

LEGISLATIVE COMMITTEE MINUTES

SB115

Bill as Introduced

SB 115 - AS INTRODUCED

2019 SESSION

19-0983

05/10

SENATE BILL **115**

AN ACT establishing a commission to study the business environment for mental health providers in New Hampshire.

SPONSORS: Sen. Feltes, Dist 15; Sen. Hennessey, Dist 5

COMMITTEE: Executive Departments and Administration

ANALYSIS

This bill establishes a commission to study the business environment for mental health providers.

Explanation: Matter added to current law appears in ***bold italics***.
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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Nineteen

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1 1 New Section; Commission to Study the Business Environment for Mental Health Providers in
2 New Hampshire. Amend RSA 330-A by inserting after section 26 the following new section:

3 330-A:26-a Commission Established.

4 I. There is established a commission to study the business environment for mental health
5 providers in New Hampshire.

6 II. The members of the commission shall be as follows:

7 (a) Two members of the senate, appointed by the president of the senate.

8 (b) Three members of the house of representatives, appointed by the speaker of the
9 house of representatives.

10 (c) The insurance commissioner, or designee.

11 (d) The commissioner of the department of health and humans services, or designee.

12 (e) One representative of the insurance or managed care industry, appointed by
13 America's Health Insurance Plans (AHIP).

14 (f) One member of the public representing individual or small mental health practices,
15 appointed by the Clinicians United chapter of the State Employees' Association of New Hampshire,
16 SEIU Local 1984.

17 (g) One member of the public representing individual or small mental health practices,
18 appointed by the New Hampshire Providers Association.

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20 appointed by the New Hampshire chapter of the National Association of Social Workers.

21 III. Legislative members of the commission shall receive mileage at the legislative rate
22 when attending to the duties of the commission.

23 IV. The focus of the commission shall be to identify ways to improve the ability of individual
24 and small mental health practices to thrive in the state of New Hampshire. The study shall include
25 an examination of:

26 (a) Provider and insurance billing practices and regulations.

27 (b) Access to affordable education and advanced degrees in the area of mental health
28 practice.

29 (c) Commercial insurance rates and mental health parity.

30 (d) Methods to strengthen and expand the existing mental health provider network to

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1 ensure that an adequate number of providers are available to meet the need for mental health
2 services within the state.

3 V. The members of the study commission shall elect a chairperson from among the
4 members. The first meeting of the commission shall be called by the insurance commissioner. The
5 first meeting of the commission shall be held within 45 days of the effective date of this section.
6 Five members of the commission shall constitute a quorum.

7 VI. The commission shall report its findings and any recommendations for proposed
8 legislation to the president of the senate, the speaker of the house of representatives, the senate
9 clerk, the house clerk, the governor, and the state library on or before November 1, 2019.

10 2 Repeal. RSA 330-A:26-a, relative to the commission to study the business environment for
11 mental health providers, is repealed.

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13 I. Section 2 of this act shall take effect November 1, 2019.

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CHAPTER 234
SB 115 - FINAL VERSION

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21 234:2 Repeal. RSA 330-A:26-a, relative to the commission to study the business environment for
22 mental health providers, is repealed.

23 234:3 Effective Date.

24 I. Section 2 of this act shall take effect November 1, 2020.

 II. The remainder of this act shall take effect upon its passage.

Approved: July 12, 2019

Effective Date:

I. Section 2 shall take effect November 1, 2020.

II. Remainder shall take effect July 12, 2019.

Amendments

Amendment to SB 115

1 Amend RSA 330-A:26-a, II(a) as inserted by section 1 of the bill by replacing it with the following:

2

3 (a) One member of the senate, appointed by the president of the senate.

