

SB 126-FN - AS INTRODUCED

2025 SESSION

25-1001

05/09

SENATE BILL ***126-FN***

AN ACT relative to notice of changes to provider contracts.

SPONSORS: Sen. Avard, Dist 12

COMMITTEE: Health and Human Services

ANALYSIS

This bill regulates the notice requirements regarding changes to contracts between health carriers and health care providers.

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 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.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 notice of changes to provider contracts.

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

1 1 New Subparagraph; Managed Care Law; Provider Contract Standards. Amend RSA 420-J:8,
2 VIII by inserting after subparagraph (f) the following new subparagraph:

3 (g)(1) A health carrier shall provide a participating provider or facility with 60 days
4 notice of a proposed change to a contract, including any attachment, exhibit, and provider manual,
5 only 4 times per calendar year effective on January 1, April 1, July 1, and October 1, except that at
6 any time:

7 (A) The carrier and the participating provider or facility may mutually agree to
8 waive the 60 day notice requirement;

9 (B) A carrier may file a notice of a proposed change in response to a requirement
10 of the state or federal government; or

11 (C) A carrier may file a notice of a proposed change due to a change in current
12 procedural terminology codes used by the American Medical Association.

13 (2) As part of the notice requirement under this subparagraph, a health carrier shall
14 provide to the participating provider or facility, printed or electronically, a copy of the contract,
15 including any attachment, exhibit, and provider manual, without the changes and a copy of the
16 revised contract, attachment, exhibit, and/or provider manual with changes indicated by underlining
17 and bolding added language and by visually striking through deleted language.

18 (3) If the change to a contract, attachment, exhibit, or provider manual results in an
19 aggregate change in provider reimbursement of more than \$500,000 per calendar year across all
20 participating providers or facilities in the state with whom the carrier has a provider contract, the
21 carrier shall submit to each participating provider or facility a good faith estimate of the total annual
22 aggregate financial impact of the changes to their contract. The estimate and an explanation for all
23 financial impacts as a result of the change under this subparagraph shall be submitted annually to
24 the commissioner of insurance to be published annually on the insurance department's official
25 website or be made publicly available upon request of the department.

26 2 Effective Date. This act shall take effect 60 days after its passage.

LBA
25-1001
1/20/25

**SB 126-FN- FISCAL NOTE
AS INTRODUCED**

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FISCAL IMPACT:

The Legislative Budget Assistant has determined that this legislation has a total fiscal impact of less than \$10,000 in each of the fiscal years 2025 through 2028.

AGENCIES CONTACTED:

Insurance Department