

Rep. Osborne, Rock. 2
Rep. Packard, Rock. 16
Rep. S. Smith, Sull. 3
Rep. Kofalt, Hills. 32
Rep. Sweeney, Rock. 25
Rep. Peternel, Carr. 6
May 13, 2026
2026-1946h
09/08

Floor Amendment to SB 498-FN

1 Amend the title of the bill by replacing it with the following:

2

3 AN ACT relative to children's mental health services for persons 18 years of age and younger
4 and relative to licensing requirements for health care facilities that operate on a
5 membership-based business model.
6

7 Amend the bill by replacing all after section 3 with the following:

8

9 4 Patients' Bill of Rights; Definitions; Direct Payment and Membership-Based Facilities.

10 Amend RSA 151:19, II to read as follows:

11 II. "Facility" means any hospital, building, residence, or other place or part thereof, licensed
12 under the provisions of RSA 151:2. For the purposes of RSA 151:21, RSA 151:25, and RSA 151:26,
13 "facility" shall not include home health care providers, or private homes where home care services
14 are provided. ***For the purposes of RSA 151:21, "facility" shall not include direct payment and***
15 ***membership-based facilities.***

16 5 Patients' Bill of Rights; Definitions; Direct Payment and Membership-Based Facilities.

17 Amend RSA 151:19, VI to read as follows:

18 VI. "Patients' rights" or "rights" means those rights established under RSA 151:21, ~~[or]~~ RSA
19 151:21-b, ***or RSA 151:21-c***, as applicable.

20 6 Residential Care and Health Facility Licensing; Policies Required. Amend RSA 151:2-f to read
21 as follows:

22 151:2-f Policies Required for Health Facilities and Special Health Care Service Licenses.

23 ***I.*** Every facility licensed under RSA 151:2, I(a) or (d) and every person holding a special
24 health care service license under RSA 151:2-e shall:

25 ~~[I.]~~ ***(a)*** Adopt and enforce a written policy to assure that the facility provides its services to
26 all persons who require the services the facility provides regardless of the source of payment for the
27 services provided to any person;

28 ~~[II.]~~ ***(b)*** Adopt, publicize, and apply an assistance plan for persons who are uninsured or who
29 do not have the financial resources to pay for the facility's services due to financial hardship;

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1 ~~[III.]~~ (c) Provide data to the commissioner of the department of health and human services
2 regarding the volume, cost and outcomes of services provided in the facility; and

3 ~~[IV.]~~ (d) Pay fees under RSA 151:2-e, III to the commissioner of the department to cover the
4 costs of administering the licensing of special health care services, the administration of the quality
5 and patient safety requirements of this section, and the collection and analysis of the data collected
6 under this section.

7 ***II. Subparagraph I(a) shall not apply to any facilities that operate on a***
8 ***membership-based business model or exclusively provide services to persons who make***
9 ***direct payment for services, and are not nursing homes, skilled nursing facilities,***
10 ***intermediate care facilities, or rehabilitation facilities, including rehabilitation hospitals***
11 ***and facilities offering comprehensive rehabilitation services. For the purposes of this***
12 ***paragraph, a direct payment is one that is paid directly by the patient and is not***
13 ***reimbursed or otherwise paid by a third party.***

14 7 New Section; Residential Care and Health Facility Licensing; Patients' Bill of Rights for
15 Direct Payment and Membership-Based Facilities. Amend RSA 151 by inserting after section 21-b
16 the following new section:

17 151:21-c Patients' Bill of Rights for Direct Payment and Membership-Based Facilities. The
18 policy describing the rights and responsibilities of each patient admitted to a facility that operates on
19 a membership-based business model or exclusively provides services to persons who make direct
20 payment for services as defined in RSA 151:2-f, II, except those admitted by a home health care
21 provider, shall include, as a minimum, the following:

22 I. The patient shall be treated with consideration, respect, and full recognition of the
23 patient's dignity and individuality, including privacy in treatment and personal care and including
24 being informed of the name, licensure status, and staff position of all those with whom the patient
25 has contact, pursuant to RSA 151:3-b.

26 II. The patient shall be fully informed of the patient's rights and responsibilities and of all
27 procedures governing patient conduct and responsibilities. This information shall be provided orally
28 and in writing before or at admission, except for emergency admissions. Receipt of the information
29 shall be acknowledged by the patient in writing. When a patient lacks the capacity to make
30 informed judgments the signing shall be by the person legally responsible for the patient.

