### LEGISLATIVE COMMITTEE MINUTES

# HB1526

# Bill as Introduced

#### HB 1526-FN - AS AMENDED BY THE HOUSE

31Mar2022... 1181h

#### 2022 SESSION

22-2110 05/04

HOUSE BILL

1526-FN

AN ACT

relative to income eligibility for in and out medical assistance.

SPONSORS:

Rep. Snow, Hills. 19; Rep. Schapiro, Ches. 16; Rep. McMahon, Rock. 7; Rep.

Marsh, Carr. 8; Rep. Langley, Hills. 8; Rep. Wallner, Merr. 10; Sen. Rosenwald,

Dist 13; Sen. Sherman, Dist 24

COMMITTEE:

Health, Human Services and Elderly Affairs

#### **ANALYSIS**

This bill repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the department of health and human services to amend the income eligibility standard for the "in and out medical assistance" policy. The bill also makes an appropriation to the department of health and human services to implement the revised income eligibility standard.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

22-2110 05/04

#### STATE OF NEW HAMPSHIRE

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

AN ACT

8

relative to income eligibility for in and out medical assistance.

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

- 1 Repeal. 2021, 91:424, suspending 2020, 39:1, which required the department of health and 2 human services to amend the income eligibility standard for the "in and out medical assistance" 3 policy, is repealed.
- 2 Appropriation; In and Out Medical Assistance. The sum of \$2,685,192 for the fiscal year ending June 30, 2023 is hereby appropriated to the department of health and human services to implement 2020; 39:1. The governor is authorized to draw a warrant for said sum out of any money in the treasury not otherwise appropriated.
  - 3 Effective Date. This act shall take effect January 1, 2023.

#### HB 1526-FN- FISCAL NOTE AS INTRODUCED

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relative to income eligibility for in and out medical assistance.

FISCAL IMPACT:

[X] State

[ ] County

[ ] Local

[ ] None

		Estimated Increas	se / (Decrease)	
STATE:	FY 2022	FY 2023	FY 2024	FY 2025
Appropriation	\$0	\$5,370,384	\$0	\$0
Revenue	\$0	\$0	\$0	
Expenditures	Indeterminable	\$3.8 million - \$7.7 million in state general funds; the same in matching federal funds	\$0	\$0
Funding Source:	[X] General	[ ] Education	[ ] Highway	X ] Other -

#### METHODOLOGY:

This bill repeals Chapter 91:424, Laws of 2021, a provision in the budget trailer bill that suspended changes to the Medicaid In & Out program for the FY 22/23 biennium. Originally, Chapter 39:1, Laws of 2020 would have required the Department of Health and Human Services to amend the income eligibility standard for the In & Out population to less than or equal to 133 1/3 percent of the income limit contained in Section 1931 of the federal Social Security Act. By suspending this provision, the budget trailer bill delayed the changes (and associated cost) until July 1, 2023. This bill, by contrast, would restore the changes effective upon the bill's passage.

The Department states, as of October 2021, there were 6,073 individuals in the In & Out program, of whom 5,104 were in a household of one, 766 were in a household of two, and 203 were in a household of three or more. The current protected income limits are \$591 and \$675 for households of one and two, respectively.

The Department states that under the proposed change, the maximum protected income level under the In & Out program will increase from \$591 to \$901 for a household of one and from \$675 to \$1,047 for a household of two. This change would result in the elimination of the spend-down requirement for 998 individuals (920 in a household of one and 78 in a household of two), resulting in those individuals enrolling in a managed care organization rather than continuing to participate in the fee-for-service based In & Out program. The remaining 5,075 individuals will

remain in the fee-for-service program, and will have their spend-down amounts decreased by varying amounts.

With respect to the 998 individuals transitioning to managed care, the Department states that depending on the percentage of individuals who are dually-eligible for both Medicaid and Medicare, total costs will be between \$7.6 million and \$15.4 million per year, of which half (between \$3.8 million and \$7.7 million per year) would be paid for with state general funds and half with matching federal funds. The Department is unable to determine the cost for those individuals who will remain in the In & Out program but whose spend-down requirements will be reduced as a result of the proposed change.

This bill contains an appropriation of \$5,370,384 in FY23. The bill is effective upon passage, so it is unknown what costs, if any, will be incurred in FY22.

#### AGENCIES CONTACTED:

Department of Health and Human Services

#### HB 1526-FN - AS AMENDED BY THE HOUSE

31Mar2022... 1181h

#### 2022 SESSION

22-2110 05/04

HOUSE BILL

1526-FN

AN ACT

relative to income eligibility for in and out medical assistance.

