

**SENATE FINANCE COMMITTEE
BUDGET WORK SESSION**

05/22/25

SENATE FINANCE - 2025 BUDGET RECAP SHEET

Department of Corrections

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
1. HB 1 Amendment Request Delete section 5, X by restoring Department of Correction abolished positions and restoring the department's budget to be as introduced in HB 1.	Department of Corrections	GF	\$0	\$17,358,776	\$17,942,470	\$35,301,246
2a. HB 1 Change Request Restore 87 positions cut from the House's Budget with reallocation and change to remaining 63 positions being eliminated.	Senator Lang	GF	\$0	\$10,108,810	\$10,416,114	\$20,524,924
2b. HB 1 Change Request Restores funding to the salary and benefits lines for 41 vacant parole officer positions. These funds were previously shifted by the House into the overtime class line. (Net zero impact)	Senator Lang	GF	\$0	\$0	\$0	\$0
2c. HB 1 Change Request Reduction to operating expenses across multiple class lines and accounting units.	Senator Lang	GF	\$0	(\$1,997,960)	(\$2,182,090)	(\$4,180,050)
2d. HB 1 Change Request Reduce funding to Field Services Division, by consolidating field offices and eliminating six positions. (AU 8302, compare page 625)	Senator Lang	GF	\$0	(\$924,087)	(\$955,955)	(\$1,880,042)
2e. HB 1 Amendment 2025-2227s, Page 4 Amend section 5, X to reflect updated abolished positions list.	Senator Lang	GF	\$0	\$0	\$0	\$0
Net Impact of Changes to General Fund for (2a thru 2e)				\$7,186,763	\$7,278,069	\$14,464,832

SENATE FINANCE - 2025 BUDGET RECAP SHEET

Department of Environmental Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
1. HB 1 Amendment Request Delete section 14 of HB 1 relative to the back of the budget General Fund reduction to DES.	Bob Scott, Commissioner	GF	\$0	\$3,000,000	\$3,000,000	\$6,000,000
2. HB 1 Change Request Technical Fix correct funding in accounting unit 5402 to be class 009 agency income. (AU 5402, compare page 914)	LBA	N/A	\$0	\$0	\$0	\$0
3. HB 2 Amendment 2025-1788s, Page 5 Add specific DES RSAs to section 445 of HB 2 to be exempt from the 5% dedicated fund assessment.	Bob Scott, Commissioner / Senator Gray	GF	\$0	(\$618,909)	(\$618,909)	(\$1,237,818)
4. HB 2 Amendment Request Exempt any dedicated funds added to RSA 6:12, I (b) after April 30, 2025. Avoid issues with HB 163.	Bob Scott, Commissioner	N/A	\$0	\$0	\$0	\$0
5. HB 2 Amendment 2025-1688s, Page 6 Add a new section to HB 2 authorizing settlement or judgment funds received by the State for impacts to public drinking water systems to be used to issue grants, loans, or reimbursements for those system impacts.	Bob Scott, Commissioner	N/A	\$0	\$0	\$0	\$0
6. HB 2 Amendment 2025-1797s, Page 7 Provides funding to the Department of Environmental Services from the Drinking Water and Groundwater Trust Fund in fiscal year 2026 to support Phase 2B of the southern New Hampshire regional water project.	Senator Carson	OTH: DWGW Trust Fund	\$0	\$11,550,000	\$0	\$11,550,000
7. HB 2 Amendment 2025-2052s, Page 8 Appropriates \$5,000,000 per a year for State aid grant wastewater infrastructure projects.	Senator Rosenwald	GF	\$0	\$5,000,000	\$5,000,000	\$10,000,000

SENATE FINANCE - 2025 BUDGET RECAP SHEET

Department of Environmental Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
8. HB 2 Amendment 2025-1780s, Page 9 Appropriates \$325,000 to the Pillsbury Lake Village District for piping upgrades, water filtration upgrades and new well development loans.	Senator Innis	GF	\$0	\$325,000	\$0	\$325,000

Amendment to HB 1-A

1 Amend the bill by replacing section 5, paragraph X with the following:

2

3 X. Department of Corrections. The following position numbers are hereby abolished:

4 (a) Accounting Unit #7101 Commissioner's Office: 42238.

5 (b) Accounting Unit #8338 Victim Services Coordinator: 42282.

6 (c) Accounting Unit #8300 Financial Services: 12983.

7 (d) Accounting Unit #5731 Correctional Industries Inventory: 12888, 12907.

8 (e) Accounting Unit #3372 NH State Prison for Men: 12821, 12879, 12882, 16320,
9 16913, 40748.

10 (f) Accounting Unit #3373 Northern NH Correctional Facility: 41503.

11 (g) Accounting Unit #3374 NH Correctional Facility/Women: 40724.

12 (h) Accounting Unit #6632 Maintenance: 12894, 40167, 44336.

13 (i) Accounting Unit #6633 Laundry: 16811.

14 (j) Accounting Unit #6634 Kitchen: 18813.

15 (k) Accounting Unit #6635 Warehouse: 18848, 41532.

16 (l) Accounting Unit #8302 District Offices: 12802, 12829, 12838, 12845, 17425, 18563,
17 30356.

18 (m) Accounting Unit #4106 Concord Transitional Work Center: 12827.

19 (n) Accounting Unit #5172 Shea Farm: 19938.

20 (o) Accounting Unit #7874 Calumet House: 16929.

21 (p) Accounting Unit #6820 Programs: 12901, 12937, 18809, 19552, 19564, 40719, 41315,
22 41465, 42240, 42250, 42263, 44283, 44329, 44334.

23 (q) Accounting Unit #8231 Mental Health: 16277, 19559, 41462, 41501, 41502, 41504,
24 42270.

25 (r) Accounting Unit #8234 Medical - Dental: 19536, 30352, 40709, 41497, 41522.

26 (s) Accounting Unit #8235 Residential Treatment Program: 30365, 42271.

27 (t) Accounting Unit #8236 Pharmacy: 9U662.

28 (u) Accounting Unit #6528 Employee Development: 42283.

29 (v) Accounting Unit #6529 Human Resources: 12805, 13028, 18180, 19901, 42269.

30 (w) Accounting Unit #6531 Business Information Unit: 30347, 44333.

31 (x) Accounting Unit #5929 Professional Standards: 12899, 9U548.

Sen. Gray, Dist 6
April 28, 2025
2025-1788s
08/09

Amendment to HB 2-FN-A-LOCAL

1 Amend paragraph II inserted by section 445 of the bill by inserting after paragraph (ss) the following
2 new paragraphs:
3
4 (tt) RSA 6:12, I(b)(35), moneys received under RSA 147-A:4, RSA 147-A:6, RSA 147-A:16,
5 RSA 147-A:17, RSA 147-A:17-a, RSA 147-B:8, and RSA 147-B:11, which shall be credited to the
6 hazardous waste cleanup fund established under RSA 147-B:3.
7 (uu) RSA 6:12, I(b)(45) money received under RSA 146-C:12, II which shall be credited to
8 the oil pollution control fund established in RSA 146-A:11-a.
9 (vv) RSA 6:12, I(b)(132), moneys deposited in the water pollution control facilities'
10 replacement fund under RSA 485-A:51.
11 (ww) RSA 6:12, I(b)(171), moneys deposited in the air resources fund under RSA 125-
12 C:12, V.
13 (xx) RSA 6:12, I(b)(173), moneys deposited in the brownfields cleanup revolving loan
14 fund under RSA 147-F:20.
15 (yy) RSA 6:12, I(b)(252), moneys deposited in the aquatic resource compensatory
16 mitigation fund established by RSA 482-A:29.
17 (zz) RSA 6:12, I(b)(361), moneys deposited in the PFAS response fund established in
18 RSA 485-H:10.

Sen. Gray, Dist 6
April 22, 2025
2025-1688s
07/06

Amendment to HB 2-FN-A-LOCAL

- 1 1 Water Management and Protection; Per And Polyfluoroalkyl Substances (PFAS) Fund And
2 Programs; Contingent Reimbursement. Amend RSA 485-H:6, I-a to read as follows:
3 I-a. Following the reimbursement of the department of justice for legal expenses related to
4 relevant litigation, any funds from judgments or settlements received by the state resulting from
5 lawsuits against manufacturers of PFAS attributable to impacts to public drinking water systems
6 shall be deposited directly into the drinking water and groundwater trust fund established in RSA 6-
7 D:1. RSA 7:6-e and RSA 6:13-e, III, shall not apply to funds deposited pursuant to this paragraph.
8 The New Hampshire drinking water and groundwater advisory commission shall ensure that an
9 amount equivalent to the funds deposited pursuant to this paragraph is distributed through a
10 combination of loans and grants to public water systems whose water sources have been impacted by
11 PFAS contamination above applicable standards. ***If the funds from judgments or settlements***
12 ***received by the state for impacts to public drinking water systems account for PFAS***
13 ***contamination below applicable standards, the advisory commission may issue grants,***
14 ***loans, or reimbursements to those systems for those impacts.***

2025-1688s

AMENDED ANALYSIS

Add:

1. Allows the New Hampshire drinking water and groundwater advisory commission to issue grants, loans, or reimbursements to water systems for impacts related to PFAS contamination.

