

SB 137-FN - AS INTRODUCED

2025 SESSION

25-1151

05/09

SENATE BILL ***137-FN***

AN ACT relative to hospital stays covered under the state Medicaid plan.

SPONSORS: Sen. Prentiss, Dist 5

COMMITTEE: Health and Human Services

ANALYSIS

This bill directs the department of health and human services to establish under the state Medicaid program, an administrative day rate and swing bed rate for certain types of hospital stays, including minimum stays for mothers of newborns.

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 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.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

AN ACT relative to hospital stays covered under the state Medicaid plan.

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

1 1 New Section; Coverage for Hospital Stays under the State Medicaid Plan. Amend RSA 126-A
2 by inserting after section 18-b the following new section:

3 126-A:18-c Coverage for Hospital Stays under the State Medicaid Plan.

4 Hospital stays shall be covered under the state Medicaid plan as follows:

5 I.(a) The department shall establish an administrative day rate for those days of hospital
6 stay in which a client does not meet criteria for acute inpatient level of care, but is not discharged
7 because:

8 (1) An appropriate placement outside the hospital is not available; or

9 (2) The postpartum parent's newborn remains on an inpatient claim for monitoring
10 post-in utero exposure to substances that may lead to physiologic dependence and continuous care by
11 the postpartum parent is the appropriate first-line treatment. "Postpartum parent" means the client
12 who delivered the baby or babies.

13 (b) The department shall use the annual statewide weighted average nursing facility
14 Medicaid payment rate to update the all-inclusive administrative day rate on November 1st of each
15 year.

16 (c) The administrative day rate shall include pharmacy services, pharmaceuticals, and
17 medically necessary ancillary services, as determined by the department, when these services are
18 provided during administrative days.

19 (d) The department shall identify administrative days during the length of stay review
20 process after the client's discharge from the hospital.

21 (e) The state Medicaid plan shall cover up to 5 newborn administrative days and may
22 include additional days with expedited prior authorization (EPA). For EPA, the hospital shall
23 establish that the clinically appropriate EPA criteria outlined in the department's published billing
24 guides have been met, and the hospital shall use the appropriate EPA number for billing purposes.

25 (f) The department shall pay the administrative day rate starting with the date of
26 hospital admission if the admission is solely for a no placement administrative day stay.

27 (g) The department shall pay the hospital the newborn administrative day rate only if:

28 (1) The postpartum parent rooms with their newborn and provides parental
29 support/care; and

30 (2) The hospital provides all prescribed medications to the postpartum parent for the
31 duration of the stay, including medications prescribed to treat substance use disorder.

1 II. The department shall establish a swing bed day rate for those days when a client is
2 receiving department-approved nursing service level of care in a swing bed.

3 (a) The department shall not pay a hospital the rate applicable to the acute inpatient
4 level of care for those days of a hospital stay when a client is receiving department-approved nursing
5 service level of care in a swing bed.

6 (b) The department's allowed amount for those ancillary services not covered under the
7 swing bed day rate shall be based on the payment methods provided in rules adopted under RSA
8 541-A. These ancillary services may be billed by the hospital on an outpatient hospital claim, except
9 for pharmacy services and pharmaceuticals.

10 (c) The department shall allow pharmacy services and pharmaceuticals not covered
11 under the swing bed day rate, that are provided to a client receiving department-approved nursing
12 service level of care, to be billed directly by a pharmacy through the point of sale system. The
13 department shall not allow those pharmacy services and pharmaceuticals to be paid to the hospital
14 through submission of a hospital outpatient claim.

15 III. The department shall adopt rules under RSA 541-A to establish the rate setting
16 methodology and criteria required under this section.

17 2 Effective Date. This act shall take effect July 1, 2025.

SB 137-FN- FISCAL NOTE
AS INTRODUCED

AN ACT relative to hospital stays covered under the state Medicaid plan.

FISCAL IMPACT: This bill does not provide funding, nor does it authorize new positions.

Estimated State Impact				
	FY 2025	FY 2026	FY 2027	FY 2028
Revenue	\$0	\$0	\$0	\$0
<i>Revenue Fund(s)</i>	None			
Expenditures*	\$0	\$7.3 million	\$7.3 million	\$7.3 million
<i>Funding Source(s)</i>	General Fund			
Appropriations*	\$0	\$0	\$0	\$0
<i>Funding Source(s)</i>	None			

***Expenditure = Cost of bill**

***Appropriation = Authorized funding to cover cost of bill**

METHODOLOGY:

This bill requires the Department of Health and Human Service to establish an administrative day rate for hospital stays for patients who do not meet the criteria for acute inpatient level of care, but are not discharged for certain reasons enumerated by the bill. Based on data published by the New Hampshire Hospital Association, the Department estimates that approximately 100 individuals a day will meet the criteria contemplated by the bill. The Department further estimates a rate of \$200 a day for each individual based upon similar rates. Accordingly, the Department anticipates an increase of \$7,300,000 in general fund expenditures per year. Expenses of this kind are not subject to a federal match unless the patient is in a long-term care eligibility group or in a swing bed, so the cost associated with this bill would be covered by the state general fund.

AGENCIES CONTACTED:

Department of Health and Human Services