HB 1604-FN - AS AMENDED BY THE HOUSE

7Mar2024... 0728h

2024 SESSION

24-2380
05/10

HOUSE BILL ***1604-FN***

AN ACT relative to the use of electronic medical records.

SPONSORS: Rep. Nagel, Belk. 6

COMMITTEE: Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill prohibits health carriers from requiring that providers use electronic medical records.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Four

AN ACT relative to the use of electronic medical records.

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

1 New Section; Electronic Medical Records. Amend RSA 332-I by inserting after section 13 the following new section:

332-I:14 Electronic Medical Records.

I. In this section, "electronic medical record" or "EMR" means a digital version of the paper charts in medical provider's offices, clinics, and hospitals. EMRs contain notes and information collected by and for the clinicians in that office, clinic, or hospital and are mostly used by providers for diagnosis and treatment.

II. No public or private health carrier governed by state law and when there is no conflict with federal law shall:

(a) Require a health care provider to use an EMR.

(b) Withhold any portion of a provider's fee for not using an EMR.

(c) Require any specific format of EMR.

(d) Require any specific information in the EMR other than certain demographic information required to identify the patient, the purpose of the health care interaction, and treatment rendered.

2 Effective Date. This act shall take effect 60 days after its passage.

LBA
24-2380
Revised 3/5/24

HB 1604-FN- FISCAL NOTE
AS INTRODUCED

AN ACT relative to the use of electronic medical records.

FISCAL IMPACT: [X] State [ ] County [ ] Local [ ] None

Estimated State Impact - Increase / (Decrease)				
	FY 2024	**FY 2025**	**FY 2026**	**FY 2027**
Revenue	$0	Indeterminable		
OIRevenue Fund(s)	Insurance premium tax revenue			
Expenditures	$0	$0	$0	$0
Funding Source(s)	None			
Appropriations	$0	$0	$0	$0
Funding Source(s)	None			

- Does this bill provide sufficient funding to cover estimated expenditures? [X] N/A
- Does this bill authorize new positions to implement this bill? [X] No

METHODOLOGY:

This bill prohibits public and private health carriers from requiring health care providers to meet certain electronic medical record (EMR) standards. The Insurance Department states that carriers and providers may incur costs related to the following: (1) EMR programming to obtain compliance with the bill, (2) providing "no cost" copies, and (3) staffing resources to allow access to EMRs within the 24-hour time frame allowed by the bill. In addition, the right to challenge the accuracy of medical records may result in new legal expenses. Conversely, providers' costs may be reduced because of less need for secure digital storage and reduced cost of EMR systems, training, and maintenance. If health providers face a net cost increase, they may raise the prices of their services to offset. Carriers, in turn, may increase premiums to cover these increased costs. Increased premiums may increase insurance premium tax revenue collected by the state. The extent of any impact is indeterminable.

The Department of Health and Human Services states that any costs associated with the bill could likely be absorbed within its existing budget.

AGENCIES CONTACTED:

Departments of Insurance and Health and Human Services