SPONSORS:

Rep. Snow, Hills. 19; Rep. Schapiro, Ches. 16; Rep. McMahon, Rock. 7; Rep. Marsh, Carr. 8; Rep. Langley, Hills. 8; Rep. Wallner, Merr. 10; Sen. Rosenwald,

Dist 13; Sen. Sherman, Dist 24

HOUSE COMMITTEE:

Health, Human Services and Elderly Affairs OTP 19-2 Consent: OTP/A 21-0. SENATE HHS: OTP 5-B

#### **ANALYSIS**

This bill repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the department of health and human services to amend the income eligibility standard for the "in and out medical assistance" policy. The bill also makes an appropriation to the department of health and human services to implement the revised income eligibility standard.

Explanation:

Matter added to current law appears in bold italics.

Matter removed from current law appears [in brackets and struckthrough.]

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22-2110 05/04

#### STATE OF NEW HAMPSHIRE

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

AN ACT

8

relative to income eligibility for in and out medical assistance.

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

- 1 1 Repeal. 2021, 91:424, suspending 2020, 39:1, which required the department of health and 2 human services to amend the income eligibility standard for the "in and out medical assistance". 3 policy, is repealed.
  - 2 Appropriation; In and Out Medical Assistance. The sum of \$2,685,192 for the fiscal year ending June 30, 2023 is hereby appropriated to the department of health and human services to implement 2020; 39:1. The governor is authorized to draw a warrant for said sum out of any money in the treasury not otherwise appropriated.
    - 3 Effective Date. This act shall take effect January 1, 2023.

#### HB 1526-FN- FISCAL NOTE AS INTRODUCED

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relative to income eligibility for in and out medical assistance.

FISCAL IMPACT:

[X] State

[ ] County

[ ] Local

[ ] None

	Estimated Increase / (Decrease)			
STATE:	FY 2022	FY 2023	FY 2024	FY 2025
Appropriation	\$0	\$5,370,384	\$C	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	Indeterminable	\$3.8 million - \$7.7 million in state general funds; the same in matching federal funds	\$0	\$0
Funding Source:	[X] General	[ ] Education	[ ] Highway	[X] Other -

#### **METHODOLOGY:**

This bill repeals Chapter 91:424, Laws of 2021, a provision in the budget trailer bill that suspended changes to the Medicaid In & Out program for the FY 22/23 biennium. Originally, Chapter 39:1, Laws of 2020 would have required the Department of Health and Human Services to amend the income eligibility standard for the In & Out population to less than or equal to 133 1/3 percent of the income limit contained in Section 1931 of the federal Social Security Act. By suspending this provision, the budget trailer bill delayed the changes (and associated cost) until July 1, 2023. This bill, by contrast, would restore the changes effective upon the bill's passage.

The Department states, as of October 2021, there were 6,073 individuals in the In & Out program, of whom 5,104 were in a household of one, 766 were in a household of two, and 203 were in a household of three or more. The current protected income limits are \$591 and \$675 for households of one and two, respectively.

The Department states that under the proposed change, the maximum protected income level under the In & Out program will increase from \$591 to \$901 for a household of one and from \$675 to \$1,047 for a household of two. This change would result in the elimination of the spend-down requirement for 998 individuals (920 in a household of one and 78 in a household of two), resulting in those individuals enrolling in a managed care organization rather than continuing to participate in the fee-for-service based In & Out program. The remaining 5,075 individuals will

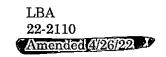
remain in the fee-for-service program, and will have their spend-down amounts decreased by varying amounts.

With respect to the 998 individuals transitioning to managed care, the Department states that depending on the percentage of individuals who are dually-eligible for both Medicaid and Medicare, total costs will be between \$7.6 million and \$15.4 million per year, of which half (between \$3.8 million and \$7.7 million per year) would be paid for with state general funds and half with matching federal funds. The Department is unable to determine the cost for those individuals who will remain in the In & Out program but whose spend-down requirements will be reduced as a result of the proposed change.

This bill contains an appropriation of \$5,370,384 in FY23. The bill is effective upon passage, so it is unknown what costs, if any, will be incurred in FY22.

#### AGENCIES CONTACTED:

Department of Health and Human Services



## HB 1526-FN FISCAL NOTE AS AMENDED BY THE HOUSE (AMENDMENT #2022-1181h)

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relative to income eligibility for in and out medical assistance.