Sen. Carson, Dist 14
April 29, 2025
2025-1797s
07/08

Amendment to HB 2-FN-A-LOCAL

1 1 Appropriation; Drinking Water and Groundwater Trust Fund. The sum of \$11,550,000 for the
2 fiscal year ending June 30, 2026, is hereby appropriated to the department of environmental services
3 from the drinking water and groundwater trust fund established under RSA 485-F for the purpose of
4 funding regional drinking water infrastructure as part of Phase 2B of the southern New Hampshire
5 regional water project to increase water supply by over 2 million gallons per day to multiple towns
6 impacted by per- and polyfluoroalkyl substance contamination and growing water demands. No
7 current public utility ratepayer shall be adversely affected by any direct or indirect costs to bring
8 drinking water to communities receiving new services through any projects funded by this
9 appropriation. Any remaining funds hereby appropriated shall not lapse.

Sen. Rosenwald, Dist 13
May 9, 2025
2025-2052s
07/09

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Environmental Services; Appropriation. There is hereby appropriated to the
2 department of environmental services the sum of \$5,000,000 for the fiscal year ending June 30, 2026,
3 and the sum of \$5,000,000 for the fiscal year ending June 30, 2027, which shall be nonlapsing, for
4 the purpose of making payments to communities for projects that have previously been awarded
5 state aid grant funding for eligible and completed wastewater infrastructure projects, per RSA 486,
6 as approved by the governor and executive council. Any remaining funds not used for making
7 payments on existing grants may be used to award new grants. The governor is authorized to draw
8 a warrant for said sums out of any money in the treasury not otherwise appropriated.

2025-2052s

AMENDED ANALYSIS

1. Appropriates funds to the department of environmental services for the purpose of making payments to communities for projects that have previously been awarded state aid grant funding for eligible and completed wastewater infrastructure projects.

Sen. Innis, Dist 7
April 28, 2025
2025-1780s
07/06

Amendment to HB 2-FN-A-LOCAL

- 1 1 Appropriation.
- 2 I. The sum of \$325,000 is hereby appropriated to the Pillsbury Lake Village District for the
- 3 purpose of addressing loan costs associated with the following upgrades:
- 4 (a) Piping Upgrades: \$155,000 to cover a loan used for upgrading the pipes under
- 5 Concord Drive in Webster.
- 6 (b) Water Filtration Upgrade: \$105,000 to cover a loan for upgrading the water filtration
- 7 system.
- 8 (c) New Well Development: \$65,000 to cover a loan for digging a new well, known as the
- 9 Franklin-Pierce well, which requires less processing and will reduce overall costs.
- 10 II. The appropriation shall be for the biennium ending June 30, 2027, and the governor is
- 11 authorized to draw a warrant for said sum out of any money in the treasury not otherwise
- 12 appropriated.

2025-1780s

AMENDED ANALYSIS

Add:

1. Makes an appropriation to the Pillsbury Lake Village District for loan costs related to upgrading pipes, the water filtration system, and developing a new well.

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division for Children, Youth, and Families

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
1. HB 2 Amendment #2025-2338s, Page 21 Revise section 243 to allow the use of general funds for construction of the SYSC replacement facility. DHHS request; amendment drafted for discussion purposes.	Nathan White, DHHS CFO	N/A	\$0	\$0	\$0	\$0
2. HB 2 Amendment Request; No Action Needed DHHS request for an HB 2 amendment to delay the effective dates in section 103, relative to court-appointed counsel for children in dependency proceedings, and delete section 104, establishing additional DCYF attorneys. This was also requested by the Judicial Branch, and adopted by Senate Finance during a prior budget discussion. (See amendment #2025-2194s.)	Nathan White	N/A	\$0	\$0	\$0	\$0
3a. HB 1 Change Request Restore residential placement contracts for youth to the governor's recommended level. (DHHS request; AU 2958, Compare Page 1098)	Nathan White	GF	\$0	\$3,057,046	\$3,725,048	\$6,782,094
3b. HB 1 Change Request In addition to DCYF, funding for youth residential placements is also found within the Bureau of Children's Behavioral Health. As in 3a above, restore funding to the governor's recommended level. (DHHS request; AU 3053, Compare Page 1291)	Nathan White	GF	\$0	\$2,000,000	\$2,000,000	\$4,000,000
4. HB 1 Change Request If 3a above is not adopted, move \$5 million from FY27 to FY26 to address anticipated need in FY26. (DHHS Request; AU 2958, Compare Page 1098)	Nathan White	GF	\$0	\$5,000,000	(\$5,000,000)	\$0

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division for Children, Youth, and Families

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
<p>5a. HB 1 Change Request Reduce funding for the Sununu Center by \$1 million per year. If adopted, DHHS will provide detail on the specific class lines from which the funds should be removed. (AU 6643, Compare Page 1116)</p>	Sen. Rosenwald	GF	\$0	(\$1,000,000)	(\$1,000,000)	(\$2,000,000)
<p>5b. HB 1 Change Request If 3a above is not adopted, use savings from 5a to partially restore funding for residential placement contracts for youth. (AU 2958, Compare Page 1098)</p>	Sen. Rosenwald	GF	\$0	\$1,000,000	\$1,000,000	\$2,000,000
<p>6. HB 1 Change Request Restore funding for a contract for master licensed alcohol and drug counselors. (DHHS request; AU 2958, Compare Page 1098)</p>	Nathan White	GF	\$0	\$1,922,334	\$1,922,334	\$3,844,668

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Economic Stability

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
1. HB 2 Amendment #2025-2169s, Page 22 Fund positions to support the summer EBT program established in 2024.	Sen. Birdsell	GF	\$0	\$105,000		\$105,000
2. HB 2 Amendment #2025-2170s, Page 23 Fund a tier-one call center. Will be used for the purpose of supporting Medicaid eligibility determinations. Uses funds that would otherwise lapse at the end of FY25. Also a DHHS request.	Sen. Birdsell / Sen. Rosenwald	GF	\$3,825,000	\$0	\$0	\$3,825,000
3. HB 2 Amendment #2025-2191s, Page 24 Incorporate a modified version of SB 243, relative to a child care scholarship eligibility program. Uses funds that would otherwise lapse at the end of FY25.	Sen. Birdsell	GF	\$100,000	\$0	\$0	\$100,000
4. HB 2 Amendment #2025s-2225s, Page 26 Incorporate a modified version of SB 113, providing funds for DHHS to contract with nonprofits that provide eviction prevention and rehousing services.	Sen. Birdsell	GF	\$0	\$3,000,000	\$3,000,000	\$6,000,000
5. HB 2 Amendment #2025-2311s, Page 27 Incorporate components of SB 244, relative to a public-private health care workforce recruitment and retention hub.	Sen. Rosenwald	GF	\$0	\$1,568,500	\$2,068,500	\$3,637,000
6. HB 1 Change Request Remove federal TANF funds budgeted for the child care workforce program. Per DHHS, TANF funds may not be used for this purpose. (DHHS Request; AU 2324, Compare Page 1141)	Nathan White, DHHS CFO	FF	\$0	(\$7,500,000)	(\$7,500,000)	(\$15,000,000)

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Economic Stability

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
<p>7. HB 2 Amendment #2025-2367s, Page 29 Remove provisions establishing a developmental services recreational services fund. The sections state that DHHS, as the administrator of the fund, would be recognized as a charitable organization for the purpose of qualifying for charitable gaming revenue. DHHS request; amendment drafted for discussion purposes.</p>	Nathan White	N/A	\$0	\$0	\$0	\$0
<p>8. HB 1 Change Request Budget a new federal Child Care Development Fund (CCDF) American Relief Act grant award. DHHS Request; No AU or Compare Report reference as this will be housed in a new account.</p>	Nathan White	FF	\$0	\$476,777	\$0	\$476,777

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Medicaid Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
<p>1. HB 2 Amendment #2025-2215s, Page 30 Restore the Granite Advantage funding mechanism by removing the general fund appropriation and adding back the provision allowing a transfer from Liquor funds in the event of a shortfall. Net zero impact on general funds.</p>	Sen. Lang	GF, OTH	\$0	\$0	\$0	\$0
<p>2. HB 2 Amendment #2025-2288s, Page 32 Restore the Granite advantage funding mechanism as in amendment 2215s, and further remove the provision allowing the trust fund to accept revenue from premiums imposed upon Granite Advantage enrollees. Fiscal impact included in item 3 below.</p>	Sen. Rosenwald	GF, OTH	\$0	\$0	\$0	\$0
<p>3. HB 2 Amendment #2025-2067s, Page 33 Delete the provisions directing DHHS to institute premiums for those enrolled in the Granite Advantage and Children's Health Insurance Programs. Cost shown here reflects premium revenue assumptions included in the governor's recommended and House-passed budgets.</p>	Sen. Rosenwald	GF	\$0	\$3,300,000	\$23,000,000	\$26,300,000
<p>4. HB 2 Amendment #2025-2161s, Page 34 Incorporate SB 34, relative to a work requirement for the Granite Advantage population.</p>	Sen. Pearl	N/A	\$0	\$0	\$0	\$0