4

5 Amend RSA 330-A:26-a, V and VI as inserted by section 1 of the bill by replacing them with the
6 following:

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16 Amend the bill by replacing paragraph I of section 3 of the bill with the following:

17

18 I. Section 2 of this act shall take effect November 1, 2020.

Committee Minutes

SENATE CALENDAR NOTICE
Executive Departments and Administration

Sen Sharon Carson, Chair
 Sen Kevin Cavanaugh, Vice Chair
 Sen Cindy Rosenwald, Member
 Sen Shannon Chandley, Member
 Sen John Reagan, Member

Date: January 23, 2019

HEARINGS

	Wednesday	01/30/2019
	(Day)	(Date)
Executive Departments and Administration	LOB 101	9:00 a.m.
(Name of Committee)	(Place)	(Time)
9:00 a.m. SB 173-FN	relative to criminal history background checks by employers and public agencies.	
9:15 a.m. SB 208	renaming the adjutant general's department to the department of military affairs and veterans services.	
9:30 a.m. SB 109-FN	relative to paid details by personnel of the division of fire safety.	
9:45 a.m. SB 115	establishing a commission to study the business environment for mental health providers in New Hampshire.	
10:00 a.m. SB 114	establishing a committee to study state oversight and regulation of life coaches.	
10:15 a.m. SB 222-FN	relative to licensure of pharmacy benefits managers.	
10:30 a.m. SB 226-FN	relative to registration of pharmacy benefit managers, and reestablishing the commission to study greater transparency in pharmaceutical costs and drug rebate programs.	

EXECUTIVE SESSION MAY FOLLOW

Sponsors:

SB 173-FN

Sen. Giuda

Sen. Fuller Clark

Rep. Hennessey

SB 208

Sen. Giuda

Sen. D'Allesandro

Sen. Feltes

Rep. Graham

SB 109-FN

Sen. Carson

Sen. Cavanaugh

Rep. Baldasaro

Rep. Doucette

Rep. Goley

Rep. S. Beaudoin

SB 115

Sen. Feltes

Sen. Hennessey

SB 114

Sen. Fuller Clark

Rep. Grote

Rep. J. Schmidt

SB 222-FN

Sen. Rosenwald

Sen. Feltes

Sen. Levesque

Rep. Luneau

SB 226-FN

Sen. Soucy

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Sen. Fuller Clark

Sen. Watters

Rep. Butler

Sen. Hennessey

Sen. Sherman

Sen. Hennessey

Rep. Hennessey

Rep. McBeath

Sen. Levesque

Sen. Cavanaugh

Sen. Kahn

Rep. Muscatel

Sen. Rosenwald

Jennifer Horgan 271-2609

Sharon M. Carson
Chairman

Senate Executive Departments and Administration Committee

Jennifer Horgan 271-2609

SB 115, establishing a commission to study the business environment for mental health providers in New Hampshire.

Hearing Date: January 30, 2019

Time Opened: 9:47 a.m.

Time Closed: 10:11 a.m.

Members of the Committee Present: Senators Carson, Cavanaugh, Rosenwald, Chandley and Reagan

Members of the Committee Absent : None

Bill Analysis: This bill establishes a commission to study the business environment for mental health providers.

Sponsors:

Sen. Feltes

Sen. Hennessey

Who supports the bill: Senator Feltes; Jake Berry, New Futures; Heidi Page, Clinicians United; Thomas Burwell, LCMHC-Clinicians United; Deborah Guiloti, Clinicians United; Brian Hawkins, SEA/SEIU 1984; Lynn Stanley, NASHNH; Paula Rogers, Anthem; Susan Paschell, NH Providers Association; David Holt.

Who opposes the bill: No one

Who is neutral on the bill: Jennifer Patterson, NH Insurance Department

Summary of testimony presented in support:

Senator Feltes

- NH is faced with a mental and opioid public health epidemic.
- The legislature has worked to address barriers and enhance the workforce in recognition of these epidemics.
- This commission shall focus on provider and insurance billing practices and regulations, commercial insurance rates and mental health parity, access to affordable education and advanced degrees in the areas of mental health practice, and methods to strengthen and expand the existing mental health provider network.
- NH has taken steps in some of these areas, but it is helpful to take a step back and reexamine the situation as a whole.

- There is more that can be done.
- The important things are: how do we make sure NH has enough providers? What's going on with credentialing and other barriers?
- Believes New Futures will be making a recommendation to make it the commission to study the business environment for behavioral health providers. Is fine with that since in most cases they are co-occurring issues.