FISCAL IMPACT:

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[ ] County

[ ] Local

[ ] None

Estimated Increase / (Decrease)				
STATE:	FY 2022	FY 2023	FY 2024	FY 2025
Appropriation	\$0	\$2,685,192	\$0	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	\$1.9 million - \$3.8 million in state general funds; the same in matching federal funds	\$0	\$0
Funding Source:	[X] General Matching federal fo	[ ] Education ands	[ ] Highway	[X] Other:

#### **METHODOLOGY:**

This bill repeals Chapter 91:424, Laws of 2021, effective January 1, 2023. The section being repealed is a provision in the budget trailer bill that suspended changes to the Medicaid In & Out program for the FY 22/23 biennium. Originally, Chapter 39:1, Laws of 2020 would have required the Department of Health and Human Services to amend the income eligibility standard for the In & Out population to less than or equal to 133 1/3 percent of the income limit contained in Section 1931 of the federal Social Security Act. By suspending this provision, the budget trailer bill delayed the changes (and associated cost) until July 1, 2023. This bill would restore the changes effective January 1, 2023.

The Department states, as of October 2021, there were 6,073 individuals in the In & Out program, of whom 5,104 were in a household of one, 766 were in a household of two, and 203 were in a household of three or more. The current protected income limits are \$591 and \$675 for households of one and two, respectively.

The Department states that under the proposed change, the maximum protected income level under the In & Out program will increase from \$591 to \$901 for a household of one and from \$675 to \$1,047 for a household of two. This change would result in the elimination of the spend-

down requirement for 998 individuals (920 in a household of one and 78 in a household of two), resulting in those individuals enrolling in a managed care organization rather than continuing to participate in the fee-for-service based In & Out program. The remaining 5,075 individuals will remain in the fee-for-service program, and will have their spend-down amounts decreased by varying amounts.

With respect to the 998 individuals transitioning to managed care, the Department states that depending on the percentage of individuals who are dually-eligible for both Medicaid and Medicare, total costs will be between \$7.6 million and \$15.4 million per full year of implementation, of which half (between \$3.8 million and \$7.7 million) would be paid for with state general funds and half with matching federal funds. The general fund cost of the bill as amended, with its effective date of January 1, 2023, would therefore be half of this amount, or a range of \$1.9 million to \$3.8 million. The Department is unable to determine the cost for those individuals who will remain in the In & Out program but whose spend-down requirements will be reduced as a result of the proposed change.

This bill contains an appropriation of \$2,685,192 in FY23.

#### AGENCIES CONTACTED:

Department of Health and Human Services

#### HB 1526-FN - AS AMENDED BY THE SENATE

31Mar2022... 1181h 05/05/2022 1833s 05/05/2022 1956s

#### 2022 SESSION

22-2110 05/04

HOUSE BILL

1526-FN

AN ACT

relative to income eligibility for in and out medical assistance.

SPONSORS:

Rep. Snow, Hills. 19; Rep. Schapiro, Ches. 16; Rep. McMahon, Rock. 7; Rep.

Marsh, Carr. 8; Rep. Langley, Hills. 8; Rep. Wallner, Merr. 10; Sen. Rosenwald,

Dist 13; Sen. Sherman, Dist 24

COMMITTEE:

Health, Human Services and Elderly Affairs

#### AMENDED ANALYSIS

This bill:

I. Repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the department of health and human services to amend the income eligibility standard for the "in and out medical assistance" policy.

II. Makes an appropriation to the department of health and human services to implement the revised income eligibility standard.

III. Revises the duties of the executive committee established in the mental health counseling compact, contingent upon the compact becoming law.

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.

#### HB 1526-FN - AS AMENDED BY THE SENATE

31Mar2022... 1181h 05/05/2022 1833s 05/05/2022 1956s

22-2110 05/04

#### STATE OF NEW HAMPSHIRE

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

AN ACT

relative to income eligibility for in and out medical assistance.

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

1 Repeal. 2021, 91:424, suspending 2020, 39:1, which required the department of health and 1 2 human services to amend the income eligibility standard for the "in and out medical assistance" 3 policy, is repealed. 2 Appropriation; In and Out Medical Assistance. The sum of \$2,685,192 for the fiscal year 4 5 ending June 30, 2023 is hereby appropriated to the department of health and human services to implement 2020: 39:1. The governor is authorized to draw a warrant for said sum out of any money 6 7 in the treasury not otherwise appropriated. The department may accept and expend matching 8 federal funds for this purpose without prior approval of the fiscal committee. 9 3 Mental Health Counseling Compact; Executive Committee Duties. RSA 330-D:8, IV is 10 repealed and reenacted to read as follows: 11 IV. The executive committee shall: 12 (a) Have the power to act on behalf of the commission according to the terms of this 13 compact; 14 (b) Be composed of up to 11 members: (1) Seven voting members who are elected by the commission from the current 15 16 membership of the commission; and (2) Up to 4 ex-officio, non-voting members from 4 recognized national professional 17 counselor organizations to be selected by their respective organizations; 18 19 (c) The commission may remove any member of the executive committee as provided in 20 the bylaws; 21 (d) Meet at least annually; and 22 (e) Have the following duties and responsibilities: 23 (1) Recommend to the entire commission changes to the rules or bylaws, changes to 24 this compact legislation, fees paid by the compact member states such as annual dues, and any 25 commission compact fee charged to licensees for the privilege to practice; (2) Ensure compact administration services are appropriately provided, contractual 26 27 or otherwise; 28 (3) Prepare and recommend the budget; (4) Maintain financial records on behalf of the commission; 29

