

## 2026 New Hampshire and Vermont Legislative Update

### New Hampshire

#### Administration

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

- **[HB 1071](#)** – repealing immunity afforded health care facilities when following directives adopted in response to the COVID-19 state of emergency  
*Status – Passed the House; Introduced in Senate Health and Human Services*  
**Dartmouth Health position – Oppose**
- **[HB 1293](#)** – taxing the excess value certain properties owned by charitable or non-profit organizations  
Seeks to tax properties, buildings and lands, of charitable organizations that exceed \$1,000,000.  
*Status – Referred to Interim Study*  
**Dartmouth Health position – Monitored**
- **[HB 1352](#)** – relative to payment and dispute resolution for medical bills under workers compensation  
Seeks to extend the amount of time insurance carriers, self-insurers, and payors act to pay uncontested claims, establish an optional mediation process for contested claims, modifies the reasonable effort standard for resolving claims with a good faith standard, and increases civil penalties for failure to engage in good faith efforts.  
*Status – House voted Inexpedient to Legislate*  
**Dartmouth Health position – Monitored**
- **[HB 1378](#)** –relative to parental access to a minor child’s medical records  
*Status – Passed the House, Introduced to Senate Health and Human Services*  
**Dartmouth Health position – Opposed original bill; working with policymakers on an amendment**
- **[HB 1562](#)**- relative to licensing requirements for health care facilities that operate on a membership-based business model  
*Status – Passed the House, Returned to the House per Senate Rule 3-21*  
**Dartmouth Health position – Monitored**
- **[HB 1653](#)** – relative to emergency medical care provided at freestanding hospital emergency facilities  
*Status – Laid on the House table*  
**Dartmouth Health position – Monitored**
- **[HB 1756](#)** – allowing organizations to file for property tax exemptions once and receive those exemptions unless and until a town assessor finds the organization ineligible for an exemption  
*Status – Passed the House; Senate Election Law & Municipal Affairs recommended passage 5-0*  
**Dartmouth Health position – Monitored**
- **[HB 1784](#)** – relative to the health care consumer protection trust fund  
*Status – House voted Interim Study*  
**Dartmouth Health position – Monitored**
- **[HB 1788](#)** – holding state contracts with DEI provisions to be void as a matter of law and establishing a right of action for citizen where public entities of agencies engage with contracts with DEI provisions  
*Status – Passed the House; Heard in Senate Judiciary*  
**Dartmouth Health position – Monitored**

- [SB 421](#)** – relative to the membership and duties of the trauma medical review committee and establishing a committee to review the member and duties of other boards and an appointment related to emergency medical services  
*Status – Passed the Senate; Heard in House Health, Human Services and Elderly Affairs*  
**Dartmouth Health position – Support**
- [SB 444](#)** – prohibiting the use of animal testing when other comparable methods are available  
*Status – Passed the Senate; Heard in House Commerce and Consumer Affairs*  
**Dartmouth Health position – Monitoring**
- [SB 476](#)** – relative to consumer health care cost transparency  
 Creates a new requirement for the NH Insurance Dept to give consumers access to health care price-transparency tool and billing information  
*Status – Laid on the Senate table*  
**Dartmouth Health position – Monitored**
- [SB 548](#)** – relative to health carrier provider contract standards  
 Allows the NH Insurance Dept Commissioner to hold an informational public hearing when a health carrier ends a provider contract affecting 1,000 or more patients, and includes requirements for continuity-of-care and patient notification. It also creates a standardized notice process to ensure patients receive information about contract terminations and their rights.  
*Status – Passed Senate; Heard in House Commerce and Consumer Affairs*  
**Dartmouth Health position – Support**
- [SB 613](#)** – relative to licensing requirements for health care facilities established within a 15 mile radius of a critical access hospital (CAH)  
 Requires a health care facility to provide certified, written notice to a CAH if to be located within 15 miles; establishes standards governing the transfer of patients from freestanding hospital emergency facilities to ensure clinical appropriateness, patient safety, continuity of care, and patient choice; prohibits exclusive transfer practices  
*Status – Laid on the Senate table*  
**Dartmouth Health position – Supported**
- [SB 664](#)** – limiting hospital executive compensation in communities designated as distressed place-based economies under certain circumstances  
*Status – Laid on the Senate table*  
**Dartmouth Health position – Opposed**
- [SB 666](#)** – relative to consumer protection, transparency, and oversight of certain health care transactions and establishing a study committee to analyze health insurance providers, their practices, policies, premiums, management, and the impact to consumers  
 Defines and regulates material health care transactions and requires notice to the Department of Justice (DoJ) of health care transactions that change of control of health care entities and that may reasonably to expected to affect competition, cost of health care services, or access to care. Authorizes the DoJ to review, monitor, and approve such transactions and enforce violations of the regulatory requirement as a violation of the consumer protection act.  
*Status – Referred to Interim Study*  
**Dartmouth Health position – Monitored**