Heidi Paige (Clinicians United)

- There is an ongoing concern about public access to mental health counseling.
- One of the barriers is the pay rate that clinicians receive from insurance companies.
- For the past 20 years, she has been a provider for most commercial insurance companies and has seen a raise in those rates only once.
- Has asked for raises from the commercial insurance companies, but they say that they are not raising the fees at this time.
- This is a barrier to people entering the field, especially when they are factoring in education debt.
- Seasoned clinicians tend drop low paying insurance companies, which limits the public's access to them.
- Some insurance companies have randomly dropped the 60minute individual therapy session to 45minutes, which cheats the client out of a full 60minute session.
- Some provider networks say they have an adequate number of clinicians, but many of the clinicians they list are not taking clients from lower paying services.

Thomas Burwell (LCMHC/Clinicians United)

- When working for community mental health organization if a client was in extreme danger they were taken to the hospital and they would receive some sort of care.
- In the work he does now, he had a client who was in danger and went to the emergency room where he waited for 10 hours. Ultimately, the hospital told him there was nothing they could do for him.
- There is a severe shortage of psychiatrists in the state. If a client is determined to need medication, they cannot get it because they cannot find an available psychiatrist.
- There are significant inequities to what job someone can get based on their degree, and what they get paid.

Brian Hawkins (State Employees Association)

- Supports the bill and agrees that adjusting the reporting deadline is an appropriate idea.

Lynn Stanley (National Association of Social Workers-NH)

- One member of the commission will be appointed by the NASW.
- The NASW hosts the Mental Health Coalition, which brings together all the providers, marriage and family therapists, mental health counselors, and more.
- It is from that group the NASW would be appointing someone to the commission.

Paula Rogers (Anthem)

- Supports the bill and agrees that adjusting the reporting deadline is an appropriate idea.

Summary of testimony presented in opposition:

None

Neutral Information Presented:

Jennifer Patterson (NH Insurance Department)

- The Department is happy to participate in the commission.
- What can be done to facilitate access and parity has been a key area of focus for the Department.
- This commission makes sense due to the tremendous legal complexities involved and the importance of fostering dialogue across the board.
- The Insurance Department has done market conduct examinations in the area of access to behavioral health services and once the data is complete they will make it available.
- Senator Carson pointed out that the commission repeals on November 1, 2019 and asked if that is enough time to accomplish the work the commission has been charged with.
 - Thinks that it would be very helpful to move that date out because these conversations take time.

jch

Date Hearing Report completed: January 31, 2019

Speakers

Testimony

Chroniak, Deborah

From: Christine Miller <miller5529@comcast.net>
Sent: Thursday, January 24, 2019 5:22 PM
To: Carson, Sharon
Subject: SB115

Dear Senator Carson,

I am a Licensed Clinical Mental Health Counselor in private practice in Bedford, NH. I am sorry I cannot be at the hearing on SB115 to testify in person, but I had patients previously scheduled for the day of the hearing.

I strongly support SB115; establishing a commission to study the business environment for mental health providers in New Hampshire.

I have been a mental health practitioner for over 40 years and have witnessed many changes in the provision of behavioral health services. For many years I accepted reimbursement from every insurance company. No longer. I am reimbursed \$30.00 per session more by one insurance company than by two others. I no longer accept new patients with those low paying insurances. This is not fair to the public or to me. Insurance reimbursement has essentially not increased in 20 years. Would you work for 20 years without a raise? There are many issues just like these.

I am sure that legislators are unaware of many of these issues which is why I support a commission to study the business environment for mental health providers in New Hampshire.

Thank you for your consideration.

Christine Miller, LCMHC

Women's Counseling Center

201 Riverway Place

Bedford, NH 03110

603-668-8400

Chroniak, Deborah

From: Jim McDonough <jmcdonough6367@msn.com>
Sent: Monday, January 28, 2019 4:06 PM
To: Carson, Sharon
Subject: SB115

Sent from my iPad
Dear Senator Carson,

I am a Licensed Clinical Mental Health Counselor in private practice in Manchester, NH. I strongly support SB115, establishing a commission to look into the business end of our work as Mental Health providers in NH.