## HB 1526-FN - AS AMENDED BY THE SENATE - Page 2 -

1	(5) Monitor compact compliance of member states and provide compliance reports to
2	the commission;
3	(6) Establish additional committees as necessary; and
4	(7) Other duties as provided in rules or the bylaws.
5	4 Contingency. If SB 397 of the 2022 legislative session becomes law, then section 3 of this act
6	shall take effect at 12:01 AM on the date SB 397 takes effect. If SB 397 of the 2022 legislative
7	session does not become law, then section 3 of this act shall not take effect.
8	5 Effective Date.
9	I. Section 3 of this act shall take effect as provided in section 4 of this act.
10	II. The remainder of this act shall take effect January 1, 2023.

#### HB 1526-FN- FISCAL NOTE

AS AMENDED BY THE HOUSE (AMENDMENT #2022-1181h)

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relative to income eligibility for in and out medical assistance.

FISCAL IMPACT:

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[ ] County

[ ] Local

[ ] None

	. ,	Estimated Increa	ase / (Decrease)	-
STATE:	FY 2022	FY 2023	FY 2024	FY 2025
Appropriation	\$0	\$2,685,192	\$0	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	\$1.9 million - \$3.8 million in state general funds; the same in matching federal funds	\$0	\$0
Funding Source:	[X] General Matching federal fi	[ ] Education	[ ] Highway	[X] Other -

#### **METHODOLOGY:**

This bill repeals Chapter 91:424, Laws of 2021, effective January 1, 2023. The section being repealed is a provision in the budget trailer bill that suspended changes to the Medicaid In & Out program for the FY 22/23 biennium. Originally, Chapter 39:1, Laws of 2020 would have required the Department of Health and Human Services to amend the income eligibility standard for the In & Out population to less than or equal to 133 1/3 percent of the income limit contained in Section 1931 of the federal Social Security Act. By suspending this provision, the budget trailer bill delayed the changes (and associated cost) until July 1, 2023. This bill would restore the changes effective January 1, 2023.

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This bill contains an appropriation of \$2,685,192 in FY23.

#### AGENCIES CONTACTED:

Department of Health and Human Services

#### CHAPTER 265 HB 1526-FN - FINAL VERSION

31Mar2022... 1181h 05/05/2022 1833s 05/05/2022 1956s 26May2022... 2108EBA

#### 2022 SESSION

22-2110 05/04

**HOUSE BILL** 

1526-FN

AN ACT

relative to income eligibility for in and out medical assistance and relative to the

executive committee for the mental health counseling compact.

SPONSORS:

Rep. Snow, Hills. 19; Rep. Schapiro, Ches. 16; Rep. McMahon, Rock. 7; Rep. Marsh,

Carr. 8; Rep. Langley, Hills. 8; Rep. Wallner, Merr. 10; Sen. Rosenwald, Dist 13; Sen.

Sherman, Dist 24

COMMITTEE:

Health, Human Services and Elderly Affairs

#### AMENDED ANALYSIS

This bill:

- I. Repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the department of health and human services to amend the income eligibility standard for the "in and out medical assistance" policy.
- II. Makes an appropriation to the department of health and human services to implement the revised income eligibility standard.
- III. Revises the duties of the executive committee established in the mental health counseling compact, contingent upon the compact becoming law.

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.

#### CHAPTER 265 HB 1526-FN - FINAL VERSION

31Mar2022... 1181h 05/05/2022 1833s 05/05/2022 1956s 26May2022... 2108EBA

22-2110 05/04

#### STATE OF NEW HAMPSHIRE

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

AN ACT

27

28 29 otherwise:

relative to income eligibility for in and out medical assistance and relative to the executive committee for the mental health counseling compact.

