

# Committee Report

**CONSENT CALENDAR**

**February 3, 2021**

**HOUSE OF REPRESENTATIVES**

**REPORT OF COMMITTEE**

**The Committee on Health, Human Services and Elderly  
Affairs to which was referred HB 600-FN,**

**AN ACT relative to funding for newborn screening.**

**Having considered the same, report the same with the  
recommendation that the bill OUGHT TO PASS.**

**Rep. William Marsh**

**FOR THE COMMITTEE**

## COMMITTEE REPORT

Committee:	<b>Health, Human Services and Elderly Affairs</b>
Bill Number:	<b>HB 600-FN</b>
Title:	<b>relative to funding for newborn screening.</b>
Date:	<b>February 3, 2021</b>
Consent Calendar:	<b>CONSENT</b>
Recommendation:	<b>OUGHT TO PASS</b>

### STATEMENT OF INTENT

New Hampshire's newborn screening program is a wonderful program, and the intent of this bill is not to change the program in any way. The intent is to change how they send out their bills. Under current law, the Department of Health and Human Services bills hospitals for the filter paper on which blood samples are submitted for testing. Filter paper is a supply, and this bill cannot be submitted to insurers. We are simply asking the Commissioner to restructure the current fee so that these bills can be submitted to insurers. Instead of billing for "filter paper", the invoice could read "newborn screening panel." We are aware this is already done at least in Texas and Minnesota. Coverage for pediatric preventative services has been mandated by federal law without co-pay or deductible since 2014 pursuant to 45 CFR 147.130. This bill does not mandate any change whatsoever in insurance law. Passage of this bill will help maintain the economic viability of the various birthing centers in NH.

Vote 21-0.

Rep. William Marsh  
FOR THE COMMITTEE

Original: House Clerk  
Cc: Committee Bill File

## CONSENT CALENDAR

Health, Human Services and Elderly Affairs

**HB 600-FN**, relative to funding for newborn screening. **OUGHT TO PASS.**

Rep. William Marsh for Health, Human Services and Elderly Affairs. New Hampshire's newborn screening program is a wonderful program, and the intent of this bill is not to change the program in any way. The intent is to change how they send out their bills. Under current law, the Department of Health and Human Services bills hospitals for the filter paper on which blood samples are submitted for testing. Filter paper is a supply, and this bill cannot be submitted to insurers. We are simply asking the Commissioner to restructure the current fee so that these bills can be submitted to insurers. Instead of billing for "filter paper", the invoice could read "newborn screening panel." We are aware this is already done at least in Texas and Minnesota. Coverage for pediatric preventative services has been mandated by federal law without co-pay or deductible since 2014 pursuant to 45 CFR 147.130. This bill does not mandate any change whatsoever in insurance law. Passage of this bill will help maintain the economic viability of the various birthing centers in NH.

**Vote 21-0.**

Original: House Clerk

Cc: Committee Bill File

# Voting Sheets

**HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS**

**EXECUTIVE SESSION on HB 600-FN**

**BILL TITLE:** relative to funding for newborn screening.

**DATE:** February 1, 2021

**LOB ROOM:** 206/208

**MOTIONS:** **OUGHT TO PASS**

Moved by Rep. Marsh

Seconded by Rep. Merchant

Vote: 21-0

**CONSENT CALENDAR: YES**

**Statement of Intent:** Refer to Committee Report

Respectfully submitted,

Rep Beth Folsom, Clerk

**STATE OF NEW HAMPSHIRE  
OFFICE OF THE HOUSE CLERK**



1/22/2021 10:06:45 AM  
Roll Call Committee Registers  
Report

**2021 SESSION**

**Health, Human Services and Elderly Affairs**

Bill #: 600      Motion: OTP      AM #: \_\_\_\_\_      Exec Session Date: \_\_\_\_\_

