

HOUSE FINANCE - DIVISION 3 HB 1 and HB 2 PROPOSED AMENDMENTS

| HB 1 | | | | |
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| Section | Bill Page | Brief Description | Recommendation | Packet Page |
| NEW | NEW | DHHS Back-of-Budget Reduction | Amend (1445h) | 3 |

| HB 2 | | | | |
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| Section | Bill Page | Brief Description | Recommendation | Packet Page |
| 94-95 | 49 | WIC Farmers' Market Nutrition Program | Amend (1392h) | 4 |
| 96 | 49 | Gifts Accepted by the DHHS Commissioner | Amend (1260h) | 5 |
| 106 | 51 | Access to Court-Appointed Counsel for Children in Dependency Proceedings | Amend (1395h) | 6 |
| 185 | 73 | Cap on County Long-Term Care Expenditures | Amend (1178h) | 7 |
| NEW | NEW | Reimbursing Counties for Enhanced Federal Match Rate in Prior Years | Amend (1149h) | 8 |
| NEW | NEW | Revising Granite Advantage Funding Mechanisms | Amend (1302h) | 9 |
| NEW | NEW | Repealing the Liquor Transfer to the Alcohol Fund | Amend (1009h) | 12 |
| NEW | NEW | Appropriating Opioid Abatement Trust Funds to the Alcohol Fund For Use by the Governor's Commission | Amend (1283h) | 13 |
| NEW | NEW | Prioritizing Use of Opioid Abatement Trust Funds | Amend (1363h) | 14 |
| NEW | NEW | Requiring the Governor's Commission on Alcohol and Other Drugs to Itemize Spending | Amend (1290h) | 15 |
| NEW | NEW | Incorporating HB 73, Relative to Harm Reduction | Amend (1191h) | 16 |
| NEW | NEW | Repealing the Senior Volunteer Grant Program | Amend (0923h) | 25 |
| NEW | NEW | Requiring DHHS Contractors to Comply With the Patients' Bill of Rights | Amend (1140h) | 26 |
| NEW | NEW | Accelerating Implementation of Home Dialysis Within the State Medicaid Program | Amend (1132h) | 27 |
| NEW | NEW | Incorporating HB 94, Relative to Coverage of Circumcision Under the State Medicaid Plan | Amend (0873h) | 28 |
| NEW | NEW | Relative to a Medicaid Outpatient Procedure Incentive Program | Amend (1402h) | 29 |
| NEW | NEW | Requiring DHHS to Conduct a Clinical/Financial Research Study Relative to the Medicaid Adult Dental Benefit | Amend (1195h) | 30 |
| NEW | NEW | Revising Statute re: the Prescription Drug Affordability Board | Amend (1279h) | 31 |
| NEW | NEW | Incorporating HB 117, Relative to Substitution of Biological Products | Amend (1200h) | 33 |
| NEW | NEW | Relative to Standing Orders for Medications and Medical Supplies | Amend (1386h) | 35 |
| NEW | NEW | Renaming the Office of Health Equity the Office of Health Access, and Keeping the Governor's Hiring Freeze In Place for that Office Throughout the Biennium | Amend (1328h) | 36 |
| NEW | NEW | Requiring DHHS and its Contractors to Treat All People With Equal Dignity and Respect | Amend (1277h) | 37 |

**HOUSE FINANCE - DIVISION 3
HB 1 and HB 2 PROPOSED AMENDMENTS**

| HB 2 | | | | |
|----------------|------------------|---|-----------------------|--------------------|
| Section | Bill Page | Brief Description | Recommendation | Packet Page |
| NEW | NEW | Suspending New Enrollment in the State Loan Repayment Program for the Biennium | Amend (1135h) | 38 |
| NEW | NEW | Allowing the Use of General Funds to Support Activities and Infrastructure at the SYSC Replacement Facility | Amend (1273h) | 39 |
| NEW | NEW | Incorporating HB 223, Relative to Licensing of Healthcare Facilities | Amend (1179h) | 40 |
| NEW | NEW | Requiring Statewide or Local Termination of the Medicaid to Schools Program if Parental Consent Policies Are Changed | Amend (1220h) | 41 |
| NEW | NEW | Extending the Lapse Date for Funds Appropriated to the Recovery Friendly Workplace Initiative | Amend (1247h) | 42 |
| NEW | NEW | Extending the Lapse Date for Funds Appropriated for Recreational and Socialization Services, and Allowing a Newly-Created Recreational Services Special Fund to Operate as a Charity for Purposes of Receiving Gaming Revenue | Amend (1249h) | 43 |
| NEW | NEW | Directing DHHS to Seek Maximum Title IV-E Funds | Amend (1257h) | 45 |
| NEW | NEW | Requiring DHHS to Report on Funds Expended on Employment-Related Childcare, and Utilize Available Federal TANF Reserve Funds to Avoid a Child Care Waitlist | Amend (1391h) | 46 |
| NEW | NEW | Reducing Medicaid Provider Rates by 3%, and Requiring DHHS to Reduce General Funds by \$17.5 Million in FY26 and \$35 Million in FY27 | Amend (1422h) | 47 |
| NEW | NEW | Delaying the June 2027 MCO Capitation Payments Until the Start of FY28, and Requiring DHHS to Reduce General Funds by \$25 Million in FY27. | Amend (1423h) | 48 |
| NEW | NEW | Requiring the Sale of the Tirrell House | Amend (1420h) | 49 |
| NEW | NEW | Requiring the Sale of the Philbrook Center | Amend (1421h) | 50 |
| NEW | NEW | Requiring the Sale of Hampstead Properties Not Needed by the State in FY28 | Amend (1435h) | 51 |

Amendment to HB 1-A

1 Amend the bill by inserting after section 7 the following, and renumbering the original sections 8-9
2 to read as 9-10, respectively:

3

4 8 Department of Health and Human Services; Budget Reduction. In addition to any other
5 required reductions, the department of health and human services is hereby directed to reduce
6 general fund appropriations by \$23,000,000 in the fiscal year ending June 30, 2026, and by
7 \$23,000,000 in the fiscal year ending June 30, 2027. The department shall provide the department
8 of administrative services with the accounting units and class lines to be reduced and shall report
9 these reductions to the fiscal committee of the general court by May 30, 2026, for reductions in the
10 fiscal year ending June 30, 2026, and by May 30, 2027, for reductions in the fiscal year ending June
11 30, 2027.

Rep. Edwards, Rock. 31
March 26, 2025
2025-1392h
05/08

Amendment to HB 2-FN-A-LOCAL

1 Amend the bill by replacing section 94 and 95 with the following:

2

3 94 Suspension Pending Funding; WIC Farmers' Market Nutrition Program. For the biennium
4 ending June 30, 2027, the WIC farmers' market nutrition program established by RSA 132:12-f shall
5 be suspended until such time as the commissioner of the department of health and human services
6 determines that sufficient funds are available to implement the program.

2025-1392h

AMENDED ANALYSIS

Replace:

38. Suspends the WIC Farmers' Market Nutrition Program for the biennium pending sufficient funding.

Amendment to HB 2-FN-A-LOCAL

1 Amend the bill by replacing section 96 with the following:

2

3 96 New Paragraph; Gifts to the State. Amend RSA 4:8 by inserting after paragraph II the
4 following new paragraph:

5 III. Notwithstanding paragraph I, the commissioner of the department of health and human
6 services may accept gifts of personal property valued at \$250,000 or less for the benefit of the
7 department. The commissioner shall distribute unrestricted gifts based on his or her assessment of
8 departmental needs. The commissioner shall file an annual report to the fiscal committee of the
9 general court and the governor on or before November 1, disclosing the nature and value of all gifts
10 received by the department and how those gifts were allocated.

2025-1260h

AMENDED ANALYSIS

Replace:

39. Permits the department of health and human services to accept gifts for the benefit of the department.

Amendment to HB 2-FN-A-LOCAL

1 Amend the bill by replacing section 106 with the following:

2

3 106 Expanding Access to Court-appointed Counsel for Children in Dependency Proceedings;
4 Prospective Effective Date Extended. Amend 2024, 296:6 to read as follows:

5 296:6 Effective Date.

6 I. Sections 3 and 5 of this act shall take effect August 1, 2026.

7 II. The remainder of this act shall take effect [~~July 1, 2025~~] **January 1, 2026**.

8 107 Department of Health and Human Services; Division for Children, Youth and Families;
9 Classified Positions Established; Appropriation.

10 I. There is hereby established 3 unclassified staff attorney positions in the department of
11 health and human services for the purposes of fulfilling responsibilities related to expanded access to
12 court-appointed counsel for children in out-of-home placements pursuant to 2024, 296. The salaries
13 of the unclassified positions established in this paragraph shall be established in accordance with
14 RSA 94:1-a, I.