## Workforce

- [HB 1030](#)** – relative to licensed practical nurse (LPN) scope of practice  
 Expands assessment authority and care planning  
*Status – Passed the House; Passed the Senate*  
**Dartmouth Health position – Support**
- [HB 1052](#)** – expands qualifications for initial licensure as a LADC, or licensed alcohol and drug counselor  
*Status – Referred to Interim Study*  
**Dartmouth Health position – Monitored**

- **[HB 1572](#)** – relative to licensure as a masters licensed alcohol and drug counselors, recreational therapist, and speech-language pathologist  
*Status – Laid on the House Table*  
Dartmouth Health position – **Monitored**
- **[HB 349](#)** – relative to the practice of optometry and authorization to perform ophthalmic laser procedures  
*Status – Passed the House; Passed the Senate and Vetoed by the Governor*  
Dartmouth Health position – **Monitored**
- **[SB 425](#)** – adopting the physician associate licensure compact  
Prohibits the use of AI as a means of providing services requiring a professional license for psychologist, mental health practitioners, and alcohol and other drug use professionals  
*Status – Passed the Senate; Heard in House Executive Departments and Administration*  
Dartmouth Health position – **Monitoring**
- **[SB 457](#)** – establishes an application process to grant licenses to physicians who graduate from medical schools outside of the US or Canada  
*Status – Passed the Senate; Heard in House Executive Departments and Administration*  
Dartmouth Health position – **Monitoring**
- **[SB 640](#)** – relative to the use of artificial intelligence to provide services requiring a professional license  
*Status – Passed the Senate; to be Heard in House Executive Departments and Administration*  
Dartmouth Health position – **Monitoring**
- **[SB 667](#)** – establishes felony-level offenses for the assault of an emergency room personnel  
*Status – Passed the Senate; Heard in House Criminal Justice and Public Safety*  
Dartmouth Health position – **Support**

## Pharmacy

- **[HB 1755](#)** – requires participants in the 340B discounted drug purchasing program to report specific data annually to DHHS; requires DHHS to report data to the Legislature  
*Status – Laid on House Table*  
Dartmouth Health position – **Opposed**
- **[SB 477](#)** – Establishes reporting requires for the DHHS, hospitals, and other covered entities participating in the 340B Drug Pricing Program  
*Status – Senate voted Interim Study*  
Dartmouth Health position – **Opposed**
- **[SB 478](#)** – strengthening prescription drug affordability and pharmacy benefit manager accountability  
*Status – Laid on the Senate Table*  
Dartmouth Health position – **Monitoring**
- **[SB 504](#)** – relative to the practice of pharmacy and the dispensing of certain medications by pharmacists  
Authorizing the dispensing of 30 day supply of non-controlled oral anti-cancer medication by pharmacists, allows for direct dispense  
*Status – Passed in the Senate; to be Heard in House Executive Departments and Administration*  
Dartmouth Health position – **Monitoring**
- **[SB 665](#)** – requiring pharmacies to charge consumers the lowest available price for prescription drugs and prohibits insurers and pharmacy benefit managers from disclosing or offering that lowest price  
*Status – Passed Senate; to be Heard in Senate Commerce and Consumer Affairs*  
Dartmouth Health position – **Monitoring**