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Pearson, Mark A. Chairman	21		
Marsh, William M. Vice Chairman	1		
McMahon, Charles E.	2		
Nelson, Bill G.	3		
Acton, Dennis F.	4		
Gay, Betty I.	5		
Cushman, Leah P.	6		
Folsom, Beth A. Clerk	7		
Kelsey, Niki	8		
King, Bill C.	9		
Kofalt, Jim	10		
Weber, Lucy M.	11		
MacKay, James R.	12		
Snow, Kendall A.	13		
Knirk, Jerry L.	14		
Salloway, Jeffrey C.	15		
Cannon, Gerri D.	16		
Nutter-Upham, Frances E.	17		
Schapiro, Joe	18		
Woods, Gary L.	19		

STATE OF NEW HAMPSHIRE  
OFFICE OF THE HOUSE CLERK



1/22/2021 10:06:45 AM  
Roll Call Committee Registers  
Report

2021 SESSION

Health, Human Services and Elderly Affairs

Bill #: 600	Motion: OTP	AM #:	Exec Session Date:
Merchant, Gary			20
<b>TOTAL VOTE:</b>			21
			0



# Hearing Minutes

HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS

PUBLIC HEARING on Bill # HB 600-FN

**BILL TITLE:** An Act relative to newborn screening

**DATE:** 2/1/2021

**ROOM:** 206/8

**Time Public Hearing Called to Order:** 9:25 am

**Time Adjourned:** 9:55 am

**Committee Members Present:**

**In Room 206/8: Reps. M. Pearson, Folsom, McMahon, Gay, Cushman, B. King, MacKay  
On Zoom from home:**

**Marsh, Nelson, Acton, Kelsey, Kofalt, Snow, Knirk, Salloway, Cannon, Weber, Nutter-Upham, Schapiro, Woods and Merchant**

**TESTIMONY**

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

**Representative Marsh**

- Requested by NH Hospital Association
- No changes to a wonderful program
- Deals with billing procedure moving from "paper filter" to a service.
- Aligns with other states and Federal law.
- Facilities would be better able to recoup costs.

**Paula Minnehan, New Hampshire Hospital Association**

- endorses bill as presented
- some providers are not currently able to bill as there is no "coding" mechanism in place, the law would make it negotiable with carriers
- Not an insurance mandate
- some facilities have worked out billing agreements but this is not universal

**Dr. Sai Cherala, DHHS, Public Health**

Spoke to the value of program, crucial to Public Health  
early diagnostic, earlier treatment, Currently 37 conditions screened, information passed on to PCP,  
funded through fees, the bill as presented has no fiscal impact on screening program.

**Heidi Kroll, America's Health Insurance Plans (AHIP)**

Carriers already reimbursing in "bundled" costs, not sure legislation is needed, it is a negotiated process between providers and carriers

**Sabrina Dunlap, Anthem**

Does not support, carriers not included in discussions, leave it to be negotiated

**Henry Lippman, DHHS Medicaid Director**

Greater recoupment for this service would aid in the economic viability of birthing locations around the state.

**Andrew Hosmer, Harvard Pilgrim Health Care**

Does not support, leave to negotiation between providers and carriers.

**Christa Gilbert, member of the public**

Please support this life saving measure with sustainable funding with the possibility of additional screening in the future.

