

Committee Report

CONSENT CALENDAR

March 2, 2021

HOUSE OF REPRESENTATIVES

REPORT OF COMMITTEE

**The Committee on Commerce and Consumer Affairs to
which was referred HB 519,**

**AN ACT relative to technical changes in the laws
administered by the insurance department. Having
considered the same, report the same with the
recommendation that the bill OUGHT TO PASS.**

Rep. John Hunt

FOR THE COMMITTEE

COMMITTEE REPORT

Committee:	Commerce and Consumer Affairs
Bill Number:	HB 519
Title:	relative to technical changes in the laws administered by the insurance department.
Date:	March 2, 2021
Consent Calendar:	CONSENT
Recommendation:	OUGHT TO PASS

STATEMENT OF INTENT

Rep. John Hunt for Commerce and Consumer Affairs. This bill makes minor “technical” changes to several insurance laws to provide clarity in language or correct inadvertent errors and omissions in existing statutes.

Vote 19-0.

Rep. John Hunt
FOR THE COMMITTEE

Original: House Clerk
Cc: Committee Bill File

CONSENT CALENDAR

Commerce and Consumer Affairs

HB 519, relative to technical changes in the laws administered by the insurance department.
OUGHT TO PASS.

Rep. John Hunt for Commerce and Consumer Affairs. Rep. John Hunt for Commerce and Consumer Affairs. This bill makes minor “technical” changes to several insurance laws to provide clarity in language or correct inadvertent errors and omissions in existing statutes. **Vote 19-0.**

CONSENT CALENDAR BLURB

HB 519 - relative to technical changes in the laws administered by the insurance department.

OUGHT TO PASS.

Rep. John Hunt for Commerce and Consumer Affairs. This bill makes minor “technical” changes to several insurance laws to provide clarity in language or correct inadvertent errors and omissions in existing statutes. **Vote 19-0.**

Voting Sheets

HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

EXECUTIVE SESSION on HB 519

BILL TITLE: relative to technical changes in the laws administered by the insurance department.

DATE: February 10, 2021

LOB ROOM: Remote

MOTIONS: **OUGHT TO PASS**

Moved by Rep. Hunt

Seconded by Rep. Bartlett

Vote: 19-0

CONSENT CALENDAR: YES

Statement of Intent: Refer to Committee Report

Respectfully submitted,

Rep Keith Ammon, Clerk

HOUSE COMMITTEE ON COMMERCE

EXECUTIVE SESSION ON HB HB519

BILL TITLE: relative to technical changes in the laws administered by the insurance department

DATE: Feb 10, 2021

LOB ROOM: ZOOM

MOTION: (Please check one box)

- OTP ITL Retain (1st year) Adoption of Amendment # _____
 Interim Study (2nd year) *(if offered)*

Moved by Rep. _____ Hunt _____ Seconded by Rep. ___ Bartlett _____ Vote: 19-0__

MOTION: (Please check one box)

- OTP OTP/A ITL Retain (1st year) Adoption of Amendment # _____
 Interim Study (2nd year) *(if offered)*

Moved by Rep. _____ Seconded by Rep. _____ Vote: _____

MOTION: (Please check one box)

- OTP OTP/A ITL Retain (1st year) Adoption of Amendment # _____
 Interim Study (2nd year) *(if offered)*

Moved by Rep. _____ Seconded by Rep. _____ Vote: _____

MOTION: (Please check one box)

- OTP OTP/A ITL Retain (1st year) Adoption of Amendment # _____
 Interim Study (2nd year) *(if offered)*

