# LEGISLATIVE COMMITTEE MINUTES

# **SB157**

# Bill as Introduced

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## SB 157-FN-A - AS INTRODUCED

### 2021 SESSION

### 21-0914 05/04

# SENATE BILL 157-FN-A

- AN ACT relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.
- SPONSORS: Sen. Whitley, Dist 15; Sen. Bradley, Dist 3; Sen. Rosenwald, Dist 13; Sen. Carson, Dist 14; Sen. Sherman, Dist 24; Rep. Wallner, Merr. 10; Rep. Cornell, Hills. 18; Rep. Mullen, Hills. 7; Rep. Long, Hills. 10

COMMITTEE: Health and Human Services

### ANALYSIS

### This bill:

I. Extends a prior appropriation to the department of health and human services for child welfare behavioral health services.

II. Requires that the New Hampshire 10-year mental health plan include a report on implementation of 2019, 44 (SB 14), relative to child welfare.

III. Establishes positions in the department of health and human services contracts and procurement unit and makes an appropriation for this purpose.

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removed from current law appears [in brackets and struckthrough-]Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

### SB 157-FN-A - AS INTRODUCED

## STATE OF NEW HAMPSHIRE

### In the Year of Our Lord Two Thousand Twenty One

AN ACT relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

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

Appropriation to the Department of Health and Human Services for Child Welfare Behavioral
 Health Services. Lapse Extension. Amend 2019, 346:347 to read as follows:

3 346:347 Appropriation; Department of Health and Human Services; Child Welfare Behavioral 4 Health Services. The sum of \$6,084,000 for the fiscal year ending June 30, 2020, and the sum of 5 \$13,164,000 for the fiscal year ending June 30, 2021, are hereby appropriated to the department of 6 health and human services for the purposes of sections 330-346 of this act. The \$13,164,000 7 appropriation for fiscal year 2021 shall not lapse until June 30, 2022. Notwithstanding RSA 8 14:30-a, VI, the department may accept and expend any federal fund match to the appropriation in 9 this section without prior approval of this fiscal committee of the general court. The governor is 10 authorized to draw a warrant for said sums out of any money in the treasury not otherwise 11 appropriated.

12 2 Annual Report on State Mental Health Plan; Child Welfare Component. Amend RSA 126-A:5,
13 XXXIII to read as follows:

XXXIII.(a) On or before September 1, 2019, the commissioner shall submit a report on the 14 15 New Hampshire 10-year mental health plan of 2018 containing the priorities for implementation of 16the plan to the oversight committee on health and human services, established under RSA 126-A:13, 17the chairpersons of the house and senate policy committees with jurisdiction over health and human 18 services matters, the president of the senate, the speaker of the house of representatives, and the 19 governor. The commissioner shall submit a report on or before September 1, 2020 and annually  $\mathbf{20}$ thereafter on the status of the implementation of the 10-year mental health plan including, but not  $\mathbf{21}$ limited to, unmet benchmarks and recommendations for any necessary barrier resolution or  $\mathbf{22}$ necessary adjustments or modifications to the plan to better serve New Hampshire citizens, to the 23oversight committee on health and human services and the chairpersons of the house and senate policy committees with jurisdiction over health and human services matters. The annual report 24shall include any recommendations by the commissioner for legislation as needed or appropriate in 25 $\mathbf{26}$ achieving important benchmarks in fully implementing the 10-year mental health plan.

(b) As part of the annual report required by this paragraph, the commissioner
of the department of health and human services, in conjunction with the commissioner of
the department of education, shall issue a joint report on the implementation of 2019, 44

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1 (SB 14), relative to child welfare. This portion of the report shall address in detail the 2 implementation status of each section of 2019, 44 (SB 14) and include all information 3 related to progress toward full implementation of a system of care under RSA 135-F. The 4 report shall also address the following:

5 6

15

(1) The total cost of children's behavioral health services.

6 (2) The identification of barriers and service gaps in the array of children's 7 behavioral health services, along with a description of efforts and plans to fill those gaps.

8 (3) The availability of mobile crisis and stabilization services in each part of 9 the state and plans to fill any gaps.

10 (4) Changes to statutes, administrative rules, policies, practices, and 11 managed care and provider contracts which will be necessary to fully implement the 12 system of care.

13 (5) Shortfalls in workforce sufficiency affecting full implementation of the
 14 system of care as well as efforts and plans for addressing those shortfalls.

(6) Numbers of children and youth awaiting services in various categories.

(7) Plans to coordinate the system of care with existing efforts addressing
 early childhood interventions, primary prevention, and primary care integration.

18 (8) Plans to develop and/or coordinate a cross-system assessment tool and 19 data collection system to measure outcomes, including but not limited to status upon exit 20 from the system of care, measured treatment results, recidivism, and other returns to the 21 service system.

3 Repeal. RSA 135-F:6, relative to reporting requirements on the system of care for children's
mental health, is repealed.

4 System of Care for Children's Mental Health; Duties of the Commissioner of Health and Human Services; Reference Change. Amend the introductory paragraph of RSA 135-F:4, II to read as follows:

II. Develop a plan for full establishment and maintenance of a system of care. Such plan shall be reviewed and amended annually. It shall include sufficient detail to allow compliance with the reporting requirements of RSA [135-F:6] 126-A:5, XXXIII, and shall address at least the following elements:

5 System of Care for Children's Mental Health; Duties of the Commissioner of the Department of Education; Reference Change. Amend the introductory paragraph of RSA 135-F:5, II to read as follows:

II. Develop a plan for full support and participation of the department of education in the establishment and maintenance of a system of care. Such plan shall be reviewed and amended annually. It shall include sufficient detail to allow compliance with the reporting requirements of RSA [135 F:6] 126-A:5, XXXIII, and shall address at least the following elements:

## SB 157-FN-A - AS INTRODUCED - Page 3 -

1 6 Department of Health and Human Services; Contracts and Procurement Unit; Positions 2 Established. There are hereby established within the department of health and human services for 3 the biennium ending June 30, 2023, 8 full-time, classified positions in the office of business 4 operations, contracts and procurement unit.

5 7 Appropriation; Department of Health and Human Services; Contracts and Procurement Unit. 6 The sum of \$644,260 for the fiscal year ending June 30, 2022, and the sum of \$810,607 for the fiscal 7 year ending June 30, 2023, are hereby appropriated to the department of health and human services 8 for the purpose of funding positions in the office of business operations, contracts and procurement 9 unit. The governor is authorized to draw a warrant for said sums out of any money in the treasury 10 not otherwise appropriated.

11 8 Effective Date. This act shall take effect June 30, 2021.