Respectfully submitted,

Rep. Beth Folsom, Clerk

## House Remote Testify

### Health, Human Services and Elderly Affairs Committee Testify List for Bill HB600 on 2021-02-01

Support: 6 Oppose: 2 Neutral: 5 Total to Testify: 7

<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>
Kroll, Heidi	kroll@gcglaw.com	603.496.2345	A Lobbyist	America's Health Insurance Plans (AHIP)	Oppose	Yes (5m)	1/31/2021 9:21 PM
Lipman, Henry	henry.lipman@dhhs.nh.gov	603.271.9200	State Agency Staff	DHHS	Neutral	Yes (5m)	2/1/2021 8:06 AM
Hosmer, Andrew	ahosmer@preti.com	603.496.2078	A Lobbyist	Harvard Pilgrim Health Care	Oppose	Yes (1m)	2/1/2021 9:40 AM
Pelletier, Tristen	Trinitypelletier385@gmail.com	603.667.6511	A Member of the Public	Myself	Support	Yes (100m)	2/1/2021 10:34 AM
Marsh, William	wmarshmd@gmail.com	603.569.6382	An Elected Official	Myself	Support	Yes (0m)	1/21/2021 7:44 AM
Minnehan, Paula	pminnehan@nhha.org	603.496.1047	A Lobbyist	New Hampshire Hospital Association	Support	Yes (0m)	1/21/2021 4:36 PM
Cherala, Sai	sai.s.cherala@dhhs.nh.gov	603.271.4110	State Agency Staff	Myself	Neutral	Yes (0m)	1/28/2021 2:20 PM
Brannen, Tyler	tyler.j.brannen@ins.nh.gov	2712396	State Agency Staff	Insurance Department	Neutral	No	1/22/2021 2:03 PM
Heaton, Michelle	michelle.c.heaton@ins.nh.gov	2712399	State Agency Staff	Insurance Department	Neutral	No	1/22/2021 2:07 PM
Padmore, Michael	michael.padmore@nhms.org	603.858.4744	A Lobbyist	NH Medical Society	Support	No	1/31/2021 9:57 AM
Wazir, Safiya	s.wazir@leg.state.nh.us	603.333.0594	An Elected Official	My Constituents	Support	No	1/31/2021 9:08 PM
Rathbun, Eric	ericrathbun@gmail.com	860.912.3751	A Member of the Public	Myself	Support	No	1/31/2021 10:11 PM
Dunlap, Sabrina	sabrina.dunlap@anthem.com	603.703.8073	A Lobbyist	Anthem	Neutral	No	2/1/2021 7:23 AM

# Testimony



## **HOUSE HEALTH AND HUMAN SERVICES COMMITTEE**

**February 2, 2021**

### **HB 602 – Relative to Reimbursements for Telemedicine**

#### **Testimony**

Good morning, Mr. Chairman, and members of the committee. My name is Paula Minnehan, Senior VP, State Government Relations with the New Hampshire Hospital Association (NHHA), representing all 26 of the state's community hospitals as well as all specialty hospitals.

The NHHA is opposed to HB 602. NHHA believes the current telemedicine statute, which was signed into law by the Governor in late June 2020, is working as intended. The law is vitally important to ensuring that patients can access care and providers can safely provide care via telemedicine. This has been even more essential during the COVID-19 pandemic, where social distancing for many meant that they should remain home to reduce their exposure to others. The adoption and expansion of the various telemedicine modalities provided for in the current law were well overdue and are, as many health care experts have stated, here to stay as an important component in ensuring access to essential health care services.

The bill before you, however, attempts to roll back many of the enhancements that were passed into law less than a year ago. Specifically, removing the reimbursement parity provision would discourage, and likely limit, the ability of healthcare providers to invest and expand their telehealth technology and modalities. In addition, removing the "audio-only" option in the current law will negatively impact patients' ability to receive care. You will hear from many other providers today that audio only has been a lifeline for patients during this pandemic and is truly the only mode of accessing care in some rural areas of the state that still experience little to no internet access.

Furthermore, the bill that passed last year established a telehealth commission. This commission is comprised of many thoughtful legislative leaders and experts in the health care field. The commission has just begun their work and is slated to be in effect for a number of years. Their charge is comprehensive, and data focused.

NHHA conducted a telehealth survey of our hospital members at the end of 2020 and those results will be presented to the commission at their upcoming meeting in mid-February. While the results have not been made public yet, I can share with you that several themes have emerged including increased patient and provider satisfaction with using telehealth services. The patient experience as well as the provider experience with telehealth has been a positive

one. The hospitals have embraced the technology fully and we have seen a rapid increase in the use of telemedicine. One important comment shared by many hospitals is that their ability to maintain the technology enhancements needed to provide effective, reliable, and secure telehealth is dependent on reimbursement parity and a consistent public policy that supports telehealth.

