

# Senate Health and Human Services Committee

*Sophie Walsh 271-3469*

**HB 241-FN**, relative to health insurance coverage of pain management services for the management of chronic pain.

**Hearing Date:** April 8, 2026

**Time Opened:** 9:56 a.m.

**Time Closed:** 10:10 a.m.

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

**Members of the Committee Absent:** Senators Rochefort and Long

**Bill Analysis:** This bill requires health carriers to develop, in accordance with guidelines established by the insurance department, a program to provide access to a broad spectrum of covered pain management services for the management of chronic pain.

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**Sponsors:**

Rep. Nagel

Rep. T. Dolan

Rep. Lundgren

Rep. Palmer

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**Who supports the bill:** 63 people signed in support of the bill. Full sign in sheets are available upon request by contacting the Legislative Aide, Sophie Walsh (sophie.walsh@gc.nh.gov).

**Who opposes the bill:** 4 people signed in opposition to the bill. Full sign in sheets are available upon request by contacting the Legislative Aide, Sophie Walsh (sophie.walsh@gc.nh.gov).

**Who is neutral on the bill:** 2 people signed in neutral on the bill. Full sign in sheets are available upon request by contacting the Legislative Aide, Sophie Walsh (sophie.walsh@gc.nh.gov).

**Summary of testimony presented:**

Representative David Nagel, Belknap – District 6

- Representative Nagel explained that this has been an important issue he has worked on since 1997. It has a long history of bipartisan, multistakeholder support on local, regional, and national levels.
- Representative Nagel reviewed written testimony submitted to the Committee.
- The goal is to create a balanced public policy that respects the needs of both people in pain and people with addiction.

- The causes of the opioid crisis are very complex. One of the major reasons is that there are many good therapies with no patient access, which this bill is intended to address.
- The 1998 Pain Care Policy act is federal legislation that sought to educate providers on how to manage pain, secure funding dedicated to pain care, and study the issue of pain in the United States.
- This bill has been agreed to by all stakeholders as a good start. It has passed in Maine, Massachusetts, and Illinois. It has worked well according to those states' Insurance Departments.
- The U.S. Department of Veterans Affairs has already implemented this. It saves costs and improves access.
- Representative Nagel referenced page 2 line 8 of the bill and noted that an amendment will be provided to address prior authorization. Stakeholders agree that it is too far to eliminate all prior authorization for these therapies. The amendment will likely allow early access to these services with subsequent prior authorization if necessary.

#### Paula Rogers, America's Health Insurance Plans

- Ms. Rogers emphasized that this has been worked on for a long period of time. This will require insurance plans to provide a non-traditional array of services to approach pain relief from a non-pharmaceutical perspective.
- This will open up a new opportunity for people who are suffering.
- Ms. Rogers emphasized that stakeholders are working on an amendment to address prior authorization. She explained that while there shouldn't be prior authorization to get into a pain program, we do not want to be in a situation in which there is no oversight of the program.

#### Representative Daniel Popovici-Muller, Rockingham – District 17

- Representative Popovici-Muller urged the Committee to support the bill.
- He emphasized that there are a lot of people in need of help, and this is an effective way to start addressing the issue.

#### Tracie Adams, American Physical Therapy Association – New Hampshire

- Ms. Adams stated that she is speaking in support of the bill.
- The opioid crisis has had a devastating impact in the United States. Musculoskeletal conditions are among the leading diagnoses associated with opioid prescriptions.
- Studies have shown that early physical therapy can help prevent acute pain from turning into a chronic pain condition. Chronic pain conditions are a major predictor of long-term opioid use.

- Physical therapists educate patients about pain and help them understand how to regulate flare-ups, improve mobility, and build strength. These services fall within the broader spectrum of covered pain management services for the treatment of chronic pain.
- It is important to advance legislation that includes physical therapy as a safe and effective evidence-based alternative to opioid use for the management of chronic pain.