

Senate Health and Human Services Committee

Sophie Walsh 271-3469

SB 543-FN, relative to long-term care eligibility and making an appropriation therefor.

Hearing Date: January 8, 2026

Time Opened: 9:04 a.m.

Time Closed: 9:22 a.m.

Members of the Committee Present: Senators Rochefort, Avard, Birdsell, Prentiss and Long

Members of the Committee Absent : None

Bill Analysis: This bill establishes provisional eligibility for Medicaid nursing facility services as part of the long-term care application process and makes an appropriation to the department of health and human services for this purpose.

Sponsors:

Sen. Abbas

Sen. Sullivan

Sen. Prentiss

Sen. McGough

Sen. Long

Sen. Rochefort

Sen. Gannon

Rep. D. Mannion

Who supports the bill: Sen. McGough, Brendan Williams (NH Health Care Association), Chuck Crush (Salemhaven), Kate Horgan (NH Association of Counties), Lara McIntyre (Granite State Home Health & Hospice Association and Leading Age of Maine & New Hampshire), Jenny Horgan (Alzheimer's Association), Courtney Tanner (Dartmouth Health), Ben Bradley (NH Hospital Association), Polly Campion, and Judith Jones (New Futures).

Who opposes the bill: No one.

Who is neutral on the bill: Henry Lipman & Melissa Hardy (DHHS) and Henry Veilleux (Crotched Mountain Foundation).

Summary of testimony presented:

Grant Bosse, Deputy Chief of Staff, New Hampshire Senate

- Mr. Bosse introduced Senate Bill 543-FN on behalf of Senator Abbas.
- This is a second try for last year's Senate Bill 131-FN, which was passed unanimously out of the Senate Health and Human Services and Finance Committees, but was tabled and ultimately did not make it in the budget.
- This bill is a request of many New Hampshire nursing homes.

- Most nursing homes will take in Medicaid-eligible patients before their applications are approved, leaving nursing homes on the hook.
- This bill would essentially provide bridge financing between 90 days and 18 months, with the State then being repaid when the Medicaid approval is complete.
- While the fiscal note for this year's bill is not yet complete, it is identical to last year's bill. It will create two new positions and has an appropriation of \$1.5 million.
- Mr. Bosse said Senator Abbas hopes the Committee will support the policy, and as the year goes on, we will see if there is money to implement it.

Brendan Williams, New Hampshire Health Care Association

- Mr. Williams said he will be speaking in support of this concept, as he did last year.
- He expressed appreciation for the legislature appropriating funds to address pending Medicaid claims, and noted there would be no greater certainty for nursing homes than to receive a provisional payment for pending Medicaid applications.
- Mr. Williams referenced written testimony outlining the dollar amounts owed to nursing facilities throughout the state.
- He explained that due to a quirk in the reimbursement system, nursing homes received severe cuts on January 1st.
- Mr. Williams emphasized that this would be a good policy to get into statute.
- He acknowledged that the \$1.5 million appropriation may not be a lot to implement it, but explained that with a revolving fund, any money the State pays toward pending applications would be replenished upon approval when the federal match comes in.
- In the unlikely scenario that an application is denied, the provider would remit any funds paid provisionally.

Henry Lipman and Melissa Hardy, Department of Health and Human Services

- Mr. Lipman stated that the Department of Health and Human Services (DHHS) has worked extensively with the New Hampshire Health Care Association (NHHCA) on this legislation.
- The two components built into this bill are the administration for the program and the revolving fund to secure the State's position.
- The Department is supportive of this, but the issue is the amount of money available to make a meaningful difference.
- Ms. Hardy emphasized that this goes hand-in-hand with what the Department is doing to get eligibility applications completed in a timely manner.

- Senator Birdsell confirmed that there are two new positions included in the bill, and Mr. Lipman confirmed they are outlined on page 2 line 12.
- Senator Birdsell asked if this has been discussed with the Governor, as there is a hiring freeze.
- Mr. Lipman said there has not been a discussion and acknowledged that the hiring freeze could affect the implementation timeline. However, the Department likely has the bandwidth to get everything in place.

Kate Horgan, New Hampshire Association of Counties

- Ms. Horgan noted page 2 line 7 of the bill, which provides protections for the counties.
- She said this is a good bill that protects county taxpayers.

Henry Veilleux, Crotched Mountain Foundation

- Mr. Veilleux said he is speaking as a board member of the Crotched Mountain Foundation.
- He referred to page 2 line 9 of the bill, which refers to Crotched Mountain Rehabilitation Center. He explained that this could be removed from the bill, as Crotched Mountain Rehabilitation Center has closed.

Courtney Tanner, Dartmouth Health

- Ms. Tanner stated that she is speaking in support of this bill.
- On any given day at Dartmouth Hitchcock Medical Center, there are 50-80 patients who are clinically ready for discharge, but are waiting to be discharged into the community.
- Ms. Tanner noted that this fosters a strong public-private partnership and said she thinks this bill is a piece of the pie in addressing the issue of medically cleared patients waiting for discharge.

Ben Bradley, New Hampshire Hospital Association

- Mr. Bradley said he is speaking in support of this bill.
- Last year, the New Hampshire Hospital Association published a report finding 80 patients on any given day clinically cleared for discharge but facing various barriers to discharge. Of those 80 patients, 36 at the time were awaiting Medicaid determinations.
- As of yesterday, the number of medically cleared patients waiting for discharge at hospitals in New Hampshire has grown to 147. Mr. Bradley is hopeful that recently approved contracts will help with that number.
- In a previous report, it was found that there was a median of 64 unnecessary days that patients were in hospitals waiting for long term care determinations.

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Date Hearing Report completed: January 13, 2026