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

265:1 Repeal. 2021, 91:424, suspending 2020, 39:1, which required the department of health and 1 human services to amend the income eligibility standard for the "in and out medical assistance" policy, is 2 3 repealed. 4 .265:2 Appropriation; In and Out Medical Assistance. The sum of \$2,685,192 for the fiscal year 5 ending June 30, 2023 is hereby appropriated to the department of health and human services to implement 2020; 39:1. The governor is authorized to draw a warrant for said sum out of any money in the 6 7 treasury not otherwise appropriated. The department may accept and expend matching federal funds for 8 this purpose without prior approval of the fiscal committee. 265:3 Mental Health Counseling Compact; Executive Committee Duties. RSA 330-D:8, IV is 9 10 repealed and reenacted to read as follows: 11 IV. The executive committee shall: (a) Have the power to act on behalf of the commission according to the terms of this 12 13 compact; 14 (b) Be composed of up to 11 members: (1) Seven voting members who are elected by the commission from the current 15 16 membership of the commission; and (2) Up to 4 ex-officio, non-voting members from 4 recognized national professional 17 18 counselor organizations to be selected by their respective organizations; and 19 (3) The commission may remove any member of the executive committee as provided in 20 the bylaws; · 21 (c) Meet at least annually; and (d) Have the following duties and responsibilities: 22 (1) Recommend to the entire commission changes to the rules or bylaws, changes to this 23 compact legislation, fees paid by the compact member states such as annual dues, and any commission 24 25 compact fee charged to licensees for the privilege to practice; (2) Ensure compact administration services are appropriately provided, contractual or 26

(3) Prepare and recommend the budget:

(4) Maintain financial records on behalf of the commission;

#### **CHAPTER 265** HB 1526-FN - FINAL VERSION - Page 2 -

1 ,	(5) Monitor compact compliance of member states and provide compliance reports to the
2	commission;
3	(6) Establish additional committees as necessary; and
4	(7) Other duties as provided in rules or the bylaws.
5	265:4 Contingency. If SB 397 of the 2022 legislative session becomes law, then section 3 of this act
6	shall take effect at 12:01 AM on the date SB 397 takes effect. If SB 397 of the 2022 legislative session
7	does not become law, then section 3 of this act shall not take effect.
8	265:5 Effective Date.
9	<ol> <li>Section 3 of this act shall take effect as provided in section 4 of this act.</li> </ol>
10	II. The remainder of this act shall take effect January 1, 2023.

Approved: June 24, 2022
Effective Date:
I. Section 3 effective as provided in section 4
II. Remainder effective January 1, 2023

# Amendments

Sen. Rosenwald, Dist 13 April 25, 2022 2022-1741s 05/04

#### Amendment to HB 1526-FN

Amend the bill by replacing section 2 with the following:

1 2 3

4

5 6 7 2 Appropriation; In and Out Medical Assistance. The sum of \$2,685,192 for the fiscal year ending June 30, 2023 is hereby appropriated to the department of health and human services to implement 2020; 39:1. The governor is authorized to draw a warrant for said sum out of any money in the treasury not otherwise appropriated. The department may accept and expand matching federal funds for this purpose without prior approval of the fiscal committee.

Senate Finance April 26, 2022 2022-1833s 05/04

1

#### Amendment to HB 1526-FN

2	
3	2 Appropriation; In and Out Medical Assistance. The sum of \$2,685,192 for the fiscal year
4	ending June 30, 2023 is hereby appropriated to the department of health and human services to
5	implement 2020; 39:1. The governor is authorized to draw a warrant for said sum out of any money

6 in the treasury not otherwise appropriated. The department may accept and expend matching

7 federal-funds-for-this-purpose without-prior approval of the fiscal committee

Amend the bill by replacing section 2 with the following:

**32** 

#### Floor Amendment to HB 1526-FN

1	Amend the bill by replacing all after section 2 with the following:
2	
3	3 Mental Health Counseling Compact; Executive Committee Duties. RSA 330-D:8, IV is
4	repealed and reenacted to read as follows:
5	IV. The executive committee shall:
6	(a) Have the power to act on behalf of the commission according to the terms of this
7	compact;
8	(b) Be composed of up to 11 members:
9	(1) Seven voting members who are elected by the commission from the current
10	membership of the commission; and
11	(2) Up to 4 ex-officio, non-voting members from 4 recognized national professional
12	counselor organizations to be selected by their respective organizations;
13	(c) The commission may remove any member of the executive committee as provided in
14	the bylaws;
15	(d) Meet at least annually; and
16	(e) Have the following duties and responsibilities:
17	(1) Recommend to the entire commission changes to the rules or bylaws, changes to
18	this compact legislation, fees paid by the compact member states such as annual dues, and any
19	commission compact fee charged to licensees for the privilege to practice;
20	(2) Ensure compact administration services are appropriately provided, contractual
21	or otherwise;
22	(3) Prepare and recommend the budget;
<b>2</b> 3	(4) Maintain financial records on behalf of the commission;
24	(5) Monitor compact compliance of member states and provide compliance reports to
25	the commission;
26	(6) Establish additional committees as necessary; and
27	(7) Other duties as provided in rules or the bylaws.
28	4 Contingency. If SB 397 of the 2022 legislative session becomes law, then section 3 of this act
29	shall take effect at 12:01 AM on the date SB 397 takes effect. If SB 397 of the 2022 legislative
30	session does not become law, then section 3 of this act shall not take effect.
31	5 Effective Date.

