HOUSE BILL 500
AN ACT relative to prescribing opioids via telehealth medicine.
COMMITTEE: Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill modifies the procedure for physicians, physician assistants and APRN's to prescribe certain non-opioid and opioid controlled drugs by means of telemedicine.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.
AN ACT relative to prescribing opioids via telehealth medicine.

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

25:1 Telemedicine; Out of State Physicians. Amend RSA 329:1-d, III 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. Methadone hydrochloride, as defined in RSA 318-B:10, VII(d)(2) shall not be included in the exemption.] A physician licensed under this chapter may prescribe non-opioid and opioid controlled drugs classified in schedule II through IV by means of telemedicine after establishing a physician-patient relationship with the patient. When prescribing a non-opioid or opioid controlled drug classified in schedule II through IV by means of telemedicine a subsequent in-person exam shall be conducted by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and drug, but not less than annually. The prescription authority under this paragraph shall be limited to a physician licensed under this chapter, or a physician assistant in accordance with RSA 328-D:3-b, and all prescribing shall be in compliance with all federal and state laws and regulations.

25:2 Definitions; Nursing; Telehealth. Amend RSA 326-B:2, I-a to read as follows:

I-a. “Advanced practice registered nurse-patient relationship” means a medical connection between a licensed APRN and a patient that includes an in-person or telemedicine [face to face 2-way real-time interactive communication] exam, a history, a diagnosis, a treatment plan appropriate for the licensee’s medical specialty, and documentation of all prescription drugs including name and dosage. A licensee may prescribe for a patient whom the licensee does not have an APRN-patient relationship under the following circumstances: writing admission orders for a newly hospitalized patient; for a patient of another licensee for whom the prescriber is taking call; for a patient examined by another licensed practitioner; or for medication on a short-term basis for a new patient prior to the patient’s first appointment.

25:3 Definitions; Nursing; Telehealth. Amend RSA 326-B:2, XII(a)-(c) to read as follows:

XII(a). “Telemedicine” means [the use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment] the use of audio, video, or other electronic media and technologies by a licensee in one location to a patient in a different location for the purpose of diagnosis, consultation, or treatment, including the use of synchronous or asynchronous interactions as defined in RSA 310-A:1.

(b) An out-of-state APRN providing services by means of telemedicine shall be deemed to be in the practice of medicine and shall be required to be licensed under this chapter.

(c) [It shall be unlawful for any person to prescribe by means of telemedicine a controlled drug classified in schedule II through IV except for use in substance use disorder treatment.] An APRN
licensed under this chapter may prescribe non-opioid and opioid controlled drugs classified in schedule II through IV by means of telemedicine after establishing an advanced practice registered nurse-patient relationship with the patient. When prescribing a non-opioid or opioid controlled drug classified in schedule II through IV by means of telemedicine a subsequent in-person exam shall be conducted by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and drug, but not less than annually. The prescription authority under this paragraph shall be limited to an APRN licensed under this chapter, and all prescribing shall be in compliance with all federal and state laws and regulations.

25:4 Repeal. RSA 329:1-d, IV, relative to the prescribing of non-opioid controlled drugs, is repealed.

25:5 Repeal. RSA 326-B:2, XII(d), relative to the prescribing of non-opioid controlled drugs, is repealed.

25:6 Effective Date. This act shall take effect upon its passage.

Approved: May 12, 2023
Effective Date: May 12, 2023