Moved by Rep. _____ Seconded by Rep. _____ Vote: _____

CONSENT CALENDAR? X Yes _____ No

Minority Report? _____ Yes _____ No If yes, author, Rep.: _____ Motion: _____

Respectfully submitted, Rep. AMMON , Clerk



2021 SESSION

Commerce and Consumer Affairs

Bill #: HB519 Motion: OTP AM #: _____ Exec Session Date: 2/10/2021

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Hunt, John B. Chairman	19		
Potucek, John M. Vice Chairman	1		
Osborne, Jason M.	2		
Ammon, Keith M. Clerk	3		
Abramson, Max	4		
Ham, Bonnie D.	5		
Depalma IV, Joseph	6		
Greeson, Jeffrey	7		
Johnson, Dawn M.	8		
Terry, Paul A.	9		
Bartlett, Christy D.	10		
Abel, Richard M.	11		
Herbert, Christopher J.	12		
Van Houten, Constance	13		
Fargo, Kristina M.	14		
Weston, Joyce	15		
Beaulieu, Jane E.	16		
Burroughs, Anita D.	17		
McAlear, Chris R.	18		
TOTAL VOTE:	19	0	

Hearing Minutes

HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

PUBLIC HEARING ON HB 519

BILL TITLE: relative to technical changes in the laws administered by the insurance department.

DATE: February 2, 2021

LOB ROOM: Remote **Time Public Hearing Called to Order:** 1:15 pm

Time Adjourned: 1:25 pm

Committee Members: Reps. Hunt, Potucek, Ammon, Abramson, Ham, Depalma IV, Greeson, Johnson, Terry, Bartlett, Abel, Herbert, Van Houten, Fargo, Weston, Beaulieu, Burroughs and McAleer

Bill Sponsors:

Rep. Hunt

TESTIMONY

* Use asterisk if written testimony and/or amendments are submitted.

Rep John Hunt

Sponsoring the bill for the department and would ask them to introduce the bill.

Heather Silverstein

General counsel for the Insurance Department. This is a technical bill to tidy up some of the insurance requirements. Highlights. 1) deals with record retention to 3 years. 2) Underwriting file for companies. Requires them to keep a declaration notice. 3) Deals with merger of companies, commissioner has to decide in 30 days after hearing. More in line with other states. 4) Change in the deadline for holding companies. The NAIC doesn't even look until late fall. Helps our licensees and our staff. Helps spread out the filing period. There was a typo in 402N5 that we're fixing. In 408D we're adding solicits because that's part of the definition. Another one is getting our terms consistent with what industry recognizes. The last one is 4156N deals with children's early intervention. We're including a reference that should have been in there before.

HOUSE COMMITTEE ON COMMERCE & CONSUMER AFFAIRS

PUBLIC HEARING on Bill # HB519

BILL TITLE:

DATE: Feb 2, 2021

ROOM: Remote

Time Public Hearing Called to Order: 1:15PM

Time Adjourned: 1:25PM

(please bold if present)

Committee Members: Reps. Hunt, Potucek, Ammon, Osborne, Abramson, Ham, Depalma IV, Greeson, Johnson, Terry, Bartlett, Abel, Herbert, Van Houten, Fargo, Weston, Beaulieu, Burroughs and McAleer

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House Remote Testify

Commerce and Consumer Affairs Committee Testify List for Bill HB519 on 2021-02-02

Support: 4 Oppose: 0 Neutral: 0 Total to Testify: 2

<u>Name</u>	<u>Email Address</u>	<u>Phone</u>	<u>Title</u>	<u>Representing</u>	<u>Position</u>	<u>Testifying</u>	<u>Signed Up</u>
Silverstein, Heather	heather.g.silverstein@ins.nh.gov	2712261	State Agency Staff	Insurance Department	Support	Yes (5m)	2/1/2021 12:02 PM
Mobley, Marty	martha.v.mobley@ins.nh.gov	2712805	State Agency Staff	Insurance Department	Support	Yes (0m)	1/29/2021 2:24 PM
Pageau, Joan	joan@nhaia.com	603.224.3965	A Lobbyist	NH Association of Insurance Agents	Support	No	2/1/2021 11:34 AM
Rathbun, Eric	ericrathbun@gmail.com	860.912.3751	A Member of the Public	Myself	Support	No	2/1/2021 9:38 PM

Testimony

TESTIMONY FOR HB 519

- relative to technical changes in the laws administered by the insurance department.

Hearing: February 2, 2021 at 1:15 pm

Good afternoon Commerce Committee. I am Marty Mobley, the Legal Coordinator for the Insurance Department.