I. Section 3 of this act shall take effect as provided in section 4 of this act.

## Floor Amendment to HB 1526-FN - Page 2 -

II. The remainder of this act shall take effect January 1, 2023.

### Floor Amendment to HB 1526-FN - Page 3 -

2022-1956s

#### AMENDED ANALYSIS

This bill:

- I. Repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the department of health and human services to amend the income eligibility standard for the "in and out medical assistance" policy.
- II. Makes an appropriation to the department of health and human services to implement the revised income eligibility standard.
- III. Revises the duties of the executive committee established in the mental health counseling compact, contingent upon the compact becoming law.

# 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

Date: April 7, 2022

#### **HEARINGS**

	Thursday	04/14/202	2
	(Day)	(Date)	
Health and Human Services		State House Reps Hall	10:00 a.m.
(Name of Committee)		(Place)	(Time)
		Note: The committee will meet at 10:00 a.m. or 1 the end of Session.	15 minutes following
10:00 a.m.	HB 1526-FN	relative to income eligibility for in and out medic	cal assistance.
10:20 a.m.	HB 1608-FN	relative to withdrawal from the state immunizat	cion registry.
10:40 a.m.	HB 1662-FN	related to privacy obligations of the department services.	of health and human
11:00 a.m.	HB 1622-FN	relative to mental health parity.	
11:20 a.m.	HB 1604-FN	including state medical facilities in the statute p	roviding medical

Sponsors: HB 1526-FN Rep. Snow Rep. McMahon Rep. Schapiro Rep. Marsh Rep. Langley Rep. Wallner Sen. Rosenwald Sen. Sherman HB 1608-FN Rep. Prout Rep. Blasek Rep. T. Lekas Rep. Lanzara HB 1662-FN Rep. Salloway Rep. Edwards Rep. M. Pearson Rep. McMahon Rep. B. Nelson Rep. Lang Sen. Giuda Sen. Gray HB 1622-FN Rep. Luneau Rep. Bartlett Rep. Knirk Rep. Ladd Sen. Whitley
HB 1604-FN Sen. Sherman Rep. Cushman Rep. Blasek Rep. Roy Rep. Pauer Rep. Torosian

Cameron Lapine 271-2104

<u>Jeb Bradley</u> Chairman

#### Senate Health and Human Services Committee

Cameron Lapine 271-2104

HB 1526-FN, relative to income eligibility for in and out medical assistance.

**Hearing Date:** 

April 14, 2022

Time Opened:

10:36 a.m.

Time Closed:

10:55 a.m.

Members of the Committee Present: Senators Bradley and Sherman

Members of the Committee Absent: Senators Gray, Avard and Whitley

Bill Analysis: This bill repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the department of health and human services to amend the income eligibility standard for the "in and out medical assistance" policy. The bill also makes an appropriation to the department of health and human services to implement the revised income eligibility standard.

#### Sponsors:

Rep. Snow Rep. Marsh Rep. Schapiro Rep. Langley Rep. McMahon Rep. Wallner

Sen. Rosenwald

Sen. Sherman

Who supports the bill: In total, 58 individuals signed in in support of HB 1526-FN. The full sign in sheets are available upon request to the Legislative Aide, Cameron Lapine (cameron.lapine@leg.state.nh.us).

Who opposes the bill: None.

Who is neutral on the bill: None.

Summary of testimony presented in support:

#### Representative Kendall Snow

#### Hillsborough County District 19

- Representative Snow said that HB 1639-FN (2020) adjusted the income threshold for in and out medical assistance. He said that HB 1526-FN adjusts that threshold, which has not been adjusted in 30 years.
- Rep. Snow said that the adjustment in HB 1526-FN is reasonable, as it had already been passed and signed into law in 2020.
- Rep. Snow said that HB 2-FN-A-L (2021) suspended new money going into the in and out medical assistance program and HB 1526-FN repeals that suspension.