As I stated earlier, the commission is just beginning its work and it is vitally important to not make any changes to the telemedicine law at this time. I urge you to let the commission do its work, and provide patients and providers with the assurances that telehealth services will not be negatively impacted during this period.

NHHA does not support HB 602 and we ask that you find this bill inexpedient to legislate. Thank you for the opportunity to provide our comments. I am happy to answer any questions the committee may have.

Bill as  
Introduced



HB 600-FN - AS INTRODUCED

2021 SESSION

21-0096

08/11

HOUSE BILL            **600-FN**

AN ACT                relative to funding for newborn screening.

SPONSORS:            Rep. Marsh, Carr. 8; Rep. Salloway, Straf. 5; Rep. Woods, Merr. 23; Rep. Nelson,  
Carr. 5; Sen. Bradley, Dist 3

COMMITTEE:          Health, Human Services and Elderly Affairs

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ANALYSIS

This bill instructs the commissioner of the department of health and human services on the setting of fees for newborn screening tests.

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Explanation:          Matter added to current law appears in ***bold italics***.  
Matter removed from current law appears ~~[in brackets and struckthrough.]~~  
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 funding for newborn screening.

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

1           1 Newborn Health Screening; Funding. Amend RSA 132:10-a, II to read as follows:

2           II. Notwithstanding any provision of law to the contrary, the commissioner of the  
3 department of health and human services shall establish fees, pursuant to RSA 541-A, to be paid  
4 ***directly*** by hospitals ***in their entirety, acknowledging that fees may be offset by commercial***  
5 ***insurance or Medicaid paid to hospitals***, for the tests required under paragraph I. ***To the***  
6 ***extent possible, the commissioner shall structure these fees to be reimbursable without out***  
7 ***of pocket cost pursuant to 45 C.F.R. 147.130.*** All such fees shall be paid into the newborn  
8 screening fund, hereby established in the state treasury. Moneys from the newborn screening fund  
9 established under this section shall be nonlapsing and shall be continually appropriated for use by  
10 the department to cover laboratory analysis and related newborn screening program costs.

11          2 Effective Date. This act shall take effect 60 days after its passage.

**HB 600-FN- FISCAL NOTE  
AS INTRODUCED**

AN ACT relative to funding for newborn screening.

**FISCAL IMPACT:**     State             County             Local             None

STATE:	Estimated Increase / (Decrease)			
	FY 2021	FY 2022	FY 2023	FY 2024
<b>Appropriation</b>	\$0	\$0	\$0	\$0
<b>Revenue</b>	\$0	\$0	\$0	\$0
<b>Expenditures</b>	\$0	Indeterminable Increase	\$225,000	\$225,000
<b>Funding Source:</b>	<input checked="" type="checkbox"/> General Medicaid Funds	<input type="checkbox"/> Education	<input type="checkbox"/> Highway	<input checked="" type="checkbox"/> Other - Federal

**METHODOLOGY:**

This bill amends RSA 132:10-a, II by making clear that fees charged to hospitals for newborn screening may be offset by commercial insurance and Medicaid paid to hospitals. With respect to Medicaid reimbursements to hospitals, the Department of Health and Human Services estimates that approximately 12,000 newborn screens are done annually and approximately one-fourth (3,000) of the births are covered by Medicaid. The Department assumes that Medicaid would reimburse hospitals up to \$75 for the cost of each test, resulting in an annual cost to the Medicaid program of \$225,000, of which half (\$112,500) would be paid for with state funds and half with federal funds. In addition, the Department anticipates a one-time system cost to the Medicaid program, but notes that such cost is indeterminable. The Department further notes that the bill does not change the process by which hospitals pay fees to the Department to support the newborn screening program. Instead, the bill provides a mechanism for hospitals to receive compensation to offset the cost for purchasing filter papers and administration in support of the program. The Department assumes that, if enacted, there would be no direct fiscal impact to the newborn screening program itself, only to the Medicaid program in the form of reimbursements to hospitals.

