

CHAPTER 206  
SB 112 – FINAL VERSION

03/19/2015 0822s  
6May2015... 1292h  
3June2015... 1946h  
06/11/2015 2117EBA

2015 SESSION

15-0488  
01/09

SENATE BILL **112**

AN ACT requiring the Medicaid program to cover telehealth services.

SPONSORS: Sen. Pierce, Dist 5

COMMITTEE: Health and Human Services

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AMENDED ANALYSIS

This bill requires the Medicaid program to cover telehealth services upon approval by the legislative fiscal committee.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.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

AN ACT                    requiring the Medicaid program to cover telehealth services.

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

1            206:1 New Section; Medicaid Coverage of Telehealth Services. Amend RSA 167 by inserting  
2 after section 4-c the following new section:

3            167:4-d Medicaid Coverage of Telehealth Services.

4            I. In this section, “telehealth services” shall comply with 42 C.F.R. section 410.78. The use  
5 of the term “telemedicine” shall comply with the Centers for Medicare and Medicaid Services  
6 requirements governing the aforementioned telehealth services.

7            II.(a) Coverage under this section shall include the use of telehealth or telemedicine for  
8 Medicaid-covered services provided within the scope of practice of a physician or non-physician  
9 practitioner as a method of delivery of medical care:

10                    (1) Which is an appropriate application of telehealth services provided by medical  
11 specialists only, excluding primary care, as determined by the department based on the Centers for  
12 Medicare and Medicaid Services regulations; and

13                    (2) By which an individual shall receive medical services from a physician or non-  
14 physician practitioner who is an enrolled Medicaid provider without in-person contact with that  
15 provider.

16                    (b) Nothing in this section shall be construed to prohibit the Medicaid program from  
17 providing coverage for only those services that are medically necessary and subject to all other terms  
18 and conditions of the coverage.

19            III. This section shall be conditioned upon review and approval of a state plan amendment  
20 submitted by the department to the Centers for Medicare and Medicaid Services.

21            206:2 New Subparagraph; Telecommunications Planning and Development Advisory  
22 Committee; Implementation of Medicaid Coverage of Telehealth Services; Duty Added. Amend RSA  
23 12-A:46, IV by inserting after subparagraph (h) the following new subparagraph:

24                    (i) Advising and assisting the department of health and human services in the  
25 implementation of Medicaid coverage of telehealth services as required under RSA 167:4-d. This  
26 shall include, but not be limited to, assisting in the development of a detailed work plan for  
27 implementation of Medicaid coverage of telehealth services and identifying funding or other tangible

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1 resources for consultative services drawing on the expertise in the telehealth community and/or  
2 academic institutions.

3       206:3 Applicability. The department of health and human Services shall develop a telehealth  
4 services program which shall commence on July 1, 2016, and which shall not result in increased  
5 costs to the Medicaid program. The program shall not commence without approval of the fiscal  
6 committee of the general court which shall occur by February 1, 2016.

7       206:4 Department of Health and Human Services; Implementation of Medicaid Coverage of  
8 Telehealth Services; Report Required. The department of health and human services shall report to  
9 the house and senate finance committees and the oversight committee on health and human  
10 services, established in RSA 126-A:13, on the financial impact of the program for the period July 1,  
11 2016 through December 31, 2016. The report shall be submitted on or before March 1, 2017, and  
12 shall not include the financial impact of telehealth services coverage of newly-eligible adults from 0-  
13 133 percent of the federal poverty level (FPL) who are eligible for medical assistance under section  
14 1902(a)(10)(A)(i)(VIII) of the Social Security Act of 1935, as amended, 42 U.S.C. section  
15 1396a(a)(10)(A)(i) (“newly eligible adults”) and their spouse and dependents if applicable.

16       206:5 Contingent Renumbering. If HB 153 of the 2015 regular legislative session becomes law,  
17 RSA 12-A:46, IV(i) as inserted by section 2 of this act shall be renumbered as RSA 12-A:46, IV(j).

18       206:6 Effective Date. This act shall take effect upon its passage.

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20 Approved: July 6, 2015

21 Effective Date: July 6, 2015