I have been a Mental Health provider for 25+ years. I work with adolescents and adults with anxiety, depression, and many who are survivors of domestic violence and emotional and sexual abuse. I am a provider for most insurances including Medicaid. I have not been given any type of raise or cost of living increase in all these years.

Currently, I am being more selective of which clients I accept because of the inequality between the difficult clinical work I do, and the low reimbursement rate. This is not fair to me or potential clients. No other business would tolerate this. It's unconscionable.

Thank you for your consideration,

Sheila McDonough
LCMHC #97 NH

Chroniak, Deborah

From: Donna Lennon <donnalennoncounseling@gmail.com>
Sent: Monday, January 28, 2019 10:02 PM
To: Rosenwald, Cindy; JohnReagan111@gmail.com; Cavanaugh, Kevin; Chandley, Shannon; Carson, Sharon; Horgan, Jennifer
Cc: Brian Hawkins; David Holt
Subject: I support SB115; Establishing a commission to study the business environment for mental health providers in New Hampshire.

Follow Up Flag: Follow up
Flag Status: Completed

I support SB115; Establishing a commission to study the business environment for mental health providers in New Hampshire.

For the past thirty plus years, I have been privileged to work as a NH Licensed Clinical Mental Health Counselor and a Master Licensed Alcohol & Drug Abuse Counselor. My work is primarily with clients seeking better lives for themselves and their families. When one person changes in a family, the entire family is effected. When one person gets sober, the children are relieved of traumatic experiences that often occur in addicted families, partners deepen their relationships and employers gain more productive employees. While this is the work I love, I should also acknowledge leaving private counseling work on two separate occasions to work in hospital rehab settings for the sole purpose of a dependable salary and all of the benefits that we cannot afford to pay for in private practice. I have since returned to private practice after I received emails from former clients asking if I had planned to return to private counseling work and from colleagues who reminded me of my passion for the work.

The reason I am telling you this is to note that during the entire time I have been providing counseling services, I have continued to receive an annual rate increase for rent, increases for malpractice insurance, telephone, rental insurance, computer expenses, relicensure fees, training and education, etc. but never once having an increase in the rates paid to me by insurance companies. Further, when we meet with couples or families which is much more challenging work considering meeting the needs of everyone in the room, we are paid an even lower rate than what we are paid for an individual session. I have limited my affiliations with insurance companies because there is also a great disparity in the amounts paid to licensed Clinicians and after doing this work for the length of time I have, I will not take a further reduction in my pay rate.

I do not know of any other profession where you do not receive pay increases. I have been told that told legal action can be taken against us for discussing insurance rates due to anti trust laws as insurance companies discourage providers from discussing their insurance reimbursement rates with other providers. This might be one reason why the problem perpetuates but how can you resolve a problem you are told not to discuss?

For consumers, I also have concerns regarding rumors of reduced coverage and higher copays for behavioral health adding to the stigma we are working so hard to eliminate. As I'm sure you will agree, Mental Health and Substance Use Disorders deserve the same coverage as any other medical illness.

In any case, I really appreciate your review of these concerns and hope you will let me know how I can be of assistance to the committee in the future.

Thank-you,

Donna B. Lennon, LCMHC, MLADC
Psychotherapist and Member of Clinicians United NH

Horgan, Jennifer

From: Tracy Strombom <tstrombom@wsfca.net>
Sent: Tuesday, January 29, 2019 12:46 PM
To: Carson, Sharon; Cavanaugh, Kevin; Rosenwald, Cindy; Chandley, Shannon; Reagan, John; Horgan, Jennifer
Subject: SB 115

Dear Senators:

I work as a child and family therapist at Warren Street Family Counseling in Concord. As one of the founders of the business as well as a member of our committee that works with insurance companies I have observed the relationship between a private mental health practice and health insurance for over twenty-five years. It has not been an easy relationship.

We are committed to providing high quality mental health services to the community and have offered a wide range of services. We are the largest family-oriented practice in the area having helped over 25,000 families and their children. Every week we have more referrals than we can accommodate. In spite of our excellent reputation and the high demand for our services we have difficulty attracting and keeping clinicians because of the financial restrictions we face from insurance companies. As the insurance industry has consolidated and larger companies buy up smaller ones we have lost our relationships with company representatives and any bargaining power we ever had.