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Medicaid Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
5. HB 2 Amendment #2025-2065s, Page 35 Delete the provision requiring termination of the Medicaid to Schools program in the event that parental control policies are violated.	Sen. Rosenwald	N/A	\$0	\$0	\$0	\$0
6. HB 2 Amendment #2025-2323s, Page 36 Revise the deadline for the Medicaid outpatient procedure incentive program from 30 days to 120 days after the effective date of the section. DHHS request; amendment drafted for discussion purposes.	Nathan White, DHHS CFO	N/A	\$0	\$0	\$0	\$0
7. HB 2 Amendment #2025-2063s, Page 37 Incorporate components of SB 122, relative to a Medicare Savings Program.	Sen. Rosenwald	N/A	\$0	\$0	\$0	\$0
8. HB 2 Amendment #2025-1926s, Page 38 Require Medicaid coverage of biomarker testing.	Sen. Innis	N/A	\$0	\$0	\$0	\$0
9. HB 1 Change Request Budget additional federal funds available to the Medicaid program, in an effort to leverage the amount of budgeted general funds. (DHHS; AU 7937, Compare Page 1152)	Nathan White	FF	\$0	\$1,468,900	\$1,468,900	\$2,937,800
10. HB 2 Amendment #2025-2208s, Page 41 Incorporate SB 137, relative to coverage of hospital stays under the Medicaid state plan.	Sen. Watters / Sen. Rosenwald	N/A	\$0	\$0	\$0	\$0

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Medicaid Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
<i>Bills:</i>						
<p>SB 249, currently in House Ways & Means, revises the formula for uncompensated care costs, including the distribution of disproportionate share hospital payments. As passed by the Senate (and assuming the full amount of Medicaid Enhancement Tax is ultimately collected from the state's hospitals), that bill would increase state expenditures by approximately \$19 million per year.</p>						

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Long-Term Supports and Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
1. HB 2 Amendment #2025-2196s, Page 43 Fund room and board for individuals with disabilities or acquired brain disorders living in a staffed community residence in the state. Uses funds that would otherwise lapse at the end of FY25.	Sen. Birdsell / Sen. Rosenwald	GF	\$10,000,000	\$0	\$0	\$10,000,000
2. HB 2 Amendment #2025-2148s, Page 44 Incorporate SB 127, funding guardianship services for older adults or adults with disabilities who have been discharged from a hospital to less restrictive settings.	Sen. Pearl	GF	\$0	\$4,434,000		\$4,434,000
3. HB 2 Amendment #2025-2310s, Page 45 Incorporate a modified version of SB 127, funding guardianship services for older adults or adults with disabilities who have been discharged from a hospital to less restrictive settings.	Sen. Birdsell	GF	\$0	\$550,000		\$550,000
4. HB 1 Amendment Request Increase funding for the Alzheimer's Disease and Related Dementias (ADRD) respite caregiver grant program. (AU 8943, Compare Page 1171)	Sen. Watters	GF	\$0	\$100,000	\$100,000	\$200,000
5. HB 2 Amendment #2025-2327s, Page 46 Establish a committee to study long-term managed care.	Sen. Pearl	N/A	\$0	\$0	\$0	\$0
6. HB 2 Amendment #2025-2337s, Page 49 Provide a 2% rate increase in FY26 and an additional 2% rate increase in FY27 for intermediate care facilities for children with intellectual and developmental disabilities.	Sen. Birdsell	GF	\$0	\$70,105	\$141,613	\$211,718

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Long-Term Supports and Services

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
7. HB 2 Amendment #2025-2286s, Page 50 Suspend, rather than repeal, the foster grandparent program. DHHS request; amendment drafted for discussion purposes.	Nathan White, DHHS CFO	N/A	\$0	\$0	\$0	\$0
8. HB 2 Amendment #2025-2367s, Page 51 Remove provisions establishing a developmental services recreational services fund. These sections state that DHHS, as the administrator of the fund, would be recognized as a charitable organization for the purpose of qualifying for charitable gaming revenue. DHHS request; amendment drafted for discussion purposes.	Nathan White	N/A	\$0	\$0	\$0	\$0

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Public Health

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
1. HB 1 Change Request Restore family planning funds to the governor's recommended level. (Also a DHHS request; AU 5530, Compare Page 1208)	Sen. Birdsell / Sen. Rosenwald	GF	\$0	\$839,219	\$839,942	\$1,679,161
		FF	\$0	\$997,673	\$994,676	\$1,992,349
2. HB 1 Change Request If item 1 above is not adopted, restore federal funds for family planning and appropriate \$500,000 per year of general funds. If adopted, DHHS will provide detail on the specific class lines to which the \$500,000 per year should be distributed. (AU 5530, Compare Page 1208)	Sen. Rosenwald	GF	\$0	\$500,000	\$500,000	\$1,000,000
		FF	\$0	\$997,673	\$994,676	\$1,992,349
3a. HB 2 Amendment #2025-2123s, Page 52 Modify section 380 to allow DHHS to enroll new participants in the State Loan Repayment Program, provided general funds are not used. (Also a DHHS request.)	Sen. Rosenwald	N/A	\$0	\$0	\$0	\$0
3b. HB 1 Change Request Budget other funds to be used for new participants in the State Loan Repayment Program. (AU 2794, Compare Page 1263)	Sen. Rosenwald	OTH	\$0	\$300,000	\$500,000	\$800,000
4. HB 2 Amendment #2025-2362s, Page 53 Incorporate a modified version of SB 246, relative to maternal health and wellness.	Sen. Birdsell	GF	\$0	\$105,000	\$75,000	\$180,000

SENATE FINANCE - 2025 BUDGET RECAP SHEET

DHHS - Division of Public Health

	Contact	SOF	FY 2025	FY 2026	FY 2027	Total
<p>5. HB 1 Change Request Budget available federal funds for two positions in the Epidemiology and Laboratory Capacity (ELC) program. Previously funded elsewhere in DHHS by federal COVID-19 funds that were terminated. (DHHS request; AU 1835, Compare Page 1234)</p>	Nathan White, DHHS CFO	FF	\$0	\$214,053	\$221,212	\$435,265
<p>6. HB 1 Change Request Budget available federal funds for one position in the immunization program. Previously funded elsewhere in DHHS by federal COVID-19 funds that were terminated. (DHHS request; AU 5178, Compare Page 1229)</p>	Nathan White	FF	\$0	\$126,237	\$128,250	\$254,487
<p>7. HB 1 Change Request Budget available federal funds for one part-time and five temporary positions in the public health infrastructure account. Previously funded elsewhere in DHHS by federal COVID-19 funds that were terminated. (DHHS request; AU 1628, Compare Page 1187)</p>	Nathan White	FF	\$0	\$552,334	\$643,590	\$1,195,924

Sen. Gray, Dist 6
May 21, 2025
2025-2338s
05/09

Amendment to HB 2-FN-A-LOCAL

1 Amend the bill by replacing section 243 with the following:

2

3 243 Youth Detention Center; Construction Funds. Amend 2023, 79:443 to read as follows:

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

2025-2338s

AMENDED ANALYSIS

Keep:

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

Sen. Birdsell, Dist 19
May 13, 2025
2025-2169s
07/05

Amendment to HB 2-FN-A-LOCAL

1 1 Appropriation; New Hampshire Department of Health and Human Services; Positions to
2 2 Support Public Assistance Applications. The sum of \$105,000 for the biennium ending June 30,
3 3 2027, is hereby appropriated to the department of health and human services for the purpose of
4 4 establishing 2 positions to support the requirements of 2024, 358, relative to participation in the
5 5 federal Summer EBT program and the elderly simplified application for SNAP. The department
6 6 may accept and expend matching federal funds without prior approval of the fiscal committee of the
7 7 general court. The department shall work with the department of administrative services, division
8 8 of personnel, to determine the appropriate classifications in accordance with the personnel
9 9 classification system and applicable broad group specifications. The governor is authorized to draw
10 10 a warrant for said sum out of any money in the treasury not otherwise appropriated.

2025-2169s

AMENDED ANALYSIS

Add:

1. Appropriates money to the department of health and human services to establish two new positions.

Sen. Birdsell, Dist 19
Sen. Rosenwald, Dist 13
May 14, 2025
2025-2170s
05/09

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Lapse; Tier-One Call Center. Notwithstanding
2 any other law to the contrary, the department of health and human services shall carry forward
3 \$3,825,000 from funds that would otherwise lapse on June 30, 2025, and shall use said funds to
4 finance a tier-one call center. Said funds shall not lapse until June 30, 2027. The department may
5 accept and expend matching federal funds without prior approval of the fiscal committee of the
6 general court.
7 2 Effective Date. Section 1 of this act shall take effect June 30, 2025.

2025-2170s

AMENDED ANALYSIS

ADD:

1. Directs the department of health and human services to use certain funds that would otherwise lapse to fund a tier-one call center.