With respect to private insurance reimbursements, the Insurance Department assumes that any and all revenues a hospital realizes are available to be used to offset any costs or fees that the hospital may be liable for. Hence, unless the legislation results in an increase in billed services, the Department assumes that the bill has no impact on claim costs, premium rates or the State's premium tax revenue.

It is assumed any fiscal impact from this bill will begin in FY 2022.

**AGENCIES CONTACTED:**

Department of Health and Human Services and Insurance Department

# Committee Report

**CONSENT CALENDAR**

**March 30, 2021**

**HOUSE OF REPRESENTATIVES**

**REPORT OF COMMITTEE**

**The Committee on Finance to which was referred HB  
600-FN,**

**AN ACT relative to funding for newborn screening.**

**Having considered the same, report the same with the  
following amendment, and the recommendation that  
the bill OUGHT TO PASS WITH AMENDMENT.**

**Rep. Jess Edwards**

**FOR THE COMMITTEE**

## COMMITTEE REPORT

Committee:	<b>Finance</b>
Bill Number:	<b>HB 600-FN</b>
Title:	<b>relative to funding for newborn screening.</b>
Date:	<b>March 30, 2021</b>
Consent Calendar:	<b>CONSENT</b>
Recommendation:	<b>OUGHT TO PASS WITH AMENDMENT 2021-0899h</b>

### STATEMENT OF INTENT

New Hampshire's newborn screening program is an important program, and the intent of this bill is not to change the program. The intent is to change how bills are sent out. Under current law, the Department of Health and Human Services bills hospitals for the filter paper on which blood samples are submitted for testing. Filter paper is a supply, as such this bill cannot be submitted to insurers. This bill directs the Commissioner to restructure the current fee so that these bills can be submitted to insurers. Instead of billing for "filter paper," the invoice could read "newborn screening panel." We are aware this is already done at least in Texas and Minnesota. Coverage for pediatric preventative services has been mandated by federal law without co-pay or deductible since 2014 pursuant to 45 CFR 147.130. This bill does not mandate any change whatsoever in insurance law. Passage of this bill will help maintain the economic viability of the various birthing centers in New Hampshire. The amendment changes the effective date from 60 days after passage to 120 days.

Vote 20-0.

Rep. Jess Edwards  
FOR THE COMMITTEE

Original: House Clerk  
Cc: Committee Bill File

## CONSENT CALENDAR

### Finance

**HB 600-FN**, relative to funding for newborn screening. **OUGHT TO PASS WITH AMENDMENT.**

Rep. Jess Edwards for Finance. New Hampshire's newborn screening program is an important program, and the intent of this bill is not to change the program. The intent is to change how bills are sent out. Under current law, the Department of Health and Human Services bills hospitals for the filter paper on which blood samples are submitted for testing. Filter paper is a supply, as such this bill cannot be submitted to insurers. This bill directs the Commissioner to restructure the current fee so that these bills can be submitted to insurers. Instead of billing for "filter paper," the invoice could read "newborn screening panel." We are aware this is already done at least in Texas and Minnesota. Coverage for pediatric preventative services has been mandated by federal law without co-pay or deductible since 2014 pursuant to 45 CFR 147.130. This bill does not mandate any change whatsoever in insurance law. Passage of this bill will help maintain the economic viability of the various birthing centers in New Hampshire. The amendment changes the effective date from 60 days after passage to 120 days. **Vote 20-0.**

