HB 1410-FN - AS INTRODUCED

2024 SESSION

24-2690 09/05

HOUSE BILL 1410-FN

AN ACT relative to certain professional licenses.

SPONSORS: Rep. Osborne, Rock. 2; Rep. T. Lekas, Hills. 38

COMMITTEE: Executive Departments and Administration

ANALYSIS

This bill repeals the chapter on the board of registration of medical technicians as well as the chapter on medical imaging and radiation therapy. This bill further makes changes to the nurse practice act, including amending the licensure of licensed nursing assistants to a registration process and making changes to the board of nursing.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Four

AN ACT relative to certain professional licenses.

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

- 1 Nurse Practice Act; Definitions. Amend RSA 326-B:2, IV to read as follows:
- IV. "Licensed nursing assistant" or "LNA" means an individual placed on the state nursing assistant registry pursuant to 42 C.F.R. section 483.156 in accordance with rules adopted by the board pursuant to RSA 541-A. [who holds a current license to provide client care under the direction of a registered nurse or licensed practical nurse.]
 - 2 Nurse Practice Act; Board of Nursing. Amend RSA 326-B:3 to read as follows: 326-B:3 Board of Nursing.
- I. The board of nursing shall comprise [43] 7 members to be appointed by the governor with the consent of the council. [Any interested individual, association, or entity may make recommendations to the governor.] The members of the board shall include [6] 2 registered nurses, 2 [of whom shall be] advanced practice registered nurses, [2] 1 licensed practical [nurses] nurse, [3] 1 licensed nursing [assistants] assistant, [one of whom shall be a medication licensed nursing assistant if possible,] and [2] 1 representative [members] member of the public. The terms of members shall be staggered as determined by the governor and council. All terms shall be for 3 years, and no member of the board shall be appointed to more than 3 consecutive terms.
- II. Each *APRN or* RN member shall be a resident of this state, licensed in good standing under the provisions of this chapter, and currently engaged in the practice of nursing as an RN and shall have no fewer than 5 years of experience as an RN, at least 3 of which shall have immediately preceded appointment. RN members of the board shall represent the various areas of nursing practice including education, administration, and clinical practice.
- III. The LPN [members] *member* of the board shall be [residents] *a resident* of this state, licensed in good standing under the provisions of this chapter, and currently engaged in the practice of nursing and shall have had no fewer than 5 years of experience as an LPN, at least 3 of which shall have immediately preceded the date of appointment.
- IV. The LNA [members] *member* of the board shall be [residents] *a resident* of this state, licensed in good standing under the provisions of this chapter, and currently engaged in nursing-related activities. [These members shall have a minimum of 5 years of experience as an LNA, at least 3 of which shall have immediately preceded the date of their appointment.]
- V. The public [members] *member* shall be [residents] *a resident* of the state of New Hampshire who [are] *is* not, and never [have] *has* been, [members] *a member* of the nursing profession or the spouse of any such person. The public members shall not have, and shall never