31 III. The patient shall be fully informed in writing in language that the patient can
32 understand, before or at the time of admission and as necessary during the patient's stay, of the
33 facility's basic per diem rate and of those services included and not included in the basic per diem
34 rate.

35 IV. The patient shall be fully informed by a health care provider of his or her medical
36 condition, health care needs, and diagnostic test results, including the manner by which such results
37 will be provided and the expected time interval between testing and receiving results, unless

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1 medically inadvisable and so documented in the medical record, and shall be given the opportunity
2 to participate in the planning of his or her total care and medical treatment, to refuse treatment, and
3 to be involved in experimental research upon the patient's written consent only. For the purposes of
4 this paragraph, "health care provider" means any person, corporation, facility, or institution either
5 licensed by this state or otherwise lawfully providing health care services, including, but not limited
6 to, a physician, hospital or other health care facility, dentist, nurse, optometrist, podiatrist, physical
7 therapist, or psychologist, and any officer, employee, or agent of such provider acting in the course
8 and scope of employment or agency related to or supportive of health care services.

9 V. The patient shall be transferred or discharged after appropriate discharge planning only
10 for medical reasons, for the patient's welfare or that of other patients, if the facility ceases to
11 operate, or for nonpayment for the patient's stay.

12 VI. The patient shall be encouraged and assisted throughout the patient's stay to exercise
13 the patient's rights as a patient and citizen. The patient may voice grievances and recommend
14 changes in policies and services to facility staff or outside representatives free from restraint,
15 interference, coercion, discrimination, or reprisal.

16 VII. The patient shall be permitted to manage the patient's personal financial affairs. If the
17 patient authorizes the facility in writing to assist in this management and the facility so consents,
18 the assistance shall be carried out in accordance with the patient's rights under this subdivision and
19 in conformance with state law and rules.

20 VIII. The patient shall be free from emotional, psychological, sexual, and physical abuse,
21 and from exploitation, neglect, corporal punishment, and involuntary seclusion.

22 IX. The patient shall be free from chemical and physical restraints except when they are
23 authorized in writing by a physician for a specific and limited time necessary to protect the patient
24 or others from injury. In an emergency, restraints may be authorized by the designated professional
25 staff member in order to protect the patient or others from injury. The staff member shall promptly
26 report such action to the physician and document the same in the medical records.

27 X. The patient shall be ensured confidential treatment of all information contained in the
28 patient's personal and clinical record, including that stored in an automatic data bank, and the
29 patient's written consent shall be required for the release of information to anyone not otherwise
30 authorized by law to receive it. Medical information contained in the medical records at any facility
31 licensed under this chapter shall be deemed to be the property of the patient. The patient shall be
32 entitled to a copy of such records upon request. The charge for the copying of a patient's medical
33 records shall not exceed \$15 for the first 30 pages or \$.50 per page, whichever is greater; provided,
34 that copies of filmed records such as radiograms, x-rays, and sonograms shall be copied at a
35 reasonable cost.

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1 XI. The patient shall not be required to perform services for the facility. Where appropriate
2 for therapeutic or diversional purposes and agreed to by the patient, such services may be included
3 in a plan of care and treatment.

4 XII. The patient shall be free to communicate with, associate with, and meet privately with
5 anyone, including family and resident groups, unless to do so would infringe upon the rights of other
6 patients. The patient may send and receive unopened personal mail. The patient has the right to
7 have regular access to the unmonitored use of a telephone.

8 XIII. The patient shall be free to participate in activities of any social, religious, and
9 community groups, unless to do so would infringe upon the rights of other patients.

10 XIV. The patient shall be free to retain and use personal clothing and possessions as space
11 permits, provided it does not infringe on the rights of other patients.

12 XV. The patient shall be entitled to privacy for visits and, if married, to share a room with
13 his or her spouse if both are patients in the same facility and where both patients consent, unless it
14 is medically contraindicated and so documented by a physician. The patient has the right to reside
15 and receive services in the facility with reasonable accommodation of individual needs and
16 preferences, including choice of room and roommate, except when the health and safety of the
17 individual or other patients would be endangered.

18 XVI. The patient shall not be denied appropriate care on the basis of age, sex, gender
19 identity, sexual orientation, race, color, marital status, familial status, disability, religion, national
20 origin, source of income, or profession.