## Public Health and Vaccine Access

- [HB 1449](#) – prohibits school vaccine clinic during school hours and requires the parent or legal guardian of a child to be present during the administration of any vaccination at such clinic  
*Status – Passed the House; Heard in Senate Health and Human Services*  
Dartmouth Health position – **Oppose**
- [HB 1584](#) – requires DHHS to provide notices of medical and religious exemptions for immunization requirements and asserts that written statements attesting religious objective is sufficient for exemption  
*Status – Passed the House; Heard in Senate Health and Human Services*  
Dartmouth Health position – **Oppose**
- [HB 1616](#) – prohibits state agencies and political subdivisions from advertising or expending funds to advertise vaccines  
*Status – Laid on the House Table*  
Dartmouth Health position – **Opposed**
- [HB 1719](#) – remove Hep B requirement from pediatric vaccine schedule  
*Status – Passed out of the House; Heard in Senate Health & Human Services*  
Dartmouth Health position – **Oppose**
- [HB 1811](#) – eliminate all vaccine requirements  
*Status – House voted Inexpedient to Legislate*  
Dartmouth Health position – **Opposed**
- [HB 524](#) – repeal the NH Vaccine Association  
*Status – Passed out of the House; Heard in Senate Health & Human Services*  
Dartmouth Health position – **Oppose**

## Access to Care

- [SB 480](#) – prohibits prior authorization for the first physical therapy, occupational therapy, and similar rehabilitative services and at least 8 medically necessary services, allows carriers to deny claims deemed not medically necessary  
*Status – Passed the Senate; to be Heard in House Commerce and Consumer Affairs*  
Dartmouth Health position – **Support**
- [SB 543](#) – establishes provisional eligibility for Medicaid nursing facility services as part of the long-term care application process and makes an appropriation to DHHS for this purpose  
*Status – Passed the Senate; Heard in House Health, Human Services and Elderly Affairs*  
Dartmouth Health position – **Support**
- [SB 606](#) – requires NH Medicaid to reimbursement for biomarker testing  
*Status – Passed Senate; to be Heard in House Commerce and Consumer Affairs*  
Dartmouth Health position – **Support**

## Behavioral Health

- [HB 1790](#) – relative to involuntary admission for certain individuals with a substance use disorder  
*Status – referred to Interim Study*  
Dartmouth Health position – **Monitored**
- [SB 646](#) – allows parity in coverage of mental health illnesses consistent with NH Medicaid scope of coverage and reimbursement rates  
*Status – Passed the Senate; to be Heard in House Commerce and Consumer Affairs*  
Dartmouth Health position – **Support**

## Women's Health

- [\*\*HB 191\*\*](#) – providing criminal penalties for the transporting of an unemancipated minor in order to obtain a surgical  
*Status – Passed the House; Passed the Senate*  
Dartmouth Health position – **Opposed**
- [\*\*HB 232\*\*](#) – relative to the rights of conscience for medical professionals  
*Status – Passed the House; Heard in Senate Health & Human Services*  
Dartmouth Health position – **Oppose**
- [\*\*SB 36\*\*](#) – relative to the collection and reporting of abortion statistics by health care providers and medical facilities  
*Status – Passed both bodies, enacted into law*  
Dartmouth Health position – **Opposed original bill; worked with policymakers on an amendment**
- [\*\*SB 520\*\*](#) – permits a physician to perform breast surgery on a minor in certain instances if the procedure is at the election of the minor in consultation with her primary care physician  
*Status – Passed the Senate; to be Heard in House Health, Human Services and Elderly Affairs*  
Dartmouth Health position – **Support**

## LGBTQIA+ Health

- [\*\*HB 1356\*\*](#) – relative to the statute of limitations for bringing a private right of action for violation of the statute prohibiting medical procedures and treatments intended to alter a minor's gender  
*Status – Passed the House; Senate Judiciary recommends passage 3-2*  
Dartmouth Health position – **Oppose**

## Childcare

- [\*\*HB 1195\*\*](#) – removes unnecessary zoning barriers that prevent child care providers from operating in certain neighborhoods, allow more providers to open and expand care options  
*Status – Passed the House; Heard in Senate Election Law and Municipal Affairs*  
Dartmouth Health position – **Support**
- [\*\*HB 1566\*\*](#) – directing the DHHS to seek clarification from the Administration for Children & Families regarding TANF reserve funds and repeal the requirement that the DHHS biennial budget request includes funding for certain child care workforce programs  
*Status – Passed House; Heard in Senate Health and Human Services*  
Dartmouth Health position – **Support**
- [\*\*SB 645\*\*](#) – relative to income eligibility for the NH child care scholarship program and reallocating certain revenue to fund the program  
*Status – Laid on the Senate Table*  
Dartmouth Health position – **Support**