HB 1410-FN - AS INTRODUCED

- 1 have had, a material financial interest in either the provision of nursing services or an activity 2 directly related to nursing, including the representation of the board or its predecessor or the 3 profession for a fee at any time during the 5 years preceding the date of appointment. No more than 2 board members shall be associated with a particular agency, 4 5 corporation, or other enterprise or subsidiary at one time. 6 VII. [Repealed.] 7 VIII. An appointee to a full term on the board shall be appointed by the governor with the 8 consent of the council before the expiration of the term of the member being succeeded and shall 9 become a member of the board on the first day following the appointment expiration date of the 10 previous appointee. Appointees to unexpired portions of full terms shall become members of the 11 board on the day following such appointment, and shall serve the unexpired term and then be 12 eligible to serve 3 full 3-year terms. 13 IX. The governor may remove any member from the board for neglect of any duty under 14 RSA 326-B:4 or for incompetence or unprofessional or dishonorable conduct. Any person may file a 15 complaint against a board member with the office of professional licensure and certification. The 16 provisions of RSA 4:1 controlling the removal of public officials from office shall be followed in 17 dismissing board members. 18 X. All members of the board and its agents or employees shall enjoy immunity from 19 individual civil liability while acting within the scope of their duties as board members, agents, or 20 employees, as long as they are not acting in a wanton or reckless manner. 21XI. Board meetings shall be open to the public. In accordance with RSA 91-A:3, the board 22may conduct part of a meeting in nonpublic session. 23 3 Nurse Practice Act; Powers and Duties of the Board. Amend RSA 326-B:4 to read as follows: 24326-B:4 Powers and Duties of the Board. The board may: 25 I. Establish reasonable and uniform standards for nursing practice consistent with the 26 criteria identified by the National Council of State Boards of Nursing. [II. Provide consultation regarding nursing practice for institutions and agencies.] 27 28 [III. Examine, license, and renew the licenses of duly qualified individuals.] II. Establish 29 eligibility criteria for licensure and renewal of licensure, including examination 30 requirements and continuing education requirements. The board shall select an appropriate 31 nationally approved licensing examination. [IV. Gather and report to the public statistical information regarding, but not limited to, the 32
- [VII.] III. Determine and enforce appropriate disciplinary action against all individuals 36 found guilty of violating this chapter or the rules adopted under this chapter.

education and licensure of registered and practical nurses.

V. [Repealed.]

VI. [Repealed.]

33

34

35

HB 1410-FN - AS INTRODUCED - Page 3 -

1 [VIII.] IV. Deny or withdraw approval of nursing and nursing assistant educational 2 programs that do not meet the minimum requirements of this chapter. 3 [IX. Maintain records of proceedings as required by the laws of New Hampshire. X. Conduct conferences, forums, studies, and research on nursing practice and education. 4 5 XI. [Repealed.] 6 XII. [Repealed.] 7 XIII. Establish and collect fees, under rules adopted by the board under RSA 541-A, relative 8 to applicants seeking any type of license issued by the board under this chapter, including fees for 9 applications for temporary licenses, reinstatement of inactive licenses, licenses by examination, and 10 renewal of licenses, as well as fees for verifying license status, program graduation, or computerized 11 lists, and fees for site visits associated with nursing education programs under RSA 326-B:32. 12 [XIV.] V. In accordance with state due process laws, limit the multistate licensure privilege 13 of any registered nurse or licensed practical nurse to practice in New Hampshire and may take any 14 other actions under applicable state laws necessary to protect the health and safety of New 15 Hampshire citizens. If the board does take such action, it shall promptly notify the administrator of 16 the coordinated licensure information system. The administrator of the coordinated licensure 17 information system shall promptly notify the home state of any such action taken by the state of 18 New Hampshire. 19 [XV.] VI. Establish a liaison committee, a practice and education committee, and such 20 additional subcommittees as may be appropriate to assist the board in the performance of its duties. 21 4 Nurse Practice Act; Rulemaking Authority. Amend RSA 326-B:9 to read as follows: 22 326-B:9 Rulemaking Authority. The board shall adopt rules, in accordance with RSA 541-A, 23 relative to the following: 24I. Eligibility requirements for the issuance of all initial, temporary, and renewal licenses, 25 specialty licenses, and certificates issued [by the board] under this chapter, including the issuance 26 of such licenses to applicants holding a currently valid license or other authorization to practice in another jurisdiction. 27 28 Eligibility requirements for the reinstatement of licenses after lapse and after 29 disciplinary action. 30 III. Recognition of national certifying bodies issuing specialty certifications required for 31 licensure as an APRN which shall also be recognized by the National Council of State Boards of 32Nursing. 33 IV. The standards to be met by, and the process for approval of, education programs 34 designed to prepare applicants to qualify for licensure or certification in any of the disciplines 35 regulated by the board under RSA 326-B:32, including the time period within which noncompliance

must be corrected before such approval is withdrawn.

HB 1410-FN - AS INTRODUCED - Page 4 -

- V. The standards to be met by, and the process for approval of, education programs designed to prepare LPNs in intravenous therapy and by programs designed to prepare LNAs to perform tasks not addressed in the basic curriculum required for licensure.
- VI. The determination of disciplinary sanctions authorized by this chapter, including the determination of administrative fines.
- VII. The administration of examinations authorized by this chapter, and the manner in which information regarding the contents of any licensing examinations may be disclosed, solicited, or compiled.
- VIII. Ethical standards for the practice of nursing and nursing-related activities.
- 10 IX. Continuing competence requirements.

