard in the Senate Health and Human Services committee on February 1, 2023. NHHA [testified](#) in support of the bill. The bill ultimately was amended quite significantly by the full committee and will be considered by the full Senate in their upcoming session.

**NHHA Position: Support**

### [SB 149, relative to nurse agencies.](#)

SB 149 establishes a licensing and application process for nurse agencies. The bill was heard in the Senate Executive Departments and Administration committee on February 2, 2023. NHHA [testified](#) in support of the bill. Ultimately the bill was amended and passed by the full committee. The full Senate will take up the bill in an upcoming session.

**NHHA Position: Support**

# Federal Update



President Biden announced last month that the COVID-19 Public Health Emergency (PHE) will end on May 11<sup>th</sup>. Our message, as well as AHA's message, is to continue to support hospitals and healthcare workers and we want to see the current flexibilities under CMS waivers to be made permanent. NHHA has convened a working group with hospital members interested in learning about the implications of the PHE ending and ensuring compliance with upcoming changes. If you are interested in participating in this working group, please contact Brooke Belanger at [bbelanger@nhha.org](mailto:bbelanger@nhha.org).

The US Senate recently held a hearing to examine health care workforce shortages and potential solutions. In a statement submitted to the Senate Health, Education, Labor & Pensions Committee for a Feb. 16 hearing on the nation's health care workforce shortages and potential solutions, AHA said "long-building structural changes within the health care workforce, combined with the profound toll of the COVID-19 pandemic, have left hospitals and health systems facing a national staffing emergency." Here in New Hampshire, we are making sure that the NH congressional delegation is aware of our memberships' concerns about the severe workforce shortage that hospitals, as well as other entities, such as long-term care facilities and behavioral health organizations, are experiencing.

Hospital price transparency remains a hot topic and CMS is continuing to assess hospital compliance. All hospitals are encouraged to evaluate their own compliance with these regulations and update all public facing web sites and resources as needed. A national organization, Patient Rights Advocate, continues to report false information about hospital compliance. Only CMS can regulate and report on hospitals adherence to the price transparency regulations.

The Drug Enforcement Agency (DEA) released proposed rules at the end of February on the prescribing of non-narcotic schedule III-IV controlled substances and expanding buprenorphine prescribing through telehealth. The proposed rules would time limit virtual prescribing of controlled substances and buprenorphine to 30-day supplies before a medical exam is required; impose increased recordkeeping requirements; provide a six-month transition period following the end of the COVID-19 public health emergency for provider-patient relationships established during the state of emergency; and impose additional limitations on virtual prescribing of controlled substances without a prior in-person exam. We agree with the AHA that these rules are a missed opportunity by the DEA. Instead of supporting greater access to care for those with mental health needs, the agency has imposed burdensome restrictions and additional administrative requirements on providers and patients. The DEA is accepting comments on the rules by March 31<sup>st</sup>.

CMS is accepting comments on proposed rules relative to more oversight of Medicare Advantage plans. NHHA submitted [a comment letter on 2/10/23](#) relative to policy and technical changes to Medicare Advantage and the Medicare prescription drug benefit program. We particularly appreciated CMS's thoughtful proposals to improve how the Medicare program works for patients and their providers and we urged CMS to expeditiously finalize the health plan oversight and consumer protections included in the proposed rule and to adopt our recommended modifications to the proposed policy on overpayments. An upcoming comment letter will focus on Medicare Advantage prior authorization processes.

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