## Food Insecurity

- [\*\*HB 1797\*\*](#) – strengthens work requirements for SNAP eligibility, directs data-sharing agreements with other state agencies with SNAP eligibility, and prohibits DHHS from using their discretion to set more lenient standards for SNAP eligibility  
*Status – Passed the House; Heard in Senate Health and Human Services*  
Dartmouth Health position – **Oppose**
- [\*\*SB 615\*\*](#) – prohibits certain items for purchase with SNAP benefits, strengthens work requirements for SNAP eligibility, directs data-sharing agreements with other state agencies with SNAP eligibility, and prohibits DHHS from using their discretion to set more lenient standards for SNAP eligibility  
*Status – Passed the Senate; to be Heard in House Health, Human Services and Elderly Affairs*  
Dartmouth Health position – **Oppose**

## Vermont

Dartmouth Health Office of Government Relations closely monitors Vermont legislation. Collaborating with partners, including our system members, the Vermont Association for Hospitals and Health Systems and other health care stakeholders, we engage in relevant Vermont legislation when appropriate.

### **Vermont Budget Adjustment**

- [Act 74/H.790](#) – Budget Adjustment Act.  
Status: Signed by the Governor on 3/5/3026

### **Vermont Budget**

On a vote of 97-40, the House advanced [H.951](#), the FY27 appropriations. Representatives largely supported the Governor's health care spending proposals, including statutory rate increases for skilled nursing facilities, additional funding to address caseload pressures in home- and community-based services, and one-time provider stabilization funds.

The House budget adds \$7.5 million in ongoing General Fund spending and \$10.4 million in one-time funds above the Governor's proposal. Key additions include:

- \$450,000 to fully restore Enhanced Residential Care Tier 1 rates to FY25 levels
- \$140,000 to increase Medicaid skilled home health rates
- \$2.72 million in rate increases for designated and specialized service agencies and home- and community-based services
- \$250,000 to restore funding for the Area Health Education Center (cut by the Governor)
- \$500,000 for Bridges to Health
- \$460,000 for Free and Referral Clinics.

### **Health Care/Insurance Reform**

- [H.585](#) – **Health insurance reforms**  
Status: Passed House, in Senate Finance. Allows the Governor to appoint two members to the Blue Cross Blue Shield of Vermont (BCBSVT) board of directors and regulate the compensation of BCBSVT executives. In addition, the bill requires site neutral payments for physical and occupational therapy, as well as athletic training, and establishes reporting requirements for medical sharing plans.
- [S.154](#) – **Biomarker testing insurance coverage**  
Status: Passed Senate, in House Health Care. Requires the Department of Financial Regulation and the Agency of Human Services to analyze and report on costs associated with requiring private health insurers and Vermont Medicaid to cover biomarker testing when it is supported by established medical evidence, including FDA indications,
- [S.189](#) – **Establishing a process for reducing or eliminating hospital services**  
Status: Passed Senate, in House Health Care. It requires hospitals to notify the Agency of Human Services (AHS) and the Green Mountain Care Board (GMCB) of the intent to reduce or eliminate hospital services.
- [S.190](#) – **Green Mountain Care Board, reference-based pricing, and studying the creation of a Public Health Benefit Authority**  
Status: Passed Senate, in House Health Care. Revises how Medicare base rates are calculated for reference-based pricing and caps QHP hospital payments at 250% of the adjusted Medicare rate. It also creates a working group to address Medicare cost-sharing issues and bars the GMCB from tackling those issues in FY'27 hospital budgets.
- [S.197](#) – **Establishing a primary care payment reform program**  
Status: Passed Senate, in House Health Care. The bill is designed to strengthen Vermont's primary care system by streamlining payments and expanding participation in the Blueprint for Health.

## Population Health

- [H.545](#) – **Issuing immunizations recommendations.**  
Grants the Commissioner of Health time-limited authority to issue recommended immunization schedules for both adults and children after consulting with the Vermont Immunization Advisory Council and reviewing the recommendations of various professional organizations, such as the Centers for Disease Control’s Advisory Committee on Immunization Practices, the American Academy of Pediatrics, and the American Academy of Family Physicians.  
Status: Signed by the Governor on 3/24/2026.

## Labor and Employment

- [H.205](#) – **Agreement not to compete**  
Prohibits not-to-compete agreements. May be attached to a bill that is moving in the Senate.  
Status: Recommitted back to House Commerce and Economic Development Committee.