In 1997 one corporation which had bought up a New Hampshire company offered us a 10% increase in rates. Without notice the following year they wrote to us that "in these trying times we all have to tighten our belts" and rescinded that increase. They posted a record profit that year of several billion dollars. Ten years later we finally got a rate increase worth one dollar more than the 1997 rate for a net gain of 2.7%. During that same period the company had raised the premiums on their policies by 412%. We have faced similar situations with other insurers including one that has finally agreed to review rates after twenty-five years of paying us the same rate. When figuring for inflation this has amounted to a 43% decrease in our pay. In the meantime, we have learned about raises and bonuses for the staffs of these companies.

When we try to negotiate with these companies their representatives usually have offices in other states and have no idea about the realities of New Hampshire. We have had difficulty arranging any sort of meeting to talk about difficulties we face. When we have talked with representatives we have often been treated as an annoyance and, in some cases, have been given multiple conflicting answers to questions with denials that they ever said or committed to anything we had recorded.

New Hampshire and the nation have a mental health crisis. When managed care took over the industry in the nineties rate cuts wiped out a large part of the private practice community. Clinicians left to find other work. We have not recovered from that and do not have enough clinicians to meet the demand for services. If we operated in any sort of a free market we would command at least a livable wage. Instead our businesses are

beholden to and controlled by an oligopoly. Instead we face a huge squeeze between stagnant rates and rapidly escalating health insurance premiums.

We have lost several high-quality clinicians to other fields because they cannot afford to purchase health insurance and take care of their families as well with a private practitioner's pay. My own family's policy increased over six times since 2002 while our income has remained the same. Between rate hikes and inflation we effectively make much less than we did thirty years ago.

This type of business climate is not sustainable and will result in even more losses to the mental health field. Yet we as a small business in New Hampshire have little to no bargaining power. We cannot organize or even talk with other clinicians or practices about rates for fear of violating anti-trust law while dealing with multi-billion dollar companies that routinely know the rates that other companies pay.

I hope that you will consider SB 115 and allow the establishment of a commission to study the business environment for mental health providers in New Hampshire. We need help if we are to maintain a thriving community of mental health providers in the state.

Sincerely,

Tracy A. Strombom, Ph.D.

Horgan, Jennifer

From: Shawn Hassell <shassell@betweenusassociates.com>
Sent: Tuesday, January 29, 2019 5:31 PM
To: Carson, Sharon; Cavanaugh, Kevin; Rosenwald, Cindy; Chandley, Shannon; Reagan, John; Horgan, Jennifer
Subject: I support SB115; Establishing a commission to study the business environment for mental health providers in New Hampshire.

Follow Up Flag: FollowUp
Flag Status: Flagged

Members of the Senate Executive Department Administration Committee January 29, 2019
Dear Senators,

I am writing to you in order to request your support for Senate Bill 115. You are likely aware of recent efforts in New Hampshire to address the many challenges in our state with mental health such as need for services being higher than available services and providers. An long overlooked part of this picture has been the business environment for mental health providers including social workers, mental health counselors, marriage and family therapists, pastoral psychotherapists, and also psychologists, psychiatric nurse practitioners, MLADCs and LADCs, and other providers.

I am the current Chair/President of the New Hampshire Association for Marriage and Family Therapy, and also as co-owner of a group practice in Manchester and Salem, NH. I am also a member of Clinician's United. Over the last two decades of practice, I have experienced many challenges to practicing when it comes to relationships with insurances, and have particularly experienced this as a practice co-owner that currently employs 10 therapists. I have also heard many examples of Licensed Marriage and Family Therapists and other mental health providers in private practice running into challenges, particularly with insurance relationships, which run from impediments and delays to large scale, serious lack of payments.