LBA 21-0914 2/5/21

# SB 157-FN-A- FISCAL NOTE AS INTRODUCED

AN ACT relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

FISCAL IMPACT: [X] State [] County [] Local	[ ] None
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	Estimated Increase / (Decrease)			
STATE:	FY 2021	FY 2022	FY 2023	FY 2024
Appropriation	\$0	\$644,260	\$810,607	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	Indeterminable	Indeterminable Increase	\$810,607	\$840,899
Funding Source:	[X] General	[ ] Education 🦷 [	] Highway [	) Other ,

# **METHODOLOGY:**

Section one of this bill amends Chapter 346:347, Laws of 2019, by extending until June 30, 2022 the \$13,164,000 appropriation to the Department of Health and Human Services for the purposes of funding children's behavioral health programming. This appropriation was originally written to lapse on June 30, 2021, at the end of the FY 2020/21 biennium. Although the amount appropriated to the Department will not change as a result of the bill, the extension of the lapse date will likely result in a lower FY 2021 lapse figure than would otherwise be the case. In turn, the Department's FY 2022 expenditures will be higher than would otherwise be the case. For these reasons, the fiscal impact of this provision is labeled indeterminable in the table above.

Section two of the bill amends RSA 126-A:5, which requires the Department to provide an annual report on the progress of the 10-year mental health plan. The amended language requires the Department to include in that report any progress made towards the goals and requirements of Chapter 44, Laws of 2019 (SB 14). The Department does not expect this section to have a fiscal impact.

Finally, section three of the bill contains an appropriation of \$644,260 in FY 2022 and \$810,607 in FY 2023 for the purpose of funding positions in the office of business operations, contracts and procurement unit. These numbers reflect the following eight positions, with start dates of October 1, 2021:

- One Administrator I (Labor Grade 27)
- One Business Administrator II (Labor Grade 24)
- Two Attorney IIs (Labor Grade 28)
- Four Program Specialist IVs (Labor Grade 25)

The Department assumes all positions will start at step five of the salary schedule. Costs for the positions are expected to be \$840,899 in FY 2024.

# AGENCIES CONTACTED:

Department of Health and Human Services

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03/04/2021 0451s

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21-0914 05/04

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28 (b) As part of the annual report required by this paragraph, the commissioner 29 of the department of health and human services, in conjunction with the commissioner of

# SB 157-FN-A - AS AMENDED BY THE SENATE - Page 2 -

the department of education, shall issue a joint report on the implementation of 2019, 44 1 (SB 14), relative to child welfare. This portion of the report shall address in detail the 2 3 implementation status of each section of 2019, 44 (SB 14) and include all information related to progress toward full implementation of a system of care under RSA 135-F. The 4 5 report shall also address the following:

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 $\mathbf{24}$ mental health, is repealed.

4 System of Care for Children's Mental Health; Duties of the Commissioner of Health and 2526 Human Services; Reference Change. Amend the introductory paragraph of RSA 135-F:4, II to read as follows: 27

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II. Develop a plan for full establishment and maintenance of a system of care. Such plan shall be reviewed and amended annually. It shall include sufficient detail to allow compliance with 29 the reporting requirements of RSA [135 F:6] 126-A:5, XXXIII, and shall address at least the 30 31following elements:

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35 II. Develop a plan for full support and participation of the department of education in the 36 establishment and maintenance of a system of care. Such plan shall be reviewed and amended

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SB 157-FN-A - AS AMENDED BY THE SENATE

03/04/2021 0451s

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### 2021 SESSION

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OTP/A 4-0

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# AGENCIES CONTACTED:

Department of Health and Human Services

# Amendments

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Sen. Whitley, Dist 15 February 17, 2021 2021-0421s 05/04

## Amendment to SB 157-FN-A

1 Amend RSA 126-A:5, XXXIII(a) as inserted by section 2 of the bill by replacing it with the following:

2

3 XXXIII.(a) On or before September 1, 2019, the commissioner shall submit a report on the 4 New Hampshire 10-year mental health plan of 2018 containing the priorities for implementation of the plan to the oversight committee on health and human services, established under RSA 126-A:13, 5 6 the chairpersons of the house and senate policy committees with jurisdiction over health and human services matters, the president of the senate, the speaker of the house of representatives, [and] the 7 governor, and the office of the child advocate established in RSA 21-V. The commissioner 8 shall submit a report on or before September 1, 2020 and annually thereafter on the status of the 9 implementation of the 10-year mental health plan including but not limited to, unmet benchmarks 10 and recommendations for any necessary barrier resolution or necessary adjustments or modifications 11 to the plan to better serve New Hampshire citizens, to the oversight committee on health and human 12 13 services and the chairpersons of the house and senate policy committees with jurisdiction over 14 health and human services matters. The annual report shall include any recommendations by the commissioner for legislation as needed of appropriate in achieving important benchmarks in fully 15 16 implementing the 10-year mental health plan.

Health and Human Services February 18, 2021 2021-0451s 05/04

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# Committee Minutes

# SENATE CALENDAR NOTICE Health and Human Services

Sen Jeb Bradley, Chair Sen James Gray, Vice Chair Sen Kevin Avard, Member Sen Tom Sherman, Member Sen Rebecca Whitley, Member

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Date: February 10, 2021

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# HEARINGS

Wednesday		02/17/202	21	
	(Day)	(Date)		
Health an	d Human Services	REMOTE 000	8:30 a.m.	
(Name of Committee)		(Place)	(Time)	
8:30 a.m.	SB 152-FN-A	relative to affordable housing program funding.		
8:45 a.m.	SB 140-FN-A	adopting omnibus legislation making appropriations to the department of health and human services.		
9:00 a.m.	SB 157-FN-A	relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.		
9:15 a.m.	SB 162-FN	relative to the department of health and humar Hampshire granite advantage health care trust facility licensure.		
9:30 a.m.	SB 150-FN	establishing a dental benefit under the state M	edicaid program.	

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## EXECUTIVE SESSION MAY FOLLOW

Sponsors: SB 152-FN-A Sen. Gray SB 140-FN-A Sen. Rosenwald SB 157-FN-A Sen. Whitley Sen. Sherman Rep. Long **SB 162-FN** Sen. Bradley **SB 150-FN** Sen. Rosenwald Sen. D'Allesandro Sen. Soucy Rep. Nordgren

Sen. Bradley Rep. Wallner Sen. Rosenwald Rep. Cornell Sen. Carson Rep. Mullen

Sen. Whitley Sen. Kahn Sen. Perkins Kwoka Rep. Wallner Sen. Watters Sen. Sherman Sen. Bradley Rep. Marsh Sen. Cavanaugh Sen. Prentiss Sen. Giuda Rep. Langley

Kirsten Koch 271-3266

<u>Jeb Bradley</u> Chairman

# Senate Health and Human Services Committee

Kirsten Koch 271-3266

SB 157-FN-A, relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

Hearing Date:February 17, 2021Time Opened:10:16 a.m.Time Closed:11:30 a.m.

Members of the Committee Present: Senators Bradley, Gray, Avard, Sherman and Whitley

Members of the Committee Absent : None

**Bill Analysis**: This bill:

I. Extends a prior appropriation to the department of health and human services for child welfare behavioral health services.

II. Requires that the New Hampshire 10-year mental health plan include a report on implementation of 2019, 44 (SB 14), relative to child welfare.

III. Establishes positions in the department of health and human services contracts and procurement unit and makes an appropriation for this purpose.