15 II. From general funds appropriated to the department of health and human services in
16 account 05-95-95-952010-5680, \$155,000 for the fiscal year ending June 30, 2026, and \$310,000 for
17 the fiscal year ending June 30, 2027, shall be used for the purpose of funding the positions
18 established in paragraph I. Notwithstanding any other law to the contrary, the department may
19 accept and expend matching federal funds without prior approval of the fiscal committee of the
20 general court.

2025-1395h

AMENDED ANALYSIS

Replace paragraph 44:

44. Extends the effective date for expanded access to court-appointed counsel for children in dependency proceedings, establishes 3 staff attorney positions in the department of health and human services, and identifies funds appropriated to the department for this purpose.

Amendment to HB 2-FN-A-LOCAL

1 Amend RSA 167:18-a, II(a) as inserted by section 185 of the bill by replacing it with the following:

2

3 II.(a) *Notwithstanding subparagraph III(a), due to exigent circumstances, an*
4 *additional one percent shall be added to the annual increase on the cap on county billings*
5 *for each year of the biennium ending June 30, 2027, resulting in annual increases of 3*
6 *percent for each year of that biennium.* The total billings to all counties made pursuant to this
7 section shall not exceed the amounts set forth below for state fiscal years [~~2024-2025~~] **2026-2027**:

8

(1) State fiscal year [~~2024~~] **2026**, [~~-\$131,849,659~~] **\$135,805,149.**

9

(2) State fiscal year [~~2025~~], **2027** [~~-\$131,849,659~~]; **\$139,879,303.**

UNAPPROVED

Amendment to HB 2-FN-A-LOCAL

1 1 New Subparagraphs; County Reimbursement of Funds; Limitation on Payments. Amend
2 RSA 167:18-a, III(b) by inserting after subparagraph (4) the following new subparagraphs:

3 (5) For fiscal year 2026, in addition to the \$5,000,000 allocated pursuant to
4 subparagraph III(b)(3), an aggregate credit of \$5,625,000 shall be allocated among the counties
5 based upon their relative proportional share of overpayments in fiscal year 2020 and fiscal year
6 2021.

7 (6) For fiscal year 2027, in addition to the \$5,000,000 allocated pursuant to
8 subparagraph III(b)(3), an aggregate credit of \$5,625,000 shall be allocated among the counties
9 based upon their relative proportional share of overpayments in fiscal year 2020 and fiscal year
10 2021.

11 (7) For fiscal year 2028, in addition to the \$5,000,000 allocated pursuant to
12 subparagraph III(b)(3), an aggregate credit of \$5,625,000 shall be allocated among the counties
13 based upon their relative proportional share of overpayments in fiscal year 2020 and fiscal year
14 2021.

15 (8) For fiscal year 2029, in addition to the \$5,000,000 allocated pursuant to
16 subparagraph III(b)(3), an aggregate credit of \$5,625,000 shall be allocated among the counties
17 based upon their relative proportional share of overpayments in fiscal year 2020 and fiscal year
18 2021.

Amendment to HB 2-FN-A-LOCAL

1 1 New Hampshire Granite Advantage Health Care Program; Funding. Amend RSA 126-AA:2,
2 I(a) to read as follows:

3 126-AA:2 New Hampshire Granite Advantage Health Care Program Established.

4 I.(a) The commissioner shall apply for any necessary waivers and state plan amendments to
5 implement a 5-year demonstration program beginning on January 1, 2019 to create the New
6 Hampshire granite advantage health care program~~[- which shall be funded exclusively from non-~~
7 ~~general fund sources, including federal funds].~~ The commissioner shall include in an application for
8 the necessary waivers submitted to the Centers for Medicare and Medicaid Services (CMS) a waiver
9 of the requirement to provide 90-day retroactive coverage and a state plan amendment allowing
10 state and county correctional facilities to conduct presumptive eligibility determinations for
11 incarcerated inmates to the extent provided under federal law. To receive coverage under the
12 program, those individuals in the new adult group who are eligible for benefits shall choose coverage
13 offered by one of the managed care organizations (MCOs) awarded contracts as vendors under
14 Medicaid managed care, pursuant to RSA 126-A:5, XIX(a). The program shall make coverage
15 available in a cost-effective manner and shall provide cost transparency measures, and ensure that
16 patients are utilizing the most appropriate level of care. Cost effectiveness shall be achieved by
17 offering cash incentives and other forms of incentives to the insured by choosing preferred lower cost
18 medical providers. Loss of incentives shall also be employed. MCOs shall employ reference-based
19 pricing, cost transparency, and the use of incentives and loss of incentives to the Medicaid and newly
20 eligible population. For the purposes of this subparagraph, "reference-based pricing" means setting
21 a maximum amount payable for certain medical procedures.

22 2 The New Hampshire Granite Advantage Health Care Trust Fund. Amend RSA 126-AA:3, I to
23 read as follows:

24 I. There is hereby established the New Hampshire granite advantage health care trust fund
25 which shall be accounted for distinctly and separately from all other funds and shall be non-interest
26 bearing. The fund shall be administered by the commissioner and shall be used solely to provide
27 coverage for the newly eligible Medicaid population as provided for under RSA 126-AA:2, to pay for
28 the administrative costs for the program, and reimburse the federal government for any over
29 payments of federal funds. All moneys in the fund shall be nonlapsing and shall be continually
30 appropriated to the commissioner for the purposes of the fund. The fund shall be authorized to pay
31 and/or reimburse the cost of medical services and cost-effective related services, including without

Amendment to HB 2-FN-A-LOCAL
- Page 2 -

1 limitation, capitation payments to MCOs. ~~[No state general funds shall be deposited into the fund.]~~
2 Deposits into the fund shall be limited exclusively to the following:

3 (a) ~~[Repealed.]~~

4 (b) Federal Medicaid reimbursement for program costs and administrative costs
5 attributable to the program;

6 (c) Surplus funds generated as a result of MCOs managing the cost of their services
7 below the medical loss ratio established by the commissioner for the managed care program
8 beginning on July 1, 2019;

9 (d) Taxes attributable to premiums written for medical and other medical related
10 services for the newly eligible Medicaid population as provided for under this chapter, consistent
11 with RSA 400-A:32, III(b);

12 (e) Funds received from the assessment under RSA 404-G;

13 (f) Revenue from the Medicaid enhancement tax to meet the requirements provided in
14 RSA 167:64; ~~and]~~

15 (g) Funds recovered or returnable to the fund that were originally spent on the cost of
16 coverage of the granite advantage health care program[-];

17 ***(h) Revenue that is attributable to premiums received from granite advantage***
18 ***health care program enrollees; and***

19 ***(i) State general funds that have been appropriated by the general court for the***
20 ***specific purpose of funding the granite advantage health care program or approved by the***
21 ***fiscal committee and governor and council for the specific purpose of addressing a funding***
22 ***shortfall identified by the commissioner of the department of health and human services.***

23 3 The New Hampshire Granite Advantage Health Care Trust Fund. Amend the introductory
24 paragraph to RSA 126-AA:3, VI to read as follows:

25 VI. The commissioner, in accordance with the most current available information, shall be
26 responsible for determining, quarterly commencing no later than December 31, 2018, whether there
27 is sufficient funding in the fund to cover projected program costs for the nonfederal share for the
28 next 6-month period. If at any time the commissioner determines that a projected shortfall exists,
29 ~~[then the sum necessary to cover such shortfall shall be transferred to the fund from the liquor~~
30 ~~commission fund established in RSA 176:16. In the event the commissioner determines that there~~
31 ~~are not sufficient funds in the liquor commission fund to cover the shortfall,]~~ ***and the fiscal***
32 ***committee and governor and council do not authorize additional funding,*** then he or she
33 shall terminate the program in accordance with the federally approved terms and conditions issued
34 by CMS. Upon making a determination that a projected shortfall exists and ~~[that there are~~
35 ~~insufficient funds in the liquor commission fund to cover the shortfall]~~ ***if the fiscal committee and***
36 ***governor and council do not authorize additional funding,*** the commissioner shall:

Amendment to HB 2-FN-A-LOCAL
- Page 3 -

1 4 Appropriation; Granite Advantage. The sum of \$12,600,000 for the fiscal year ending June 30,
2 2026, and \$1,000,000 for the fiscal year ending June 30, 2027, is hereby appropriated to the New
3 Hampshire granite advantage health care trust fund established under RSA 126-AA:3. In the event
4 the program costs are greater than the amounts available from all sources, the commissioner may
5 request, with prior approval of the fiscal committee, that the governor and council authorize
6 additional funding. Upon fiscal committee and governor and council approval, the governor is
7 authorized to draw a warrant for said sum out of any money in the treasury not otherwise
8 appropriated.

9 5 Repeal. RSA 176:16, III-a, relative to deposits from the liquor commission into the New
10 Hampshire granite advantage health care trust fund, is repealed.

