

2024 New Hampshire and Vermont Legislative Update “Cross-over” Edition

New Hampshire

Hospital Financing

There are a few legislative bills advancing that would impact hospital financing and reimbursement processes. First, hospitals and the state need to renegotiate the state’s Medicaid Enhancement Tax (MET), paid by the hospitals, and Disproportionate Share Hospital (DSH) disbursement determinations as the existing agreement sunsets on June 30, 2024. Ultimately, the legislature will need to pass legislation that contemplates a new MET/DSH plan.

Additionally, we are engaged with the following legislation.

SB 561 – Prior authorization

Would require written processes for prior authorization and utilization review determinations; shorten allowable timeframes for carriers to make prior authorization and utilization determinations; and provide minimum qualifications for peer-to-peer reviewers

Status – *Passed the Senate; being heard in the House*

Dartmouth Health position – **Support**

HB 1081 – insurance payments for ambulance providers

Status – *Passed the House; being heard in the Senate*

Dartmouth Health position – **Support**

SB 173 – codifying parallel state standards to the federal No Surprises Act

Creates an option that allows health care provider or facility to utilize either the state or federal IDR process

Status – *Passed the Senate; being heard in the House*

Dartmouth Health position – **Monitoring**

Behavioral Health

While the state continues to implement its 10-year mental health plan, there were a few bills introduced in the legislature that would have improved access to the continuum of mental health services. However, these bills did not advance this legislative session. There is one bill remaining:

SB 411 – establishes a committee to study emergency mental health services for persons 21 years and younger

Status – *Passed the Senate; being heard in the House*

Dartmouth Health position – **Support**

Workforce

In order to support our current workforce and ensure our ability to attract and recruit, we work to advance legislation that will streamline licensing processes, provide for workforce supports, and expand capacity. This session we are advocating for several pieces of legislation, including:

SB 371 – changing resident physician licensing processes to allow for parallel licensing with residency

Status – *Passed the Senate, being heard in the House*

Dartmouth Health position – **Support**

SB 403 – establishes a certification process for community health workers under OPLC, which will allow for Medicaid reimbursement

Status – *Passed the Senate, being heard in the House*

Dartmouth Health position – **Support**

LGBTQIA+

There have been more than twenty pieces of legislation filed, heard, and debated that would impact the LGBTQIA+ community. To advocate for inclusive communities that advance population health, Dartmouth Health has been working closely with external partners to oppose discriminatory legislation. We have also affirmatively opposed legislation that would directly impact a person's ability to access medical care.

HB 619 – Prohibits gender affirming bottom surgery for minors and prohibits referrals for such care

Status – Passed the House; being heard in the Senate

Dartmouth Health position – **Oppose**

HB 1660 – prohibiting Medicaid from covering gender affirming surgeries for minors

Status – Passed the House; being heard in the Senate

Dartmouth Health position – **Oppose**

Maternal health and women's healthcare

Early in the session, the Senate and House each heard several bills that would have positively (or negatively) impacted access to women's reproductive healthcare. Most of the bills relative to reproductive care, either pro or con, were killed early in the session.

SB 461 – requiring health care provider to report information about abortions performed to DHHS

Status – Passed Senate; being heard in the House

Dartmouth Health position – **Oppose, seeking amendment**

HB 1010 - expanding midwifery scope of practice

Status – House HHS retained

Dartmouth Health position – **Opposed**

SB 484 – changes to the processing of live birth worksheets that would have impacted the state's ability to track maternal and infant health and implement targeted health improvements

Status – Tabled in the Senate

Dartmouth Health position – **Opposed**

Population Health

We track, monitor, and provide testimony on legislation that impacts the health of our communities. This legislative session we have worked to oppose several bills that would impede population health efforts, such as the elimination of vaccine requirements in childcare centers. We have also worked to advance several bills that would positively impact population health.

SB 351 – \$5m to implement statewide cancer screening for firefighters

Status – Passed Senate; to be heard in the House

Dartmouth Health position – **Support**

SB 467 – establishes a CHaD license plate decal, revenue from the decal will be dedicated to the injury prevention fund

Status – Passed Senate; to be heard in the House

Dartmouth Health position – **Support**

SB 499 - hunger for children, older adults, and people with disabilities

Status – Passed Senate; to be heard in the House

Dartmouth Health position – **Support**

SB 399 – ensure insurance coverage for blood testing associated with elevated lead levels

Status – Passed Senate; to be heard in the House

Dartmouth Health position – **Support**

HB 1283 – establishes end of life options for a person with terminal illness to receive medical assistance in dying

Status – Passed House; to be heard in the Senate

Dartmouth Health position – **Monitoring**

Administration- privacy and patient/parental consent

There are several bills that would impact our operations as a health care organization.