The Insurance Department requested this legislation in order to clean up a few of our laws. I will note that the insurance industry is strongly in support of all of these proposals. For simplicity, I will just go through the bill by Section.

Section 1 reduces the time the Department must maintain unneeded records to 3 years. The current period is stated as 6 years, which is twice the time required by the civil statute of limitations. The Department believes 6 years is much more time than is necessary or practical for maintaining any records that are determined to be no longer of any value. In addition, Archives and Records management statute RSA 5:38 states “Unless otherwise provided by law with respect to particular departments or particular records, records not having a permanent or historical value may be destroyed at the end of 4 years from their making, provided that the rules of the director, as adopted under RSA 5:40, may provide that designated records may be destroyed at an earlier period or require their retention for a longer period.” This change is long overdue.

Section 2 simplifies the language in the statute that mandates what records insurers need to maintain for market conduct purposes. Because RSA 400-B:2 does require a notice of declined coverage, we are proposing to strike the phrase “if required by law” here to alleviate any possible confusion, since the notification is, in fact, required by law.

Section 3 simplifies the language in the statute on public hearings for the mergers of holding companies. The Department feels the current language is too uncertain and nonspecific, as we do not control the specifics of the finalization of

TESTIMONY FOR HB 519

- relative to technical changes in the laws administered by the insurance department.

a merger. We are proposing that the Commissioner will make a determination within 30 days after the hearing, so all parties know exactly when they may expect a decision. Additionally, this change will bring the language into line with the timeframe required by other New England states (ME, MA, CT) as well as DE, who have updated their company merger laws.

Section 4 changes the deadline for holding company registration renewals. The current date is May 1st, but these registration renewals are not reviewed by our Financial Regulation Division until September. Changing the date to August 1st allows the submitted renewal information to be more up-to-date and makes the process more efficient for the Department reviewers and industry, since the National Association of Insurance Commissioners (NAIC) does not require us to submit the renewal registrations to them until late fall.

Section 5 corrects a citation in the Pharmacy Benefit Managers (PBM) statute. This was a typo in the original legislation from 2019. (RSA 402-N:4 is about “usual and customary price”; RSA 402-N:5, I provides that a consumer may file a complaint. The rules mandated here are contained in Ins 2704.06.)

Section 6 clarifies that a producer must be appointed to “solicit or” negotiate a life settlement. This is [HB 1308](#) from last year, which was Tabled. This minor change makes clear that a producer must be appointed before they even solicit a life settlement. This language mirrors what’s in the statutory definitions for life settlement producers and our insurance producer statute as well, so we are able to be consistent in our regulation of licensees.

Section 7 corrects the reference to annuity contracts in the Unfair Trade statute. Currently, the statute refers to these contracts as “life annuity”, which is inaccurate. They are known as “annuity contracts” by the industry and regulatory entities.

TESTIMONY FOR HB 519

- relative to technical changes in the laws administered by the insurance department.

Sections 8 – 11 amend 4 statutes to include proper references to the ACA. These 4 statutes were amended last year by [HB 1162](#) with respect to Children’s Early Intervention Services. However, the appropriate reference to “catastrophic health plan” was inadvertently omitted in each of these statutes when that change was made. This technical change will correct that omission.

Archived: Wednesday, April 14, 2021 11:15:38 AM
From: [Mobley, Martha V](#)
Sent: Monday, February 1, 2021 9:42:19 AM
To: ~House Commerce Committee
Cc: [Pam Smarling](#); [Silverstein, Heather G](#)
Subject: Testimony for HB 519, being Heard in Commerce on Feb. 2nd
Importance: Normal
Attachments:
HB 519 Testimony.docx ;

Good morning Chair Hunt and Honorable Members of the House Commerce Committee,

Please find attached written testimony from the Insurance Department for [HB 519](#) (relative to **technical changes in the laws administered by the insurance department**), being heard tomorrow, February 2nd, at 1:15 pm in your Committee.

