

2022 NH Legislative Priorities Summary

The New Hampshire Medical Society (NHMS) tracked and was active on 137 individual pieces of legislation during the 2022 legislative session of the New Hampshire General Court. While virtual testimony to hearings and executive sessions was eliminated by the legislature's leadership this year – we still had more than 300 physicians provide testimony either in person or via phone or email. Some of our most effective advocacy this year was done by organizing small virtual meetings with key lawmakers where physicians could meet with them on a more personal level.

Following is a number of priority bills that the Medical Society was engaged on over the course of this year. Please let us know if you have any questions. If you are interested in getting involved with our advocacy work, don't hesitate to call or email NHMS Director of Advocacy, Mike Padmore, at (603) 858-4744 or Michael.Padmore@nhms.org.

NHMS Legislative Priority Levels

- 1 – Lead: Help lead advocacy on these bills.
- 2 – Collaborate: Work with coalition partners on these bills.
- 3 – Monitor: Monitor these bills, engaging with lawmakers and partners when necessary.

HB1210 - relative to exemptions from vaccine mandates

NHMS Position: Opposed Result: Interim Study Priority: 1

HB1210's goal was to allow an individual the ability to claim a personal conscience exemption for any immunization requirements required by their employer. NHMS was joined by a wide variety of healthcare and business organizations in opposing this legislation, including the NH Hospital Association and NH Business & Industry Association. This bill would have effectively nullified an employer's ability to institute immunization requirements for its employees. Furthermore, the bill's language would have put the state of New Hampshire and its health care institutions out of compliance with CMS guidelines in accordance with the Biden Administration's COVID-19 vaccine mandate, jeopardizing any federal money those institutions receive. This bill was voted interim study by the Senate HHS Committee, effectively defeating the bill.

SB288 - prohibiting the requiring of COVID-19 vaccinations for schools or childcare agencies

NHMS Position: Opposed Result: Amended to Study Committee Priority: 1

SB288 was introduced to prohibit schools and childcare agencies from ever requiring the COVID-19 vaccine for attendance. NHMS opposed this bill because the legislature is not the place to determine which vaccines should be required for school entry. That job is best left to the experts within the NH Department of Health and Human Services who have been making those judgements for decades to keep our teachers and students safe in the classroom. Our pediatric community led the charge, voicing their opinion loud and clear to the Senate HHS Committee. In turn, the committee decided to amend this bill into a study committee rather than pass the bill as introduced. The final bill was signed by the Governor.

HB1609 - relative to certain provisions of the fetal life protection act requiring an ultrasound examination

NHMS Position: Support

Result: Signed by Governor

Priority: 1

HB1609 was introduced in response to The Fetal Life Protection Act being signed into law by Governor Sununu during the 2021 legislative session. The Fetal Life Protection Act effectively banned abortion from being performed after 24 weeks with the only exemption being for medical emergencies that jeopardize the life of the mother. Furthermore, the new law required that an ultrasound must be done prior to any abortion being performed. Finally, it criminalized providers who violated the law. NHMS advocated against the Fetal Life Protection Act as it demonstrated a clear interference in the physician-patient relationship. NHMS supported HB1609 for two reasons: (1) HB1609 gives providers more discretion in determining when an ultrasound should be performed (2) HB1609 adds an additional exemption for “the case of fetal abnormalities incompatible with life”, allowing for providers to perform abortions in instances where a fatal fetal anomaly arises during pregnancy. After hearing from dozens of physicians around the state, this bill passed the House and Senate and was signed into law by the Governor, effective immediately.

SB382 – relative to licensure requirements for telehealth services and relative to licensure of physicians and physician assistants through reciprocity agreements.

NHMS Position: Support

Result: Signed by Governor

Priority: 1

After hearing from our members concerning issues with being unable to treat their patients when they travel across state borders, we supported SB382 which directs the NH Office of Professional Licensure and Certification to seek reciprocity agreements with states with similar licensure requirements for physicians and physician assistants. NHMS will work with NH OPLC, the NH Board of Medicine, and our medical society counterparts in other states to achieve this goal.

SB228 - relative to the regulation and practice of physician assistants

NHMS Position: Support

Result: Signed by Governor

Priority: 1

NHMS was approached in September 2021 by the NH Society of Physician Assistants in hopes of getting feedback on a bill they intended to introduce. After consulting our NHMS Council, the NH Board of Medicine, the NH Office of Professional Licensure and Certification, the NH Hospital Association, the NH Association for Justice, and the bill’s prime sponsor, Senator Jeb Bradley, we were able to reach an agreement that satisfied all parties. SB228 does not allow for physician assistants to practice independently of a physician. Rather, all PAs must enter into a written collaboration agreement with a sole practice physician or a physician representing a group or health system so long as the sole practitioner or at least one physician in the group or health system practices in a similar area of medicine as the physician assistant and is a licensed New Hampshire physician. That agreement must outline processes for the PA to collaborate and consult with the appropriate physician within the practice, acknowledge the PA’s scope of practice is limited to their education, training, and experience, and require the PA to have a physician available for consultation at all times. Regarding liability, the “participating physician” who enters into the collaboration agreement with a physician assistant shall not, by the existence of the collaboration agreement alone, be legally liable

for the actions or inactions of the physician assistant; provided, however, that this shall not otherwise limit the liability of the participating physician. In essence, this language provides added legal protection for physicians in instances where they are not involved in their PA's patient care.

HB1606 – relative to administration of the state immunization registry

NHMS Position: Opposed Result: Signed by Governor Priority: 1

HB1606 aimed to require that health care providers must ask their patient after every immunization administered if they would like to opt in or opt out of the state's immunization registry. NHMS opposed this bill as it would have added an unnecessary administrative burden on health care providers. Instead, we support an "opt out" policy because it simplifies the process for providers and still gives patients an opportunity to opt out of the registry if they so choose. While we were able to successfully amend the bill so that providers would not have to query patients after every immunization they administer, the final bill did change the registry from its current "opt out" system, to an "opt in" system. While the Governor signed this bill, the law does not go into effect until July 2023. We will continue to work on this issue during the next legislative session.

HB1022 – permitting pharmacists to dispense the drug ivermectin by means of a standing order

NHMS Position: Opposed Result: Vetoed by Governor Priority: 2

Our state only has a few standing orders currently in law, all of which went through an exhaustive study process prior to going into effect. NHMS supported the creation of those standing orders and participated in that study process. This study process is a critical component because it is designed to engage all the impacted stakeholders to collect feedback. HB1022 attempted to bypass that study process. In addition, the New England Journal of Medicine published a study in March 2022 that concluded "Treatment with ivermectin did not result in a lower incidence of medical admission to a hospital due to progression of COVID-19 or of prolonged emergency department observation among outpatients with an early diagnosis of COVID-19". As a general rule, the creation of a standing order for the indication of a drug that is not supported by evidence is poor public policy. For those reasons, NHMS opposed HB1022. This bill passed both the House and the Senate but was vetoed by the Governor.

SB407 - relative to expanding Medicaid to include certain postpartum health care services

NHMS Position: Support Result: Amended into HB1661 & signed by Governor Priority: 2

After passing through the Senate with no issues, House leadership decided to amend the personal conscience exemption language from HB1210 into this bill, even though HB1210 had already been voted down in the Senate. In response, the Senate defeated SB407 because it had been tainted by HB1210's language. However, the Senate salvaged SB407's language by amending its language into [HB1661](#), a bill they knew the House wouldn't be inclined to defeat.