# Sponsors:

Sen. Whitley Sen. Carson Rep. Cornell Sen. Bradley Sen. Sherman Rep. Mullen Sen. Rosenwald Rep. Wallner Rep. Long

Who supports the bill: There are 144 names signed in support of this bill. To view the sign in sheet, please contact the Legislative Aide for the Senate Health and Human Services Committee, Kirsten Koch, at <u>kirsten.koch@leg.state.nh.us</u>

Who opposes the bill: None.

Who is neutral on the bill: None.

Summary of testimony presented in support:

# Senator Whitley, District 15

- This bill is related to children's mental health.
- This past weekend over 50 children were in mental health crisis
- Even one child waiting in the ER for care is too many

- This bill compliments SB 14, relating mobile crisis. This bill is necessary because SB 14 reforms were delayed.
- Families are desperate to receive the right care at the right time
- This bill:
  - (1) Extends prior appropriation to DHHS for implementing the bill and getting up mobile crisis. DHHS needs to get us up to speed.
  - (2) Removes reporting that lives in 135(f) system of care law and aligns the 10-year mental health care, which for the first time, includes children. This is a streamlining effort to help the Legislature keep track.
  - (3) Establishes positions in the contracts and procurement unit. The department says many reforms are held up in this unit. They are working very hard and we know it takes time. We want to make sure the money from the Legislature is implemented.
- This is a crisis. The ER is not a place to treat the mental health of children.

# Ken Norton, NAMI

- Mr. Norton began by noting, for transparency reasons, that NAMI does receiving funding from DHHS to provide care.
- Mr. Norton said, NAMI believes emergency boarding for behavioral crisis. In 2013, there were 1-2 children waiting for beds; now there is 50+ children waiting.
- Since the pandemic started, the numbers have gone up as the year went on. Many of these youth have been assessed to be a danger to themselves and others. Suicide is the second leading cause of death for ages 10-34.
- Mr. Norton said, it seems we lack the political will to do what is necessary in a lifethreatening situation. We really have not heard the plan or timelines.
- The pandemic put a serious strain the resources of DHHS. The COVID relief package passed by Congress provides significant funding supports. The DHHS needs to move contracts through in a timely manner.
- There will be federal legislation coming that will create the hotline number for mental health crisis. This gives us 16 months to move forward with a mental health crisis number.
- Mr. Norton said, we support the reporting requirements change proposed by SB 157.

# Shawna D'Amour, Hooksett, NH

• Ms. D'Amour shared an anecdote about being a public-school teacher and the challenges of being a mother with a child with mental health issues and how she received help from state services. Ms. D'Amour expressed support for the Fast Forward Program, NAMI, and Trauma ACE.

# **Omar Shah, NH Psychiatric Society**

- Mr. Shah testified to share the ideas in the written testimony of his colleague, Dr. Patrick Ho, because Dr. Ho had to leave the hearing to attend to other duties prior to the time he could testify.
- Mr. Shah said, in his own opinion, beds are an important safe haven for patients during the time before services can be offered.

# Cheryl Avery, New Futures

- Ms. Avery said, New Futures has strong support for this bill
- Ms. Avery said there is a need to add staff to the contracts department and this bills should be implemented immediately.

# Moira O'Neill, NH Office of the Child Advocate

- Ms. O'Neill said, the NH Office of the Child Advocate supports this bill.
- Ms. O'Neill requested an amendment to the bill on Page 1, Line 19, to add, after "Governor," the "NH Office of Child Advocate."
  - Ms. O'Niell said, we have a process already to receive these reports.
  - Senator Whitley offered to handle that amendment.
- Ms. O'Neill said, we are struggling to understand why residential care has been prioritized over community care. Mobile crisis care would prevent the need for residential care.
- Individuals in crisis need protection and are not necessarily having a mental health crisis, or families are just tired of caring for them. There are complex needs of children, issues of children not being supported at home, but also negative impacts of trauma for children not being in their home.
- There has been an up tick in suicidal behavior in children. Seven children in care by the state demonstrated suicidal behavior.
- Senator Whitley asked, have you been able to have oversight over all children's services? Have you been able to access the diverse needs of these children? Can you access information as to why children are ending up in the ER?
  - Ms. O'Neill said, we need to truly understand the needs before we build new services. Our authority expanded but we have had had trouble getting a great deal of information from DHHS. We have tried to meet. We have not been invited. We finally got a list of the leadership, but not much information has been exchanged. We have a good relationship with the Fast Forward program.
- Senator Sherman asked, is there an entity that has knowledge of the children actively in emergency rooms? Actively doing casework and knowing what their needs are?
  - Ms. O'Neill, we would want that. Care Management Entities (CMEs) would manage that. We could have the authority to look at those children and create profiles for them. I cannot really answer that.

# Karen Cusano, NFI North

- Ms. Cusano said NFI North does care management.
- Ms. Cusano said, we can get certified for our services by our state. This is a guarantee in type-of-staff, training, oversights, and audits. Then we take the responsibility of hiring staff and credentialing for the service. This would be more tailored to the need.
- As for private insurance, individual providers must get credentialed. This is where the problem is for us.
- We are trying to get staff to go to patient homes to provide mental health treatment, but we do not have a psychiatrist, and we do not need clinician. We have care coordination, but the requirement of a psychiatrist prevents a private insurance provider from engaging with us and prevents us from engaging in a home care services.

# Summary of testimony presented in opposition: None.

# **Neutral Information Presented:**

# Erica Ungarelli, Children's Behavioral Health, DHHS

- Ms. Ungarelli said she can give a progress update.
- Ms. U. said, SB 14 has a lot of different requirements and components, all critical to the system transformation.
- Ms. U. said, first, we worked on appropriations for additional staff. We moved forward with that, we hired all but one position for the bureau. We went from 4 to 9 staff, on boarded at the time of the pandemic. We have 1 outstanding position that we are posting and hiring for.
- Ms. U. said, next, the care management entity, we had one provider fulfilling that roll. Fast forward, SB 14 had expanded their provision to take on more of a role of oversight to transitions back to home and community. We now have two expanded programs for kids. Almost over 300 children are enrolled in Fast Forward now.
- Ms. U. said, we are going through residential transformation. This is relative to SB 14 and federal piece of legislation on the use of residential treatment and child welfare. There are critical components between child welfare reform and behavioral health.
- Ms. U. said, there are several components for residential treatment:
  - Using a standardized tool to assess children's needs and to track progress across the system. This is an item in SB 14 called the Adolescent and Child's Strength Tool. Since last January, my staff has trained over 100 additional providers. We are working with contractor on expanding the electronic platform for tracking outcomes across the system.
  - There will be a component for the Families First federal legislation to ensure that children who access residential treatment are there for treatment, versus placement, and we need an assessment done to make sure that medical necessity is there and what level of treatment is necessary for that child. We are working oncontracting with an entity to do that assessment and log that information into the system.
  - Our current system has two levels of care. We have revamped that in 2019 into five different levels of care with distinct requirements for each level. This is more tailored to the unique needs of the children in care. We have an RFP posted so providers can respond.
  - We are adding something NH has never had, a Psychiatric Residential Treatment Facility (PRTF). We had a procurement out that has closed and we are in the process of awarding that contract. This could be an option apart from hospital needs, or as a step down from the hospital treatment for kids. This can help the issue.
- The statewide mobile crisis is on our mind. We are actively working to get this going. We want folks to know who to call when they, or family member, is in a behavioral crisis. We are working to award that contract. We are also working on the regional response.