Heather Silverstein, the Department's General Counsel, or I will be available at the hearing tomorrow to answer any questions you may have, but you are welcome to reach out to us ahead of time, if you'd like more information.

Thank you,

Marty

Marty Mobley

Legal Coordinator

NH Insurance Department

21 S. Fruit Street, Suite 14

Concord, NH 03301

Telephone: (603) 271-2805

Fax: (603) 271-1406

e-mail: martha.v.mobley@ins.nh.gov

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Please notify the Department immediately at (603) 271-2261 or reply to marty.mobley@ins.nh.gov if you have received this email in error and delete and destroy all copies of this electronic message and any attachments. Thank you.



Please consider the environment before printing this email.

Bill as
Introduced

HB 519 - AS INTRODUCED

2021 SESSION

21-0874

10/04

HOUSE BILL **519**

AN ACT relative to technical changes in the laws administered by the insurance department.

SPONSORS: Rep. Hunt, Ches. 11

COMMITTEE: Commerce and Consumer Affairs

ANALYSIS

This bill makes various technical changes to insurance laws administered by the insurance department.

This bill is a request of the insurance department.

Explanation: Matter added to current law appears in ***bold italics***.
Matter removed from current law appears ~~[in brackets and struck through.]~~
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty One

AN ACT relative to technical changes in the laws administered by the insurance department.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 1 Insurance Department Records. Amend RSA 400-A:25, III to read as follows:

2 III. The commissioner may destroy at the end of ~~[6]~~ **3** years from the date of filing any
3 records ~~[which, in his opinion, are]~~ **determined to be** no longer of any value to the state. The
4 commissioner may destroy at an earlier date such records of the department which are readily
5 available to the commissioner in an unaltered form from any other state or federal agency or from
6 any licensed insurance company.

7 2 Declined Underwriting File. Amend RSA 400-B:4, III to read as follows:

8 III. A declined underwriting file shall be maintained and shall include an application, any
9 documentation substantiating the decision to decline an issuance of a policy, any binder issued
10 without the insurer issuing a policy, any documentation substantiating the decision not to add
11 additional coverage when requested, and ~~[, if required by law, any]~~ **the** declination notification.
12 Notes regarding requests for quotations that do not result in a completed application for coverage
13 need not be maintained for purposes of this chapter. The insurer shall retain declined underwriting
14 files for the current year plus 5 years.

15 3 Insurance Holding Companies; Approval of Mergers and Acquisitions. Amend RSA 401-B:3,
16 VI(b) to read as follows:

17 (b) The public hearing referred to in subparagraph VI(a) shall be held within 30 days
18 after the statement required by paragraph I is filed and at least 20 days' notice shall be given by the
19 commissioner to the person filing the statement. Not less than 7 days' notice of the public hearing
20 shall be given by the person filing the statement to the insurer and to such other persons as may be
21 designated by the commissioner. The insurer shall give such notice to its security holders. The
22 commissioner shall make a determination within ~~[the 60-day period preceding the effective date of~~
23 ~~the proposed transaction]~~ **30 days after the conclusion of the hearing**. At such hearing, the
24 person filing the statement, the insurer, any person to whom notice of hearing was sent, and any
25 other person whose interest may be affected shall have the right to present evidence, examine and
26 cross-examine witnesses, and offer oral and written arguments and in connection therewith shall be
27 entitled to conduct discovery proceedings in the same manner as is presently allowed in the superior
28 court of this state. All discovery proceedings shall be concluded not later than 3 days prior to the
29 commencement of the public hearing.

30 4 Insurance Holding Companies; Registration. Amend RSA 401-B:4, I(b) to read as follows:

1 (b) Any insurer which is subject to registration under this section shall register within
2 15 days after it becomes subject to registration and annually thereafter by ~~May~~ **August** 1 of each
3 year for the previous calendar year, unless the commissioner for good cause shown extends the time
4 for registration, and then within the extended time. The commissioner may require any insurer
5 authorized to do business in this state which is a member of an insurance holding company system,
6 and which is not subject to registration under this section, to furnish a copy of the registration
7 statement, the summary specified in paragraph III, or other information filed by such insurance
8 company with the insurance regulatory authority of its domiciliary jurisdiction.