- 11 X. Designations that may be used by persons regulated by the board and retired persons 12 regulated by the board.
 - XI. The implementation and coordination of the nurse licensure compact adopted in RSA 326-B:46. The board shall use model rules developed for the nurse licensure compact by the National Council of State Boards of Nursing as the basis for adopting rules which shall be modified as necessary to comply with state statutes.
 - XII. Prescribing controlled drugs pursuant to RSA 318-B:41.
 - XIII. A process for registering practitioners who have been granted a special registration to prescribe controlled substances via telemedicine pursuant to 21 U.S.C. section 831(h).
 - XIV. The implementation of strategies and procedures necessary to increase the acceptance of military training and experience towards licensure for military veterans seeking to be licensed as a nurse. For the purposes of this subparagraph, "veterans" means veterans as defined in 38 U.S.C. section 101(2).
 - XV. Implementation of the nursing assistant registry pursuant to 42 C.F.R. section 483.156, including placement of qualified individuals on the nursing assistant registry.
 - XVI. The requirements for approval of a nurse aide training and competency evaluation program pursuant to 42 C.F.R. sections 483.151-152 and nurse aide competency evaluations pursuant to 42 C.F.R. section 483.154.
 - 5 Nurse Practice Act; Criminal History Record Checks. Amend RSA 326-B:15, I to read as follows:
 - I. Every applicant for initial licensure as a licensed practical nurse, registered nurse, or advanced practice registered nurse shall submit to the [board] office a criminal history record release form, as provided by the New Hampshire division of state police, department of safety, which authorizes the release of his or her criminal history record, if any, to the [board] office.
- 6 Nurse Practice Act; Licensed Nursing Assistant; Registration by Alternate Experience.
 Amend RSA 326-B:21-a to read as follows:
- 37 326-B:21-a Licensed Nursing Assistant; [Licensure] Registration by Alternate Experience.

HB 1410-FN - AS INTRODUCED - Page 5 -

I. A current or former military service member who has been assigned an enlisted				
occupational skill in any of the Department of Defense branches, including Army, Air Force, Navy,				
Marines, Coast Guard, or others, qualifying the member to serve as a medical assistant primarily				
responsible for providing emergency medical treatment at the point of care, limited primary care,				
and health protection and evacuation from a point of injury or illness, shall be deemed to have taken				
a board-approved nursing assistant course and may be placed on the nursing assistant registry,				
provided all requirements of 42 C.F.R. section 483.156 are met [and may apply for a license as				
a nursing assistant in New Hampshire]. For purposes of this paragraph "occupational skill" shall				
include Army 68W, Air Force 4N0X1, Navy hospital corpsman HM, Coast Guard health services				
technician HS, or equivalents as implemented by the Department of Defense. An [applicant]				
individual seeking registration under this paragraph shall[÷				
(a)] Provide proof that the applicant has been assigned an enlisted occupational code of				
68W (Army), 4N0X1 (Air Force), Navy hospital corpsman HM, Coast Guard health services				
technician HS, or equivalents, and that the applicant has used those skills as part of their service in				
the last 3 years.[;]				
[(b) Have committed no acts or omissions which are grounds for disciplinary action as				
set forth in this chapter, or, if such acts have been committed and would be grounds for disciplinary				
action, the board has found, after investigation, that sufficient restitution has been made; and				
(c) Meet other criteria as established by the board.]				
II. An individual licensed as an emergency medical technician-basic, emergency medical				
technician-advanced, or paramedic in any United States jurisdiction who presently holds a				
certification from the National Registry of Emergency Medical Technicians (NREMT), shall be				
deemed to have taken a board-approved nursing assistant course and may be placed on the				
nursing assistant registry, provided all requirements of 42 C.F.R. section 483.156 are met.				
$[{\color{blue} {\sf apply for a \ license \ as \ a \ licensed \ nursing \ assistant \ in \ New \ Hampshire.}] \ An \ [{\color{blue} {\sf applicant}}] \ {\color{blue} {\it individual}}$				
seeking registration under this paragraph shall:				
(a) Provide proof that the applicant is currently licensed as an emergency medical				
technician-basic, emergency medical technician-advanced, or paramedic in any United States				
jurisdiction; and				
(b) Provide a copy of the applicant's certification from the National Registry of				
Emergency Medical Technician. [;]				
[(e) Have committed no acts or omissions which are grounds for disciplinary action as set				
forth in this chapter, or, if such acts have been committed and would be grounds for disciplinary				