- When someone calls the mobile crisis hot line number, and it is determined that individual needs face to face intervention, we are working with community partners on that response. We are looking to address this now, in addition to the roll out of mobile crisis.
- We are also working on an evidence-based practice and training, as required by SB 14. We want an entity to help our provider network and department sustain practices, assess where we may need to new practices, resolve any issues, and analyze on a semi-annual, or annual, basis on where we need to go next.
- Ms. U. said, we are looping in prevention items for first-episode psychosis and infant mental health plan is a part of the budget, but not a part of SB 14.
- Senator Sherman asked, how much of the original appropriation has already lapsed from SB 14 in that first year? Has that impacted your ability to fully implement the provisions of this bill?
  - Ms. U. said, nothing has prohibited us from moving forward, other than the issues Senator Whitley raised surrounding the pandemic and the capacity of the department. I will have to ask about the first year lapse, but that was not an issue that caused slow down.
- Senator Sherman said, my understanding for RFP only involves the call center. Are we standing up the mobile crisis, for adult and pediatric? What is the time line to get interventions helping in a real way?
  - Ms. U. said, we are working on that currently with our community mental health partners on an integrated statewide response. We are working closely with providers on what can be done today.
- Senator Sherman said, are you planning to expand this and include commercial carriers with provisions to bill for these services so that this is not just be for people with Medicaid.
  - Ms. U. said, this system should be open and accessible to those who need it. We have the most control over the Medicaid population, but in all our procurements, you will see language around under-insured, or uninsured, to cover kids that may not have coverage for the services we are seeking to provide. This goes for the mobile crisis for adults, new crisis system, and anybody who requires that intervention. SB 70, that is being worked on, really helps the carriers get involved in the new crisis transformation services statewide.
- Senator Sherman asked, the community mental health centers will be staffing teams and the money that will be advocated? Do we have the support of the CMHC's approval? When will this be in operation?
  - Ms. U. said, we are hoping in the next few months. We want to adequately fund what they are doing. The CMHCs have actuarial questions. We want to look at the reimbursement rates of Medicaid. There is a mix of general fund dollars to make sure folks are covered whatever their status may be and to make sure reimbursement rates fully finance the folks they are billing.
- Senator Bradley said, it sounds that you do not need to go through a second procurement.
   Ms. U. said, that is correct.
- Senator Whitely asked, could you walk us through how the pandemic did delay these things? And whether you got any direction to hold off?
  - Ms. U. said, Nathan White can help with that. We were hiring and training folks.
     Once the pandemic hit, we were on boarding staff and shifting our work to remote

and working with providers. After the state of emergency, we were working to stand up services and push out projects on how to do this. We received guidance from CMS.

# Nathan White, Director, Contracts Unit, DHHS

- Mr. White testified on Part III of this bill.
- After the pandemic hit during the 2<sup>nd</sup> week of March, many procurements in process were put on hold because of the uncertainties. Since then, the workload has double compared to 2018. DHHS staff has seen a significant increase. They are working overtime, weekends, and without taking vacation time. The impact of pandemic has been significant. Pandemic projects have taken priority, including projects such as an operation center, vaccine sites, etc. There is a delicate balance between finding the appropriate time to devote to on-going projects, many of which are complex.
- Senator Whitley asked, my understanding is a lot of these projects were ready to go. Why were they delayed?
  - Mr. White said, our contracts team services the entire department. Other procurements were put on hold too.
- Senator Bradley suggested this conversation was off topic from the bill.
- Senator Whitley said she disagrees because SB 14 had a number of RFPs associated with it. The Families First prevention act builds up community-based care, not residential. I am curious about the prioritization of that. Is there an analysis of how many kids need this level of care?

# Erica Ungarelli joined in to answer questions.

- Ms. U. said, we need about 30 beds for that level of care. I do agree with your assessment with community-based care first, and so did DCYF.
- Senator Whitley said, based on other states systems of care, should we be building up community services and standing up mobile crisis first?
  - Ms. U. said, we have been using residential treatment very different in NH. We try to get patients back to community care as soon as possible. We are recognizing the need for community-based care. There is a need for residential care for the numbers we are seeing in the ER and children with intense needs that are being sent out of state for care. Our New England Partners are looking for a PRTF levels of care too.
- Senator Whitley asked, has there been an analysis of who these children are that are ending up in ER beds in crisis?
  - Ms. U. said, we are seeing a lot of first-time children and there is a system norm for children in crisis are going to Emergency Departments. Those children to have options, but I am not sure they are aware of those options, such as working with our community mental health centers.
- Senator Bradley asked, could you give us a thumbnail on standing up Hampstead the 12 additional beds?
  - Ms. U. said, the information I received is that the one staff person is out on medical leave and therefore they cannot staff the complete number of 48 beds. I do not understand your questions.
- Senator Bradley said, there was a hope for 12 additional beds there.

 $\circ~$  Ms. U. said, from what I heard yesterday there is a deficit of 8 beds because of that staffer being out.

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KNK Date Hearing Report completed: February 25, 2021

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# SENATE CALENDAR NOTICE Finance

Sen Gary Daniels, Chair Sen John Reagan, Vice Chair Sen Bob Giuda, Member Sen Erin Hennessey, Member Sen Chuck Morse, Member Sen Lou D'Allesandro, Member Sen Cindy Rosenwald, Member

Date: March 17, 2021

# EXECUTIVE SESSION

Tuesday	03/23/202	03/23/2021		
(Day)	(Date)			
Finance	REMOTE 000	1:00 p.m.		
(Name of Committee)	(Place)	(Time)		

1:00 p.m. EXECUTIVE SESSION ON PENDING LEGISLATION

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715-8592, or 1-312-626-6799, or 1-929-205-6099, or 1-253-215-8782, or 1-346-248-7799,