Original: House Clerk

Cc: Committee Bill File



# Voting Sheets

**HOUSE COMMITTEE ON FINANCE**

**EXECUTIVE SESSION on HB 600-FN**

**BILL TITLE:** relative to funding for newborn screening.

**DATE:** March 29, 2021

**LOB ROOM:** REMOTE

**MOTIONS: OUGHT TO PASS WITH AMENDMENT**

Moved by Rep. Erf

Seconded by Rep. Edwards

AM Vote: 20-0

Amendment # 2021-0899

Moved by Rep. Edwards

Seconded by Rep. Erf

Vote: 20-0

**CONSENT CALENDAR: YES**

**Statement of Intent:** Refer to Committee Report

Respectfully submitted,

Rep Joseph Pitre, Clerk

HOUSE COMMITTEE ON Finance

EXECUTIVE SESSION ON HB 600-FN

BILL TITLE: Relative to FUNDING FOR NEWBORN SCREENING

DATE: 28 MAR 21

LOB ROOM: 210-211

MOTION: (Please check one box)

- ~~OTP~~     ITL     Retain (1<sup>st</sup> year)     Adoption of Amendment # 0899h  
(if offered)
- Interim Study (2<sup>nd</sup> year)

Moved by Rep. ERF EDWARDS    Seconded by Rep. ERF    Vote: 20-

MOTION: (Please check one box)

- OTP     OTP/A     ITL     Retain (1<sup>st</sup> year)     Adoption of Amendment # \_\_\_\_\_  
(if offered)
- Interim Study (2<sup>nd</sup> year)

Moved by Rep. EDWARDS    Seconded by Rep. ERF    Vote: 20-0

MOTION: (Please check one box)

- OTP     OTP/A     ITL     Retain (1<sup>st</sup> year)     Adoption of Amendment # \_\_\_\_\_  
(if offered)
- Interim Study (2<sup>nd</sup> year)

Moved by Rep. \_\_\_\_\_    Seconded by Rep. \_\_\_\_\_    Vote: \_\_\_\_\_

MOTION: (Please check one box)

- OTP     OTP/A     ITL     Retain (1<sup>st</sup> year)     Adoption of Amendment # \_\_\_\_\_  
(if offered)
- Interim Study (2<sup>nd</sup> year)

Moved by Rep. \_\_\_\_\_    Seconded by Rep. \_\_\_\_\_    Vote: \_\_\_\_\_

CONSENT CALENDAR?

Yes     No

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

Respectfully submitted, Rep. Pitre, Clerk

OFFICE OF THE HOUSE CLERK



1/22/2021 9:58:11 AM  
Roll Call Committee Registers  
Report

2021 SESSION

Finance

Bill #: 600-FU Motion: OTP/A AM #: \_\_\_\_\_ Exec Session Date: 29 MAR 21

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Weyler, Kenneth L. Chairman	20		
Ober, Lynne M. Vice Chairman	1		
Umberger, Karen C.	2		
Danielson, David J. <i>Tuflette</i>	3		
Theberge, Robert L.	4		
Pitre, Joseph A. Clerk	5		
Emerick, Tracy	6		
Erf, Keith	7		
Griffin, Gerald	8		
Edwards, Jess C.	9		
Bean, Harry H. <i>Doucette</i>	10		
Lynn, Bob J.	11		
Wallner, Mary Jane	12		
Nordgren, Sharon L.			
Buco, Thomas L.	13		
Leishman, Peter R.	14		
Hatch, William A.	15		
Rogers, Katherine D.	16		
Walz, Mary Beth	17		
Heath, Mary	18		
Murray, Kate R. <i>Porter</i>	19		

OFFICE OF THE HOUSE CLERK



1/22/2021 9:58:11 AM  
Roll Call Committee Registers  
Report

2021 SESSION

Finance

Bill #: 600-FN Motion: OTP AM #: <sup>2021-</sup>0899h Exec Session Date: 29 MAR 21