Amendment to HB 2-FN-A-LOCAL

- 1 1 New Subparagraphs; New Hampshire Employment Program and Family Assistance Program;
2 Rulemaking. Amend RSA 167:83, II by inserting after subparagraph (r) the following new
3 subparagraphs:
- 4 (s) Payments for child care providers. Such rules shall:
- 5 (1) Streamline data entry requirements for providers receiving child care scholarship
6 payments by eliminating any requirement to report hourly attendance, to the extent that such
7 reporting is not necessary for administering child care scholarship payments; and
- 8 (2) By December 2025, implement a system of prospective provider payments,
9 through which child care providers shall receive scholarship program payments in advance of or at
10 the beginning of each payment period. If a provider begins providing care to a child in the middle of
11 a service period, the department may delay the first payment until the start of the next service
12 period.
- 13 (t) Child care scholarship presumptive eligibility pilot program.
- 14 (1) The department shall develop and implement a presumptive eligibility pilot
15 program, whereby applicants who meet threshold screening requirements established by the
16 department will receive the benefit of child care scholarship funds while the application process is
17 underway, from the date of the initial screening until the earliest of:
- 18 (A) 60 days after the initial screening;
- 19 (B) The date on which a final eligibility determination is made; or
- 20 (C) The expiration of a submission period, the length of which shall be identified
21 by the department, if the applicant fails to submit the required information or documentation to
22 establish eligibility during this period. The department shall provide both the applicant and the
23 child care provider at least 10 days notice, and shall supply the applicant a list of the verification
24 documents still required to determine eligibility, before terminating the presumptive eligibility
25 period on this basis.
- 26 (2) Except in cases of fraud or intentional violation of program rules, no child care
27 provider and no scholarship applicant shall held be responsible for the costs of care paid from
28 scholarship funds during such period of presumptive eligibility, even if the child is ultimately
29 determined ineligible for scholarship funds.
- 30 (3) The department shall establish criteria and parameters as needed to implement
31 the program.

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

- 1 (4) The duration of this pilot program shall be 24 months, beginning January 1,
2 2026.
- 3 (5) The department may suspend this pilot program, with notice to providers and
4 prospective applicants, if an active waitlist is maintained pursuant to N.H. Admin. Code section He-
5 C 6910.11, and the department shall reinstate the pilot program if such a waitlist ends during the
6 duration of the pilot program.
- 7 (6) On or before May 1, 2028, the department shall provide a detailed report of the
8 presumptive eligibility pilot program to the house health and human services oversight committee
9 and senate health and human services committee of the general court. The report shall include the
10 following information:
- 11 (A) Information regarding family and provider interest and utilization of the
12 program during the pilot period;
- 13 (B) Information regarding the costs and benefits of the program as implemented,
14 and any suggestions for improvements;
- 15 (C) Funding levels necessary to sustain the program going forward; and
16 (D) Any other relevant information regarding the program.
- 17 (u) District office staff training. The department of health and human services shall
18 develop and engage in training of all district office staff regarding changes to the child care
19 scholarship program.
- 20 2 Department of Health and Human Services; Lapse. Notwithstanding any other law to the
21 contrary, the department of health and human services shall carry forward \$100,000 from funds
22 appropriated for child care workforce programs that would otherwise lapse on June 30, 2025, and
23 use said funds to finance the provisions of this bill. Said funds shall not lapse until June 30, 2027.
- 24 3 Prospective Repeal. RSA 167:83, II(b), related to the child care scholarship presumptive
25 eligibility pilot program, is repealed.
- 26 4 Effective Date.
- 27 I. Section 2 of this act shall take effect June 30, 2025.
- 28 II. Section 3 of this act shall take effect May 2, 2028.

Sen. Birdsell, Dist 19
May 16, 2025
2025-2225s
05/08

Amendment to HB 2-FN-A-LOCAL

- 1 1 Appropriation; Department of Health and Human Services; Homeless Services.
2 I. The sum of \$3,000,000 for the fiscal year ending June 30, 2026, and the sum of \$3,000,000
3 for the fiscal year ending June 30, 2027, are hereby appropriated to the department of health and
4 human services for the housing stabilization fund to contract with nonprofits that provide eviction
5 prevention and rehousing services. Funding may be used for assistance with rental deposits, rental
6 guarantees, or rental assistance. The department of health and human services shall annually
7 report the usage of this fund with regional breakdowns according to populations including families
8 with children, low-income seniors, and veterans.
9 II. The commissioner of the department of health and human services shall submit a
10 renewal of the state plan amendment as provided in Section 1915(i) of the Social Security Act or a
11 waiver under other provisions of the Act to the Centers for Medicare and Medicaid Services to
12 sustain a state Medicaid benefit for supportive housing services. The department of health and
13 human services shall fully implement the new supportive housing Medicaid benefit and provide a
14 report to the legislature on its implementation on November 1, 2025, and November 1, 2026.

2025-2225s

AMENDED ANALYSIS

Add:

1. Makes appropriations to the department of health and human services for homeless prevention services and directs the renewal of the 1915(i) Medicaid state plan amendment for supportive housing services.

Amendment to HB 2-FN-A-LOCAL

1 Department of Health and Human Services; Division of Public Health Services; Public-Private
2 Health Care Workforce Recruitment and Retention Hub; Infrastructure Contracts.

3 I. The department of health and human services, division of public health services, rural
4 health and primary care section shall amend its current contract with Bi-State Primary Care
5 Association's Recruitment Center to require the Recruitment Center to strengthen the infrastructure
6 needed to sustain and transform community-based primary care services through the creation of a
7 Public-Private Health Care Workforce Recruitment and Retention Hub that promotes collaboration
8 across the continuum of care. Bi-State Primary Care Association shall administer the Public-Private
9 Health Care Workforce Recruitment and Retention Hub and manage the sub-recipient contracts,
10 and leverage federal, state, and private funding, and seek new funding opportunities when
11 appropriate.

12 II. Bi-State Primary Care Association shall design the sub-recipient contracts to facilitate
13 health care workforce development, recruitment, retention, support nursing preceptor and
14 mentoring programs, provide training and technical assistance, and loan repayment opportunities.
15 Bi-State Primary Care Association shall:

16 (a) Expand and implement its national outreach and marketing campaign designed to
17 recruit qualified clinicians to New Hampshire.

18 (b) Collaborate with a family medicine residency program in rural New Hampshire at a
19 teaching health center program to support the training of family medicine residents in the north
20 country. The teaching health center program shall be accredited or eligible for accreditation by a
21 nationally recognized accreditation agency.

22 2 Appropriation; Workforce Recruitment, Advertising, and Marketing. The sum of \$250,000 for
23 the fiscal year ending June 30, 2026 and \$250,000 for the fiscal year ending June 30, 2027 are
24 hereby appropriated to the department of health and human services, division of public health
25 services, rural health and primary care section for the purpose described in paragraph II(a) of
26 section 1 of this act. The governor is authorized to draw a warrant for said sums out of any money in
27 the treasury not otherwise appropriated.

28 3 Appropriation; Bi-State Primary Care Association Sub-recipient Contract with a Rural
29 Residency Training at a Teaching Health Center Program. The sum of \$500,000 for the fiscal year
30 ending June 30, 2027 is hereby appropriated to the department of health and human services,
31 division of public health services, rural health and primary care section for the purposes set forth in

Amendment to HB 2-FN-A-LOCAL
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1 paragraph II(b) of section 1 of this act. The governor is authorized to draw a warrant for said sum
2 out of any money in the treasury not otherwise appropriated.

3 4 Appropriation; Early Childhood and Family Mental Health Credential. The sum of \$203,500
4 for the fiscal year ending June 30, 2026 and the sum of \$203,500 for the fiscal year ending June 30,
5 2027 are hereby appropriated to the department of health and human services, bureau of children's
6 behavioral health for the purpose set forth in RSA 167:3-1, IV(a)(2). The bureau shall use the
7 funding to support the training of up to 60 clinicians per year of the biennium. The governor is
8 authorized to draw a warrant for said sums out of any money in the treasury not otherwise
9 appropriated.

10 5 Appropriation; Primary Care Workforce Program. The sum of \$115,000 for the fiscal year
11 ending June 30, 2026 and the sum of \$115,000 for the fiscal year ending June 30, 2027 are hereby
12 appropriated to the department of health and human services, division of public health services,
13 rural health and primary care section, for an administrator I position for the purpose of
14 administering paragraph I of section 1 of this act. The governor is authorized to draw a warrant for
15 said sums out of any money in the treasury not otherwise appropriated.

16 6 Appropriation; Medicaid Rates Paid to Opioid Treatment Providers.
17 There is hereby appropriated to the department of health and human services the sum of
18 \$1,000,000 for the fiscal year ending June 30, 2026, and the sum of \$1,000,000 for the fiscal year
19 ending June 30, 2027, for the purpose of increasing rates paid to providers of opioid treatment
20 programs. Said amounts are intended to cover the cost of rate increases for both the traditional
21 Medicaid population and granite advantage program population. The department may accept and
22 expend any federal funds available for the purposes of this section without the prior approval of the
23 fiscal committee of the general court. The governor is authorized to draw a warrant for said sums
24 out of any money in the treasury not otherwise appropriated.

Sen. Gray, Dist 6
May 21, 2025
2025-2367s
05/06

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by deleting sections 446-450, relative to a developmental services special account.

2025-2367s

AMENDED ANALYSIS

Delete:

183. Establishes a recreational and socialization services special fund to support recreational services for individuals with developmental disabilities, sets the payment limit for such services at \$595 per individual, and extends the lapse of a prior appropriation to the department of health and human services for this purpose.