Some of the more common challenges to practice include:

1. The insurance company denying payments with regularity, giving a code for the denial and that code being unclear, requiring a call with a 20-60 minute wait in cues, then the insurance admitting it was there error and submitting for re-processing.
2. In the situations of them re-processing, rather than being paid in the usual 2-4 weeks, the preprocessing due to the insurance company's errors often take 8-12 weeks to pay out, leaving the provider often without hundreds of dollars for a 2-3 months.
3. The actual rates for several insurances have either stayed level or somewhat declined over the years, in fact over the decades, while other costs of running a private practice have gone up on pace with inflation or more. The rates for 2-3 insurances, such as the Optum/United Health/Harvard Pilgrim family and Cigna, have remain unchanged, with Cigna at \$55 for an individual therapy session and Optum at \$61, for at least 15 years that I know of, and senior therapists I know say the rates have scarcely changed since the early 90s. The committee should be aware that, for ethical practice and

required documentation, a full time caseload should be no more than approximately 25-26 clients per week. When you add up overhead of rent, professional liability costs, billing costs, computer/software costs, and much more, the results are unusually low incomes at rates like this for Master's and Doctoral level professionals. I commonly hear incomes of \$50,000 or a bit more. To make up for these low rates, it is not uncommon to hear of mental health providers in private practice seeing more like 35 clients per week or more, resulting in a 60 hour work week or more. This adds to burnout and poorer care and treatment. Another result of this is that, with other insurances such as BCBS paying more reasonably, therapists who stay in practice longer and have strong demand naturally cannot continue to afford these low rates of reimbursement, as well as the many other billing challenges and delays, and so many providers simply drop certain insurances, which adds to NH citizens struggling to find providers.

4. The insurance companies have extensive contracts, all with variations, that mental health providers must agree to in order to be in-network providers. Despite significant lack of service providers, most insurers routinely "close" their panels and present other barriers to providers to be contracted in the first place, even when it's clear that they have many members in need who cannot find providers, or at certain times (evenings/Saturdays), or certain specialties (couples, family, trauma, etc.). The companies having closed panels is often arbitrary seeming to providers trying to apply.
5. The insurance companies' rules for when they will pay, rule outs or caveats when there is a secondary insurance, are often complex and not well explained in contracts. In addition, it is fairly common for an insurance company to be paying for services for weeks or months, with the member paying her/his co-pay, then months later the insurance company discovers it was paying in error (thought the member and the provider could never have discerned this), and the insurance company issues a "clawback". This entails the insurance company informing the provider it was paid in error, requiring that the provider either send a check, often for hundreds or thousands of dollars, and if they don't pay, the insurance company will simply retract from future payments (and if it is a group practice, they will pull it from other members of that insurance, which pulls money from other providers in the practice, which is a total disaster for bookkeeping in a group practice setting). The insurance company holds in these situations that the *provider* must then go after and retrieve the money, *months into therapy and often months after therapy is complete*, from the client. Obviously, the successful retrieval of these funds is rare because the client thought s/he was paying their share, therapy is often over, and the client often does not have the hundreds/thousands to pay. The professional nature of the therapy relationship makes it professionally risky for the provider to turn in a client in this situation to a collections agency, and any MH ethical expert will tell you that a collection effort, and especially a suit to retrieve funds, is highly ill-advised, as it will likely lead to a spurious, false report of malpractice to the Board of MH Practice or other governing board. So, the result of these "clawbacks" is very damaging to providers of mental health, particularly in group and individual private practice.

I could relate many more problems facing mental health practitioners in private practice. They are extensive enough that I have witnessed many providers drop insurances altogether, serving only clients that can afford private pay rates (typically \$90-140 per hour), while many other providers have been disillusioned and left private practice or the field altogether. I hope that members of this Senate committee can hear just a few of the challenges I describe here and vote in favor of SB 115. A closer look at the business environment for mental health providers in New Hampshire is long overdue.

I am more than willing to respond to any follow-up questions that any committee members might have. The last thing I'll mention is that, in the language of SB 115, section II (h), I would support that there should be an extra member of the public representing individual or small mental health practices, perhaps appointed by the NH chapter of the National Association of Social workers or the NH Association for Marriage and Family Therapy or the NH Association of Mental Health Counseling or another of the professional MH associations. That is, it would be more effective to have two people from a couple of

professional associations, preferably with a blend of individual and small group mental health practice experience, since the insurance challenges with individual practice are different and amplified in group practices.

