

Workers' Compensation Legislation Related to Medical Costs

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Session Year: 2014

Bill Number: SB 204

This bill as first introduced would have increased the medical conditions that are covered as a permanent impairment for workers' compensation. The bill was amended to create instead a "First Responder Critical Injury Benefit" for certain limited permanent impairments. As amended, the bill also created a commission to study soft tissue injuries and the feasibility of creating a first responders' fund. The commission will report on its findings on or before November 1, 2014.

Bill Number: HB 1489

This bill originally was to establish a heart, lung and cancer fund for firefighters, which would have been funded by an assessment against self-insureds and insurance policies protecting businesses and homes. The bill was amended to instead create a study committee to study the establishment of such a fund and potential funding methods, as well as to determine the constitutionality of the provisions of RSA 281-A:17, II (establishing presumption that cancer disease in a firefighter, is occupationally related). The committee will report on its findings on or before November 1, 2014.

Bill Number: HB 255

As originally introduced in the 2013 legislative session, HB 255 would have amended workers' compensation laws to:

- Allow an employer to select a health care provider during the first ten days of an employee's injury
- Establish a three-year pilot program in three counties for a 90-day preferred provider network
- Require pharmacies to substitute generic drugs unless the prescribing physician indicates that the brand name drug is medically necessary
- Allow an employer to provide a pharmacy benefits management program
- Change the amount of the payment, in the absence of any contract setting reimbursement rates, to be a reasonable fee for services and reimbursement for necessary services

The bill was retained by the House and brought forward into the 2014 Legislative Session. At that time, the House amended the bill to establish a commission to study medical costs and payments under current workers' compensation law. The commission will report on its findings on or before November 1, 2014.

Fiscal Impact Analysis by NCCI: This bill, if passed and approved as originally filed, would have reduced the workers' compensation cost by about \$1.5 million. If enacted, the other provisions of HB 255 had the potential to produce additional system cost savings.

Bill Number: HB 1468

The bill would have established a committee to study the effects of increasing workers' compensation benefits and to study payment schedules for medical reimbursement. The bill was killed with the bill sponsor's agreement, in light of the creation of a commission under SB 255 (see above).

Session Year: 2013

Bill Number: HB 439

In the state of New Hampshire, the indemnity benefit for workers' compensation is set at 60% of the workers average weekly wage. This bill would have increased that rate to 66 2/3%, which would be comparable to most other states. The bill was retained into the 2014 legislative session, but ultimately killed by the Senate.

Fiscal Impact Analysis by NCCI: This bill, if passed and approved as filed originally, would have increased the workers' compensation cost between \$6 million and \$9 million.

Bill Number: SB 95

This bill was introduced to give a workers' compensation claimant a choice of pharmacy and to establish a formula for reimbursements to health care providers or pharmacy processing agents for prescription drugs. The bill was amended to eliminate the prescription drug fee schedule but retain the worker's right of pharmacy choice and was passed.

Bill Number: SB 71

This bill established a committee to study the use and misuse of prescription drugs in workers' compensation cases. A report was issued on November 1, 2013.

Session Year: 2012

Bill Number: SB 71

This bill was introduced in 2011. The bill would have allowed the Labor Commissioner to establish a fee schedule for all medical services with a conversion factor up to 150% of Medicare rates. The bill was retained by the Senate into the 2012 legislative session then killed by the Senate, voting it was "inexpedient to legislate." The bill never reached the House.

Session Year: 2010

Bill Number: SB 420

This bill established a committee to study pharmacy benefits management for injured workers covered by workers' compensation. The committee ultimately had various recommendations for legislation related to pharmacy benefits as set forth in a November 2010 report.

Session Year: 2006

Bill Number: SB 172

Originally, this bill was introduced in the 2005 legislative session to establish a committee to study a medical fee schedule for workers' compensation. After being retained to the 2006 legislative session, the bill was killed by the House.