

HB 247 - AS INTRODUCED

2021 SESSION

21-0164

08/05

HOUSE BILL **247**

AN ACT relative to treatment alternatives to opioids.

SPONSORS: Rep. Lundgren, Rock. 5; Rep. Dolan, Rock. 5; Rep. Crawford, Carr. 4; Rep. Massimilla, Graf. 1; Rep. Lascelles, Hills. 20; Rep. Love, Rock. 6

COMMITTEE: Health, Human Services and Elderly Affairs

ANALYSIS

This bill requires the department of health and human services to create a voluntary nonopioid directive form which may be used for nonopioid treatment options for pain. This bill also establishes insurance coverage for such treatment options.

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 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

1 III. Requirements and procedures for a patient to appoint a duly authorized guardian or
2 health care proxy to override a previously filed voluntary nonopioid directive form and circumstances
3 under which an attending practitioner may override a previously filed voluntary nonopioid directive
4 form based on documented medical judgment which shall be recorded in the patient's medical record.

5 IV. Procedures to ensure that any recording, sharing, or distributing of data relative to the
6 voluntary nonopioid directive form complies with all federal and state confidentiality laws.

7 V. Procedures for yearly continuing education for health care practitioners which shall
8 include proof that they have completed no less than 4 hours of continuing education relating to
9 effective alternatives to the use of opioids which focus on the use of nonpharmacological modalities
10 for pain management, specifically chiropractic, acupuncture, osteopathic manipulation, and
11 massage.

12 126-A:92 Protections.

13 I. A written prescription which is presented at an outpatient pharmacy or a prescription
14 that is electronically transmitted to an outpatient pharmacy shall be presumed to be valid for the
15 purposes of this subdivision, and a pharmacist in an outpatient setting shall not be held in violation
16 of this subdivision for dispensing a controlled substance containing an opioid or other controlled
17 substance in contradiction to a voluntary nonopioid directive form, except upon evidence that the
18 pharmacist acted knowingly against the voluntary nonopioid directive form.

19 II. No health care practitioner or employee of a health care practitioner acting in good faith
20 shall be subject to criminal or civil liability or be considered to have engaged in unprofessional
21 conduct for failing to offer or administer a prescription or medication order for a controlled substance
22 containing an opioid under the voluntary nonopioid directive form.

23 III. No person acting as a representative or an agent under a health care proxy shall be
24 subject to criminal or civil liability for making a decision under RSA 126-A:90 in good faith.

25 2 New Section; Coverage for Nonopioid Treatment for Pain; Individual. Amend RSA 415 by
26 inserting after section 6-aa the following new section:

27 415:6-bb Coverage for Nonopioid Treatment for Pain; Individual. Each insurer that issues or
28 renews any individual policy, plan, or contract of accident or health insurance providing benefits for
29 medical or hospital expenses shall provide to persons covered by such insurance who are residents of
30 this state coverage for the costs of options to patients for evidenced-based nonopioid treatment for
31 pain, including but not limited to, yoga therapy, chiropractic care, osteopathic manipulative
32 treatment and acupuncture treatment. Policies issued pursuant to this section shall provide
33 coverage for at least 20 visits per event of yoga therapy, physical therapy, occupational therapy,
34 osteopathic manipulation, a chronic pain management program, and chiropractic services when
35 ordered by a health care practitioner to treat conditions that cause chronic pain. Reimbursement,
36 coinsurance, copayment, and deductible amounts for pain management care utilizing yoga therapy,
37 chiropractic, acupuncture, and/or osteopathic manipulation shall be determined as a service under

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1 the Patient Protection and Affordable Care Act of 2009, as amended, definition of rehabilitation and
2 habilitation, but in no case shall be greater than the deductible, coinsurance, or co-pay required for a
3 primary care visit.

4 3 New Section; Coverage for Nonopioid Treatment for Pain; Group. Amend RSA 415 by
5 inserting after section 18-ee the following new section:

6 415:18-ff Coverage for Nonopioid Treatment for Pain. Each insurer that issues or renews any
7 policy of group or blanket accident or health insurance providing benefits for medical or hospital
8 expenses shall provide to each group, or to the portion of each group comprised of certificate holders
9 of such insurance who are residents of this state, coverage for the costs of options to patients for
10 evidenced-based nonopioid treatment for pain, including but not limited to, yoga therapy,
11 chiropractic care, osteopathic manipulative treatment and acupuncture treatment. Policies issued
12 pursuant to this section shall provide coverage for at least 20 visits per event of yoga therapy,
13 physical therapy, occupational therapy, osteopathic manipulation, a chronic pain management
14 program, and chiropractic services when ordered by a health care practitioner to treat conditions
15 that cause chronic pain. Reimbursement, coinsurance, copayment, and deductible amounts for pain
16 management care utilizing yoga therapy, chiropractic, acupuncture, and/or osteopathic manipulation
17 shall be determined as a service under the Patient Protection and Affordable Care Act of 2009, as
18 amended, definition of rehabilitation and habilitation, but in no case shall be greater than the
19 deductible, coinsurance, or co-pay required for a primary care visit.

20 4 Health Services Corporations; Applicable Statutes. Amend RSA 420-A:2 to read as follows:

21 420-A:2 Applicable Statutes. Every health service corporation shall be governed by this chapter
22 and the relevant provisions of RSA 161-H, and shall be exempt from this title except for the
23 provisions of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415-A, RSA 415-F, RSA 415:6,
24 II(4), RSA 415:6-g, RSA 415:6-k, RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:6-t, RSA 415:6-u,
25 RSA 415:6-v, RSA 415:6-w, RSA 415:6-x, RSA 415:6-y, 415:6-z, 415:6-aa, **RSA 415:6-bb**, RSA 415:18,
26 V, RSA 415:18, XVI and XVII, RSA 415:18, VII-a, RSA 415:18-a, RSA 415:18-i, RSA 415:18-j, RSA
27 415:18-o, RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w, RSA 415:18-y,
28 RSA 415:18-z, RSA 415:18-aa, RSA 415:18-bb, RSA 415:18-cc, 415:18-dd, 415:18-ee, **RSA 415:18-ff**,
29 RSA 415:22, RSA 417, RSA 417-E, RSA 420-J, and all applicable provisions of title XXXVII wherein
30 such corporations are specifically included. Every health service corporation and its agents shall be
31 subject to the fees prescribed for health service corporations under RSA 400-A:29, VII.

32 5 Health Maintenance Organizations; Statutory Construction. Amend RSA 420-B:20, III to read
33 as follows:

34 III. The requirements of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415:6-g,
35 RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:6-t, RSA 415:6-u, RSA 415:6-v, RSA 415:6-w, RSA
36 415:6-x, RSA 415:6-y, RSA 415:6-z, RSA 415:6-aa, **RSA 415:6-bb**, RSA 415:18, VII-a, RSA 415:18,
37 XVI and XVII, RSA 415:18-i, RSA 415:18-j, RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-

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1 v, RSA 415:18-w, RSA 415:18-y, RSA 415:18-z, RSA 415:18-aa, RSA 415:18-bb, RSA 415:18-cc, RSA
2 415:18-dd, 415:18-ee, ***RSA 415:18-ff***, RSA 415-A, RSA 415-F, RSA 420-G, and RSA 420-J shall apply
3 to health maintenance organizations.

4 6 Effective Date. This act shall take effect July 1, 2021.