UNAPPROVED

Amendment to HB 2-FN-A-LOCAL

1 1 Alcohol Abuse Prevention and Training Fund; Appropriations and Disbursements. Amend
2 RSA 176-A:1, III to read as follows:

3 III. Moneys [~~received from all other sources other than the liquor commission pursuant to~~
4 ~~RSA 176:16, III, including any community benefit contribution made by New Hampshire's hospitals,~~]
5 shall be disbursed from the fund upon the authorization of the governor's commission on alcohol and
6 drug abuse prevention, treatment, and recovery established pursuant to RSA 12-J:1 and shall not be
7 diverted for any other purposes. Funds disbursed shall be used for alcohol and other drug abuse
8 prevention, treatment, and recovery services, and other purposes related to the duties of the
9 commission under RSA 12-J:3.

10 2 Repeal. RSA 176:16, III, relative to the disbursement of funds from the liquor commission to
11 the alcohol abuse prevention and training fund, is repealed.

2025-1009h

AMENDED ANALYSIS

Add:

1. Repeals the disbursement from the liquor commission to the alcohol abuse prevention and training fund.

Rep. Edwards, Rock. 31
March 23, 2025
2025-1283h
06/05

Amendment to HB 2-FN-A-LOCAL

1 1 Appropriation; Opioid Abatement Trust Fund. Notwithstanding any other law to the
2 contrary, the sum of \$10,700,000 for the fiscal year ending June 30, 2026, and the sum of
3 \$10,700,000 for the fiscal year ending June 30, 2027, are hereby appropriated from the opioid
4 abatement trust fund, established under RSA 126-A:83, to the alcohol abuse prevention and training
5 fund, established under RSA 176-A.

2025-1283h

AMENDED ANALYSIS

1. Transfers funds from the opioid abatement trust fund to the alcohol abuse prevention and training fund.

UNAPPROVED

Rep. Edwards, Rock. 31
March 25, 2025
2025-1363h
05/09

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Termination of Contracts Using Opioid
2 Abatement Funds. The department of health and human services shall terminate all contracts,
3 grants, or other agreements funded with opioid abatement funds with effective dates on or after May
4 1, 2025, for the purposes of funding provisions contained in this act.

UNAPPROVED

Rep. Edwards, Rock. 31
March 23, 2025
2025-1290h
07/02

Amendment to HB 2-FN-A-LOCAL

1 1 New Subparagraph; The State and Its Government; Governor's Commission on Alcohol and
2 Drug Abuse Prevention, Treatment, and Recovery; Meetings and Reports. Amend RSA 12-J:4, II by
3 inserting after subparagraph (i) the following new subparagraph:

4 (j) Specify and itemize funds spent on prevention, treatment and reduction of societal
5 and individual harm, recovery, and program monitoring and evaluation services and programs.

2025-1290h

AMENDED ANALYSIS

Add:

1. Requires the governor's commission on alcohol and drug abuse prevention, treatment, and recovery to specify and itemize funds spent on prevention, treatment and reduction of societal and individual harm, recovery, and program monitoring and evaluation services and programs.

Amendment to HB 2-FN-A-LOCAL

1 1 Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery.
2 Amend RSA 12-J:1 through RSA 12-J:4 to read as follows:

3 12-J:1 Commission Established; Membership; Terms.

4 There is hereby established a commission which shall serve in an advisory capacity to the
5 governor and the general court regarding ***the importance of prevention as well as*** the delivery of
6 effective and coordinated alcohol and ***other*** drug [~~abuse~~] ***misuse programs of*** prevention,
7 treatment ***using a public health informed approach to address addiction***, and recovery
8 services throughout the state. The commission shall consist of the following members:

9 I. Seven public members, 2 of whom shall be professionals knowledgeable about alcohol and
10 ***other*** drug [~~abuse~~] ***misuse*** prevention, one of whom shall be appointed by the governor and one of
11 whom shall be appointed by the senate president; 2 of whom shall be professionals knowledgeable
12 about alcohol and ***other*** drug [~~abuse~~] ***misuse*** treatment ***including reduction of societal and***
13 ***individual harm***, one of whom shall be appointed by the governor and one of whom shall be
14 appointed by the speaker of the house of representatives; 2 of whom shall be public members who
15 are not professionals within the alcohol and drug [~~addiction~~] ***misuse*** prevention and treatment
16 system, one of whom shall be appointed by the senate president and one of whom shall be appointed
17 by the speaker of the house of representatives; and one member in long-term recovery, appointed by
18 the governor.

19 II. Two members of the house of representatives, appointed by the speaker of the house of
20 representatives, and 2 members of the senate, appointed by the president of the senate. The term of
21 the legislative members of the commission shall be for the biennium and shall be coterminous with
22 membership in the general court. Legislative members shall receive mileage at the legislative rate
23 when attending to the duties of the commission.

24 III.(a)(1) The attorney general, or designee.

25 (2) The adjutant general, or designee.

26 (3) The administrative judge of the circuit court, or designee.

27 (4) The chairperson of the liquor commission, or designee.

28 (5) The commissioner of the department of health and human services, or designee.

29 (6) The director of juvenile justice services, department of health and human
30 services, or designee.

31 (7) The commissioner of the department of education, or designee.

32 (8) The commissioner of the department of corrections, or designee.

Amendment to HB 2-FN-A-LOCAL
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1 (9) The commissioner of the department of safety, or designee.

2 (10) The director of the office of alcohol and drug policy, department of health and
3 human services, or designee.

4 (11) The commissioner of the department of insurance, or designee.

5 (b) The members under this paragraph shall serve terms coterminous with their terms
6 in office.

7 IV.(a)(1) A representative of the Business and Industry Association of New Hampshire,
8 appointed by the association.

9 (2) A representative of the New Hampshire Medical Society, appointed by the
10 society.

11 (3) The chancellor of the community college system of New Hampshire, or designee.

12 (4) The chairman of the New Hampshire Suicide Prevention Council.

13 (5) A representative of the New Hampshire Nurses' Association, appointed by the
14 association.

15 (6) A representative of the New Hampshire Charitable Foundation, appointed by the
16 foundation.

17 (7) A representative of the New Hampshire Hospital Association, appointed by the
18 association.

19 (8) *The president of the New Hampshire Association of Chiefs of Police, or*
20 *designee.*

21 (b) A representative of the state's faith-based community, who shall be a nonvoting
22 member, appointed by the governor.

23 (c) The members under this paragraph shall serve 3-year terms.

24 12-J:2 Organization of Commission; Task Forces; Staffing.

25 I. The commission shall elect one of its members to serve as chairperson. The executive
26 director of the commission shall be the director of the appropriate division responsible for alcohol
27 and drug [abuse] *misuse* prevention and recovery, who shall serve without additional compensation.
28 Twelve members of the commission shall constitute a quorum.

29 II.(a) To assist the commission in the performance of its duties, the chairperson shall create
30 task forces. The chairperson shall initially create task forces to address the following issues:

31 (1) Prevention.

32 (2) Treatment *and reduction of societal and individual harm.*

33 (3) Recovery.

34 (4) Program monitoring and evaluation.

35 (b) To assist the commission in the performance of its duties, the chairperson may create
36 additional task forces.

1 (c) The commission chairperson shall appoint at least one commission member to serve
2 on each task force as chairperson.

3 (d) Based upon recommendations from each task force, the commission chairperson may
4 appoint non-commission members to serve as adjunct members of each task force for a term of one
5 year. In appointing adjunct members, the chairperson shall ensure that youth have the opportunity
6 to participate directly in the work of appropriate task forces.

7 (e) Each task force shall:

8 (1) Develop a mission statement, including its goals and objectives.

9 (2) Report to the commission on a regular basis concerning available programs,
10 funding, and unmet needs.

11 (3) Identify program areas where improved coordination is needed.

12 II-a. The chairperson shall create a budget task force comprised of the individuals listed in
13 RSA 12-J:1, III(a) to report biannually on financial expenditures for substance [~~abuse~~] **misuse**
14 related work throughout state government as detailed in RSA 12-J:4, III and recommend budget
15 policy priorities to the commission regarding the allocation of funding alcohol and **other** drug
16 prevention, treatment **including reduction of societal and individual harm**, and recovery
17 services across state agencies and throughout the state.

18 III. All executive branch departments shall provide administrative support to the
19 commission. The executive director of the commission shall direct and coordinate the administrative
20 support to the commission.

21 IV. All executive branch departments shall respond promptly to written requests from the
22 commission for information concerning the alcohol and drug abuse prevention, treatment, and
23 recovery programs and services provided by them and the costs and funding sources for such
24 programs and services.

