



## NEW HAMPSHIRE

### What is the definition of “telemedicine” or “telehealth”?

“‘Telemedicine’ means the use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment. ‘Telemedicine’ shall not include the use of audio-only telephone or facsimile.”

[N.H. REV. STAT. ANN. § 329:1-d\(I\).](#)

### PSYCHIATRISTS

### What are the restrictions on the scope of practice for psychiatrists practicing via telemedicine/telehealth?

“It shall be unlawful for any person to prescribe by means of telemedicine a controlled drug classified in schedule II through IV.”

[N.H. REV. STAT. ANN. § 329:1-d\(III\).](#)

- (a) 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, or who are treating patients at a state designated community mental health center pursuant to RSA 135-C or at a Substance Abuse and Mental Health Services Administration (SAMHSA)-certified state opioid treatment program, and shall require an initial in-person exam by a practitioner licensed to prescribe the drug. Subsequent in-person exams shall be by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and drug, but not less than annually.
- (b) 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), who are treating patients at a SAMHSA-certified state opioid treatment program. Such prescription authority shall require an initial in-person exam by a practitioner licensed to prescribe the drug and 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.



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### [N.H. REV. STAT. ANN. § 329:1-d\(IV\).](#)

A physician providing services by means of telemedicine directly to a patient shall:

- (a) Use the same standard of care as used in an in-person encounter;
- (b) Maintain a medical record; and
- (c) Subject to the patient's consent, forward the medical record to the patient's primary care or treating provider, if appropriate.

### [N.H. REV. STAT. ANN. § 329:1-d\(V\).](#)

Are there any licensing requirements specific to telemedicine/telehealth (e.g., requirements to be licensed in the state where the patient is located)?

"An out-of-state physician 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. This paragraph shall not apply to out-of-state physicians who provide consultation services pursuant to RSA 329:21, II."

### [N.H. REV. STAT. ANN. § 329:1-d\(II\).](#)

This chapter (regarding Occupations and Professions) does not apply:

"To legally qualified physicians in other states or countries when called in consultation by an individual licensed to practice in the state who bears the responsibility for the patient's diagnosis and treatment. However, regular or frequent consultation by such an unlicensed person, as determined by the licensing board, shall constitute the practice of medicine without a license"; or

"To any physician residing on the border of a neighboring state and duly authorized under the laws thereof to practice medicine therein, whose practice extends into this state, and who does not open an office or appoint a place to meet patients or to receive calls within this state"; or

"To regular or family physicians of persons not residents of this state, when called to attend them during a temporary stay in this state, provided such family physicians are legally registered in some state."

### [N.H. REV. STAT. ANN. § 329:21\(II\)-\(IV\).](#)



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What are the criteria for establishing a practitioner-patient relationship via telemedicine/telehealth?

“‘Physician-patient relationship’ means a medical connection between a licensed physician and a patient that includes an in-person or 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. . . .”

[N.H. REV. STAT. ANN. § 329:1-c.](#)

What are the acceptable modalities (e.g., telephone, video) for the practice of psychiatry via telemedicine/telehealth that meet the standard of care for the state?

“‘Telemedicine’ means the use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment. ‘Telemedicine’ shall not include the use of audio-only telephone or facsimile.”

[N.H. REV. STAT. ANN. § 329:1-d\(l\).](#)

### ADVANCED PRACTICE REGISTERED NURSES (APRNs)

What are the restrictions on the scope of practice for APRNs practicing via telemedicine/telehealth?

“An APRN providing services by means of telemedicine directly to a patient shall:

- (1) Use the same standard of care as used in an in-person encounter;
- (2) Maintain a medical record; and
- (3) Subject to the patient’s consent, forward the medical record to the patient’s primary care or treating provider, if appropriate.”

[N.H. REV. STAT. ANN. § 326-B:2\(XII\)\(e\).](#)



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Are there any licensing requirements specific to telemedicine/telehealth (e.g., requirements to be licensed in the state where the patient is located)?

“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.”

[N.H. REV. STAT. ANN. § 326-B:2\(XII\)\(b\).](#)

What are the criteria for establishing a practitioner-patient relationship via telemedicine/telehealth?

Under the Nurse Practice Act, “[a]dvanced practice registered nurse-patient relationship means a medical connection between a licensed APRN and a patient that includes an in-person or 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. . . .”

[N.H. REV. STAT. ANN. § 326-B:2\(I-a\).](#)

Does an APRN have prescribing authority? If so, under what conditions/limits may an APRN prescribe via telemedicine/telehealth?

“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.”

[N.H. REV. STAT. ANN. § 326-B:2\(I-a\).](#)

“It shall be unlawful for any person to prescribe by means of telemedicine a controlled drug classified in schedule II through IV.”

[N.H. REV. STAT. ANN. § 326-B:2\(XII\)\(c\).](#)

- (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, or who are treating patients at a state



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designated community mental health center pursuant to RSA 135-C or at a Substance Abuse and Mental Health Services Administration (SAMHSA)-certified state opioid treatment program, and shall require an initial in-person exam by a practitioner licensed to prescribe the drug. Subsequent in-person exams shall be by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition and drug, but not less than annually.

- (2) 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), who are treating patients at a SAMHSA-certified state opioid treatment program. Such prescription authority shall require an initial in-person exam by a practitioner licensed to prescribe the drug and 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.

[N.H. REV. STAT. ANN. § 326-B:2\(XII\)\(d\).](#)

What are the acceptable modalities (e.g., telephone, video) for the practice of advance practice nursing via telemedicine/telehealth that meet the standard of care for the state?

“‘Telemedicine’ means the use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment. Telemedicine shall not include the use of audio-only telephone or facsimile.”

[N.H. REV. STAT. ANN. § 326-B:2\(XII\)\(a\).](#)

### FOLLOW-UP CARE

What are the requirements regarding follow-up care for telemental/telebehavioral/telepsychiatric health services?

None identified.

However, both a physician and an APRN “providing services by means of telemedicine directly to a patient shall . . . [s]ubject to the patient's consent, forward the medical record to the patient's primary care or treating provider, if appropriate.”



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[N.H. REV. STAT. ANN. § 329:1-d\(V\)\(c\).](#)

[N.H. REV. STAT. ANN. § 326-B:2\(XII\)\(e\)\(3\).](#)

### COVERAGE & REIMBURSEMENT

Does Medicaid provide coverage for telemental/telebehavioral/telesychiatric health services? If so, what are the coverage criteria?

“The use of the term “telemedicine” shall comply with the Centers for Medicare and Medicaid Services requirements governing the aforementioned telehealth services.”

[N.H. REV. STAT. ANN. § 167:4-d\(I\).](#)

“Coverage under this section shall include the use of telehealth or telemedicine for Medicaid-covered services provided within the scope of practice of a physician or non-physician practitioner as a method of delivery of medical care:

- (1) Which is an appropriate application of telehealth services provided by medical specialists only, excluding primary care, as determined by the department based on the Centers for Medicare and Medicaid Services regulations; and
- (2) By which an individual shall receive medical services from a physician or non-physician practitioner who is an enrolled Medicaid provider without in-person contact with that provider.”

“Nothing in this section shall be construed to prohibit the Medicaid program from providing coverage for only those services that are medically necessary and subject to all other terms and conditions of the coverage.”

[N.H. REV. STAT. ANN. § 167:4-d\(II\).](#)