or 1-669-900-6833

3. Or iPhone one-tap: 13017158592, 98219364180# or 13126266799, 98219364180#

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Deb Martone 271-4980

<u>Gary L. Daniels</u> Chairman Speakers

Name	Title	Representing	Position	Testifing
Norton Kenneth	A Lobbyist	NAMI NH The National Alliance On Mental Illness	Support	Yes
Whitley Becky	An Elected Official	Senate District 15	Support	Yes
D'Amour Shawna	A Member of the Public	Myself	Support	Yes
Ho Patrick	A Member of the Public	New Hampshire Psychiatric Society	Support	Yes
O'Neill Moira	State Agency Staff	NH Office of the Child Advocate	Support	Yes
Ungarelli Erica	State Agency Staff	DHHS	Support	Yes
White Nathan	State Agency Staff	DHHS	Support	Yes
Shah Omar	A Member of the Public	Myself	Support	Yes
Mott-Smith Wiltrud	A Member of the Public	Myself	Support	No
Cannon Brenda	A Member of the Public	Myself	Support	No
Carson Sharon	An Elected Official	Senate District 14	Support	No
Sherman Senator Tom	An Elected Official	SD 24	Support	No
Costello Amy	A Member of the Public	Myself	Support	No
Casino Joanne	A Member of the Public	Myself	Support	No
Abruzzese Cathleen	A Member of the Public	Myself.	Support	No
Chase Wendy	An Elected Official	Myself	Support	No
Johnson Sara	A Member of the Public	Myself	Support	No
Rardin Laurie	A Member of the Public	Myself	Support	No
Toll Amanda	An Elected Official	Myself	Support	No
Heslin Mary	A Member of the Public	Myself	Support	No
Bushueff Catherine	A Member of the Public	Myself	Support	No
Dick Benjamin	A Member of the Public	Myself	Support	No
Berrien Skip	A Member of the Public	Myself	Support	No
Fedorchak Gaye	A Member of the Public	Myself	Support	No
Dunn Bob	A Lobbyist	Roman Catholic Bishop of Manchester	Support	No
Brennan Nancy	A Member of the Public	Myself	Support	No
, Mayne Kenneth	A Member of the Public	Myself	Support	No
, Heath Ruth	A Member of the Public	Myself	Support	No
Cook Richard	A Member of the Public	Myself	Support	No
Whittington Jeanne	A Member of the Public	Myself	Support	No
Schissel Mary	A Member of the Public	Myself	Support	No
Lawrence Emily	A Member of the Public	Emily Lawrence	Support	No
Schnell Robin	A Member of the Public	Myself	Support	No
Beaudoin Jennifer	A Member of the Public	Myself	Support	No
Clark Denise	A Member of the Public	Myself	Support	No
Avery Cheryl	A Lobbyist	New Futures - Children's Behavioral Health	Support	No
St. Germain Diane	A Member of the Public	Myself	Support	No
Blake Karen	A Member of the Public	Myself	Support	No
Havden Sam	A Member of the Public	Myself	Support	No
Platt Elizabeth-Anne	A Member of the Public	Myself	Support	No
Paquette Ashley	A Member of the Public	Myself	Support	No
Angulas Bonnie	A Member of the Public	Myself	Support	No
Foerster Elise	A Member of the Public	Myself	Support	No
Zaenglein Barbara	A Member of the Public	Myself	Support	No
Zaenglein Eric	A Member of the Public	Myself	Support	No
Fowler Traci	A Member of the Public	Myself	Support	No
Pospychala Erin	A Member of the Public	Myself	Support	No
Lindpaintner Lyn	A Member of the Public	Myself	Support	No
Joyal Ali	A Member of the Public	Myself		
Willing Maura	A Member of the Public	Myself	Support	No
Blanchard Sandra	A Member of the Public		Support	No
		Myself Muself	Support	No
Burns Scott	A Member of the Public	Myself Myself	Support	No
Moe Carmeiita	A Member of the Public	Myself	Support	No
Gruette Cathy	A Member of the Public	Myself	Support	No
Gordon Laurie	A Member of the Public	Myself	Support	No
	a Kéomahan aétha Dublia	Myself	Support	No
Green Debra	A Member of the Public		••	
Green Debra Hoffmann Lauren Minnehan Paula	A Member of the Public A Member of the Public A Lobbyist	Myself NH Hospital Association	Support Support	No No

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Koch Laurie **DeMark Richard Richman Susan** Koch Helmut **Benton Emily Cornell Patricia Bates** David Littlefield Shannon Fenner-Lukaitis Elizabeth Fordey Nicole Falk Cheri **Guggisberg Karen Zboya Patrice** MacLean Meghan Wells Lee Wallner Rep Mary Jane **Gibbons** Cheryl Thompson Laura Matthews James Perencevich Ruth Nossiff Virginia Ingram April Damon Claudia Clark Lynn Garen June Untiet Kelly Garland Ann Podlipny Ann Ellermann Maureen Straiton Marie **Dewey Karen Hinebauch Mel** Corell Elizabeth Larson Ruth Hackmann Kent Bruce Susan Anderson Kervn Destefano Kim Folsom Andrea Freeman-Woolpert Julia **Rettew Annie** McCue Dara Nardino Marie Taylor Gale Matthews Marjorie Jones Anna Lincoln Mary jakubowski dennis Silverberg Judith Jak Deborah Brickett Jane Hope Lucinda **Covert Susan Neville Betsey** blakeney gordon Mattlage Linda Jones Jennifer Mitchell Karen **Emerson** Patti

A Member of the Public Myself Myself An Elected Official A Member of the Public Myself An Elected Official Myself A Member of the Public **Mvself** A Member of the Public Myself Myself A Member of the Public A Member of the Public Myself A Member of the Public Mvself A Member of the Public **Mvself** A Member of the Public Myself Support No No Support Support No No Support Support No Support No

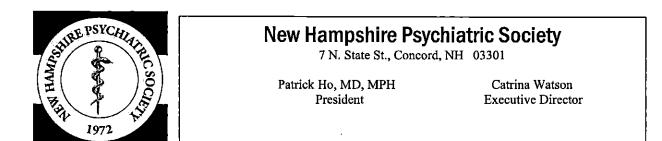
Carter Lilian Minton Faith McLaughlin Barbara Spencer Rob Woods Renia Mooney Bridget Reed Barbara Shields Lara Cahill kathy Cusano Karen Ciolfi Monica Spielman Kathy Spielman James Brassard Louise **Rosenwald Cindy** King Stefanie Hayes Randy **Raspiller** Cindy **Brown Howard Brown William Brown Morgan** Martin Joelle Jones Andrew **Keeler** Margaret Walsh Conor Chase Susan **Glenn Quinney** 

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A Member of the Public Myself A Member of the Public. Myself A Member of the Public Myself An Elected Official SD 13 A Member of the Public Myself A Member of the Public Myself

Support No Support No

## Testimony



To: NH Senate Health and Human Services Committee

From: Patrick Ho, MD, MPH, President, New Hampshire Psychiatric Society

Re: SB 157-FN - relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

Date: January 28, 2021

On behalf of the New Hampshire Psychiatric Society and our members, I would like to submit this letter in support of 157-FN. As a psychiatrist, I care for adults and children with both longstanding and acute mental health needs. Recently, we have seen a marked increase in children waiting for inpatient psychiatric hospitalization in our state. Within the past week, the number of children has eclipsed 50, with many children waiting days to weeks for hospitalization. For the children of our state and those who care about them, this is absolutely unconscionable.

While certainly the COVID-19 pandemic has played a large role in increasing mental health need while making access even more difficult, the problem of children waiting in hospital emergency departments awaiting psychiatric hospitalization is not new and was still a major issue prior to the pandemic. This issue has been a longstanding concern because frankly, our state lacks the alternatives to psychiatric hospitalization that exist in other states—we lack the infrastructure to keep our children out of hospitals. We lack intensive outpatient programs, in-home services, or mental health respite beds necessary to provide mental health care for our children outside of an inpatient setting.