## Workforce

- [H.84](#) – **Allowing telehealth appointments to be recorded with patient and provider consent**  
Gives health-care providers the option to record telehealth appointments when both the patient and the provider agree to it.  
Status: Passed Senate Health and Welfare.
- [H.237](#) – **Psychologists prescribing**  
Allows doctoral-level psychologists to obtain limited prescribing authority for certain mental health medications after completing postdoctoral training, passing a national exam, and entering collaborative agreements with psychiatrists.  
Status: Passed House, passed Senate Health and Welfare and Finance Committees. On Senate Floor.
- [S.64](#) – **Scope of practice for optometrists.**  
Authorizes optometrists to perform surgical procedures on the eye including laser surgeries, needle injections, and scalpel surgeries.  
Status: Passed Senate, in House Health Care.
- [S.142](#) – **Pathway to licensure for internationally trained physicians and medical graduates**  
Proposes to create a new pathway for internationally trained physicians and medical graduates to obtain licensure to practice medicine in Vermont.  
Status: Passed Senate, in House Health Care.
- [S.163](#) – **Role of advanced practice registered nurses in hospital care**  
Updates Vermont law to reflect the existing role of Advanced Practice Registered Nurses (APRNs) in hospitals.  
Status: Passed Senate, in House Health Care.

## Pharmaceutical/Pharmacy

- [H.577](#) – **Establishing the Vermont Prescription Drug Discount Card Program**  
Creates a statewide prescription drug discount card program administered by the State Treasurer to reduce prescription drug costs for Vermonters regardless of insurance status.  
Status: Passed House, in Senate Health and Welfare.

## Mental Health & Supports

- [H.573](#) – **First certification of an emergency exam**  
Allows physician assistants (PAs) to complete the first certification required for involuntary psychiatric hospitalization.  
Status: Passed House, in Senate Health and Welfare
- [S.193](#) – **Establishing a forensic facility for certain criminal justice-involved individuals**  
Establishes a forensic facility within the Department of Corrections (DOC). Emphasizes the facility must function as a locked, secure setting for court-ordered individuals while operating under a clinically driven, trauma-informed, recovery-oriented model rather than a traditional correctional unit.  
Status: Passed Senate.

- **[H.657](#) – Youth homelessness**

Allows certain homeless or unaccompanied youth to consent to their own medical, mental health, and substance use treatment.  
Status: Passed House, in Senate Health and Welfare.

## Administration

- **[H.582](#) – Adult protective services**

Amends the definition of neglect in the adult protective services statute to bring the program into compliance with federal regulations.

Status: Passed House, in Senate Health and Welfare.

- **[H.583](#) – Clinical decision making**

Regulates private equity and hedge fund ownership and investment in health care. The bill prohibits private equity groups and hedge funds with ownership or investment interests in a health care facility from interfering with the professional judgment of clinicians and creates a cause of action for aggrieved clinicians. It also requires health care facilities and management services organization (MSO) to report information related to private equity and hedge fund ownership or investment interests, as well as certain financial information.

Status: Passed House, in Senate Health and Welfare.

- **[H.611](#) – Miscellaneous provisions affecting the Department of Vermont Health Access**

Repeals outdated reporting requirements, updates advisory committees to align with federal rules, increases burial fund limits for Medicaid eligibility, proposes a delay in implementing Medicaid coverage for doula services to allow time for federal approval through the state plan amendment process, and repeals a portion of the 340B mandate statute.

Status: Passed House. In Senate Health and Welfare.

- **[H.814](#) – Neurological rights and the use of artificial intelligence technology in health and human services**

Establishes a statewide framework to ensure artificial and augmented intelligence are used ethically in health care, human services, and education.

Status: Passed House, in Senate Health and Welfare.

- **[H.816](#) – Regulating the use of artificial intelligence in the provision of mental health services**

Regulates the use of AI in the mental health services by outlining both permitted and prohibited applications in therapeutic settings.

Passed House, in Senate Health and Welfare.

- **[S.71](#) – Consumer data privacy and online surveillance**

Comprehensive data privacy legislation that includes an entity level exemption for Health Insurance Portability and Accountability Act (HIPAA) covered entities, as well as an exemption for nonprofits.

Status: Passed Senate in 2025, in House Commerce and Economic Development Committee.

- **[S.210](#) – Access to autopsy reports**

Clarifies access to autopsy reports in Vermont and formalizes the process for obtaining them.

Status: Passed Senate, in House Human Services.