Thank you very much for your attention,

Shawn Hassell, LMFT
Chair, NHAMFT

Shawn J. Hassell, M.S., LMFT
AAMFT Approved Supervisor
Between Us Associates
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Voting Sheets

Senate Executive Departments and Administration Committee

EXECUTIVE SESSION

Bill # SB115

Hearing date: _____

Executive session date: _____

Motion of: committee amendment

VOTE: 5-0

<u>Made by</u> Carson <input type="checkbox"/>	<u>Seconded</u> Carson <input checked="" type="checkbox"/>	<u>Reported</u> Carson <input type="checkbox"/>
<u>Senator:</u> Cavanaugh <input type="checkbox"/>	<u>by Senator:</u> Cavanaugh <input type="checkbox"/>	<u>by Senator:</u> Cavanaugh <input type="checkbox"/>
Chandley <input checked="" type="checkbox"/>	Chandley <input type="checkbox"/>	Chandley <input type="checkbox"/>
Reagan <input type="checkbox"/>	Reagan <input type="checkbox"/>	Reagan <input type="checkbox"/>
Rosenwald <input type="checkbox"/>	Rosenwald <input type="checkbox"/>	Rosenwald <input type="checkbox"/>

Motion of: OTPA

VOTE: 5-0

<u>Made by</u> Carson <input type="checkbox"/>	<u>Seconded</u> Carson <input type="checkbox"/>	<u>Reported</u> Carson <input type="checkbox"/>
<u>Senator:</u> Cavanaugh <input type="checkbox"/>	<u>by Senator:</u> Cavanaugh <input checked="" type="checkbox"/>	<u>by Senator:</u> Cavanaugh <input type="checkbox"/>
Chandley <input type="checkbox"/>	Chandley <input type="checkbox"/>	Chandley <input type="checkbox"/>
Reagan <input checked="" type="checkbox"/>	Reagan <input type="checkbox"/>	Reagan <input type="checkbox"/>
Rosenwald <input type="checkbox"/>	Rosenwald <input type="checkbox"/>	Rosenwald <input type="checkbox"/>

consent Reagan - Chandley

<u>Committee Member</u>	<u>Present</u>	<u>Yes</u>	<u>No</u>	<u>Reported out by</u>
Senator Carson, Chairman	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Senator Cavanaugh, Vice-Chair	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Chandley	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Reagan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Rosenwald	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Amendments: _____

Notes: _____

Committee Report

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE
FOR THE CONSENT CALENDAR

Thursday, January 31, 2019

THE COMMITTEE ON Executive Departments and Administration

to which was referred SB 115

AN ACT

establishing a commission to study the business environment for mental health providers in New Hampshire.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS WITH AMENDMENT

BY A VOTE OF: 5-0

AMENDMENT # 0205s

Senator Sharon Carson
For the Committee

This bill establishes a commission to study the business environment for mental health providers. The enactment of this commission will allow for the opportunity to fully examine the work that has already been done on barriers in the state and consider what more needs to be done. The Committee amended the bill reducing the number of senators and adjusting the reporting deadlines in order to give the commission a more appropriate timeframe to complete their work.

Jennifer Horgan 271-2609

FOR THE CONSENT CALENDAR

EXECUTIVE DEPARTMENTS AND ADMINISTRATION

SB 115, establishing a commission to study the business environment for mental health providers in New Hampshire.

Ought to Pass with Amendment, Vote 5-0.

Senator Sharon Carson for the committee.

This bill establishes a commission to study the business environment for mental health providers. The enactment of this commission will allow for the opportunity to fully examine the work that has already been done on barriers in the state and consider what more needs to be done. The Committee amended the bill reducing the number of senators and adjusting the reporting deadlines in order to give the commission a more appropriate timeframe to complete their work.

Docket of SB115

Docket Abbreviations

Bill Title: establishing a commission to study the business environment for mental health providers in New Hampshire.