Amendment to HB 2-FN-A-LOCAL

1 Amend the bill by deleting sections 409, 411, 412, and 413, relative to granite advantage health care
2 program funding.

3

4 Amend the bill by replacing section 410 with the following:

5

6 410 The New Hampshire Granite Advantage Health Care Trust Fund. Amend RSA 126-AA:3, I
7 to read as follows:

8 I. There is hereby established the New Hampshire granite advantage health care trust fund
9 which shall be accounted for distinctly and separately from all other funds and shall be non-interest
10 bearing. The fund shall be administered by the commissioner and shall be used solely to provide
11 coverage for the newly eligible Medicaid population as provided for under RSA 126-AA:2, to pay for
12 the administrative costs for the program, and reimburse the federal government for any over
13 payments of federal funds. All moneys in the fund shall be nonlapsing and shall be continually
14 appropriated to the commissioner for the purposes of the fund. The fund shall be authorized to pay
15 and/or reimburse the cost of medical services and cost-effective related services, including without
16 limitation, capitation payments to MCOs. No state general funds shall be deposited into the fund.
17 Deposits into the fund shall be limited exclusively to the following:

18 (a) [Repealed.]

19 (b) Federal Medicaid reimbursement for program costs and administrative costs
20 attributable to the program;

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

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

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

28 (f) Revenue from the Medicaid enhancement tax to meet the requirements provided in
29 RSA 167:64; [and]

30 (g) Funds recovered or returnable to the fund that were originally spent on the cost of
31 coverage of the granite advantage health care program[.]; **and**

- 1 *(h) Revenue that is attributable to premiums received from granite advantage*
2 *health care program enrollees.*

2025-2215s

AMENDED ANALYSIS

REPLACE:

165. Provides for deposit of revenue from premiums received from granite advantage health care program enrollees in the granite advantage health care trust fund.

Sen. Rosenwald, Dist 13
May 20, 2025
2025-2288s
07/08

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by deleting sections 409-413, relative to granite advantage health care program
- 2 funding.

2025-2288s

AMENDED ANALYSIS

Delete:

165. Repeals the prohibition on the use of general funds for the granite advantage program and removes the provision requiring the liquor commission to make up for any short fall in the program.

Sen. Rosenwald, Dist 13
May 9, 2025
2025-2067s
07/08

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by deleting sections 107-108.

2025-2067s

AMENDED ANALYSIS

Deletes paragraphs 42 and 43, which direct the department of health and human services to file a Medicaid waiver and state plan amendment to institute premiums based on income for individuals participating in the granite advantage health care program and households with children participating in the Medicaid program.

Sen. Pearl, Dist 17
May 13, 2025
2025-2161s
07/05

Amendment to HB 2-FN-A-LOCAL

1 1 New Hampshire Granite Advantage Health Care Program 1115 Demonstration; Renewed
2 Application to CMS.

3 I. On or before January 1, 2026, the department of health and human services shall
4 resubmit to the Center for Medicare and Medicaid Services (CMS) a Section 1115 demonstration
5 waiver to the state Medicaid plan relative to enforcing community engagement and work
6 requirements as a condition of Granite Advantage eligibility. Prior to submitting the Section 1115
7 waiver to CMS, the department shall submit the proposed waiver to the fiscal committee of the
8 general court for approval.

9 II. Beginning November 1, 2025 and annually thereafter, the department shall provide a
10 report regarding the status of the waiver application and implementation of the community
11 engagement requirements in RSA 126-AA:2, III, to the senate president, the speaker of the house of
12 representatives, the senate clerk, the house clerk, and the governor.

13 2 Effective Date. Section 1 of this act shall take effect upon its passage.

2025-2161s

AMENDED ANALYSIS

ADD:

1. Directs the department of health and human services to resubmit the 1115 demonstration waiver to CMS regarding community engagement and work requirements under the state Medicaid program and directs the department to provide an annual report to the legislature regarding the status of implementation.

Sen. Rosenwald, Dist 13
May 9, 2025
2025-2065s
07/08

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by deleting section 415.

2025-2065s

AMENDED ANALYSIS

Deletes paragraph 167, which provides for the termination of the Medicaid to schools program under certain circumstances.

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by replacing section 439 with the following:
- 2
- 3 439 New Paragraph; Department of Health and Human Services; Medicaid; Outpatient
- 4 Procedure Incentive Program. Amend RSA 126-A:3 by inserting after paragraph VIII the following
- 5 new paragraph:
- 6 IX. The department shall seek to implement in the Medicaid care management program and
- 7 the contractual agreements with each managed care organization an outpatient procedure incentive
- 8 program for Medicaid beneficiaries to choose, when clinically appropriate, to receive outpatient
- 9 procedures, including ambulatory surgical care, in a lower cost setting. The outpatient procedure
- 10 incentive program shall be included by the department in the managed care organization withhold
- 11 and incentive program and part of each managed care organization's member incentive program,
- 12 subject to federal limitations. The outpatient procedure incentive program shall be included in the
- 13 next contract amendment between the department and the managed care organizations after the
- 14 effective date of this paragraph. Within 90 days of the effective date of this paragraph, the
- 15 department shall submit the plan for implementation of the outpatient procedure incentive program
- 16 to the fiscal committee of the general court.

Sen. Rosenwald, Dist 13
May 9, 2025
2025-2063s
05/06

Amendment to HB 2-FN-A-LOCAL

1 1 New Section; Financial Eligibility for Medicare Savings Program. Amend RSA 167 by
2 inserting after section 4-f the following new section:
3 167:4-g Medicare Savings Program. The department shall administer the Medicare savings
4 program as described in 42 U.S.C. section 1396a(a)(10)(E) in accordance with federal law and this
5 section.
6 I. Financial eligibility for the Medicare savings program shall include a resource disregard,
7 thereby eliminating the resource test.
8 II. The commissioner of the department of health and human services shall adopt rules
9 under RSA 541-A relative to the Medicare savings program in accordance with the requirements of
10 this section.
11 III. On or before November 1, 2025, the department of health and human services shall
12 prepare and submit to the Centers for Medicare and Medicaid Services any amendments to the state
13 Medicaid plan necessary for implementation of the Medicare savings program, including eliminating
14 the financial eligibility resource test as provided in paragraph I.
15 2 Effective Date. Section 1 of this act shall take effect July 1, 2027.

Amendment to HB 2-FN-A-LOCAL

- 1 1 New Subdivision; Managed Care Law; Biomarker Testing. Amend RSA 420-J by inserting
2 after section 19 the following new subdivision:
3 Biomarker Testing
- 4 420-J:20 Definitions. In this subdivision:
- 5 I. "Biomarker" means a characteristic that is objectively measured and evaluated as an
6 indicator of normal biological processes, pathogenic processes, or pharmacologic responses to a
7 specific therapeutic intervention, including known gene-drug interactions for medications being
8 considered for use or already being administered. Biomarkers include but are not limited to gene
9 mutations, characteristics of genes, or protein expression.
- 10 II. "Biomarker testing" means the analysis of a patient's tissue, blood, or other biospecimen
11 for the presence of a biomarker. Biomarker testing includes but is not limited to single-analyte
12 tests, multi-plex panel tests, protein expression, and whole exome, whole genome, and whole
13 transcriptome sequencing.
- 14 III. "Clinical utility" means a biomarker test result that provides information used in the
15 formulation of a treatment or monitoring strategy that informs a covered person's outcomes and
16 impacts the treating provider's clinical decisions. The most appropriate test may include both
17 information that is actionable and some information that cannot be immediately used in the
18 formulation of a clinical decision.
- 19 IV. "Consensus statements" mean statements developed by an independent,
20 multidisciplinary panel of experts utilizing a transparent methodology and reporting structure and
21 with a conflict of interest policy. These statements are aimed at specific clinical circumstances and
22 base the statements on the best available evidence for the purpose of optimizing the outcomes of
23 clinical care.
- 24 V. "Nationally recognized clinical practice guidelines" mean evidence-based clinical practice
25 guidelines developed by independent organizations or medical professional societies utilizing a
26 transparent methodology and reporting structure and with a conflict of interest policy. Clinical
27 practice guidelines establish standards of care informed by a systematic review of evidence and an
28 assessment of the benefits and risks of alternative care options and include recommendations
29 intended to optimize patient care.

30 420-J:21 Biomarker Testing; Health Benefit Plan Coverage Requirements.