25 ***12-J:2-a Definition of Harm Reduction.***

26 ***I. For the purposes of this chapter, RSA 126-A, RSA 318-B:93, RSA 328-D:3, and RSA***
27 ***329:16-g, "harm reduction" is an approach that emphasizes engaging directly with people***
28 ***who use alcohol and other drugs to prevent overdose and infectious disease transmission,***
29 ***improve the physical, mental, and social function of those served, and offer low-threshold***
30 ***options for accessing substance use disorder treatment and other health care services.***
31 ***Harm reduction shall be balanced by the imperative to protect society from the ravages of***
32 ***alcohol or drug misuse.***

33 ***II. This approach shall be limited to the following:***

34 ***(a) Connecting individuals to overdose education, counseling, and referral to***
35 ***treatment for infectious diseases and substance use disorders.***

1 **(b) Distributing opioid overdose reversal medications, such as naloxone to**
2 **individuals at risk of overdose, or to those who might respond to an overdose, and provide**
3 **training in overdose reversal and prevention.**

4 **(c) Making available substance test kits, including fentanyl test strips.**

5 **(d) Lessening harms associated with drug use and related behaviors that**
6 **increase the risk of infectious diseases, including HIV, viral hepatitis, and bacterial and**
7 **fungal infections; via referrals, syringe service programs, sharps disposal and medication**
8 **disposal kits, wound care supplies medication lock boxes, education, testing, and**
9 **prophylactic measures.**

10 **(e) Reducing infectious disease transmission among people who use drugs,**
11 **including those who inject drugs by equipping them with accurate information and**
12 **facilitating referral to resources.**

13 **(f) Reducing overdose deaths, promoting linkages to care, and facilitating**
14 **appropriate co-location of services as part of a comprehensive, integrated approach.**

15 **(g) Providing education and public awareness programs to reduce stigma**
16 **associated with substance use and co-occurring disorders.**

17 **(h) Promoting a philosophy of hope and healing by utilizing those with lived**
18 **experience of recovery in the management of harm reduction services, and connecting those**
19 **who have expressed interest to treatment, peer support workers and other recovery support**
20 **services.**

21 **(i) Promoting a healthy society by mitigating the harmful effects of individual**
22 **misuse of alcohol and other drugs.**

23 12-J:3 Duties.

24 The duties of the commission shall be to:

25 I. Develop and revise, as necessary, a statewide plan for the effective prevention of alcohol
26 and **other** drug [abuse] **misuse**, particularly among youth, and a comprehensive system of
27 treatment **including reduction of societal and individual harm** and recovery services for
28 individuals and families affected by alcohol and **other** drug [abuse] **misuse**. **Nothing in RSA 12-J**
29 **should be construed to limit care of chronic pain and hospice and palliative care patients,**
30 **including use of the term “misuse” which shall be utilized, as intended, to broaden the**
31 **scope of work across the substance use continuum of care.** The statewide plan shall:

32 (a) Identify the causes, the nature and scope, and the impact of alcohol and **other** drug
33 [abuse] **misuse** in New Hampshire.

34 (b) Identify and prioritize unmet needs for prevention **as a leading state initiative,**
35 treatment **including reduction of societal and individual harm,** and recovery services.

36 (c) Recommend initiatives and policy considerations to the general court to reduce the
37 incidence of alcohol and **other** drug [abuse] **misuse** in New Hampshire.

1 (d) Identify and quantify public and private resources available to support alcohol and
2 drug [~~abuse~~] **misuse** prevention, treatment **including reduction of societal and individual**
3 **harm**, and recovery.

4 (e) Specify additional resources necessary to address unmet needs for prevention,
5 treatment **including reduction of societal and individual harm**, and recovery.

6 (f) Specify evaluation and monitoring methodology.

7 II. Advise the governor and general court on and promote the development of effective
8 community-based alcohol and **other** drug [~~abuse~~] **misuse** prevention strategies.

9 III. Advise the governor and the general court on and promote the development of treatment
10 services, **including reduction of societal and individual harm**, to meet the needs of **society**
11 **and** citizens addicted to alcohol or other drugs.

12 III-a. Advise the governor and the general court on and promote the development of recovery
13 services to meet the needs of citizens in recovery from alcohol and other drug misuse.

14 IV. Identify unmet needs and the resources required to reduce the incidence of alcohol and
15 drug [~~abuse~~] **misuse** in New Hampshire and to make recommendations to the governor and general
16 court regarding legislation and funding to address such needs.

17 V. Authorize the disbursement of moneys from the alcohol abuse prevention and treatment
18 fund, pursuant to RSA 176-A:1, III.

19 VI. Make presentations at least once each legislative session to the house and senate finance
20 committees, the senate health and human services committee, the house health, human services and
21 elderly affairs committee, and the fiscal committee of the general court.

22 VII. Develop a handout which shall describe the risks of opioid use and how to mitigate
23 them for the purposes of RSA 318-B:16-a.

24 12-J:4 Meetings and Reports.

25 I. The commission shall meet at least 4 times each year and may convene public hearings as
26 necessary to promote the goals of the commission.

27 II. The commission shall submit an annual report to the governor, speaker of the house of
28 representatives, president of the senate, chairpersons of the house and senate finance committees,
29 chairperson of the house health, human services and elderly affairs committee, the chairperson of
30 the senate health and human services committee, and the chairperson of the fiscal committee of the
31 general court by October 1 of each year regarding the activities of the commission. The annual
32 report shall:

33 (a) Identify alcohol and **other** drug [~~abuse~~] **misuse** prevention **as a leading state**
34 **initiative**, treatment **including reduction of societal and individual harm**, and recovery
35 services and programs provided by state departments and agencies or funded in whole or in part by
36 state or federal funds;

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- Page 6 -

1 (b) Indicate the progress made during the prior year toward the implementation of the
2 statewide plan developed by the commission pursuant to RSA 12-J:3, I;

3 (c) Recommend any revisions to the statewide plan developed pursuant to RSA 12-J:3, I;

4 (d) Identify and prioritize unmet needs for prevention, treatment ***including reduction***
5 ***of societal and individual harm***, and recovery;

6 (e) Indicate the progress, or lack thereof, in addressing the unmet needs;

7 (f) Recommend initiatives and/or policy considerations to the governor and the general
8 court to address the unmet needs;

9 (g) Specify the resources and any legislation necessary to support existing programs for
10 prevention, treatment ***including reduction of societal and individual harm***, and recovery and
11 to develop, implement, support, and evaluate the initiatives recommended by the commission;

12 (h) In even-numbered years the report may include specific recommendations for funds
13 to be included in the next state biennial budget to support alcohol and ***other*** drug [~~abuse~~] ***misuse***
14 prevention, treatment ***including reduction of societal and individual harm***, and recovery
15 services and programs; and

16 (i) Incorporate the findings and recommendations of the report required under
17 paragraph II-a and make specific findings and recommendations regarding public awareness,
18 education, and legislation to address the dangers of synthetic drugs.

19 II-a. The commission shall prepare a report, including recommendations for policies to be
20 implemented for coordinating public awareness of and education in the ***importance of prevention***
21 ***and health promotion, as well as the*** dangers of synthetic drugs and other emerging or designer
22 synthetic drug substances. The report shall include substantive input from the commission's
23 member agencies, including the department of health and human services, bureau of drug and
24 alcohol services, the attorney general, the department of safety, and the department of education.
25 The commission shall submit its initial report, including recommendations, to the senate president,
26 the speaker of the house of representatives, and the governor no later than 3 months after the
27 effective date of this paragraph. The commission shall submit subsequent reports, including
28 recommendations, to the senate president, the speaker of the house of representatives, and the
29 governor annually thereafter.

30 III.(a) To assist the commission in the timely completion of its annual report, each
31 commission member representing an executive branch department or entity shall provide the
32 information specified in paragraph II for its department or entity to the commission on or before
33 August 1 of each year.

34 (b) The commission shall submit a mid-year report to the governor, speaker of the house
35 of representatives, president of the senate, chairpersons of the house and senate finance committees,
36 chairperson of the house health, human services and elderly affairs committee, chairperson of the
37 senate health and human services committee, and chairperson of the fiscal committee of the general

1 court by March 1 of each year regarding the current state of drug [abuse] ***misuse***, prevention,
2 treatment ***including reduction of societal and individual harm***, and recovery. The commission
3 shall include a dashboard of the following, both in the interim and the annual report as required in
4 RSA 12-J:4, II, that includes but is not limited to:

5 (1) ***A summary of known prevention programs to include the general type***
6 ***and approaches being followed.***

7 (1-a) The number of known drug overdoses, broken out by drug involved.

8 (2) The number of deaths attributable to overdoses, as reported by the chief medical
9 examiner, broken out by drug involved.

10 (3) The number of people known to be in treatment or recovery programs supported
11 by commission funding.

12 (4) The accessibility and availability of treatment programs, including waitlists.

13 (5) The number of individuals in drug court programs, as reported by the judicial
14 branch.

15 (6) The number of individuals in diversion programs, as reported by the judicial
16 branch.

17 (7) The number of convictions for drug related offenses, as reported by the judicial
18 branch.

19 (8) The number of persons incarcerated for drug related offenses as reported by the
20 department of corrections.