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Weyler, Kenneth L. Chairman	20		
Ober, Lynne M. Vice Chairman	✓		
Umberger, Karen C.	2		
Danielson, David J. <i>Turlette</i>	3		
Theberge, Robert L.	4		
Pitre, Joseph A. Clerk	5		
Emerick, Tracy	6		
Erf, Keith	7		
Griffin, Gerald	8		
Edwards, Jess C.	9		
Bean, Harry H. <i>Doucette</i>	10		
Lynn, Bob J.	11		
Wallner, Mary Jane	12		
Nordgren, Sharon L.	—		
Buco, Thomas L.	13		
Leishman, Peter R.	14		
Hatch, William A.	15		
Rogers, Katherine D.	16		
Walz, Mary Beth	17		
Heath, Mary	18		
<del>Murray, Kate R.</del> <i>Porter</i>	19		

Rep. Edwards, Rock. 4  
March 18, 2021  
2021-0899h  
08/11

Amendment to HB 600-FN

- 1 Amend the bill by replacing section 2 with the following:
- 2
- 3     2 Effective Date. This act shall take effect 120 days after its passage.

UNAPPROVED

Division III  
Work Session  
Minutes

**HOUSE COMMITTEE ON Finance**  
**DIVISION III WORK SESSION ON HB 600-FN**

**BILL TITLE:** relative to funding for newborn screening.

**DATE:** March 22, 2021

**ROOM:** REMOTE                      Time Work Session Called to Order: <<Start Time>>

Time Adjourned: <<End Time>>

(please circle if present)

**Committee Members:** Edwards, Erf, Weyler, Bean, Wallner, Nordgren and Rogers

**Bill Sponsors:**

**Rep. Marsh**

**Rep. Salloway**

**Rep. Woods**

**Rep. Nelson**

**Sen. Bradley**

**TESTIMONY**

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

Rep. Erf moved OTP on amendment #2021-0899h, seconded by Rep. Edwards. Motion adopted 7-0.

Rep. Erf moved OTP/A, seconded by Rep. Edwards. Motion adopted 7-0

Respectfully submitted,

Rep. Kenneth Weyler  
Clerk



OFFICE OF THE HOUSE CLERK



1/22/2021 9:59:53 AM  
 Roll Call Committee Registers  
 Report

2021 SESSION

Finance - Division III

*H.B. 666*  
*Eof*

Bill #: \_\_\_\_\_ Motion: *OTRA* AM #: *0899* Exec Session Date: *3/22/21*

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Edwards, Jess C. Chairman	✓		
Erf, Keith Vice Chairman	✓		
Weyler, Kenneth L. Clerk	✓		
Bean, Harry H.	✓		
Wallner, Mary Jane	✓		
Nordgren, Sharon L.	✓		
Rogers, Katherine D.	✓		
<b>TOTAL VOTE:</b>	<b>7</b>	<b>0</b>	

OFFICE OF THE HOUSE CLERK



1/22/2021 9:59:53 AM  
 Roll Call Committee Registers  
 Report

2021 SESSION

Finance - Division III

*Erf/*

Bill #: HB 660 Motion: Adopt Amendment AM #: 07996 Exec Session Date: 3/22/21

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Edwards, Jess C. Chairman	✓		
Erf, Keith Vice Chairman	✓		
Weyler, Kenneth L. Clerk	✓		
Bean, Harry H.	✓		
Wallner, Mary Jane	✓		
Nordgren, Sharon L.	✓		
Rogers, Katherine D.	✓		
<b>TOTAL VOTE:</b>	<b>7</b>	<b>0</b>	

Rep. Edwards, Rock. 4  
March 18, 2021  
2021-0899h  
08/11

Amendment to HB 600-FN

- 1 Amend the bill by replacing section 2 with the following:
- 2
- 3     2 Effective Date. This act shall take effect 120 days after its passage.

UNAPPROVED

Bill  
as  
Amended  
by the  
House

HB 600-FN - AS AMENDED BY THE HOUSE

7Apr2021... 0899h

2021 SESSION

21-0096  
08/11

HOUSE BILL

**600-FN**

AN ACT

relative to funding for newborn screening.