HB 1663— relative to patient confidentiality and patient protections

Would have entailed extensive administrative burdens relative to patients’ record management, safety and quality review and improvement, and patient access to medical records

Status – House HHS retained

Dartmouth Health position – **Opposed**

SB 571 – establishing a committee to study consent and confidentiality laws applicable to adolescent and young adult health care

Status – Passed the Senate, to be heard in House Child & Family Law

Dartmouth Health position – **Opposed original bill; neutral on amended bill**

SB 400 – reduces the maximum cost for medical records and to be provided electronically if requested

Status – Passed the Senate; to be heard in the House

Dartmouth Health position – **Monitoring**

SB 462 – increases the cap on damages for wrongful death loss of consortium claims

Status – Passed the Senate; to be heard in the House

Dartmouth Health position – **Monitoring**

Vermont

Budget Adjustment Act

- Increases skilled home health reimbursement rates
- Increases funds to pay for skilled nursing facilities labor costs
- Extends the home health CON moratorium to July 1, 2030

Hospital Financing

H.766 – Prior authorization, claims edits, and step therapy requirements

Align prior authorization requirements with Medicaid, align claims edits requirements with Medicare, and provide for exceptions to step therapy protocols.

Status – Passed the House; Passed Senate Health and Welfare; to be taken up on the Senate floor

H.721 – Medicaid Expansion –

Expand the Medicare Savings Program (MSP) to reduce out-of-pocket costs by paying Part B premiums and cost-sharing.

Status – Passed the House; Passed Senate Health and Welfare and currently in Senate Appropriations.

H.861 – Audio-only reimbursement parity

Status: Passed the House; Passed Senate Health and Welfare and Finance Committees

H.622 – EMS providers reimbursement for treatment and training personnel

Status: Passed the House; Passed the Senate Health and Welfare Committee and in Senate Committee

H.621 – Health insurance coverage for diagnostic breast imaging with no cost sharing

Status: Passed the House and Senate. Delivered to the Governor on April 19, 2024, for his action.

H.741 – Insurance coverage for colorectal cancer screening to align coverage risk individuals with the U.S. Preventative Services Task Force (USPSTF) recommendations.

Status: Passed the House and Senate. Awaiting Gubernatorial action

H.883 – Border Hospital Rate Increase

The FY25 budget includes \$2.175 million to ensure that the rate of pay to out-of-state hospitals ten miles from the border will increase as a percentage of rate paid to in-state hospitals.

Status: Passed House; Included in the Senate Appropriations Committee FY25.

H.883 – Skilled Home Health Rate Increase

The FY25 budget includes \$1.3 million to increase reimbursement rates for skilled home health services to 100% of the Medicare Low Utilization Payment Adjustment (LUPA).

Status: Passed House; Included in the Senate Appropriations Committee FY25 Budget

Behavioral/Mental Health

H.883 (FY2025 Budget)

\$1 million for start-up costs for psychiatric youth inpatient facility at Southwestern Vermont Medical Center and \$3.5 million for Psychiatric Residential Treatment Facility services for individuals under the age of 21 at the Brattleboro Retreat.

Status: Passed House; Passed Senate Appropriations

S.192 – Forensic facility admissions criteria and processes

This bill establishes admission criteria and processes for a forensic facility. The purpose and intent of the bill is to enable the commissioner of the Department of Mental Health (DMH) to seek treatment and programming for certain individuals in a forensic facility and to update the civil commitment procedures for individuals with intellectual disabilities.

Status: Passed House Human Services; currently in House Health Care and then will go to House Judiciary Committee.

Workforce

H.247 – Adoption of the Occupational Therapy Licensure Compact

Status: Passed House; Passed Senate Health and Welfare. Up for Senate floor action.

H.543 – Adoption of the Social Work Licensure Compact

Status: Passed the House and Senate. Will be sent to the Governor for his action.

H.847 – Peer support provider and recovery support specialist certification

Creates a certification for peer support providers and peer recovery support specialists. Certified individuals will be able to bill Medicaid for their services once the program is established under the Office of Professional Regulation.

Status: Passed House; Passed Senate Health and Welfare and Finance Committees. Up for Senate floor action.