9 5 Pharmacy Benefit Managers; Complaints. Amend RSA 402-N:5, II to read as follows:

10 II. The commissioner shall adopt rules, pursuant to RSA 541-A, to implement ~~RSA 402-N:4~~
11 **paragraph I**. Such rules shall include procedures for addressing complaints, provisions for
12 enforcement, the receipt of complaints referred to the insurance department under RSA 318:47-h,
13 III(b), and for reporting to the board of pharmacy on the status of complaints referred.

14 6 Life Settlements Act; Producer. Amend RSA 408-D:3, V(a) to read as follows:

15 V.(a) A life settlement producer that **solicits or** negotiates a life settlement contract
16 between a viator and a life settlement provider shall be appointed by the life settlement provider.

17 7 Unfair Methods, Acts, and Practices Defined; Unfair Discrimination. Amend RSA 417:4,
18 VIII(h) to read as follows:

19 (h) For life **coverage**, ~~life~~ annuity **contracts**, or disability coverage, refusing to insure
20 or to continue to insure, or limiting the amount, extent, or kind of coverage based on the applicant
21 who is also the proposed insured having filled a prescription for an opioid antagonist, when that
22 prescription is not relevant to the applicant's health, but rather is designed to promote the health of
23 someone else. For any such prescription, the carrier shall inquire with the applicant as to the reason
24 for the prescription and may request documentation that verifies the applicant's response prior to
25 issuing an underwriting decision.

26 8 Children's Early Intervention Therapy Services; Individual. Amend RSA 415:6-n to read as
27 follows:

28 415:6-n Coverage for Children's Early Intervention Therapy Services. Each insurer that issues
29 or renews any individual policy, plan, or contract of accident or health insurance providing benefits
30 for medical, rehabilitation, or hospital expenses, shall provide to certificate holders of such
31 insurance, who are residents of this state, coverage for expenses arising from the services of licensed
32 and credentialed occupational therapists, physical therapists, speech-language pathologists, and
33 clinical social workers working with children from birth to 36 months of age with an identified
34 developmental disability and/or delay as specified in rules adopted pursuant to RSA 171-A:18, IV as
35 long as the providing therapist receives a referral from the child's primary care provider if
36 applicable. The benefits in this section shall not be subject to deductibles, copayments, or
37 coinsurance; provided that the benefits included in this section may have a cap of \$3,200 per child

HB 519 - AS INTRODUCED
- Page 3 -

1 per year not to exceed \$9,600 by the child's third birthday. For a health care contract that meets the
2 definition of a "high deductible plan" set forth in 26 U.S.C. section 223(c)(2) **or a catastrophic**
3 **health plan, as defined under the Patient Protection and Affordable Care Act of 2009**, a
4 carrier shall be exempt from the deductible provisions of this section and may apply a deductible to
5 children's early intervention therapy services until an enrollee's deductible has been satisfied for the
6 year. Notwithstanding any provision of law or rule to the contrary, the coverage under this section
7 shall apply to the medical assistance program, pursuant to RSA 161 and RSA 167.

8 9 Children's Early Intervention Therapy Services; Group. Amend RSA 415:18-s to read as
9 follows:

10 415:18-s Coverage for Children's Early Intervention Services. Each insurer that issues or
11 renews any policy of group accident or health insurance providing benefits for medical,
12 rehabilitation, or hospital expenses, shall provide to each group, or to the portion of each group
13 comprised of certificate holders of such insurance who are residents of this state, coverage for
14 expenses arising from the services of licensed and credentialed occupational therapists, physical
15 therapists, speech-language pathologists, and clinical social workers working with children from
16 birth to 36 months of age with an identified developmental disability and/or delay as specified in
17 rules adopted pursuant to RSA 171-A:18, IV as long as the providing therapist receives a referral
18 from the child's primary care provider if applicable. The benefits in this section shall not be subject
19 to deductibles, copayments, or coinsurance; provided that the benefits included in this section may
20 have a cap of \$3,200 per child per year not to exceed \$9,600 by the child's third birthday. For a
21 health care contract that meets the definition of a "high deductible plan" set forth in 26 U.S.C.
22 section 223(c)(2) **or a catastrophic health plan, as defined under the Patient Protection and**
23 **Affordable Care Act of 2009**, a carrier shall be exempt from the deductible provisions of this
24 section and may apply a deductible to children's early intervention therapy services until an
25 enrollee's deductible has been satisfied for the year. Notwithstanding any provision of law or rule to
26 the contrary, the coverage under this section shall apply to the medical assistance program,
27 pursuant to RSA 161 and RSA 167.