21 (9) Funds expended and balances remaining, programs and strategies created or
22 sustained by the funds, and an estimate of the number of individuals served by these funds.

23 (10) Barriers to data access and availability, with proposed strategies to develop or
24 enhance data capacity.

25 (11) Performance outcomes pursuant to National Outcomes Measurement Standards
26 (NOMS) as required with federal funding sources.

27 (12) Any other information requested by the governor or general court.

28 (c) All data required in subparagraph (b) shall be presented in the aggregate to protect
29 the privacy of the individual. The commission shall delete any data required in those paragraphs
30 that enables the personal identification of an individual.

31 IV. In the reports submitted by the commission to the governor, speaker of the house of
32 representatives, president of the senate, chairpersons of the house and senate finance committees,
33 chairperson of the house health, human services and elderly affairs committee, chairperson of the
34 senate health and human services committee, and chairperson of the fiscal committee of the general
35 court, the report shall include outcome data and/or research citations about the efficacy of funded
36 programs based upon evidence of program results.

Amendment to HB 2-FN-A-LOCAL
- Page 8 -

1 2 Report on Cost-Effectiveness and Outcomes of Programs Required. Amend RSA 12-J:5, I(a)(2)
2 to read as follows:

3 (2) Prevention programs, *including reduction of societal and individual harm.*

4 3 New Section; Substance Use Disorder Access Points. Amend RSA 126-A by inserting after
5 section 98 the following new section:

6 126-A:99 Substance Use Disorder Access Points Established.

7 I. With the availability of sufficient federal funding, the department of health and human
8 services shall establish and administer statewide access points for delivery of substance use services
9 and supports. The access points shall provide information and referrals for screening and
10 evaluation; treatment, including medications for substance use disorders; prevention, and treatment
11 including naloxone; supports and services to assist in long-term recovery; and peer recovery support
12 services.

13 II. The commissioner of the department of health and human services shall include the
14 administration and operation of the access points in the department's report to the governor's
15 commission on alcohol and other drug misuse prevention, treatment, and recovery under RSA 12-J:4,
16 III.

17 III. The program shall be funded through the state opioid response grant from the
18 Substance Abuse and Mental Health Services Administration. In addition, the department may
19 accept funds from any source, including state appropriations, federal funds, and private gifts, grants,
20 or donations to operate and sustain the access points.

21 4 Syringe Service Programs; Activities. Amend RSA 318-B:43, II(b) to read as follows:

22 (b) Coordinate and collaborate with other local agencies, *including law enforcement*
23 *agencies*, organizations, and providers involved in comprehensive prevention programs for people
24 who inject drugs to minimize duplication of effort.

25 5 New Subparagraph; Syringe Service Programs; Activities. Amend RSA 318-B:43, II by
26 inserting after subparagraph (b) the following new subparagraph:

27 (b-1) Consult and inform municipal law enforcement agencies concerning syringe service
28 program and harm reduction activities.

29 6 New Section; Controlled Drug Act; Syringe Service Programs. Amend RSA 318-B by inserting
30 after section 43 the following new section:

31 318:43-a Syringe Service Programs; Authorized Activities and Funding Sources.

32 I. Notwithstanding any other law to the contrary, any person authorized under RSA 318-
33 B:43 to operate a syringe service program may engage in eligible activities, as defined in paragraph
34 IV.

35 II. State funds including, but not limited to, funds received by the state in the New
36 Hampshire opioid litigation settlement may be used to support the activities of syringe service
37 programs as permitted under this section and RSA 318-B:43.

Amendment to HB 2-FN-A-LOCAL
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1 III. No person shall be prohibited from using federal funds for eligible activities and syringe
2 service programs as authorized in RSA 318-B:43, so long as the use of the federal funds is consistent
3 with federal law and any rules governing use of the funds.

4 IV. In this section:

5 (a) "Drug checking" means the process of identifying, analyzing, or detecting the
6 composition of a drug or the presence or composition of an unexpected substance within the drug.

7 (b) "Drug checking equipment" means equipment, products, or materials used, designed
8 for use, or intended for use to perform drug checking, including materials and items used by the
9 person operating the equipment or products to store, measure, or process samples for analysis.
10 Drug checking equipment includes fentanyl test strips, other immunoassay drug testing strips,
11 colorimetric reagents, spectrometers such as Fourier Transform Infrared and Raman spectrometers,
12 and equipment that uses high-performance liquid chromatography, gas chromatography, mass
13 spectrometry, and nuclear magnetic resonance techniques. Drug checking equipment does not
14 include the substances being analyzed, drug packaging, or drug supplies.

15 (c) "Drug supplies" means hypodermic needles, syringes, preparation containers, cotton,
16 filters, alcohol wipes, water, saline, tourniquets, disposal containers, wound care items, pipes,
17 bubbles, snorting straws, pipe covers, and other items used in the consumption of drugs;

18 (d) "Eligible activities" means:

19 (1) Purchasing, obtaining, providing, transporting, distributing, using, or evaluating
20 the use of drug checking equipment;

21 (2) Training, both initial and ongoing, about drug checking equipment, the process
22 of drug checking, and the purpose of drug checking;

23 (3) Technical assistance concerning drug checking equipment, the process of drug
24 checking, and the purpose of drug checking; and

25 (4) Providing drug supplies.

26 7 New Paragraph; Controlled Drug Act; Definition of Drug Misuse Added. Amend RSA 318-B:1
27 by inserting after paragraph X-b the following new paragraph:

28 X-c. "Drug misuse" means the use of a substance for a purpose that is not consistent with
29 legal or medical guidelines.

30 8 Effective Date. Sections 1-7 shall take effect 30 days after its passage.

Amendment to HB 2-FN-A-LOCAL

1 1 Senior Volunteer Grant Program; Establishment of Program. Amend RSA 161-F:40 to read as
2 follows:

3 161-F:40 Establishment of Program.

4 I. There is hereby established a senior volunteer grant program in the department. The
5 program shall, within the limits of funds appropriated, reimburse the senior companion [~~and foster~~
6 ~~grandparents programs~~] **program** for the volunteers' stipends, benefits, travel, and administrative
7 expenses incurred in providing volunteer services.

8 II. The funds so appropriated shall be disbursed by the department in quarterly payments.
9 The funds shall be allocated to *the* senior companion [~~and foster grandparents programs~~] **program**.

2025-0923h

AMENDED ANALYSIS

Add:

1. This bill repeals reimbursement of funds for the foster grandparent program.

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Contracts. All department of health and human
2 services contracts or contract amendments shall include a provision requiring the contractor to
3 comply with the patients' bill of rights as applicable pursuant to RSA 151:21.

4 2 Applicability. Section 1 of this act shall apply to contracts or contract amendments entered
5 into on or after the effective date of that section.

6 3 Repeal. Section 1 of this act, relative to department of health and human services contracts, is
7 repealed.

8 4 Effective Date.

9 I. Section 3 of this act shall take effect November 30, 2026.

10 II. Sections 1 and 2 of this act shall take effect 60 days after its passage.

2025-1140h

AMENDED ANALYSIS

ADD:

1. Requires the department of health and human services to include references to the patients' bill of rights in contracts and contract addenda

Rep. Edwards, Rock. 31
March 19, 2025
2025-1132h
08/11

Amendment to HB 2-FN-A-LOCAL

1 1 Home Dialysis; State Program Implementation. The department of health and human
2 services shall, as part of the state Medicaid program, accelerate the implementation of the at home
3 dialysis program. The department may, as part of its contracts with managed care organizations,
4 provide incentives for such acceleration if the commissioner deems it necessary.

2025-1132h

AMENDED ANALYSIS

1. Requires the department of health and human services to accelerate the implementation of home dialysis.

UNAPPROVED

Amendment to HB 2-FN-A-LOCAL

1 1 New Section; Circumcision under the State Medicaid Plan; Restrictions. Amend RSA 167 by
2 inserting after section 3-m the following new section:

3 167:3-n State Medicaid Plan; Circumcision.

4 I. In this section:

5 (a) "Health care provider" means a hospital, health care facility, physician, resident
6 physician, physician assistant, or registered nurse, practicing in the state of New Hampshire.

7 (b) "Newborn child" means a person under 1 year of age.

8 (c) "Child" or "minor" means a person who is under 18 years of age.

9 II. Medical assistance provided under the state Medicaid plan shall not include the
10 circumcision of children unless the procedure is medically necessary pursuant to paragraphs III or
11 IV.

12 III. Medically necessary circumcision for a newborn child shall be valid for the following
13 diagnoses:

14 (a) Congenital obstructive urinary tract anomalies.

15 (b) Neurogenic bladder.

16 (c) Spina bifida.

17 (d) Recurrent urinary tract infections.

18 IV. Medically necessary circumcision for a minor shall be valid for the following diagnoses:

19 (a) A documented prior history of recurrent urinary tract infections.

20 (b) Documented vesicoureteral reflux of at least a Grade III.

