

Amendment to HB 503

1 Amend the title of the bill by replacing it with the following:

2
3 AN ACT codifying the council on housing stability and relative to telehealth and medically
4 assisted treatment for substance use disorder.
5

6 Amend the bill by replacing all after the enacting clause with the following:

7
8 1 Statement of Intent. The intent of the general court is to recommend to the executive branch
9 to sunset the council on housing stability established by the governor in Executive Order 2020-22
10 and to have the state council on housing stability reconstituted by the legislature for the purpose of
11 addressing housing instability in New Hampshire. In addition, it is the intent of the general court
12 that current members serving on the governor's council shall continue their membership and be
13 appointed to serve on the state council on housing stability established in this act.

14 2 New Chapter; Council on Housing Stability. Amend RSA by inserting after chapter 4-G the
15 following new chapter:

16 CHAPTER 4-H

17 STATE COUNCIL ON HOUSING STABILITY

18 4-H:1 State Council on Housing Stability Established. There is hereby established the state
19 council on housing stability for the purpose of implementing the plan to create housing stability for
20 all citizens of the state of New Hampshire.

21 4-H:2 Membership.

22 I. The initial members of the state council on housing stability shall be those appointed by
23 Executive Order 2020-22. Any subsequent vacancy shall be filled by the appointing entity. The
24 council shall be comprised of the following members:

25 (a) Two individuals, one of whom shall be a young adult, who have current and/or recent
26 lived experience with housing instability, appointed by the governor.

27 (b) Commissioners or executive directors, or their designees, of the following agencies:

28 (1) Department of health and human services.

29 (2) Department of education.

30 (3) Department of safety.

31 (4) Department of transportation.

32 (5) Department of business and economic affairs.

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- 1 (6) Department of corrections.
- 2 (7) Department of employment security.
- 3 (8) Department of military affairs and veterans services.
- 4 (9) New Hampshire housing finance authority.
- 5 (10) Community development finance authority.
- 6 (c) The bureau chief of the bureau of housing supports, department of health and human
7 services.
- 8 (d) The director of the division of behavioral health services, or designee, department of
9 health and human services.
- 10 (e) The director of the division for children, youth and families, or designee, department
11 of health and human services.
- 12 (f) One representative of each of New Hampshire's Continuum of Care, appointed by
13 each continuum.
- 14 (g) A representative of the New Hampshire Municipal Association, appointed by the
15 association.
- 16 (h) A representatives of a local educational agency, appointed by the governor.
- 17 (i) A landlord, appointed by the governor.
- 18 (j) A real estate developer, appointed by the governor.
- 19 (k) Two representatives of local providers of housing services, appointed by the
20 governor.
- 21 (l) A representative of Housing Action New Hampshire, appointed by the association.
- 22 (m) A representative of a county economic development council, appointed by the
23 council.
- 24 (n) A representative of a regional planning council, appointed by the council.
- 25 (o) A representative of the Community Behavioral Health Association, appointed by the
26 association.
- 27 (p) A representative of the faith based community, appointed by the governor.
- 28 (q) A representative of a member agency of the NH Coalition Against Domestic and
29 Sexual Violence, appointed by the coalition.
- 30 (r) Two representatives of the philanthropic community with expertise in housing
31 instability, appointed by the governor.
- 32 (s) A representative of the business community with an interest in affordable housing,
33 appointed by the governor.
- 34 (t) Three legislators, one appointed by the governor, one appointed by the senate
35 president, and one appointed by the speaker of the house of representatives.
- 36 (u) Three mayors, or their designees, representing different regions of New Hampshire,
37 appointed by the New Hampshire Municipal Association.

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1 (v) A representative from a law enforcement agency, appointed by the New Hampshire
2 Chiefs of Police Association.

3 (w) A representative from NAMI New Hampshire, appointed by the alliance.

4 II. The council is authorized to perform its work virtually. If physical meeting is necessary,
5 legislative members of the council shall receive mileage at the legislative rate when attending to the
6 duties of the council. The council may form subcommittees as necessary in the course of its work.

7 4-H:3 Duties; Quorum; Authority to Accept Grants.

8 I. The state council on housing stability shall monitor and update the plan which makes
9 recommendations to address and/or undertake the following:

10 (a) Necessary measures to strengthen New Hampshire's housing market and to create
11 housing stability for all citizens.

12 (b) Conduct an affordable housing needs assessment in each county to determine the
13 housing deficit.

14 (c) The barriers to affordable housing and what can be done to remove such barriers.

15 (d) The necessary system of care to support individuals and families to obtain and
16 maintain stable housing.

17 (e) Integrate and coordinate a housing stability governance structure across state
18 government and connect to local communities by conducting ongoing needs assessment and strategic
19 planning.

20 (f) Enhance the interoperability of data systems within and across government agencies
21 to inform and monitor program and service access, equity, and quality.

22 (g) Have housing options available throughout citizens' lifespans, based on the needs
23 and desire people have at different times of their life.

24 (h) Develop a comprehensive state plan on homelessness.

