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Purpose: To Establish a standing Commission on Emerging Medical Technologies

Principal Sponsor: Hon. Mark Pearson

Co-Sponsors: Hon. Jess Edwards, Hon. Gerri Cannon, Hon. Gary Merchant,

Preamble: This legislation is submitted to honor the service of the late Rep. Kathryn Rogers to the state of New Hampshire.

Background: Representative Kathryn Rogers of the New Hampshire House submitted proposed legislation to the House under bill number HB1290FN entitled, "Establishing a task force on precision medicine and biomarker testing. That bill was heard by the Committee on Health, Human Services and Elderly Affairs. The Committee remanded the bill to the Committee on Oversight of the Department of Health and Human Services which appointed its own sub-committee as a task force and thereby implemented the goals of HB1290FN.

Medical technology is an advancing effort based on emerging science. This requires that as technology changes it is a state responsibility to assess its role in facilitating development and distribution of preventive and curative technologies. At the same time the state has an obligation to provide oversight of activities which have the potential to harm, mislead, or cheat vulnerable citizens. In pursuit of the state's responsibility the sponsors move the appointment of a Joint Standing Commission on Emerging Medical Technologies.

Members: The Standing Commission on Emerging Medical Technologies shall be composed of the following members:

a. A member of the State Senate to be appointed by the President of the Senate.
b. Two members of the House of Representatives, one from each major party, each having interest and expertise in emerging medical technologies.
c. The Commissioner of Health and Human Services or a designee.
d. A physician appointed by the New Hampshire Medical Society.
e. A member appointed by the New Hampshire Pharmacists Association.
f. A member of the New Hampshire Association of Nurse Practitioners.
g. A representative of the New Hampshire Hospital Association.
h. The New Hampshire Insurance Commissioner or a designee.
g. A representative of the New Hampshire Cancer Society.
i. A representative of the American Clinical Laboratory Association.
j. A representative of those organizations responsible for the reimbursement of health care to be appointed by the Governor.

Members of the Commission who are legislators will receive a mileage allowance for attendance.

Intent, Scope and Provisions

The intent, scope and provisions of the Commission shall be:

The Commission on Emerging Medical Technology will be convened within sixty days of passage of this bill by an interim Chair selected by the Chair of the DHHS Oversight Committee. The serving Chair of the Commission will be elected by the appointed delegates and will serve continuously at the preference of the members. The Chair of the Commission will convene meetings virtually or in person expeditiously and continuously on a timely basis to implement the goals as set above.

The Chair of the Commission will submit timely reports to the DHHS Oversight Committee outlining progress toward the goals of the Committee. An initial annual report shall be submitted to the DHHS Oversight Committee by October 1, 2023. It shall be the prerogative of the Chair of the DHHS Oversight Committee to reappoint members of the Commission on or about October 1, 2024 to continue its work.

Duties:

The Commission shall

a. Study and make recommendations to the legislature to support improved awareness, understanding, and access to emerging medical technologies.

b Review reports or studies on the current status of emerging medical technologies, how the science is evolving, and on the experiences of patients and providers in accessing and providing these technologies.

c. Examine barriers to the use of emerging medical technologies across the continuum of consumer and patient needs focused on diagnosis, treatment decisions, and post-treatment monitoring of disease, including but not limited to: lack of awareness, no or low reimbursement for providers, lack of coverage or restrictive utilization management by payers, and level of patient and provider understanding of the use of new technologies.

d. Study the role of clinical practice guidelines in health care provider and payer decision making related to emerging medical technologies, especially when evidence-based tests are available, but clinical guidelines are not yet developed.

e. Identify opportunities to expand awareness, education, understanding and usefulness of emerging medical technologies to improve care and reduce unnecessary health care spending.

f. Make specific recommendations to the Committee on DHHS Oversight regarding legislation to publicize, promote, and regulate emerging medical technologies.

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Issues to Examine:

Privacy Protections

Of particular importance will be the protection of patient privacy. How can we best protect the privacy of patients whose biology is being made apparent in new ways?

Public and Professional Awareness

New medical technologies will be of benefit only to the extent that patients and practitioners have keen awareness of its possibilities and of the places where it can be accessed. How ought such awareness be fostered? Ought the state to have a role in this?

Oversight by DHHS

What ought the role of DHHS be in regulating this emerging technology - if at all?

Recommendation:

After due deliberation by the subcommittee appointed by the Chair of DHHS Oversight Committee, and the DHHS Oversight Committee itself, both groups recommend the establishment of a Standing Commission on Emerging Medical Technology. This commission shall meet at least once per year at the call of the chair. The commission shall scan emerging medical technologies to assess whether any of these technologies merit detailed oversight. Should the commission deem any technology to require oversight, it shall hold appropriate meetings to review the issues cited above and it shall report its conclusions to the DHHS Oversight Committee.

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