21 (c) Paraphimosis unresponsive to medical therapy.

22 (d) Recurrent balanoposthitis.

23 (e) Recurrent balanitis or balanitis xerotica obliterans.

24 (f) Congenital chordee.

25 (g) Phimosis after puberty which has been unresponsive to medical therapy.

26 (h) Secondary or acquired phimosis causing urinary obstruction, hematuria or preputial
27 pain unresponsive to medical therapy.

28 (i) Condyloma acuminatum.

29 (j) Malignant neoplasm of the prepuce.

30 (k) Or any diagnosed condition for which a circumcision is deemed medically necessary
31 by a physician or other health care provider licensed in New Hampshire.

32 2 Effective Date. Section 1 of this act shall take effect January 1, 2026.

Amendment to HB 2-FN-A-LOCAL

1 1 New Paragraph; Department of Health and Human Services; Medicaid; Outpatient Procedure
2 Incentive Program. Amend RSA 126-A:3 by inserting after paragraph VIII the following new
3 paragraph:

4 IX. The department shall seek to implement in the Medicaid care management program and
5 the contractual agreements with each managed care organization an outpatient procedure incentive
6 program for Medicaid beneficiaries to choose, when clinically appropriate, to receive outpatient
7 procedures, including ambulatory surgical care, in a lower cost setting. The outpatient procedure
8 incentive program shall be included by the department in the managed care organization withhold
9 and incentive program and part of each managed care organization's member incentive program,
10 subject to federal limitations. The outpatient procedure incentive program shall be included in the
11 next contract amendment between the department and the managed care organizations after the
12 effective date of this paragraph. Within 30 days of the effective date of this paragraph, the
13 department shall submit the plan for implementation of the outpatient procedure incentive program
14 to the fiscal committee of the general court.

2025-1402h

AMENDED ANALYSIS

1. Directs the department of health and human services to seek to implement an outpatient procedure incentive program under Medicaid managed care, to encourage Medicaid beneficiaries to choose to receive outpatient procedures, including ambulatory surgical care, from the lower cost provider when clinically appropriate.

Amendment to HB 2-FN-A-LOCAL

1 1 Public Health; Department of Health and Human Services; Commissioner of Health and
2 Human Services. Amend RSA 126-A:5, XIX-a(a)(1) to read as follows:

3 (1) The commissioner shall pursue contracting options to administer the state's
4 Medicaid dental program with the goals of improving access to dental care for Medicaid populations,
5 improving health outcomes for Medicaid enrollees, expanding the provider network, increasing
6 provider capacity, fostering individual behaviors that promote good oral health, and retaining
7 innovative programs that improve access and care through a value-based care model. ***The***
8 ***commissioner shall prepare and submit a report that contains a clinical and financial***
9 ***research study to determine cost-avoidance associated with adult dental benefits under***
10 ***this paragraph. The study shall consider the impact on emergency room visits, patient***
11 ***infections, and any other factors the commissioner determines should be included in the***
12 ***study. The commissioner shall submit their report to the chairs of the senate finance and***
13 ***house finance committees on or before January 1, 2027.***

2025-1195h

AMENDED ANALYSIS

Add:

I. Requires the commissioner of the department of health and human services to submit a report to the general court that contains a clinical and financial research study concerning adult dental benefits.

Amendment to HB 2-FN-A-LOCAL

1 1 Prescription Drug Affordability Board; Definition of Public Payor. Amend RSA 126-BB:1, VI is
2 repealed and reenacted to read as follows:

3 VI. "Public payor" means any health plan which includes coverage for prescription drugs
4 and is paid for in whole or in part by state general funds or any division of state, county, or
5 municipal government that administers a health plan for its employees or an association of state,
6 county, or municipal employers that administers a health plan for its employees. "Public payor" also
7 includes health care paid for by the department of corrections.

8 2 New Subparagraph; Prescription Drug Affordability Board; Alternate Member Added. Amend
9 RSA 126-BB:2, I by inserting after subparagraph (c) the following new subparagraph:

10 (d) One alternate appointed by the commissioner of the department of health and
11 human services selected from the advisory council established in RSA 126-BB:4. Notwithstanding
12 paragraph II, the alternate board member's term shall be coterminous with their membership on the
13 advisory council. The alternate board member may participate in deliberations of the board in the
14 event any member elects to be recused as provided in RSA 126-BB:3 or is absent.

15 3 Prescription Board Affordability Board; Chairperson. Amend RSA 126-BB:2, IV to read as
16 follows:

17 IV. The chair of the board shall be elected by an affirmative vote of at least 4 of the 5
18 members of the board **and shall serve a 2-year term. The chair of the board shall be elected**
19 **in odd numbered years within 3 months of submission of the annual report specified in**
20 **RSA 126-BB:5, IV.**

21 4 Prescription Drug Affordability Board; Employee Authorization. Amend RSA 126-BB:2, VI to
22 read as follows:

23 VI. The board shall be administratively attached to the department of health and human
24 services. ~~[For a limited time,]~~ The board may employ an executive director, who shall be an
25 unclassified employee. The executive director shall be appointed by and serve at the pleasure of the
26 board. ~~[Said position shall be effective for no more than 2 years following the date of hire of the~~
27 ~~individual first selected to fill the position. The board may also employ one contracted employee or~~
28 ~~more,]~~ **The board also may employ classified or contract employees or contract for similar**
29 **services**, dependent on the availability of funds.

30 5 Prescription Drug Affordability Board; Competitive Bid Required. Amend RSA 126-BB:11 to
31 read as follows:

Amendment to HB 2-FN-A-LOCAL
- Page 2 -

1 126-BB:11 Competitive Bid Required. The contracts entered into by the board, including those
2 for consulting services or personal contract services, shall be subject to the competitive bid process.
3 Such contracts shall [also] be approved by [~~the fiscal committee of the general court,~~] the governor[~~]~~
4 and the executive council.

5 6 Lapse Extension; Prescription Drug Affordability Board. Of funds appropriated to account 05-
6 95-95-952010-6273, prescription drug affordability board, in the fiscal year ending June 30, 2025, up
7 to \$20,000 shall be nonlapsing until June 30, 2027.

8 7 Section 6 of this act shall take effect June 30, 2025.

UNAPPROVED

Amendment to HB 2-FN-A-LOCAL

1 1 Pharmacists and Pharmacies; Pharmacies; Substituting Biological Products. Amend RSA
2 318:47-dd to read as follows:

3 318:47-dd Pharmacies; Substituting Biological Products.

4 I. In this section:

5 (a) "Biological product" means a virus, therapeutic serum, toxin, antitoxin, vaccine,
6 blood, blood component or derivative, allergenic product, protein (except any chemically synthesized
7 polypeptide), or analogous product, or arsphenamine or derivative of arsphenamine (or any other
8 trivalent organic arsenic compound), applicable to the prevention, treatment, or cure of a disease or
9 condition of human beings.

10 (b) "Proper name" means the nonproprietary name for a biological product designated by
11 the federal Food and Drug Administration license for use upon each package of the product.

12 (c) "Interchangeable biological product" means a biological product that the federal Food
13 and Drug Administration:

14 (1) Has licensed and determined meets the standards for interchangeability
15 pursuant to 42 U.S.C. section 262(k)(4); or

16 (2) Has determined **does not require an interchangeable study to be** [is]
17 therapeutically equivalent as set forth in the latest edition of or supplement to the federal Food and
18 Drug Administration's Approved Drug Products with Therapeutic Equivalence Evaluations.

19 II. The board shall maintain a link on its website to the federal Food and Drug
20 Administration's Lists of Licensed Biological Products with Reference Product Exclusivity and
21 Biosimilarity or Interchangeability Evaluations.

22 III. A pharmacist may substitute a biological product [~~pursuant to this section only if it has~~
23 ~~been licensed by the federal Food and Drug Administration as an interchangeable biological product~~]
24 for the prescribed biological product **when it meets the definition of interchangeable biological**
25 **product.**

26 IV. When a pharmacist dispenses an interchangeable biological product for the prescribed
27 biological product, the pharmacist or his or her designee shall inform the patient.

28 V. A pharmacist shall not substitute an interchangeable biological product pursuant to this
29 section if:

30 (a) The prescriber indicates that substitution is not authorized by specifying on the
31 prescription "medically necessary" on a paper prescription, or uses electronic indications when

1 transmitted electronically, or gives instructions when transmitted orally that the biological product
2 prescribed is medically necessary; *or*

3 ***(b) The patient informs the pharmacist that he or she does not wish to receive***
4 ***an interchangeable biological product.***

5 VI.(a) Within 3 business days following the dispensing of a biological product, the dispensing
6 pharmacist or the pharmacist's designee shall make an entry of the specific product provided to the
7 patient, including the name of the product and the manufacturer. The communication shall be
8 conveyed by making an entry that is electronically accessible to the prescriber through:

- 9 (1) An interoperable electronic medical records system;
- 10 (2) An electronic prescribing technology; or
- 11 (3) A pharmacy benefit management system; or
- 12 (4) A pharmacy record.