21 XVII. The patient shall be entitled to be treated by the patient's physician of choice, subject
22 to reasonable rules and regulations of the facility regarding the facility's credentialing process.

23 XVIII. The patient shall be entitled to have the patient's parents, if a minor, or spouse, or
24 next of kin, unmarried partner, or a personal representative chosen by the patient, if an adult, visit
25 the facility, without restriction, if the patient is considered terminally ill by the physician
26 responsible for the patient's care.

27 XIX. The patient shall be entitled to receive representatives of approved organizations as
28 provided in RSA 151:28.

29 8 Department of Health and Human Services; Legislative Reporting Requirement. The
30 commissioner of the department of health and human services shall conduct a study to examine the
31 impact of direct pay models on the health care system of New Hampshire, with special attention
32 given to the impact of implementation of the direct primary care law, RSA 329:1-e and 2019, 330
33 (HB 508). The department shall provide the results of the study to the speaker of the house of
34 representatives, the senate president, the house clerk, and the senate clerk, on or before June 30,
35 2027.

36 9 Patients' Bill of Rights; Definitions; Direct Payment and Membership-Based Facilities.
37 Amend RSA 151:19, II to read as follows:

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1 II. "Facility" means any hospital, building, residence, or other place or part thereof, licensed
2 under the provisions of RSA 151:2. For the purposes of RSA 151:21, RSA 151:25, and RSA 151:26,
3 "facility" shall not include home health care providers, or private homes where home care services
4 are provided. ~~[For the purposes of RSA 151:21, "facility" shall not include direct payment and~~
5 ~~membership-based facilities.]~~

6 10 Patients' Bill of Rights; Definitions; Direct Payment and Membership-Based Facilities.
7 Amend RSA 151:19, VI to read as follows:

8 VI. "Patients' rights" or "rights" means those rights established under RSA 151:21 **or** RSA
9 151:21-b, ~~[or RSA 151:21-e,~~ as applicable.

10 11 Residential Care and Health Facility Licensing; Policies Required RSA 151:2-f is repealed
11 and reenacted to read as follows:

12 151:2-f Policies Required for Health Facilities and Special Health Care Service Licenses. Every
13 facility licensed under RSA 151:2, I(a) or (d) and every person holding a special health care service
14 license under RSA 151:2-e shall:

15 I. Adopt and enforce a written policy to assure that the facility provides its services to all
16 persons who require the services the facility provides regardless of the source of payment for the
17 services provided to any person;

18 II. Adopt, publicize, and apply an assistance plan for persons who are uninsured or who do
19 not have the financial resources to pay for the facility's services due to financial hardship;

20 III. Provide data to the commissioner of the department of health and human services
21 regarding the volume, cost and outcomes of services provided in the facility; and

22 IV. Pay fees under RSA 151:2-e, III to the commissioner of the department to cover the costs
23 of administering the licensing of special health care services, the administration of the quality and
24 patient safety requirements of this section, and the collection and analysis of the data collected
25 under this section.

26 12 Repeal. RSA 151:21-c, relative to the patients' bill of rights for direct payment and
27 membership-based facilities, is repealed.

28 13 Applicability. Sections 9-12 of this act shall take effect on January 1, 2032 if no new facilities
29 are licensed pursuant to RSA 151 between January 1, 2027 and January 1, 2032. If new facilities
30 are licensed between January 1, 2027 and January 1, 2032, sections 9-12 of this act shall not take
31 effect.

32 14 Effective Date.

33 I. Sections 9 - 12 of this act shall take effect as provided in section 13 of this act.

34 II. Sections 4 - 8 of this act shall take effect January 1, 2027.

35 III. The remainder of this act shall take effect 60 days after its passage.

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AMENDED ANALYSIS

This bill:

I. Establishes the New Hampshire children's behavioral health association for the purpose of collecting assessments to fund payments to care management entities for the provision of childhood behavioral health services. The association is authorized to collect assessments from insurance carriers, stop loss carriers, and third-party administrators for fully insured and self-funded health plans. The assessment base would include covered lives in the state employee health plan, as well as pooled risk management programs under RSA 5-b. The funds provided for this purpose would be deposited in a dedicated fund administered by the insurance commissioner.

II. This bill exempts direct-pay health care facilities from certain licensing requirements and policies in RSA 151:2-f.

III. Establishes a patient's bill of right for direct-pay facilities and directs the department of health and human services to study direct-pay models.