- Rep. Snow said that in and out medical assistance assists a large group of people, but he is particularly interested in community mental health. He said that other people who are helped by in and out medical assistance include people with liver problems or kidney dialysis patients, among others.
- Rep. Snow said that some individuals currently in the in and out medical assistance program could move over to traditional Medicaid and become part of a managed care organization (MCO), which is more effective.
- Senator Sherman asked if the population covered by HB 1526-FN were the expanded 90/10 population or the traditional 50/50 population.
  - o Rep. Snow said that he asked the same question and did not receive a clear answer.
  - o Senator Bradley said that it appeared to him to be the 50/50 population.
  - Rep. Snow said that that could be correct. He said that others could answer the question better.

#### **Kelley Capuchino**

#### Community Behavioral Health Association

- Ms. Capuchino said that people on Medicaid expect to not pay for their medical bills.
   She said that the increases in HB 1393-FN (2020) lifted the financial burdens for individuals and providers.
- Ms. Capuchino said that many providers require a guarantee of payment but community mental health providers are required to provide care.
- Ms. Capuchino said that ten community mental health centers incurred losses of over \$7.5 million from write offs due to spend downs. She said that they incur these losses year over year.
- Ms. Capuchino said that a spend down is like a deductible in that an individual has to incur expenses before their Medicaid benefits come into effect.
- Ms. Capuchino said that she has a family member whose fixed income is \$1,255 per month. She said that this family member's basic expenses are \$1,200 for four bills, leaving their discretionary spending budget at \$55 for things such as food, gas, medicine, toiletries, co-pays, and their spend down. She said that her family member does not have \$664 to spend on their spend down.

#### Jake Berry

#### Vice President of Policy, New Futures

- Mr. Berry said that the in and out medical assistance program is important. He said that it provides continuous coverage.
- Mr. Berry said that it has been decades since the income eligibility threshold was increased for in and out medical assistance. He encouraged the Committee to expand the population and bring more people in.

#### **Holly Stevens**

#### Director of Public Policy, NAMI

- Ms. Stevens said that the low threshold for in and out medical assistance is not only a
  financial burden, it is also an administrative burden. She said that people need to track
  down their bills and have them in one place in order to submit them as proof of their
  spend down. Ms. Stevens specifically mentioned difficulties for people with substance
  use disorder.
- Ms. Stevens said that it is also an administrative burden for providers and the Department of Health and Human Services (DHHS), as providers need to call and find out if an individual's Medicaid is active or not.
- Ms. Stevens said that, according to the Fiscal Policy Institute, the average rent for a two-bedroom apartment in New Hampshire is \$1,498. She said that that is above even the increased income threshold in HB 1526-FN.

#### Robert Berry and Dawn Landry

#### General Counsel, Division of Medicaid; Medicaid Policy Administrator, DHHS

- Mr. Berry said that HB 1526-FN is an important bill and DHHS supports it. He said that DHHS wants to implement the program but lacks the funding to do so.
- Senator Sherman asked if the population involved was the 50/50 population or if it was the expanded population.
  - Ms. Landry said that none of the expanded population were involved. She said that the population served are mostly the Aged, Blind, and Disabled population.
  - o Senator Bradley indicated he did not understand what Ms. Landry said.
  - o Ms. Landry repeated that the primary population served by in and out medical assistance is the Aged, Blind, and Disabled population, which is a specific population of Medicaid eligibility.
- Senator Bradley said that, looking at the fiscal note, a program was authorized in HB 2-FN-A-L (2021) but implementation was delayed until July 1, 2023.
  - o Mr. Berry clarified that HB 2-FN-A-L (2021) suspended HB 1393-FN (2020).
- Senator Bradley said that fiscal note says that HB 1526-FN would restore the previous bill upon passage.
  - Mr. Berry said that the fiscal note was prepared for HB 1526-FN as introduced.
     He said that it was not updated for the bill as the House amended it.
- Senator Bradley asked why the original fiscal note had a cost of \$7.7 million but the bill as amended would have an appropriation for \$2.6 million with an effective date of January 1, 2023.
  - Ms. Landry said that the \$2.6 million would cover January, February, March, April, May, and June of 2023.
- Senator Bradley asked why moving the effective date back reduced the cost.
  - o Mr. Berry said that moving the effective date back to January 1, 2023 would reduce the number of months the program would cover.
  - Senator Bradley urged DHHS to have an updated fiscal note for when HB 1526-FN gets to the Finance Committee.
- Senator Bradley asked what services the in and out population would be eligible for.