13 (b) Entry into an electronic records system as described in this paragraph is presumed to
14 provide notice to the prescriber. Otherwise, the pharmacist shall communicate the biological product
15 dispensed to the prescriber using facsimile, telephone, electronic transmission, or other prevailing
16 means, provided that the communication shall not be required where:

- 17 (1) There is no federal Food and Drug Administration-approved interchangeable
18 biological product for the biological product prescribed; or
- 19 (2) A refill prescription is not changed from product dispensed on the prior filling of
20 the prescription.

21 VII. The label of all biological products dispensed by a pharmacist shall include the proper
22 name and the name of the manufacturer of the product.

23 2 Effective Date. Section 1 of this act shall take effect 60 days after its passage.

Amendment to HB 2-FN-A-LOCAL

1 1 New Paragraph; Public Health; Department of Health and Human Services; General
2 Provisions. Amend RSA 126-A:3 by inserting after paragraph V the following new paragraph:

3 V-a.(a) When deemed medically necessary and cost effective by the department of health
4 and human services' chief medical officer, a standing order may be issued by the chief medical officer
5 for certain Medicaid covered over-the-counter (non-legend) medications, medical supplies, and
6 laboratory tests. Such standing order shall be reviewed annually by the chief medical officer for
7 continuation or discontinuation of the standing order.

8 (b) The chief medical officer's standing order, as provided in subparagraph (a), shall also
9 permit non-Medicaid recipients to obtain over-the-counter (non-legend) medications, medical
10 supplies, and laboratory tests pursuant to the standing order. Nothing in this paragraph shall
11 prohibit insurers from applying appropriate medical management techniques or require insurers to
12 pay for the cost of these items unless expressly stated by the insurer's terms of coverage.

13 (c) No health care professional, acting in good faith and with reasonable care, who issues
14 a standing order, or who dispenses, or distributes over-the-counter (non-legend) medications,
15 medical supplies, or laboratory tests by standing order shall be subject to any criminal or civil
16 liability, or any professional disciplinary action, for any action authorized by this paragraph or any
17 outcome resulting from an action authorized by this paragraph.

2025-1386h

AMENDED ANALYSIS

Add:

1. Allows the department of health and human services' chief medical officer to place standing orders for certain Medicaid covered over-the-counter (non-legend) medications, medical supplies, and laboratory tests.

Rep. Edwards, Rock. 31
March 24, 2025
2025-1328h
06/09

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Office of Health Access; Name Change; Hiring
2 Freeze. The department of health and human services, office of health equity shall be renamed the
3 office of health access. The office shall remain in compliance with the terms of Executive Order
4 2025-02, regarding executive branch hiring for the biennium ending June 30, 2027, even if the
5 executive order is lifted. Furthermore, the office of health access shall serve every person with equal
6 dignity and respect. The office shall not contract with or pay vendors who fail to serve every person
7 with equal dignity and respect. The office and all vendors shall comply with RSA 354-B, also known
8 as the "Civil Rights Act."

2025-1328h

AMENDED ANALYSIS

1. Directs the department of health and human services to rename the office of health equity as the office of health access and directs the office to comply with the hiring freeze in Executive Order 2025-02 for the biennium ending June 30, 2027.

Amendment to HB 2-FN-A-LOCAL

1 1 Directive; Department of Health and Human Services. The department of health and human
2 services shall serve every person with equal dignity and respect. The department shall not contract
3 with or pay vendors who fail to serve every person with equal dignity and respect. The department
4 and all vendors shall comply with RSA 354-B, also known as the "civil rights act." In the event that
5 the department determines that a contract violates the provisions of this section, it shall terminate
6 said contract in accordance with applicable law and contract provisions, and the state shall be
7 entitled to recover any funds unspent by the contractor at the time of termination.

2025-1277h

AMENDED ANALYSIS

ADD:

1. Directs the department of health and human services to serve every person with equal dignity and respect and to not contract with or pay vendors who fail to serve every person with equal dignity and respect.

Rep. Edwards, Rock. 31
March 19, 2025
2025-1135h
09/05

Amendment to HB 2-FN-A-LOCAL

1 1 Agency Directive; Department of Health and Human Services. For the biennium ending June
2 30, 2027, the department of health and human services shall not enroll any new participants into the
3 state loan repayment program (SLRP). The department may continue to fund existing agreements
4 with existing participants who enrolled in the SLRP prior to the effective date of this section.

2025-1135h

AMENDED ANALYSIS

Add:

Directs the department of health and human services not to enroll any new participants into the state loan repayment program or the biennium ending June 30, 2027.

Amendment to HB 2-FN-A-LOCAL

1 1 Youth Detention Center; Construction Funds. Amend 2023, 79:443 to read as follows:
2 79:443 Youth Detention Center; Construction Funds. Notwithstanding any other act of the
3 legislature or law to the contrary, any secured treatment facility constructed to replace the current
4 Sununu Youth Services Center shall be funded entirely with federal discretionary funds
5 appropriated in the American Rescue Plan Act of 2021, Public Law 117-2, including any funds which
6 have previously been allocated by the governor but which have not been expended. No state general
7 funds shall be appropriated for the purpose of constructing the replacement facility and any funds
8 appropriated to the project shall not be transferred or used for any other purpose. ***The use of***
9 ***general funds or federal discretionary funds which may become available, may be utilized***
10 ***to support activities or infrastructure to integrate facilities or operations between***
11 ***Hampstead Hospital and the replacement facility. The department shall undertake an***
12 ***initiative to consider establishment of a new permanent name for the Youth Development***
13 ***Center.***

2025-1273h

AMENDED ANALYSIS

Add:

I. Allows general funds to be used to support activities and infrastructure at a facility that replaces the Sununu Youth Services Center.

Amendment to HB 2-FN-A-LOCAL

1 1 Residential Care and Health Facility Licensing; License or Registration Required. Amend
2 RSA 151:4-a, II(a) to read as follows:

3 II.(a) Any person or entity proposing to establish [~~an ambulatory surgical center, emergency~~
4 ~~medical care center,~~] **a** hospital[, ~~birthing center, drop-in or walk-in care center, dialysis center, or~~
5 ~~special health care service]~~ within a radius of 15 miles of the primary physical location of a New
6 Hampshire hospital certified as a critical access hospital pursuant to 42 C.F.R 485.610(b) and (c),
7 shall give written notice of the intent to establish a health care facility within a 15 mile radius with
8 a description of the facility [~~or special health care service]~~ to the chief executive officer of the hospital
9 by certified mail.

10 2 Effective Date. Section 1 of this act shall take effect 60 days after its passage.

AMENDED ANALYSIS

ADD:

1. Exempts ambulatory surgical centers, emergency medical care centers, birthing centers, drop-in or walk-in care centers, dialysis centers, and special health care services from the notice and consent requirements for establishment within 15 miles of a critical access hospital.

Amendment to HB 2-FN-A-LOCAL

1 1 New Paragraph; Medicaid to Schools Program; Termination. Amend RSA 186-C:25 by
2 inserting after paragraph VII the following new paragraph:

3 VIII. The program shall terminate statewide if the federal government or state adopts any
4 policy contrary to a policy requiring parental control of all medical services provided to children. If a
5 local school district adopts such a contrary policy, the program shall terminate for that school only.

AMENDED ANALYSIS

ADD:

1. Provides for the termination of the Medicaid to schools program under certain circumstances.

UNAPPROVED

Rep. Edwards, Rock. 31
March 21, 2025
2025-1247h
05/02

Amendment to HB 2-FN-A-LOCAL

1 1 Lapse Extension; Department of Health and Human Services; Granite United Way. Amend
2 2023, 79:559 to read as follows:

3 79:559 Appropriation; Department of Health and Human Services. There is hereby
4 appropriated to the department of health and human services, the sum of \$2,054,360 for the fiscal
5 year ending June 30, 2023, which shall not lapse until June 30, [2025] **2027**, for the purpose of
6 Granite United Way administering the Recovery Friendly Workplace Initiative, which promotes
7 individual wellness for Granite Staters by empowering workplaces to provide support for people
8 recovering from substance use disorder. The governor is authorized to draw a warrant for said sum
9 out of any money in the treasury not otherwise appropriated.

2025-1247h

AMENDED ANALYSIS

1. Extends a prior appropriation to the department of health and human services for administration of a substance use disorder recovery initiative by Granite United Way.