Official Docket of SB115.:

Date	Body	Description
1/18/2019	S	Introduced 01/03/2019 and Referred to Executive Departments and Administration; SJ 4
1/23/2019	S	Hearing: 01/30/2019, Room 101, LOB, 09:45 am; SC 8
2/4/2019	S	Committee Report: Ought to Pass with Amendment #2019-0205s , 02/14/2019; Vote 5-0; CC; SC 10
2/14/2019	S	Committee Amendment #2019-0205s , AA, VV; 02/14/2019; SJ 5
2/14/2019	S	Ought to Pass with Amendment 2019-0205s, MA, VV; OT3rdg; 02/14/2019; SJ 5
3/21/2019	H	Introduced 03/20/2019 and referred to Commerce and Consumer Affairs HJ 11 P. 69
3/26/2019	H	Public Hearing: 04/02/2019 10:00 am LOB 302
4/2/2019	H	Full Committee Work Session: 04/10/2019 10:00 am LOB 302
4/9/2019	H	==CANCELLED== Executive Session: 04/17/2019 10:00 am LOB 302
4/10/2019	H	Executive Session: 04/18/2019 01:00 pm LOB 302
4/24/2019	H	Committee Report: Ought to Pass with Amendment #2019-1545h for 05/08/2019 (Vote 12-7; RC) HC 23 P. 8
5/8/2019	H	Amendment #2019-1545h : AA VV 05/08/2019 HJ 15 P. 14
5/8/2019	H	Ought to Pass with Amendment 2019-1545h: MA VV 05/08/2019 HJ 15 P. 14
5/8/2019	H	Referred to Health, Human Services and Elderly Affairs 05/08/2019 HJ 15 P. 14
5/8/2019	H	Public Hearing: 05/15/2019 10:00 am LOB 205
5/8/2019	H	Division I Subcommittee Work Session: 05/16/2019 10:00 am LOB 104
5/14/2019	H	Executive Session: 05/21/2019 10:00 am LOB 205
5/22/2019	H	Majority Committee Report: Ought to Pass with Amendment #2019-2030h for 06/05/2019 (Vote 17-4; RC) HC 27 P. 16
5/22/2019	H	Minority Committee Report: Inexpedient to Legislate
6/5/2019	H	Amendment #2019-2030h : AA VV 06/05/2019 HJ 17 P. 69
6/5/2019	H	Ought to Pass with Amendment 2019-2030h: MA DV 223-125 06/05/2019 HJ 17 P. 69
6/13/2019	S	Sen. Carson Moved to Concur with the House Amendment, MA, VV; 06/13/2019; SJ 20
6/28/2019	H	Enrolled 06/27/2019 HJ 20 P. 53
6/28/2019	S	Enrolled (In recess 06/27/2019); SJ 21
7/16/2019	S	Signed by the Governor on 07/12/2019; Chapter 234
7/16/2019	S	I. Section 2 Effective 11/01/2020
7/16/2019	S	II. Remainder Effective 07/12/2019

Other Referrals

Senate Inventory Checklist for Archives

Bill Number: SB 115

Senate Committee: E, D + A

Please include all documents in the order listed below and indicate the documents which have been included with an "X" beside

Final docket found on Bill Status

Bill Hearing Documents: {Legislative Aides}

Bill version as it came to the committee

All Calendar Notices

Hearing Sign-up sheet(s)

Prepared testimony, presentations, & other submissions handed in at the public hearing

Hearing Report

Revised/Amended Fiscal Notes provided by the Senate Clerk's Office

Committee Action Documents: {Legislative Aides}

All amendments considered in committee (including those not adopted):

- amendment # 0205 - amendment # _____

- amendment # _____ - amendment # _____

Executive Session Sheet

Committee Report

Floor Action Documents: {Clerk's Office}

All floor amendments considered by the body during session (only if they are offered to the senate):

- amendment # _____ - amendment # _____

- amendment # _____ - amendment # _____

Post Floor Action: (if applicable) {Clerk's Office}

Committee of Conference Report (if signed off by all members. Include any new language proposed by the committee of conference):

Enrolled Bill Amendment(s)

Governor's Veto Message

All available versions of the bill: {Clerk's Office}

as amended by the senate as amended by the house

final version

Completed Committee Report File Delivered to the Senate Clerk's Office By:

Committee Aide

Date

Senate Clerk's Office JM