25 II. The state council on housing stability shall be jointly facilitated by the department of
26 health and human services, the department of business and economic affairs, and the New
27 Hampshire community development finance authority. The first meeting of the council shall be
28 called by the legislative member appointed by the speaker of the house of representatives pursuant
29 to RSA 4-H:2, I(t) within 45 days of the effective date of this section.

30 III. A majority of the appointed council members shall constitute a quorum. All official
31 actions of the council shall require a majority vote of those present and voting.

32 IV. The council may accept grants and other assistance to support its work, contingent upon
33 the approval of the governor and executive council. Such items may be brought forward by any state
34 agency that is represented on the council.

35 4-H:4 Reporting Requirement. On or before November 1, 2022, and annually thereafter, the
36 council shall provide an a report of its activities and the status of the plan to create housing stability

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1 for all citizens of the state to the speaker of the house of representatives, the president of the senate,
2 the house clerk, the senate clerk, the governor, and the state library.

3 3 Medicaid Coverage of Telehealth Services. Amend RSA 167:4-d, III(a)(2) to read as follows:

4 (2) By which telemedicine services for primary care[;] **and** remote patient
5 monitoring[~~;-and substance use disorder services~~] shall only be covered in the event that the patient
6 has already established care at an originating site via face-to-face in-person service. A provider shall
7 not be required to establish care via face-to-face in-person service when:

8 (a) The provider is a Department of Veteran Affairs (VA) practitioner or VA-contracted
9 practitioner not required to obtain a special registration pursuant to 21 U.S.C. section 831(h);

10 (b) The patient is being treated by, and is physically located in a correctional facility
11 administered by the state of New Hampshire or a New Hampshire county;

12 (c) The patient is being treated by, and is physically located in a doorway as defined in
13 RSA 167:4-d, II(c);

14 (d) The patient is being treated by and is physically located in a state designated
15 community mental health center pursuant to RSA 135; or

16 (e) The patient is being treated by, and physically located in, a hospital or clinic
17 registered in a manner fully consistent with 21 U.S.C. section 823(f); and

18 4 Controlled Drug Act; Prohibited Acts. Amend RSA 318-B:2, XVI to read as follows:

19 XVI.(a)(1) The prescribing of a non-opioid controlled drug classified in schedule II through
20 IV by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA
21 326-B:2, XII(a)[~~;-who are treating a patient with whom the prescriber has an in-person practitioner-~~
22 ~~patient relationship, for purposes of monitoring or follow-up care. A provider shall not be required to~~
23 ~~establish care via face-to-face in-person service when:~~

24 ~~(A) The provider is a Department of Veteran Affairs (VA) practitioner or VA-~~
25 ~~contracted practitioner not required to obtain a special registration pursuant to 21 U.S.C. section~~
26 ~~831(h);~~

27 ~~(B) The patient is being treated by, and is physically located in a correctional~~
28 ~~facility administered by the state of New Hampshire or a New Hampshire county;~~

29 ~~(C) The patient is being treated by, and is physically located in a doorway as~~
30 ~~defined in RSA 167:4-d, II(c);~~

31 ~~(D) The patient is being treated by and is physically located in a state designated~~
32 ~~community mental health center pursuant to RSA 135; or~~

33 ~~(E) The patient is being treated by, and physically located in, a hospital or clinic~~
34 ~~registered in a manner fully consistent with 21 U.S.C. section 823(f)].~~

35 (2) Subsequent in-person exams shall be by a practitioner licensed to prescribe the
36 drug at intervals appropriate for the patient, medical condition, and drug, but not less than
37 annually.

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(b)(1) The prescribing of an opioid controlled drug classified in schedule II through IV by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-B:2,

XII(a). ~~[A provider shall not be required to establish care via face-to-face in-person service when:~~

~~(A) The provider is a Department of Veteran Affairs (VA) practitioner or VA-contracted practitioner not required to obtain a special registration pursuant to 21 U.S.C. section 831(h);~~

~~(B) The patient is being treated by, and is physically located in a correctional facility administered by the state of New Hampshire or a New Hampshire county;~~

~~(C) The patient is being treated by, and is physically located in a Doorway as defined in RSA 167:4-d, II(e);~~

~~(D) The patient is being treated by and is physically located in a state designated community mental health center pursuant to RSA 135; or~~

~~(E) The patient is being treated by, and physically located in, a hospital or clinic registered in a manner fully consistent with 21 U.S.C. section 823(f).]~~

(2) Subsequent in-person exams shall be by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and opioid, but not less than annually.

(c) The prescription authority under this paragraph shall be limited to a practitioner licensed to prescribe the drug and in compliance with all federal laws, including the United States Drug Enforcement Agency registration or waiver when required. ~~[An initial face-to-face in-person exam shall be required with the exception of the locations enumerated in this paragraph.]~~

5 Physicians and Surgeons; Telemedicine. Amend RSA 329:1-d, III and IV to read as follows:

III. It shall be unlawful for any person to prescribe by means of telemedicine a controlled drug classified in schedule II through IV, except substance use disorder (SUD) treatment ~~[as permitted in locations enumerated in paragraph IV]~~. Methadone hydrochloride, as defined in RSA 318-B:10, VII(d)(2) shall not be included in the exemption.