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Individuals with Developmental Disabilities;
2 Funding for Recreational Services. Amend 2024, 376:4, V to read as follows:

3 V. Payment for recreational **and socialization** services shall be limited to [~~\$600~~] **\$595** per
4 individual.

5 2 Appropriation; Lapse Date. Amend 2024, 376:4, II, to read as follows:

6 II. In order to ensure that costs to access recreational **and socialization** services are
7 covered, and that individuals with developmental disabilities are able to participate in recreational
8 **and socialization** activities within their communities, the sum of \$500,000 is appropriated to the
9 department of health and human services for the biennium ending June 30, 2025. This
10 appropriation is in addition to any other funds appropriated to the department of health and human
11 services. The governor is authorized to draw a warrant for said sums out of any money in the
12 treasury not otherwise appropriated. Any unexpended funds shall lapse to the general fund on June
13 30, [~~2025~~] **2027**.

14 3 New Section; Recreational Services Special Fund. Amend RSA 171-A by inserting after
15 section 33 the following new section:

16 174-A:34 Purpose; Establishment of the Recreational Services Special Fund.

17 I. There is hereby established a fund designated as the recreational and socialization
18 services fund to provide financial support for recreational and socialization services for individuals
19 with developmental disabilities. The fund shall accept donations, grants, and contributions.
20 Notwithstanding RSA 287-D:1, IV and RSA 287-E:1, V, the administrator of the fund shall be
21 recognized as a charitable organization for the purpose of qualifying for a charitable organization
22 license for games of chance, bingo, and lucky-7

23 II. The fund shall be administered by the department of health and human services and
24 used exclusively for providing or supporting recreational and socialization services for individuals
25 with developmental disabilities.

26 III. Donations to the fund shall be deposited into a nonlapsing account, continuously
27 appropriated to the department of health and human services, and unspent funds shall not lapse but
28 shall remain available for their designated purpose in subsequent fiscal years.

29 IV. The recreational and socialization services fund is hereby authorized to participate as a
30 charity eligible to receive contributions from gaming facilities licensed under RSA 287-D and RSA
31 287-E.

Amendment to HB 2-FN-A-LOCAL
- Page 2 -

1 4 New Subparagraphs; Application of Receipts; Recreational and Socialization Services Fund.
2 Amend RSA 6:12, I(b) by inserting after subparagraph (399) the following new subparagraphs:

3 (400) Moneys deposited in the recreational and socialization services fund
4 established in RSA 174-A:34.

5 5 Historic Horse Racing Facilities and Machines; Charitable Organization Designation.
6 Notwithstanding any general or special law to the contrary, any person, association, corporation, or
7 any other type of entity licensed by the lottery commission to hold any live running or harness race
8 or meet, offer wagers on historic horse races, or conduct any simulcast running or harness horse race
9 or meet, at which pari-mutuel pools are sold, shall be considered a charitable organization as defined
10 in RSA 287-A:1, II.

11 6 Effective Date. Section 2 of this act shall take effect June 30, 2025.

UNAPPROVED

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Availability of Funds Directive. The department
2 of health and human services shall seek all available Title IV-E, Administration for Children and
3 Families funds to maximize federal participation in expenses associated with eligibility screening,
4 training, accounting, technology upgrades, and implementation of a child-centered approach to
5 utilizing and conserving federal benefits to which children in its care might be eligible. The
6 department shall twice annually provide a detailed report of its efforts to seek such funds and
7 results of those efforts to the oversight committee on health and human services established in RSA
8 126-A:13, the senate finance and children and family law committees, the house children and family
9 law and finance committees, and the fiscal committee of the general court.

2025-1257h

AMENDED ANALYSIS

ADD:

1. Mandates that the department of health and human services seek all available Title IV-E, Administration for Children and Families funds to maximize benefits for children in its care.

Rep. Wallner, Merr. 19
March 26, 2025
2025-1391h
05/08

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Child Care Services. The commissioner of the
2 department of health and human services shall be responsible for determining, on an ongoing basis
3 through June 30, 2027, whether there is sufficient funding for employment-related child care
4 services to avoid a waitlist and support greater utilization of employment related child care. If at
5 any time the commissioner determines that funding is insufficient, the commissioner shall, to the
6 extent allowed by applicable federal regulations, utilize available federal Temporary Assistance to
7 Needy Families (TANF) reserve funds to cover the amount of the shortfall. The department shall
8 report quarterly to the fiscal committee of the general court on any funds expended on employment-
9 related child care services, including federal TANF funds authorized by this section.

2025-1391h

AMENDED ANALYSIS

1. Directs the department of health and human services to use TANF funds to cover any shortfall in funding for employment-related child care services in order to prevent a waitlist.

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Medicaid Provider Rate Reduction.
2 Notwithstanding any other provision of law, the commissioner of the department of health and
3 human services shall reduce all Medicaid provider rates by 3 percent effective January 1, 2026. As a
4 result of the savings achieved by implementing this section, the department shall reduce general
5 fund appropriations by \$17,500,000 in the fiscal year ending June 30, 2026, and by \$35,000,000 in
6 the fiscal year ending June 30, 2027. The department shall work with the department of
7 administrative services to reduce appropriated federal funds as needed to implement this section.

2025-1422h

AMENDED ANALYSIS

Add:

1. Directs the department of health and human services to reduce Medicaid provider rates and to use the resulting savings to reduce department appropriations by a specified amount in each year of the biennium.

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Delay of Capitation Payments. The department
2 of health and human services shall delay the June 2027 capitation payments to Medicaid managed
3 care organizations until the start of the state fiscal year ending June 30, 2028. As a result of
4 implementing this section, the department shall reduce general fund appropriations by \$25,000,000
5 in the fiscal year ending June 30, 2027. The department shall work with the department of
6 administrative services to reduce appropriated federal funds as needed to implement this section.

AMENDED ANALYSIS

Add:

1. Delays the June 2027 capitation payments to Medicaid managed care organizations until fiscal year 2028 and directs the department of health and human services to use the resulting savings to reduce department appropriations by a specified amount for the fiscal year ending June 30, 2027.

Amendment to HB 2-FN-A-LOCAL

1 1 Tirrell House; Sale of Property. Notwithstanding RSA 10 and RSA 4:40, the commissioner of
2 the department of administrative services shall offer for sale at fair market value the Tirrell House
3 property located at 15 Brook Street, Manchester, New Hampshire. The property shall be offered
4 first to the city of Manchester and then to Hillsborough County. If neither the city nor county
5 accept the offer by January 1, 2026, the commissioner of the department of administrative services
6 shall issue a request for proposals for the sale of the Manchester property at no less than the fair
7 market value, such sale to be completed no later than June 30, 2027. The commissioner of the
8 department of administrative services shall submit quarterly reports on the progress of the sale to
9 the fiscal committee of the general court. All proceeds from the sale shall be deposited into the
10 general fund.

2025-1420h

AMENDED ANALYSIS

Add:

1. Requires the sale of the Tirrell House property in Manchester, New Hampshire.

Amendment to HB 2-FN-A-LOCAL

1 1 Anna Philbrook Center for Children; Sale of Property. Notwithstanding RSA 10 and RSA
2 4:40, the commissioner of the department of administrative services shall offer for sale at fair
3 market value the Philbrook Center for Children property located at 105 Pleasant Street, Concord,
4 New Hampshire. The property shall be offered first to the city of Concord and then to Merrimack
5 County. If neither the city nor county accept the offer by January 1, 2026, the commissioner of the
6 department of administrative services shall issue a request for proposals for the sale of the Concord
7 property at no less than the fair market value, such sale to be completed no later than June 30,
8 2027. The commissioner of the department of administrative services shall submit quarterly reports
9 on the progress of the sale to the fiscal committee of the general court. All proceeds from the sale
10 shall be deposited into the general fund.

2025-1421h

AMENDED ANALYSIS

ADD:

1. Requires the sale of the Anna Philbrook Center in Concord, NH.

Amendment to HB 2-FN-A-LOCAL

1 1 Hampstead Hospital and Residential Treatment Facility; Sale of Property. Notwithstanding
2 RSA 10 and RSA 4:40, the commissioner of the department of administrative services shall
3 subdivide and offer for sale at fair market value the state-owned portions of the Hampstead Hospital
4 property that are neither part of the Hampstead Hospital and Residential Treatment Facility nor
5 necessary for use as the replacement facility for the Sununu Youth Services Center or other state
6 operations, located at 218 East Road, Hampstead, New Hampshire. The property shall be offered
7 first to the city of Hampstead and then to Rockingham County. If neither the city nor county accept
8 the offer by January 1, 2026, the commissioner of the department of administrative services shall
9 issue a request for proposals for the sale of the Hampstead property at no less than the fair market
10 value, such sale to be completed no later than June 30, 2028. The commissioner of the department of
11 administrative services shall submit quarterly reports on the progress of the sale to the fiscal
12 committee of the general court. All proceeds from the sale shall be deposited into the general fund.

2025-1435h

AMENDED ANALYSIS

ADD

1. Requires the subdivision and sale of portions of the Hampstead Hospital property in Hampstead, New Hampshire, excluding those portions used as the replacement facility for the Sununu Youth Services Center and Hampstead Hospital and Residential Treatment Facility, and those used for any state operations.