28 10 Children's Early Intervention Therapy Services; Health Services Corporation. Amend RSA
29 420-A:17-g to read as follows:

30 420-A:17-g Coverage for Children's Early Intervention Services. Every health service
31 corporation and every other similar corporation licensed under the laws of another state that issues
32 or renews any policy of group accident or health insurance providing benefits for medical,
33 rehabilitation, or hospital expenses, which provides coverage for outpatient services shall provide to
34 each group, or to the portion of each group comprised of certificate holders of such insurance who are
35 residents of this state, coverage for expenses arising from the services of licensed and credentialed
36 occupational therapists, physical therapists, speech-language pathologists, and clinical social
37 workers working with children from birth to 36 months of age with an identified developmental

1 disability and/or delay as specified in rules adopted pursuant to RSA 171-A:18, IV as long as the
2 providing therapist receives a referral from the child's primary care provider if applicable. The
3 benefits in this section shall not be subject to deductibles, copayments, or coinsurance; provided that
4 the benefits included in this section may have a cap of \$3,200 per child per year not to exceed \$9,600
5 by the child's third birthday. For a health care contract that meets the definition of a "high
6 deductible plan" set forth in 26 U.S.C. section 223(c)(2) **or a catastrophic health plan, as defined**
7 **under the Patient Protection and Affordable Care Act of 2009**, a carrier shall be exempt from
8 the deductible provisions of this section and may apply a deductible to children's early intervention
9 therapy services until an enrollee's deductible has been satisfied for the year. Notwithstanding any
10 provision of law or rule to the contrary, the coverage under this section shall apply to the medical
11 assistance program, pursuant to RSA 161 and RSA 167.

12 11 Children's Early Intervention Therapy Services; HMO. Amend RSA 420-B:8-r to read as
13 follows:

14 420-B:8-r Coverage for Children's Early Intervention Services. Every health maintenance
15 organization and every similar corporation licensed under the laws of another state that issues or
16 renews any policy, plan, or contract of individual or group health insurance providing benefits for
17 medical, rehabilitation, or hospital expenses, shall provide to each individual or group, or to the
18 portion of each group comprised of certificate holders of such insurance who are residents of this
19 state, coverage for expenses arising from the services of licensed and credentialed occupational
20 therapists, physical therapists, speech-language pathologists, and clinical social workers working
21 with children from birth to 36 months of age with an identified developmental disability and/or delay
22 as specified in rules adopted pursuant to RSA 171-A:18, IV as long as the providing therapist
23 receives a referral from the child's primary care provider if applicable. The benefits in this section
24 shall not be subject to deductibles, copayments, or coinsurance; provided that the benefits included
25 in this section may have a cap of \$3,200 per child per year not to exceed \$9,600 by the child's third
26 birthday. For a health care contract that meets the definition of a "high deductible plan" set forth in
27 26 U.S.C. section 223(c)(2) **or a catastrophic health plan, as defined under the Patient**
28 **Protection and Affordable Care Act of 2009**, a carrier shall be exempt from the deductible
29 provisions of this section and may apply a deductible to children's early intervention therapy
30 services until an enrollee's deductible has been satisfied for the year. Notwithstanding any provision
31 of law or rule to the contrary, the coverage under this section shall apply to the medical assistance
32 program, pursuant to RSA 161 and RSA 167.

33 12 Effective Date. This act shall take effect 60 days after its passage.