Amendment to HB 2-FN-A-LOCAL
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- 1 I. Each health carrier issuing, amending, delivering or renewing a health benefit plan on or
2 after January 1, 2026 shall include coverage for biomarker testing as defined in RSA 420-J:20, II,
3 pursuant to the criteria established in this section.
- 4 II. Biomarker testing shall be covered for the purposes of diagnosis, treatment, appropriate
5 management, or ongoing monitoring of an enrollee's disease or condition when the test provides
6 clinical utility and is demonstrated by the following medical and scientific evidence, including but
7 not limited to any of the following:
- 8 (a) Labeled indications for an FDA-approved or -cleared test;
 - 9 (b) Indicated tests for an FDA-approved drug;
 - 10 (c) Warnings and precautions on FDA-approved drug labels;
 - 11 (d) Centers for Medicare and Medicaid Services (CMS) National Coverage
12 Determinations or Medicare Administrative Contractor (MAC) Local Coverage Determinations; or
 - 13 (e) Nationally recognized clinical practice guidelines and consensus statements.
- 14 III. A health carrier shall ensure that coverage as defined in paragraph II is provided in a
15 manner that limits disruptions in care including the need for multiple biopsies or biospecimen
16 samples.
- 17 IV. If utilization review, including but not limited to prior authorization, is required, the
18 health carrier, utilization review entity, or any third party acting on behalf of an organization or
19 entity subject to this subdivision shall approve or deny a prior authorization request and notify the
20 enrollee, the enrollee's health care provider, and any entity requesting authorization of the service
21 within 14 days for non-urgent requests or within 72 hours for urgent requests.
- 22 V. The patient and prescribing practitioner shall have access to a clear, readily accessible,
23 and convenient process to request an exception to a coverage policy or an adverse utilization review
24 determination of a health carrier. The process shall be made readily accessible on the health
25 carrier's website.
- 26 2 New Section; Medicaid Coverage of Biomarker Testing. Amend RSA 167 by inserting after
27 section 4-f the following new section:
- 28 167:4-g Biomarker Testing; Medicaid Coverage Requirements.
- 29 I. The state Medicaid plan shall cover biomarker testing as defined in RSA 420-J:20, II, in
30 accordance with the requirements of this section.
- 31 II. Biomarker testing shall be covered for the purposes of diagnosis, treatment, appropriate
32 management, or ongoing monitoring of an enrollee's disease or condition when the department of
33 health and human services determines that the test provides clinical utility, as defined in RSA 420-
34 J:20, III and is demonstrated by the following medical and scientific evidence, including but not
35 limited to any of the following:
- 36 (a) Labeled indications for an FDA-approved or -cleared test;
 - 37 (b) Indicated tests for an FDA-approved drug;

Amendment to HB 2-FN-A-LOCAL
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- 1 (c) Warnings and precautions on FDA-approved drug labels;
- 2 (d) Centers for Medicare and Medicaid Services (CMS) National Coverage
- 3 Determinations or Medicare Administrative Contractor (MAC) Local Coverage Determinations; or
- 4 (e) Nationally recognized clinical practice guidelines and consensus statements.
- 5 III. Risk-bearing entities contracted under the state Medicaid plan to deliver services to
- 6 beneficiaries shall provide biomarker testing at the same scope, duration and frequency as the
- 7 Medicaid program otherwise provides to enrollees.
- 8 IV. The state Medicaid plan shall ensure coverage as defined in paragraph II is provided in
- 9 a manner that limits disruptions in care including the need for multiple biopsies or biospecimen
- 10 samples.
- 11 V. If utilization review, including but not limited to prior authorization, is required, the
- 12 state Medicaid plan, utilization review entity, or any third party acting on behalf of an organization
- 13 or entity subject to this section shall approve or deny a prior authorization request and notify the
- 14 enrollee, the enrollee's health care provider, and any entity requesting authorization of the service
- 15 within 14 days for non-urgent requests or within 72 hours for urgent requests.
- 16 VI. The enrollee and participating provider shall have access to a clear, readily accessible,
- 17 and convenient process to request an exception to a coverage policy of the state Medicaid plan or by
- 18 risk-bearing entities contracted to the program. The process shall be made readily accessible to all
- 19 participating providers and enrollees online.
- 20 VII. The department of health and human services shall submit to the Centers for Medicare
- 21 and Medicaid Services any amendment to the state Medicaid plan required to provide coverage for
- 22 biomarker testing in accordance with this section.

Sen. Watters, Dist 4
Sen. Rosenwald, Dist 13
May 15, 2025
2025-2208s
05/05

Amendment to HB 2-FN-A-LOCAL

1 1 New Section; Coverage for Hospital Stays under the State Medicaid Plan. Amend RSA 126-A
2 by inserting after section 18-b the following new section:
3 126-A:18-c Coverage for Hospital Stays under the State Medicaid Plan.
4 Hospital stays shall be covered under the state Medicaid plan as follows:
5 I.(a) The department shall establish an administrative day rate for those days of hospital
6 stay in which a client does not meet criteria for acute inpatient level of care, but is not discharged
7 because:
8 (1) An appropriate placement outside the hospital is not available; and
9 (2) The postpartum parent's newborn remains on an inpatient claim for monitoring
10 post-in utero exposure to substances that may lead to physiologic dependence and continuous care by
11 the postpartum parent is the appropriate first-line treatment. "Postpartum parent" means the client
12 who delivered the baby or babies.
13 (b) The department shall use the annual statewide weighted average nursing facility
14 Medicaid payment rate to update the all-inclusive administrative day rate on November 1st of each
15 year.
16 (c) The administrative day rate shall include pharmacy services, pharmaceuticals, and
17 medically necessary ancillary services, as determined by the department, when these services are
18 provided during administrative days.
19 (d) The department shall identify administrative days during the length of stay review
20 process after the client's discharge from the hospital.
21 (e) The state Medicaid plan shall cover up to 5 newborn administrative days and may
22 include additional days with expedited prior authorization (EPA). For EPA, the hospital shall
23 establish that the clinically appropriate EPA criteria outlined in the department's published billing
24 guides have been met, and the hospital shall use the appropriate EPA number for billing purposes.
25 (f) The department shall pay the administrative day rate starting with the date of
26 hospital admission if the admission is solely for a no placement administrative day stay.
27 (g) The department shall pay the hospital the newborn administrative day rate only if:
28 (1) The postpartum parent rooms with their newborn and provides parental
29 support/care; and
30 (2) The hospital provides all prescribed medications to the postpartum parent for the
31 duration of the stay, including medications prescribed to treat substance use disorder.

Amendment to HB 2-FN-A-LOCAL

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- 1 II. The department shall establish a swing bed day rate for those days when a client is
2 receiving department-approved nursing service level of care in a swing bed.
- 3 (a) The department shall not pay a hospital the rate applicable to the acute inpatient
4 level of care for those days of a hospital stay when a client is receiving department-approved nursing
5 service level of care in a swing bed.
- 6 (b) The department's allowed amount for those ancillary services not covered under the
7 swing bed day rate shall be based on the payment methods provided in rules adopted under RSA
8 541-A. These ancillary services may be billed by the hospital on an outpatient hospital claim, except
9 for pharmacy services and pharmaceuticals.
- 10 (c) The department shall allow pharmacy services and pharmaceuticals not covered
11 under the swing bed day rate, that are provided to a client receiving department-approved nursing
12 service level of care, to be billed directly by a pharmacy through the point of sale system. The
13 department shall not allow those pharmacy services and pharmaceuticals to be paid to the hospital
14 through submission of a hospital outpatient claim.
- 15 III. The department shall adopt rules under RSA 541-A to establish the rate setting
16 methodology and criteria required under this section.

2025-2208s

AMENDED ANALYSIS

1. Directs the department of health and human services to establish an administrative day rate and swing bed rate under the state Medicaid plan for certain hospital stays for parents of newborns.

Sen. Birdsell, Dist 19
Sen. Rosenwald, Dist 13
May 14, 2025
2025-2196s
05/08

Amendment to HB 2-FN-A-LOCAL

1 1 Department of Health and Human Services; Lapse Extension; Funding for Community
2 Residential Services for Individuals with Disabilities and Acquired Brain Disorders.
3 Notwithstanding any other law to the contrary, the department of health and human services shall
4 carry forward \$10,000,000 from funds that would otherwise lapse on June 30, 2025, and shall use
5 said funds to finance room and board for individuals with disabilities and acquired brain disorders
6 who live in a staffed community residence within the state of New Hampshire. Said funds shall not
7 lapse until June 30, 2027. The department may accept and expend matching federal funds without
8 prior approval of the fiscal committee of the general court.
9 2 Effective Date. Section 1 of this act shall take effect June 30, 2025.

2025-2196s

AMENDED ANALYSIS

ADD:

1. Directs the department of health and human services to extend the lapse of certain funds in order to provide residential services for individuals with disabilities and acquired brain disorders.

Amendment to HB 2-FN-A-LOCAL

- 1 1 New Section; Long-Term Care; Guardianship Contracted Services. Amend RSA 151-E by
2 inserting after section 27 the following new section:
- 3 151-E:28 Guardianship Contracted Services.
- 4 I. When all other resources are exhausted, hospitals seeking to assist older adults or adults
5 with a disability as defined in RSA 151-E:24 with discharge from a hospital setting to a less
6 restrictive setting may seek to have a guardian or conservator appointed by the probate court,
7 pursuant to RSA 464-A, for any older adult or adult with a disability who:
- 8 (a) Requires an alternative decision maker to assist with discharge;
9 (b) Is deemed incapacitated by a court of competent jurisdiction; and
10 (c) Cannot secure guardianship services through any other alternative.
- 11 II. The department shall contract with office of the public guardian to provide publicly
12 funded guardianship slots for individuals in need of guardianship pursuant to paragraph I.
- 13 III. Hospitals seeking to assist adults with discharge shall apply to the department for
14 access to the publicly funded guardianship slots.
- 15 IV. Availability of publicly funded guardianship slots shall be subject to the availability of
16 funding.
- 17 2 Appropriations; Department of Health and Human Services.
- 18 I. The sum of \$550,000 for the biennium ending June 30, 2027 is hereby appropriated to the
19 department of health and human services. Said appropriation shall be used for 50 slots to provide
20 publicly funded guardianship for individuals as set forth in RSA 151-E:28. The governor is
21 authorized to draw a warrant for said sum out of any money in the treasury not otherwise
22 appropriated.
- 23 II. The sum of \$3,884,000 for the biennium ending June 30, 2027 is hereby appropriated to
24 the department of health and human services. Said appropriation shall be used by the department
25 to create new contract guardian slots and adjusting rates for individuals served under RSA 171-A,
26 RSA 161-F:52, and RSA 135-C. The governor is authorized to draw a warrant for said sum out of
27 any money in the treasury not otherwise appropriated.
- 28 3 Effective Date. Sections 1 and 2 of this act shall take effect September 30, 2025.