Because of our lack of infrastructure, children have had to wait in hospital emergency departments for inpatient psychiatric beds. This can be a frightening and uncomfortable environment for children to wait in, often for days or weeks while not receiving needed mental health care. It is certainly true that hospitals moving these children to other settings (such as pediatric inpatient units) might provide a more comfortable environment in which children can wait, but this does not ensure optimal (or any) mental health care while these children wait. Shuffling children to other parts of the hospital without instituting more mental health care services has not proven to be an adequate solution. Furthermore it is important to be more precise with the mental health resources we prioritize. Adding hospital beds for children has proven to be expensive, while only providing a temporary decrease in the wait-list of children waiting for hospital beds.

COVID-19 has shown us that any stressor to our state's already under-resourced and overwhelmed mental health system might represent a breaking point. It is now more evident than ever that we need to fund and prioritize outpatient mental health care and crisis services for children. I urge you all to vote yes on this bill and welcome any questions about this issue at <u>Patrick.a.ho@hitchcock.org</u>. Thank you for your consideration.

Thank you, Patrick Ho, MD, MPH President, New Hampshire Psychiatric Society

#### **Kirsten Koch**

From:Andrea Folsom <aahfolsom@gmail.com>Sent:Monday, February 15, 2021 1:35 PMTo:James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Kirsten KochSubject:Please Support SB 157

Dear Senators,

Children's mental health remains of heightened concern in New Hampshire, where death by suicide continues to be a leading cause of death for children and mental health services are lagging. To this end, I urge you to support SB157 relative to children's mental health services. Our children's lives depend on it.

Thank you for your service and time, Andrea Folsom, MSW

#### **Kirsten Koch**

From:Charlotte <arachnea@idiom.com>Sent:Tuesday, February 16, 2021 3:32 PMTo:Kirsten KochSubject:Mental Health Inpatient Beds for kids

Hello Ms. Koch,

One of my colleagues wrote to you about the state of available psychiatric beds in the State of New Hampshire and I wanted to add my voice to hers in advocating for the critical need for beds.

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Currently there are over 50 children holding for a psychiatric bed. The State Hospital has an average wait list of of between 30-40 adults. With ED boarding times of up to two-three weeks for some patients the situation is beyond desperate.

The Covid virus only complicates the situation as some individuals are waiting in ED's for so long that they are contracting the virus while boarding, which then either gets them another two weeks of boarding, or gets them sent home to quarantine without addressing their crisis. That is assuming that the virus itself doesn't become the crisis.

While boarding in the ED clients do not get psychiatric care beyond daily rounding. With lengthy waits their crisis moment can grow stale and when they do finally reach an admission their sense of treatment urgency can dissolve into apathy that "there is no help". Parents and providers are frustrated. ED medical providers and staff are stretched because every suicidal hold requires 1:1 safety monitoring and it places tremendous compression on already strapped Human Resources in hospitals.

I can't even begin to count the number of times I have been screamed at by a desperate family member when I have to explain the bed availability shortfall and what it means to their loved one getting care. This applies across all age groups, pediatrics, adults, and Gero psychiatric. I can't adequately articulate the feelings when a geriatric psych patient comes to the ED Covid negative, but contracts the virus while holding for a psychiatric bed.

No one who comes to the ED with medical trauma is subjected to this kind of delayed care. Cardiac patients don't wait four weeks in the ED to get to the cardiac floor for stabilization. Trauma of the mind and emotions must have the same level of urgency. Too many people turn away from their mental and emotional health feeling that it is the red headed stepchild of their overall wellness and that no one actually cares.

Thank you for any support that you can give to this issue for our State's vulnerable citizens.

Sincerely, Charlotte Johnson

Sent from my iPhone. Please excuse my inarticulate thumbs.

#### **Kirsten Koch**

From:	Michael J. Cohen <michael@mjchealthsolutions.com></michael@mjchealthsolutions.com>
Sent:	Monday, February 15, 2021 1:45 PM
То:	Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Kirsten Koch
Subject:	Support SB 157

Honorable Committee Members,

As the former Executive Director of NAMI NH and as someone who has worked with children and families with severe emotional disorders, has both supported the DHHS Mental Health 10 year plan and SB14; I strongly, encourage you support the appropriation as identified in SB 157. SB 157 will speed the process of implementing provisions in SB 14 passed in 2019, that have been delayed due to the pandemic, including expansion of mental health mobile crisis response. The work has been done to demonstrate the benefit of SB14 and if not for the pandemic we would be underway. Let's not waste any more time. Pass this appropriation so we can meet the treatment needs of children Wirth severe mental disorders and their families. Thank you. Sincerely,

Michael J. Cohen 4 Upper Flanders Rd Amherst NH 03031 604-496-1657 michael@mjchealthsolutions.com



Child Advocate

Moira O'Neill

State of New Hampshire

Office of the Child Advocate



Testimony of Moira O'Neill, PhD Child Advocate before The New Hampshire Senate Health and Human Services Committee February 17, 2021

Good morning Chair Bradley, Vice Chair Gray and esteemed members of the Health and Human Services Committee. My name is Moira O'Neill and I am the State's Child Advocate. The Office of the Child Advocate is an independent state oversight agency. Recently the Office's jurisdiction expanded by RSA 21-V, to all children's services provided or arranged for by the State, including mental health services. Thank you for the opportunity to speak to you today in support of **Senate Bill 157-FN-A, relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.** 

We support this bill and request one change, in section 2 Annual Report; we request at Page 1, line 19, after governor, insert *Office of the Child Advocate established under RSA 21-V*, as an additional recipient of the annual report. We have discovered in observation of other similar reporting that the Office of the Child Advocate is a consistent entity to receive, review and analyze reports. Including the Office should prove helpful to the legislative bodies.

We consider the passage of SB 14 in 2019 groundbreaking for New Hampshire. It established a robust set of services and supports. It positioned New Hampshire for compliance with the federal Family First Prevention Services Act. And it capitalized on the science that has made clear, children do better when they and their families receive support at home, in their own communities. However, since its passage, we have waited. We have championed the law to distressed parents letting them know services established by it were on the way and that traumatizing emergency department stays would be a thing of the past. It is heartbreaking that the waiting continues today. Now we hear there were 51 children waiting in emergency departments this past week. Providers are reporting to us that a good percentage of those children do not have history with mental health services. In fact, it appears their distress is COVID-19-related. We saw this coming. In May 2020, we urged the Governor's Office for Emergency Relief and Recovery to use federal Cares Act funds to boost the capacity of the Department's contracts office to roll out SB 14 services as an emergency response to the elevating mental health needs of children. Several subsequent and similar of our recommendations went unheeded until SB 157. We are grateful that someone has finally recognized the need for this infrastructural support so that we may help children in a timely manner.

Timeliness is critical because there is a "second pandemic"<sup>1</sup> on the rise involving children's mental health. The 51 children in the emergency departments is one symptom of the crisis. There is a steady

<sup>1</sup> Choi, KR, Heilemann, MV, Fauer, A, Mead, M, (April 27, 2020). A second pandemic: Mental health spillover from the Novel Coronavirus (COVID-19). *Journal of the American Psychiatric Nurses Association*.

https://doi.org/10.1177/1078390320919803, https://journals.sagepub.com/doi/10.1177/1078390320919803 Governor Hugh Gallen Office Park, Johnson Hall, 107 Pleasant Street, Concord New Hampshire 03301 (603) 271-7773/Toll Free (833) NHCHILD worsening of children's anxiety and depression<sup>2</sup>. We need an infrastructure of community-based supports and services to hold children and their families up and keep them safe.