SPONSORS:

Rep. Marsh, Carr. 8; Rep. Salloway, Straf. 5; Rep. Woods, Merr. 23; Rep. Nelson,  
Carr. 5; Sen. Bradley, Dist 3

COMMITTEE:

Health, Human Services and Elderly Affairs

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ANALYSIS

This bill instructs the commissioner of the department of health and human services on the setting of fees for newborn screening tests.

-----  
Explanation:

Matter added to current law appears in ***bold italics***.

Matter removed from current law appears [~~in brackets and struckthrough.~~]

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

HB 600-FN - AS AMENDED BY THE HOUSE

7Apr2021... 0899h

21-0096  
08/11

STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Twenty One*

AN ACT relative to funding for newborn screening.

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

1 1 Newborn Health Screening; Funding. Amend RSA 132:10-a, II to read as follows:

2 II. Notwithstanding any provision of law to the contrary, the commissioner of the  
3 department of health and human services shall establish fees, pursuant to RSA 541-A, to be paid  
4 ***directly*** by hospitals ***in their entirety, acknowledging that fees may be offset by commercial***  
5 ***insurance or Medicaid paid to hospitals***, for the tests required under paragraph I. ***To the***  
6 ***extent possible, the commissioner shall structure these fees to be reimbursable without out***  
7 ***of pocket cost pursuant to 45 C.F.R. 147.130.*** All such fees shall be paid into the newborn  
8 screening fund, hereby established in the state treasury. Moneys from the newborn screening fund  
9 established under this section shall be nonlapsing and shall be continually appropriated for use by  
10 the department to cover laboratory analysis and related newborn screening program costs.

11 2 Effective Date. This act shall take effect 120 days after its passage.

**HB 600-FN- FISCAL NOTE  
AS INTRODUCED**

AN ACT relative to funding for newborn screening.

**FISCAL IMPACT:**     State             County             Local             None

STATE:	Estimated Increase / (Decrease)			
	FY 2021	FY 2022	FY 2023	FY 2024
<b>Appropriation</b>	\$0	\$0	\$0	\$0
<b>Revenue</b>	\$0	\$0	\$0	\$0
<b>Expenditures</b>	\$0	Indeterminable Increase	\$225,000	\$225,000
<b>Funding Source:</b>	<input checked="" type="checkbox"/> General Medicaid Funds <input type="checkbox"/> Education <input type="checkbox"/> Highway <input checked="" type="checkbox"/> Other - Federal			

**METHODOLOGY:**

This bill amends RSA 132:10-a, II by making clear that fees charged to hospitals for newborn screening may be offset by commercial insurance and Medicaid paid to hospitals. With respect to Medicaid reimbursements to hospitals, the Department of Health and Human Services estimates that approximately 12,000 newborn screens are done annually and approximately one-fourth (3,000) of the births are covered by Medicaid. The Department assumes that Medicaid would reimburse hospitals up to \$75 for the cost of each test, resulting in an annual cost to the Medicaid program of \$225,000, of which half (\$112,500) would be paid for with state funds and half with federal funds. In addition, the Department anticipates a one-time system cost to the Medicaid program, but notes that such cost is indeterminable. The Department further notes that the bill does not change the process by which hospitals pay fees to the Department to support the newborn screening program. Instead, the bill provides a mechanism for hospitals to receive compensation to offset the cost for purchasing filter papers and administration in support of the program. The Department assumes that, if enacted, there would be no direct fiscal impact to the newborn screening program itself, only to the Medicaid program in the form of reimbursements to hospitals.

With respect to private insurance reimbursements, the Insurance Department assumes that any and all revenues a hospital realizes are available to be used to offset any costs or fees that the hospital may be liable for. Hence, unless the legislation results in an increase in billed services, the Department assumes that the bill has no impact on claim costs, premium rates or the State's premium tax revenue.

It is assumed any fiscal impact from this bill will begin in FY 2022.

**AGENCIES CONTACTED:**

Department of Health and Human Services and Insurance Department