Amendment to HB 2-FN-A-LOCAL

- 1 1 New Section; Long-Term Care; Guardianship Contracted Services. Amend RSA 151-E by
2 inserting after section 27 the following new section:
3 151-E:28 Guardianship Contracted Services.
4 I. When all other resources are exhausted, hospitals seeking to assist older adults or adults
5 with a disability as defined in RSA 151-E:24 with discharge from a hospital setting to a less
6 restrictive setting may seek to have a guardian or conservator appointed by the probate court,
7 pursuant to RSA 464-A, for any older adult or adult with a disability who:
8 (a) Requires an alternative decision maker to assist with discharge;
9 (b) Is deemed incapacitated by a court of competent jurisdiction; and
10 (c) Cannot secure guardianship services through any other alternative.
11 II. The department shall contract with office of the public guardian to provide publicly
12 funded guardianship slots for individuals in need of guardianship pursuant to paragraph I.
13 III. Hospitals seeking to assist adults with discharge shall apply to the department for
14 access to the publicly funded guardianship slots.
15 IV. Availability of publicly funded guardianship slots shall be subject to the availability of
16 funding.
17 2 Appropriation; Department of Health and Human Services. The sum of \$550,000 for the
18 biennium ending June 30, 2027 is hereby appropriated to the department of health and human
19 services. Said appropriation shall be used for 50 slots to provide publicly funded guardianship for
20 individuals as set forth in RSA 151-E:28. The governor is authorized to draw a warrant for said sum
21 out of any money in the treasury not otherwise appropriated.

22 3 Effective Date. Sections 1 and 2 of this act shall take effect September 30, 2025.

2025-2310s

AMENDED ANALYSIS

1. Authorizes hospitals seeking to assist older adults or adults with a disability with discharge from a hospital setting to a less restrictive setting to seek to have a guardian or conservator appointed by the probate court, and makes an appropriation to the department of health and human services to fund guardianship slots.

Amendment to HB 2-FN-A-LOCAL

1 1 Committee Established.

2 I. There is established a committee to study long-term managed care and other relevant
3 considerations related to long-term managed care.

4 II. The members of the committee shall be as follows:

5 (a) Three members of the senate, appointed by the president of the senate.

6 (b) Three members of the house of representatives, appointed by the speaker of the
7 house of representatives.

8 III. Legislative members of the committee shall receive mileage at the legislative rate when
9 attending to the duties of the committee.

10 IV. The committee shall:

11 (a) Solicit input regarding, and develop legislative proposals related to, the following:

12 (1) The integration of medicaid-funded long-term care services, including home and
13 community based services waiver programs and nursing home benefits, into the department of
14 health and human service's care management program, to be delivered by at least one managed care
15 organization as defined in RSA 126-A:5, XIX(c)(3);

16 (2) Managed long-term care services and support programs run nationally;

17 (3) Waivers and nursing home benefits delivered through Medicaid managed care
18 organizations, where managed care organizations are responsible for care coordination, service
19 authorization, and payment administration for long-term support and services, as well as services
20 supported under the choices for independence waiver under section 1902 (a)(30)(A) of the Social
21 Security Act;

22 (4) Whether to include developmental disability waiver services into the Medicaid
23 care management program;

24 (5) Ways in which the state and counties can obtain enhanced federal funding
25 sources;

26 (6) Ways in which Medicaid eligibility can be streamlined to place priority on
27 consumer choice and create a less restrictive environment;

28 (7) Ways in which nursing facility providers can be incentivized to accept Medicaid
29 members with high acuity to reduce length of stay in hospitals;

30 (8) How managed care organizations collaborate with county governments, including
31 delegating care coordination and service authorization functions;

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

- 1 (9) How to ensure nursing facilities are paid timely and utilize services consistent
2 with the criteria established by the department of health and human services;
- 3 (10) How managed care organizations participate in discharge planning, transitional
4 care, and other education programs for physicians, nurses, discharge planners and hospitals;
- 5 (11) How managed care organizations provide incentive payments to nursing facility
6 providers, reward reductions in preventable acute care costs, and encourage transformative efforts
7 in the delivery of nursing facility services, including efforts to promote transitions to community
8 based settings and a resident-centered care culture through facility design and services provided;
- 9 (12) How a shared savings program with county governments and other nursing
10 facility providers and active participants can ensure the delivery of quality services;
- 11 (13) How the department of health and human services can update its capitation
12 payment plan to take into consideration payments to cover all managed long-term care support
13 services;
- 14 (14) Issues relevant to ensure a seamless and effective transition to the integration
15 of all long-term care services, including waiver services, to be managed through the care
16 management program;
- 17 (15) The timeline and impact of a statewide program that aligns Medicare and
18 Medicaid enrollment into a highly-integrated, special needs plan for all dually eligible Medicaid and
19 Medicare beneficiaries;
- 20 (16) The benefits of dually eligible plans on meeting the needs of individuals who
21 choose to remain in communities with appropriate services; and
- 22 (17) Other pertinent and relevant issues as deemed necessary by the committee.
- 23 (b) Solicit input from:
- 24 (1) The department of health and human services;
- 25 (2) County and private nursing home providers;
- 26 (3) Long-term service and support providers within the development and disability
27 areas of state agencies;
- 28 (4) National Medicaid-managed care providers; and
- 29 (5) Other departments, groups, organizations, or individuals as deemed necessary by
30 the committee.
- 31 V. The members of the study committee shall elect a chairperson from among the members.
32 The first meeting of the committee shall be called by the first-named senate member. The first
33 meeting of the committee shall be held within 45 days of the effective date of this section. Four
34 members of the committee shall constitute a quorum.
- 35 VI. The committee shall report its findings and any recommendations for proposed
36 legislation to the president of the senate, the speaker of the house of representatives, the senate
37 clerk, the house clerk, the governor, and the state library on or before October 1, 2025.

1 2 Effective Date. Section 1 of this act shall take effect upon its passage.

DELAWARE
Original
UNB

Sen. Birdsell, Dist 19
May 21, 2025
2025-2337s
05/11

Amendment to HB 2-FN-A-LOCAL

1 1 Appropriation; Intermediate Care for Children with Intellectual and Developmental
2 Disabilities. The sums of \$70,105 for the fiscal year ending June 30, 2026 and \$141,613 for the fiscal
3 year ending June 30, 2027 are hereby appropriated to the department of health and human services,
4 account 05-95-048-482010-2154, for the purpose of providing a 2 percent rate increase in fiscal year
5 2026 and an additional 2 percent rate increase in fiscal year 2027 to facilities providing intermediate
6 care for children with intellectual and developmental disabilities. The governor is authorized to
7 draw a warrant for said sum out of any money in the treasury not otherwise appropriated. The
8 department is authorized to accept and expend any federal funds for the purposes of this section
9 without prior approval of the fiscal committee of the general court.

2025-2337s

AMENDED ANALYSIS

ADD:

1. Makes an appropriation to the department of health and human services for intermediate care for children with disabilities.

Sen. Gray, Dist 6
May 20, 2025
2025-2286s
09/06

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by replacing section 388 with the following:
- 2
- 3 388 Department of Health and Human Services; Foster Grandparent Program. The
- 4 reimbursements to the foster grandparent program through the senior volunteer grant program,
- 5 established in RSA 161-F:40, are hereby suspended for the biennium ending June 30, 2027.

2025-2286s

AMENDED ANALYSIS

REPLACE:

154. Suspends for the biennium the reimbursements to the foster grandparent program through the senior volunteer grant program.

Sen. Gray, Dist 6
May 21, 2025
2025-2367s
05/06

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by deleting sections 446-450, relative to a developmental services special account.

2025-2367s

AMENDED ANALYSIS

Delete:

183. Establishes a recreational and socialization services special fund to support recreational services for individuals with developmental disabilities, sets the payment limit for such services at \$595 per individual, and extends the lapse of a prior appropriation to the department of health and human services for this purpose.

Sen. Rosenwald, Dist 13
May 13, 2025
2025-2123s
07/09

Amendment to HB 2-FN-A-LOCAL

- 1 Amend the bill by replacing section 380 with the following:
- 2
- 3 380 Agency Directive; Department of Health and Human Services. For the biennium ending
- 4 June 30, 2027, the department of health and human services shall not use general funds to enroll
- 5 any new participants into the state loan repayment program (SLRP). The department may continue
- 6 to use general funds to fund existing agreements with existing participants who enrolled in the
- 7 SLRP prior to this section taking effect.