IV.(a)(1) The prescribing of a non-opioid controlled drug classified in schedule II through IV by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-B:2, XII(a) ~~[, who are treating a patient with whom the prescriber has an in-person practitioner-patient relationship, for purposes of monitoring or follow-up care. A provider shall not be required to establish care via face-to-face in-person service when:~~

~~(A) The provider is a Department of Veteran Affairs (VA) practitioner or VA-contracted practitioner not required to obtain a special registration pursuant to 21 U.S.C. section 831(h);~~

~~(B) The patient is being treated by, and is physically located in a correctional facility administered by the state of New Hampshire or a New Hampshire county;~~

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1 ~~(C) The patient is being treated by, and is physically located in a Doorway as~~
2 ~~defined in RSA 167:4-d, II(e);~~

3 ~~(D) The patient is being treated by and is physically located in a state designated~~
4 ~~community mental health center pursuant to RSA 135; or~~

5 ~~(E) The patient is being treated by, and physically located in, a hospital or clinic~~
6 ~~registered in a manner fully consistent with 21 U.S.C. section 823(f)].~~

7 (2) Subsequent in-person exams shall be by a practitioner licensed to prescribe the
8 drug at intervals appropriate for the patient, medical condition, and drug, but not less than
9 annually.

10 (b)(1) The prescribing of an opioid controlled drug classified in schedule II through IV by
11 means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-B:2,
12 XII(a). ~~[A provider shall not be required to establish care via face-to-face in-person service when:~~

13 ~~(A) The provider is a Department of Veteran Affairs (VA) practitioner or VA-~~
14 ~~contracted practitioner not required to obtain a special registration pursuant to 21 U.S.C. section~~
15 ~~831(h);~~

16 ~~(B) The patient is being treated by, and is physically located in a correctional~~
17 ~~facility administered by the state of New Hampshire or a New Hampshire county;~~

18 ~~(C) The patient is being treated by, and is physically located in a doorway as~~
19 ~~defined in RSA 167:4-d, II(e);~~

20 ~~(D) The patient is being treated by and is physically located in a state designated~~
21 ~~community mental health center pursuant to RSA 135; or~~

22 ~~(E) The patient is being treated by, and physically located in, a hospital or clinic~~
23 ~~registered in a manner fully consistent with 21 U.S.C. section 823(f)].~~

24 (2) Subsequent in-person exams shall be by a practitioner licensed to prescribe the
25 drug at intervals appropriate for the patient, medical condition, and opioid, but not less than
26 annually.

27 (c) The prescription authority under this paragraph shall be limited to a practitioner
28 licensed to prescribe the drug and in compliance with all federal laws, including the United States
29 Drug Enforcement Agency registration or waiver when required. ~~[An initial face-to-face in person~~
30 ~~exam shall be required with the exception of the locations enumerated in this paragraph.]~~

31 6 Nurse Practice Act. Amend RSA 326-B:2, XII(c) and (d) to read as follows:

32 (c) It shall be unlawful for any person to prescribe by means of telemedicine a controlled
33 drug classified in schedule II through IV ***except for use in substance use disorder treatment.***

34 (d)(1) The prescribing of a non-opioid controlled drug classified in schedule II through IV
35 by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-
36 B:2, XII(a)~~[- who are treating a patient with whom the prescriber has an in-person practitioner-~~
37 ~~patient relationship, for purposes of monitoring or follow-up care, or who are treating patients at a~~

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1 ~~state designated community mental health center pursuant to RSA 135-C or at a Substance Abuse~~
2 ~~and Mental Health Services Administration (SAMHSA) certified state opioid treatment program,~~
3 ~~and shall require an initial in-person exam by a practitioner licensed to prescribe the drug].~~

4 Subsequent in-person exams shall be by a practitioner licensed to prescribe the drug at intervals
5 appropriate for the patient, medical condition and drug, but not less than annually.

6 (2) The prescribing of an opioid controlled drug classified in schedule II through IV
7 by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-
8 B:2, XII(a)~~], who are treating patients at a SAMHSA certified state opioid treatment program. Such~~
9 ~~prescription authority shall require an initial in-person exam by a practitioner licensed to prescribe~~
10 ~~the drug and]~~ Subsequent in-person exams shall be by a practitioner licensed to prescribe the drug
11 at intervals appropriate for the patient, medical condition, and opioid, but not less than annually.

12 7 Effective Date. This act shall take effect upon its passage.

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2021-2219s

AMENDED ANALYSIS

This bill:

I. Codifies the council on housing stability initially established by the governor in Executive Order 2020-22.

II. Removes certain in-person and physical location requirements for Medicaid reimbursement and under the controlled drug act, the nurse practice act and the physicians and surgeons act to allow for medically assisted treatment for substance use disorder through telemedicine.