To demonstrate the complexity of the situation that demands rapid roll out of the 2019 SB 14 system of care services, I offer a few cases of children's experience that have come to the attention of the Office of the Child Advocate within the past year.

- Last spring as families were first feeling the stress of remote learning and loss of employment, a child experienced an extended stay in the emergency department. The child had been home from school for several weeks. A parent described the child as dangerous to family members and self. The parents refused to bring the child home. Hospital personnel were furious with DCYF for not placing the child elsewhere. Upon reviewing the case, we discovered that the complaints about the child's behavior were actually many months old and under treatment. More recently, the child was experiencing emotional abuse by the parent's partner. This was not a simple case of a child needing acute psychiatric care. It was a case of a child needing a safe place to live, and a family needing support to address their own needs that led to the child's emotional abuse.
- Recently, through surveillance of critical incidents, the Office of the Child Advocate discovered seven children in a residential facility experiencing repeated suicide attempts. Six were hospitalized more than once. They are children in a place many would seek to send children from emergency departments for "placement." Their experience suggests unmet needs and inadequate supervision. The Office discovered that one child was distraught when told there was no foster home available. Another among them is distressed that the only person who has routinely visited in the past, a caseworker, is not able to visit in person due to COVID-19 social distancing. Those children want homes more than anything. They may have complex needs, but the science tells us they will do better in well-supported homes and communities with wrap around care.

The federal Family First Prevention Services Act is predicated on the science underscoring children simply do better at home and in their communities. SB 14 was in part intended to help New Hampshire come into compliance with the law by building the infrastructure to support children and strengthen families in ways that keeps them on track and out of emergency rooms or residential programs. The Office of the Child Advocate understands that while the Department has directed almost \$16 million to an integrated mobile crisis model for SFY 2021, over \$5.5 million lapsed in SFY 2020. The Department reports the lapse as pandemic-related; however, we view the lapse as a delay due to the lack of sufficient infrastructure to implement SB 14. It is essential all funds allocated for children reach their target. Senate Bill 157 protects those resources and creates capacity for the Department to operate efficiently. It also mandates accountability for spending and implementation.

The Office of the Child Advocate urges the Committee to pass SB 157-FN-A, relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

Thank you for hearing my testimony. I welcome questions if you have them.

<sup>&</sup>lt;sup>2</sup> Henderson, M.D., Schmus, C.J., McDonald, C.C. & Irving, S.Y., (2020). The COVID-19 pandemic and the impact on child mental health: A socio-ecological perspective. *Pediatric Nursing*, 46(6): 267-272.

### **Testimony Template**

Name: Shawna D'Amour	Date: February 17, 2021
Town: Hooksett NH	Phone number: 603-440-4818
Email: shawnaldamour@gmail.com	This testimony is regarding Bill # SB157

1. Introduction
Good morning and thank you for hearing my testimony. My name is Shawna D'Amour. I live in Hooksett, NH. I've spent the last 21 years as a New Hampshire public school teacher and administrator. I am passionate about supporting students' academic success as well as their social/emotional well-being and mental health. Today, I come to you representing the most important job in my life, being a mom. I am a mother with lived experience having a child with mental illness. I have seen the challenges families face with the lack of resources in our state. After years of roadblocks, I have also experienced receiving some of the state's children's behavioral health resources and the difference it has made in our lives.
2. State which bill or topic you are speaking about, and whether you are in support or opposition:
I am here today to speak in support of Senate Bill 157.

3. State a limited number of relevant facts that support your position.

If I were to ask any parent, what is the one thing you hope or wish for your child in life? I'm sure the answer would be simple....happiness, health, fulfillment. If you were to ask me that question, "What is the one thing you hope or wish for your child in life?" My answer is for my son to *live*. For eight years, eight years, we've been advocating to get our son services and supports. Eight years of various appointments with waitlists lasting 6-9 months. Eight years of too many medication changes to count. It was finally one magical psychiatrist that wheeled her chair up to us, faced us and said, "I believe you. Your son is dealing with so much, and so are you. I'm sorry it's been years of you trying to get him help. I'm going to help you." That began our journey to being connected to the Fast Forward Program (Family and Systems Together), which is funded by DHHS. Our wrap around team is there to help us align available community resources. They are there to support us as a family because we are ALL living with mental illness.

We have a family peer support person from NAMI, who is a mother with lived experience and she acts as a mentor and guide. We have a FF Case Coordinator that works with NFI North and she's worked tirelessly to find a clinician to provide therapy in our home. In addition, our magical psychiatrist is part of the team and any family and friends or school personnel we invite to meetings.

And with all these supports, we still have so far to go in our state. It took us 8 years of trying to get our son help, and both of us are educators that have knowledge of resources but living it as a parent is different. At a recent Emergency Room visit, my son asked where the other kids were that were like him? He mentioned it was so scary to be there in the hospital. After seven hours we were told that the only hospital accepting children for psychiatric services is Hampstead and there were 47 children on the waitlist for a bed. 47.

While we are eternally grateful for the Fast Forward Team and the wrap services provided to our family, I can't help but think of all those families that are where we were last year. I can't help but think of those 47 children waiting for a bed, and I can't help but think of my own child and what happens when he needs a higher level of service only to be told it could be months because the waitlist is so long.

4. Conclusion

In closing, I implore you to support Senate Bill 157. We need more resources available in our state. I thank you for listening to my story.

# Voting Sheets

## Senate Health and Human Services Committee EXECUTIVE SESSION RECORD

2021-2022 Session

Bill #SR 157-FN-A Hearing Date: 2/17/21 Executive Session Date: 2/18/21 Amendment # 2021-04215 Motion: Vote: **Committee Member** Present Made by Second Yes No Sen. Bradley, Chair X  $\mathbf{X}$ X Sen. Gray, Vice Chair Sen. Avard . . Sen. Sherman ト X Sen. Whitley Motion: Vote:\_\_\_\_\_ **Committee Member** Present Second Yes Made by No Sen. Bradley, Chair X Ĵţ\$-Х Sen. Gray, Vice Chair Sen Avard n ka nine ≁ and the set Sen. Sherman Sen: Whitley  $\nabla$ Motion: Vote: **Committee Member** Present Made by Second Yes No Sen Bradley, Chair Sen. Gray, Vice Chair Sen. Avard ¥. to Pillan Sen. Sherman Sen. Whitley - 24 - 24 Motion: Vote: Present Committee Member Made by Second Yes No Sen. Bradley, Chair Sen. Gray, Vice Chair Sen. Avard Sen. Sherman

Sen. Whitley

Reported out by: SCN. Whitlen

Notes:

## Senate Finance Committee EXECUTIVE SESSION

Hearing date:	NIA	Bill #SB 157-FN-A
Motion of:	Hearing date://///////////////////////////////	
Senator:       Reagan       by Senator:       Reagan       by Senator:       Reagan       Giuda       Gi	ATT T	<b>VOTE</b> : 7-0
Made by       Daniels       Seconded       Daniels       Reported       Daniels         Senator:       Reagan       by Senator:       Reagan       by Senator:       Reagan         Giuda       Giuda       Giuda       Giuda       Giuda       Giuda         Rosenwald       Rosenwald       Rosenwald       Rosenwald       Nosenwald         D'Allesandro       D'Allesandro       D'Allesandro       Morse         Morse       Morse       Morse       Morse         Hennessey       Hennessey       Hennessey       Hennessey         Senator Daniels , Chairman       Yes       No       Reported out by         Senator Giuda       Yes       No       Reported out by         Senator Reagan, Vice-Chair       Yes       No       Reported out by         Senator Rosenwald       Yes       Yes       Yes       Yes         Senator Rosenwald       Yes       Yes       Yes       Yes         Senator D'Allesandro       Yes       Yes       Yes       Yes         Senator Morse       Yes       Yes       Yes       Yes         Senator D'Allesandro       Yes       Yes       Yes       Yes	Senator:       Reagan       by Senator:       Reagan         Giuda       Giuda       Giuda       Giuda         Rosenwald       Rosenwald       Rosenwald       D'Allesandro         Morse       Morse       Morse       Morse	by Senator:       Reagan         Giuda       Giuda         Rosenwald       D         ro       D'Allesandro         Morse       D
Senator:       Reagan       by Senator:       Reagan       by Senator:       Reagan       Giuda         Giuda       Giuda       Giuda       Giuda       Giuda       Giuda       Giuda         Rosenwald       Rosenwald       Rosenwald       Rosenwald       Rosenwald       Rosenwald         D'Allesandro       D'Allesandro       D'Allesandro       D'Allesandro       Morse         Morse       Morse       Morse       Morse       Hennessey         Hennessey       Hennessey       Hennessey       Hennessey         Senator Daniels , Chairman       V       V       V         Senator Reagan Vice-Chair       V       V       V         Senator Rosenwald       V       V       V       V         Senator Norse       V       V       V       V       V         Senator Morse       V       V       V       V       V       V         Senator D'Allesandro       V       V       V       V       V       V       V         Senator D'Allesandro       V       V       V       V       V       V       V       V       V       V       V       V       V       V       V       V	Motion of:	VOTE:
Senator Daniels, Chairman	Senator:       Reagan       by Senator:       Reagan         Giuda       Giuda       Giuda       Giuda         Rosenwald       Rosenwald       Rosenwala         D'Allesandro       D'Allesandro       Morse	by Senator: Reagan Giuda H Rosenwald D'Allesandro Morse
	Senator Daniels , Chairman	

# Committee Report

#### STATE OF NEW HAMPSHIRE

#### SENATE

#### **REPORT OF THE COMMITTEE**

#### Thursday, February 18, 2021

#### THE COMMITTEE ON Health and Human Services

#### to which was referred SB 157-FN-A

AN ACT

relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

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Having considered the same, the committee recommends that the Bill

OUGHT TO PASS WITH AMENDMENT

BY A VOTE OF: 4-0

AMENDMENT # 0451s

Senator Rebecca Whitley For the Committee

Kirsten Koch 271-3266

#### HEALTH AND HUMAN SERVICES

SB 157-FN-A, relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit. Ought to Pass with Amendment, Vote 4-0. Senator Rebecca Whitley for the committee.

#### STATE OF NEW HAMPSHIRE

#### SENATE

#### REPORT OF THE COMMITTEE

#### Wednesday, March 24, 2021

#### THE COMMITTEE ON Finance

#### to which was referred SB 157-FN-A

AN ACT

relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS

BY A VOTE OF: 7-0

Senator Erin Hennessey For the Committee

Deb Martone 271-4980

#### **General Court of New Hampshire - Bill Status System**

### Docket of SB157

Docket Abbreviations

**Bill Title:** relative to funding of children's mental health services and making an appropriation to fund positions in the department of health and human services contracts and procurement unit.

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Date	Body	Description
2/9/2021	S	Introduced 02/04/2021 and Referred to Health and Human Services; SJ
2/10/2021	S	Remote <b>Hearing:</b> 02/17/2021, 09:00 am; Links to join the hearing can be found in the Senate Calendar; <b>SC 11</b>
2/19/2021	S	Committee Report: Ought to Pass with Amendment <b>#2021-0451s</b> , 03/04/2021; <b>SC 12</b>
3/4/2021	S	Committee Amendment <b>#2021-0451s, RC</b> 24Y-0N, AA; 03/04/2021; <b>SJ</b> 6
3/4/2021	S	Ought to Pass with Amendment 2021-0451s, RC 24Y-0N, MA; Refer to Finance Rule 4-5; 03/04/2021; SJ 6
3/24/2021	S	Committee Report: Ought to Pass, 04/01/2021; SC 17
4/1/2021	S	Ought to Pass: RC 24Y-0N, MA; 04/01/2021; SJ 10
4/1/2021	S	Sen. Bradley Moved Laid on Table, RC 24Y-0N, MA; 04/01/2021; SJ 10
4/1/2021	S	Pending Motion OT3rdg; 04/01/2021; SJ 10

NH House NH Senate

#### General Court of New Hampshire - Bill Status System

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3/4/2021	S	Committee Amendment <b>#2021-0451s, RC</b> 24Y-0N, AA; 03/04/2021; <b>SJ</b> 6
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3/24/2021	S	Committee Report: Ought to Pass, 04/01/2021; SC 17
4/1/2021	S	Ought to Pass: RC 24Y-0N, MA; 04/01/2021; SJ 10
4/1/2021	S	Sen. Bradley Moved Laid on Table, RC 24Y-0N, MA; 04/01/2021; SJ 10
4/1/2021	S	Pending Motion OT3rdg; 04/01/2021; <b>SJ 10</b>

Official Docket of SB157.:

NH House NH Senate

## Other Referrals

#### Senate Inventory Checklist for Archives

Bill Number: <u>SB 157-FN-A</u>

Senate Committee: FiNANCE - 2ND CommiTTEE

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

<u>X</u>

Final docket found on Bill Status

#### Bill Hearing Documents: {Legislative Aides}

- Bill version as it came to the committee
- \_X 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 # \_\_\_\_\_\_ - 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:

Leb 1 autorie Committee Aide

07/20/21 Date

Senate Clerk's Office \_\_\_\_\_

Senate Inventory Checklist for Archives
Bill Number: SB 157-FN-A Senate Committee: <u>HHS</u>
Please include all documents in the order listed below and indicate the documents which have been included with an "X" beside
K Final docket found on Bill Status
Bill Hearing Documents: {Legislative Aides}
Bill version as it came to the committee
X       All Calendar Notices         X       Hearing Sign-up sheet(s)         X       Prepared testimony, presentations, & other submissions handed in at the public hearing
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X. Prepared testimony, presentations, & other submissions handed in at the public hearing
K 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):
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L 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 #
Post Floor Action: (if applicable) {Clerk's Office}
Committee of Conference Report (if signed off by all members. Include any new language prop 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:
Kirsten Kerch 7/2012
Committee Aide Date
Senate Clerk's Office

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