2025-2123s

AMENDED ANALYSIS

REPLACE

150. Directs the department of health and human services not to use general funds 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 Statement of Findings. The general court hereby finds that:
- 2 I. New Hampshire is facing serious gaps in maternal health and wellness and continues to
- 3 face threats to the fragile maternal health ecosystem.
- 4 II. The New Hampshire maternal mortality committee determined that 76.1 percent of New
- 5 Hampshire pregnancy-related deaths were preventable.
- 6 III. Nationwide, data show that 53 percent of pregnancy-related deaths occurred between
- 7 one day to one year after pregnancy.
- 8 IV. New Hampshire has a high prevalence of depression, anxiety, and behavioral health
- 9 conditions, including substance overdose, a leading cause of maternal mortality.
- 10 V. The majority of maternal deaths as the result of an overdose have connections to prior
- 11 mental health conditions.
- 12 VI. Seventy-eight percent of New Hampshire moms worked during pregnancy, and 62
- 13 percent of New Hampshire moms plan to return or return to the workforce after giving birth.
- 14 2 New Section; Maternal Mental Health Screening. Amend RSA 126-A by inserting after
- 15 section 101 the following new section:
- 16 126-A:101-a Maternal Mental Health Screening.
- 17 I. The department of health and human services shall cover maternal depression screenings
- 18 at well-child visits under the state Medicaid program. The department shall recommend that health
- 19 care providers screen mothers for maternal depression at all well-child visits.
- 20 II. The department is authorized to use the following Medicaid coverage categories to
- 21 reimburse depression screening:
- 22 (a) Early and periodic screening, diagnostic, and treatment services.
- 23 (b) As an assessment under the mother's Medicaid identification number.
- 24 (c) As a risk assessment under the infant's Medicaid identification number.
- 25 III. As used in this section, "maternal depression screening" means screening tools for
- 26 maternal mental health that are consistent with current standard of care and under the supervision
- 27 of a certified health care provider.
- 28 3 New Section; Maternal Depression Screening Coverage. Amend RSA 417-D by inserting after
- 29 section 2-c the following new section:
- 30 417-D:2-d Maternal Depression Screening Coverage.

Amendment to HB 2-FN-A-LOCAL
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- 1 I. Each health carrier that issues or renews any group policy, plan, or contract of accident or
2 health insurance providing benefits for medical or hospital expenses, shall provide to certificate
3 holders of such insurance coverage for maternal depression screening.
- 4 II. Covered benefits shall include:
- 5 (a) Periodic prenatal and postpartum depression screening of the pregnant and
6 postpartum patient under the patient's plan.
- 7 (b) Periodic maternal depression screening for the mother of a child at the child's one
8 month, 2 month, 4 month, and 6 month well-child visits under the child's plan.
- 9 (c) Instruction to the mother on the results of screening and referral to mental health
10 and/or community based resources.
- 11 III. In this section:
- 12 (a) "Maternal depression screening" means any and all screening tools for maternal
13 mental health that is consistent with current standard of care and under the supervision of a
14 certified health care provider.
- 15 (b) "Pregnant or postpartum patient" is defined as is an individual who:
- 16 (1) Is pregnant or within 12 months of giving birth; or
17 (2) Has lost a pregnancy or relinquished an infant for adoption within the previous
18 12 months.
- 19 IV. This section shall not apply to plans available through the Small Business Health
20 Options Program (SHOP).
- 21 4 Appropriation; Department of Health and Human Services; Perinatal Psychiatric Provider
22 Consult Line. The sum of \$275,000 for the fiscal year ending June 30, 2028 is hereby appropriated
23 to the department of health and human services to support the establishment of a perinatal
24 psychiatric provider consult line. The governor is authorized to draw a warrant for said sums out of
25 any money in the treasury not otherwise appropriated.
- 26 5 Appropriation; Rural Maternal Health EMS Services. The sum of \$75,000 for fiscal year
27 ending June 30, 2026, and the sum of \$75,000 for the fiscal year ending June 30, 2027, is hereby
28 allocated to the department of safety to support rural maternal health EMS services. The governor
29 is authorized to draw a warrant for said sums out of any money in the treasury not otherwise
30 appropriated.
- 31 6 Appropriation: Department of Health and Human Services; Reduction of Barriers for
32 Independent Birth Centers; Agency Study and Report. The sum of \$30,000 for fiscal year ending
33 June 30, 2026, is hereby appropriated to the department of health and human services to utilize
34 existing contracts to additionally examine barriers to the sustainability of independent birth centers
35 in New Hampshire and identify ways to reduce burdens and encourage their sustainability. The
36 department shall report its findings and recommendations, including any necessary legislation and

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

1 rulemaking changes, to the senate president, the speaker of the house of representatives, the
2 governor, the house clerk, and the senate clerk on or before June 30, 2026.

3 7 New Sections; Women's Health Care. Amend RSA 417-D by inserting after section 2-d the
4 following new sections:

5 417-D:2-e Coverage of Perinatal Mental Health and Substance Use Treatment.

6 I. Any group health plan or health insurance issuer offering group health insurance
7 coverage, that provides benefits with respect to mental health and substance use disorders
8 treatment furnished to a perinatal individual enrolled under such plan or coverage, may choose to
9 waive copayment for such services.

10 II. For a health care contract that meets the definition of a "high deductible plan" set forth
11 in 26 U.S.C. section 223(c)(2), this requirement shall apply only after the enrollee has satisfied the
12 minimum deductible under section 223 for the year, except with respect to items or services that are
13 preventive care pursuant to section 223(c)(2)(C) of the federal Internal Revenue Code, in which case
14 paragraph I shall apply regardless of whether the minimum deductible under section 223 has been
15 satisfied.

16 III. In this section:

17 (a) "Perinatal individual" shall refer to an individual who:

18 (1) Is pregnant or is within 12 months of giving birth;
19 (2) Is a biological parent or an adoptive or foster parent who is within 12 months
20 from assuming custodial care of a child; or
21 (3) Has lost a pregnancy or relinquished an infant for adoption within the previous
22 12 months.

23 (b) "Substance use treatment" and "substance use disorder services" mean health care
24 services that are provided to a covered person as treatment for an addictive substance-related
25 condition, not including treatment for any condition related to tobacco use.

26 417-D:2-f Coverage of Perinatal Home Visiting Services.

27 I. Each health carrier that issues or renews any group policy, plan, or contract of accident or
28 health insurance providing benefits for medical or hospital expenses, shall provide certificate holders
29 of such insurance coverage for home visiting services for pregnant and postpartum women who do
30 not otherwise qualify.

31 II. Covered benefits shall include:

32 (a) Home visiting services for pregnant and postpartum women up to 12 months post
33 birth of a child provided by a qualified health professional with maternal and pediatric health
34 training.

35 (b) Instruction, resource referral, and materials necessary to home visiting care.

Amendment to HB 2-FN-A-LOCAL
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1 III. In this section, “home visiting services” includes evidence-based, voluntary home or
2 community-based services for mothers and caregivers with newborns aimed at improving maternal
3 and child health, including but limited to:

- 4 (a) Screenings for unmet health needs;
- 5 (b) Maternal and infant nutritional needs;
- 6 (c) Emotional health supports, including postpartum depression supports; and
- 7 (d) Resource and referral.

8 8 New Section; Expand Employee Protection to Attend Pregnancy Appointments to Postpartum
9 and Fertility Appointments. Amend RSA 275 by inserting after section 37-e the following new
10 section:

11 275:37-f Leave of Absence to Attend Medical Appointments for Childbirth, Postpartum Care,
12 and Infant Pediatric Medical Appointments.

13 No employer with 20 employees or more, shall deny an employee leave from work up to a total of
14 25 hours to attend the employee’s own medical appointments for childbirth, postpartum care, or the
15 employee’s child’s pediatric medical appointments within the first year of the child’s birth or
16 adoption. In the case where both parents of a child are employees of the same employer, the parents
17 collectively may take unpaid leave according to this section, for a total of 25 hours in their child’s
18 first year. An employer is not required to pay an employee for any time taken as leave pursuant to
19 this section. However, an employee shall be permitted to substitute any accrued vacation time or
20 other appropriate paid leave for any leave taken pursuant to this section. When the employee
21 returns from their own or their child’s health appointments, that employee’s original job shall be
22 made available to the employee by the employer. An employee who wishes to request leave under
23 this section shall provide reasonable notice to the employer prior to the leave and make a reasonable
24 effort to schedule the leave so as not to unduly disrupt the operations of the employer. An employer
25 may ask for documentation from the employee to ensure the time is being used for its intended
26 purpose.

27 9 Department of Health and Human Services; Perinatal Peer Support. The department of
28 health and human services shall study how to operationalize a perinatal peer support certification
29 program and determine best practices for perinatal peer support. The department shall provide a
30 report of their findings to the senate president, speaker of the house of representatives, the senate
31 clerk, house clerk, and governor no later than November 1, 2026.

32 10 Effective Date.

33 I. Sections 2, 3, 7, and 8 shall take effect January 1, 2026.

34 II. Section 4 shall take effect July 1, 2027.