(d) Meet other criteria as established by the board.]

7 Nurse Practice Act; Modified License; Registered Nurse or Licensed Practical Nurse. Amend RSA 326-B:25 to read as follows:

action, the board has found, after investigation, that sufficient restitution has been made; and

HB 1410-FN - AS INTRODUCED - Page 6 -

- 326-B:25 Modified License; Registered Nurse or Licensed Practical Nurse. The [board] office may issue a modified license to an individual who has met licensure requirements and who is able to practice without compromising public safety within a modified scope of practice or with accommodations or both as specified by the board.
- 8 Nurse Practice Act; Certificate of Medication Administration for Licensed Nursing Assistants.
 6 Amend RSA 326-B:27, I to read as follows:
- 7 I. The [board] office may issue a certificate of medication administration to a current LNA who:
 - (a) Has participated in and completed a board-approved medication administration education program;
 - (b) Has passed an examination approved by the board; and
- 12 (c) Has paid the certification fee.
- 9 Office of Professional Licensure and Certification; Telemedicine and Telehealth Services.
- 14 Amend RSA 310:7, II to read as follows:

9

10

- II. Individuals licensed, certified, or registered pursuant to RSA 137-F; RSA 151-A; RSA
- 16 315; RSA 316-A; RSA 317-A; RSA 326-B; RSA 326-D; RSA 326-H; RSA 327; RSA 328-D; RSA 328-E;
- 17 RSA 328-F; RSA 328-G; RSA 329-B; RSA 330-A; RSA 330-C; RSA 327-A; RSA 329; RSA 326-B; RSA
- 18 318; [RSA 328-I; RSA 328-J;] or RSA 332-B may provide services through telemedicine or telehealth,
- 19 provided the services rendered are authorized by scope of practice. Nothing in this provision shall be
- 20 construed to expand the scope of practice for individuals regulated under this chapter.
- 21 10 Repeal. The following are repealed:
- 22 I. RSA 328-I, relative to the board of registration of medical technicians.
- 23 II. RSA 151:3-d, relative to verification of medical technician registration.
- 24 III. RSA 310:2, II(jj), relative to the board of registration of medical technicians.
- 25 IV. RSA 328-J, relative to medical imaging and radiation therapy.
- V. RSA 310:2, II(d), relative to advisory board of medical imaging and radiation therapy.
- 27 VI. RSA 326-B:6, relative to collection and expenditure of funds.
- VII. RSA 326-B:8, relative to fees and charges.
- VIII. RSA 326-B:16, relative to licensure applications.
- 30 IX. RSA 326-B:19, relative to licensed nursing assistant applications.
- 31 X. RSA 326-B:21, relative to licensure by endorsement for licensed nursing assistants.
- 32 XI. RSA 326-B:22, relative to license renewal.
- 33 XII. RSA 326-B:23, relative to license reinstatement.
- 34 XIII. RSA 326-B:24, III, relative to temporary licenses for licensed nursing assistants.
- 35 XIV. RSA 326-B:31, I, relative to continuing education for licensed nursing assistants.
- 36 XV. RSA 326-B:40, relative to injunctive relief.
- 37 XVI. RSA 326-B:41, relative to unlawful acts.

HB 1410-FN - AS INTRODUCED - Page 7 -

- 1 XVII. RSA 326-B:41-a, relative to penalty.
- 2 XVIII. RSA 326-B:42, relative to persons licensed under previous laws.
- 3 11 Effective Date. This act shall take effect 60 days after its passage.

HB 1410-FN- FISCAL NOTE AS INTRODUCED

AN ACT relative to certain professional licenses.

