

CHAPTER 263
SB 544-FN - FINAL VERSION

03/12/2026 1038s
14May2026... 1703h

2026 SESSION

26-2160
05/09

SENATE BILL

544-FN

AN ACT

relative to managed care laws.

SPONSORS:

Sen. Fenton, Dist 10; Sen. Long, Dist 20; Sen. Birdsell, Dist 19; Sen. Rosenwald, Dist 13; Rep. M. Pearson, Rock. 34; Rep. Crawford, Carr. 3; Rep. Mazur, Hills. 44

COMMITTEE:

Health and Human Services

AMENDED ANALYSIS

This bill amends pharmacy benefits manager reporting and examination requirements.

Explanation:

Matter added to current law appears in ***bold italics***.

Matter removed from current law appears ~~[in brackets and struck through.]~~

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.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

AN ACT relative to managed care laws.

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

1 263:1 Managed Care Law; Prescription Drugs. Amend RSA 420-J:7-b, III-IV to read as follows:

2 III. Every health plan that provides prescription drug benefits shall provide written notice in a
3 conspicuous font and size to covered persons affected by deletions to the plan list or plan formulary,
4 provide an explanation of the exception process by which a covered person can access nonformulary
5 medically necessary prescription drugs, and provide a toll-free telephone number through which a
6 covered person can request additional information. For purposes of this paragraph, covered persons
7 affected by deletions to the plan list or plan formulary shall include those covered persons for whom the
8 health plan has provided coverage for the deleted prescription drugs during the 12-month period
9 immediately prior to the deletion. Upon notification to covered persons, the health benefit plan shall allow
10 at least [45] **60** days before implementation of any formulary deletions; provided, however, that advance
11 notice shall not be required if the federal Food and Drug Administration has determined that a prescription
12 drug on the health benefit plan's formulary is unsafe. For purposes of this section, "conspicuous font and
13 size" shall mean a font that is at least [12] **14** point in size and in an easily legible font. If a covered
14 person avails himself or herself of the exception process as outlined in 420-J:7-b, II, the medication shall
15 be covered by the health plan until there is a resolution of the exception process. ***Any denial of an***
16 ***exceptions request shall be considered an adverse determination.***

17 IV. Every health benefit plan that provides prescription drug benefits shall maintain, as part of its
18 records, all of the following information, which shall be made available to the commissioner upon request:

19 (a) [the] ***The*** complete drug formulary or formularies of the plan, if the plan maintains a
20 formulary, including a list of the prescription drugs on the formulary of the plan by major therapeutic
21 category with an indication of whether any drugs are preferred over the other drugs.

22 (b) ***Documentation regarding any changes to the formulary including the date the formulary***
23 ***was changed and the reason for the change.***

24 (c) ***The complete maximum allowable cost list for each pharmacy subject to the maximum***
25 ***allowable cost list.***

26 (d) ***Documentation regarding any changes to the maximum allowable cost list including, but***
27 ***not limited to, the date the maximum allowable cost list was changed and when impacted pharmacies***
28 ***were notified of the change.***

29 263:2 Effective Date. This act shall take effect January 1, 2027.

Approved: July 02, 2026
Effective Date: January 01, 2027