S.189 – Provider safety

Develops mental health response service guidelines and provides social service and home health provider safety. The home health safety policy change gives home health agencies flexibility to decline to send staff into homes with known safety concerns and clarifies that an agency can refuse service to a patient who has been discharged for safety reasons previously.

Status: Passed Senate and House. The Senate will review changes to the bill and will either concur with changes, concur with further proposal of amendments, or request a conference

H.883 – Nursing Home Workforce Incentive Funding

The FY25 Budget includes \$1 million in one-time contingency funding for healthcare workforce recruitment and retention incentives. The funding is split into \$500,000 for licensed nursing assistant programs to support recruitment and program capacity, and \$500,000 for recruitment and retention grants for Medical Directors and Rounding Physicians at skilled nursing facilities.

Status: Passed in the Senate version of the FY25 Budget, differences in the House and Senate version of the budget will need to be considered and reconciled as part of the Committee of Conference process.

Maternal Health and Women's healthcare

S.173 – Collection, sharing, and selling of consumer health data, specifically reproductive care.

Status: This bill is included in the larger data privacy bill, H.121.

Pharmacy and Pharmaceuticals

H.233 – Pharmacy benefit managers

The bill establishes standards and criteria for the licensure and regulation of pharmacy benefit managers providing claims processing services or other prescription drug or device services for health benefit plans.

Status: Passed House; Passed Senate Health and Welfare. Referred to the Finance Committee.

S.98 – Green Mountain Care Board authority over prescription drugs

This bill requires the GMCB, in consultation with advisory group and other state agencies, to explore and create a framework and methodology for implementing a program to regulate the cost of prescription drugs for consumers.

Status: Passed the Senate; currently in House Health Care.

Population Health

S.25/S.197 – PFAS

These bills prohibit the manufacturer, sale and distribution of certain products and packaging containing PFAS and other named chemicals. Drugs approved by the Federal Drug Administration are exempt. The committee agreed to include a provision specifically directing the evaluation of whether federally approved and regulated personal protective equipment, pharmaceuticals, medical devices, and dietary supplements should be regulated under the consumer products program. The report is due 11/ 1/2024.

Status: Bills passed the Senate and House. Current version of the bill with changes will be reviewed by the Senate Health and Welfare Committee.

S.114 – Psychedelic Therapy Advisory Working Group

This bill creates the Psychedelic Therapy Advisory Working Group to examine the use of psychedelics to improve physical and mental health and to make findings and recommendations regarding the advisability of the establishment of a state program to permit health care providers to administer psychedelics in a therapeutic setting. It will also look at the impact on public health.

Status: Passed Senate; Currently in the House Human Services Committee.

S.186 – Systemic evaluation of recovery residences and recovery communities

This bill requires the Vermont Department of Health (VDH), in collaboration with state agencies and community partners, to develop and recommend a certification program for recovery residences. It also requires VDH to complete an assessment of the recovery residences in the state.

Status: Bill passed the Senate. Currently being considered in the House Human Services Committee.

S.114 – Student application of sunscreen

This bill allows students in public and approved independent schools to possess and self-administer topical, non-aerosolized sunscreen at school with the permission of a parent or guardian.

Status: Passed full Senate and House; awaiting action by the Governor.

S.302 – Public health outreach programs regarding dementia risk.

This bill directs various departments to educate health care providers and the public about dementia risks and the benefits of early detection.

Status: Passed Senate; currently in the House Human Services Committee.

H.72 – Harm reduction and overdose prevention centers

This bill provides for a number of overdose harm reduction strategies (syringe needle exchange) and establishes an overdose prevention center in Burlington once the city applies for a grant and it has been approved by the Burlington City Council.

Status: Passed House; Passed Senate Health and Welfare on a voice vote

Administration – Privacy

H.121 – Enhanced data privacy

This bill aims to enhance consumer privacy by regulating data collection, protecting civil rights, and provide legal resource for privacy violations. The Health Care Coalition continues to advocate to exempt HIPAA-covered entities and business associates to limit consumer confusion and compliance costs and to eliminate a private right of action.

Status. Passed House and currently in Senate Economic Development Committee. The Economic Development Committee deferred the health-care related provisions of the bill to the Senate Health and Welfare Committee to provide recommendations.

S.183 – Re-envisioning the Agency of Human Services

This bill re-envisions the current Agency of Human Services (AHS) and requires the Secretary to evaluate the current structure of AHS, identify potential options for re-envisioning the agency and engage in a cost-benefit analysis of each option, and develop one or more recommendations for implementation.

Status: Passed the Senate; Passed House Human Services and referred to House Government Operations.