FISCAL IMPACT: [X] State [] County [] Local [] None

Estimated State Impact - Increase / (Decrease)						
	FY 2024	FY 2025	FY 2026	FY 2027		
Revenue	(\$227,879) to \$0 Depending on when the bill is passed	(\$911,514)	(\$683,636)	Indeterminable decrease to \$0		
Revenue Fund(s)	und(s) Office of Professional Licensure and Certification Fund					
Expenditures	\$0	\$0	\$0	\$0		
Funding Source(s)	ing Source(s) Office of Professional Licensure and Certification Fund					
Appropriations	\$0	\$0	\$0	\$0		
Funding Source(s)	None					

- Does this bill provide sufficient funding to cover estimated expenditures? [X] N/A
- Does this bill authorize new positions to implement this bill?

[X] N/A

METHODOLOGY:

This bill repeals the chapter on the board of registration of medical technicians as well as the chapter on medical imaging and radiation therapy. This bill further makes changes to the nurse practice act, including amending the licensure of licensed nursing assistants to a registration process and making changes to the board of nursing.

The Office of Professional Licensure and Certification (OPLC) states to calculate the fiscal impact of the bill they assumed a consistent biennial renewal rate with no new initial licensing fees generated. In FY 2024 the OPLC assumed a 25% impact on licenses to account for the partial year remaining after passage equaling a loss of \$227,879 in licensing fees, FY 2025 was assumed at 100% for a loss of \$911,514 in licensing fees, and FY 2026 was assumed to be an impact of 75% for a loss of \$683,636 in licensing fees. Additionally, the OPLC states there would be no change in operating expenses for the removal of the licensing fee as the costs would persist even though the licensing fee itself is eliminated. This is because staff at the licensing clerk and board administration levels have some specialization but aren't solely dedicated to individual boards. For instance, a board administrator might oversee meetings for multiple boards. If one board dissolves, they'd still manage others, so staff levels wouldn't reduce. A decrease might occur if several boards dissolve over time, but in recent years the trend has

been maintaining or increasing staff levels. The current expenditure cost for processing the license fees is \$24,076 in FY 2024, \$96,304 in FY 2025 and \$72,228 in FY 2026. FY 2027 is indeterminable since there would be no initial license applications for the affected professions, and the renewal cycles would have concluded.

LNA:

Anticipated revenue reduction is \$385,214, stemming from LPN licensing fees of \$63 biennially for 12,229 individuals. Assuming half renew annually, the yearly revenue decline is approximately \$385,214. Despite the fee repeal, operational costs remain constant. OPLC, supporting the Board of Nursing, maintains registry functions and compliance oversight. The federal government reimburses states for registry upkeep, managed by the Department of Health and Human Services. Fee elimination allows OPLC to allocate expenses more accurately, recouping registry-related costs.

Medical Imaging and Radiation Therapy:

Anticipated revenue decrease is \$431,000, stemming from \$155 biennial licensing fees for 5,561 individuals. Assuming half renew annually, yearly revenue decline is approximately \$431,000. Despite eliminating the license and advisory board, overhead costs remain largely unchanged as the OPLC already provides administrative support to other boards. While savings result from fewer administered boards, a shared board administrator serving multiple boards negates the need for staff reduction.

Medical Technicians:

Anticipated revenue decrease is \$95,300, derived from \$110 biennial licensing fees for 1,733 individuals. Assuming half renew annually, annual revenue would decrease by approximately \$95,300. Eliminating the license and board would minimally impact overhead costs, as the Office already supports other boards administratively. While administering fewer boards yields savings, a shared board administrator serving multiple boards ensures no staff reduction.

Estimated Revenue Impact Breakdown	Partial Year 25%	Full Year 100%	Remaining Year 75%
LNA	\$96,304	\$385,214	\$288,911
Medical Imaging and Radiation Therapy	\$107,750	\$431,000	\$323,250
Medical Technicians	\$23,825	\$95,300	\$71,475
Total Loss of Revenue	\$227,879	\$911,514	\$683,636

AGENCIES CONTACTED:

Office of Professional Licensure and Certification