- o Ms. Landry said that once the spend down is met, then they are eligible for all Medicaid services.
- Senator Sherman said that it seemed like the real challenge for the in and out medical
  assistance population seems to be meeting their spend down with their real budgets. He
  asked if HB 1526-FN fixes the issue of non-payment in order to meet the spend down.
  - o Ms. Landry said that by increasing the medical income limit, the spend down will be eliminated for some people and they will be moved over to a MCO. She said that for other the amount of their spend down will be reduced.
- Senator Sherman asked if someone never meets their spend down, then they can never access Medicaid.
  - o Ms. Landry said that that is correct.
- Senator Bradley said that he would ask the Committee to support HB 1526-FN but told Mr. Berry and Ms. Landry to be prepared for questions in the Finance Committee about the financial impacts.

Summary of testimony presented in opposition: None.

Neutral Information Presented: None.

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Date Hearing Report completed: April 15, 2022

# Speakers

# Senate Health & Human Services Committee SIGN-IN SHEET

Date: Thursday April 14, 2022 Time: 10:30 a.m.

HB 1526-

AN ACT relative to income eligibility for in and out medical assistance.

FN

Name/Representing (please print n	eatly)					
- Co. awar wiTV	Support	Neutral	Oppose	Speaking?	Yes	No
Kelley Capachino Behavioral Health	g					
Robert Berry & Dawn Landry	Support	Neutral	Oppose	Speaking?	Yes	No
DHHS					Q/	<u> </u>
	Support	Neutral	Oppose	Speaking?	Yes	No
Sake Berry New Fokrey	Image: Control of the				Ø	
	Support	Neutral	Oppose	Speaking?	Yes	No
	Support	Neutral	Oppose	Speaking?	Yes	No
	Support	Neutral	Oppose	Speaking?	Yes	No
	Support	Neutral	Oppose	Speaking?	Yes	No
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	Support	Neutral	Oppose	Speaking?	Yes.	No
	Support	Neutral	Oppose	Speaking?	Yes	No
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,	Support	Neutral	Oppose	Speaking?	Yes	No
	Support	Neutral	Oppose	Speaking?	Yes	No
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# Senate Health & Human Services Committee SIGN-IN SHEET

Date: Thursday April 14, 2022 Time: 10:30 a.m.

HB 1526-

AN ACT relative to income eligibility for in and out medical assistance.

FN

Name/Representing (piease print ne	eatiy)					
11 01	Support	Neutral	Oppose	Speaking?	Yes	No
Holly Stevens					<b>v</b>	
7 0	Support	Neutral	Oppose	Speaking?	Yes	No
	Support	Neutral	Oppose	Speaking?	Yes	No
-	Support	Neutral	Oppose	Speaking?	Yes	No
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# **Senate Remote Testify**

# Health and Human Services Committee Testify List for Bill HB1526 on 2022-04

Support: 54 Oppose: 0

<u>Name</u>	<u>Title</u>	Representing	<b>Position</b>
Rosenwald, Cindy	An Elected Official	SD 13	Support
McKinney, Dawn	A Lobbyist	NH Legal Assistance	Support
Eisner, Mary	A Member of the Public	Myself	Support
Houle, Normand	A Member of the Public	Myself	Support
Matthews, Marjorie	A Member of the Public	Myself	Support
Manseau, Joline	A Member of the Public	Myself	Support
Sinclair, Jill	A Member of the Public	Myself	Support
Clyde, Terri	A Member of the Public	Myself	Support
Trudel, Karen	A Member of the Public	Myself	Support
Almy, Susan	An Elected Official	Myself	Support
Moore, Susan	A Member of the Public	Myself	Support
Doherty, David	A Member of the Public	Myself	Support
West, Christie	A Member of the Public	Myself	Support
Hatcher, Phil	A Member of the Public	Myself	Support
Dontonville, Roger	An Elected Official	Myself	Support
almeida, zulmira	A Member of the Public	Myself	Support
Dontonville, Anne	A Member of the Public	Myself	Support
Pollinger, Erin	A Member of the Public	Myself	Support
Valcott, Emma	A Member of the Public	Myself	Support
Schofield, Kimberly	A Member of the Public	Myself	Support
Nichols, Beth	A Member of the Public	Mysclf	Support
Pinski, Allison	A Member of the Public	Myself	Support
Widerstrom, Sally	A Member of the Public	Myself	Support
Leavitt, Deborah	A Member of the Public	Myself	Support
Rosenberger, Teresa	A Lobbyist	Brain Injury Association of NH	Support
Gaylord, Heather	A Member of the Public	Myself	Support
Landry, Jillian	State Agency Staff	Myself	Support
Brooks, Josee	A Member of the Public	Myself	Support
Duncan, Elizabeth	State Agency Staff	Myself	Support
Putney, Sheryl	A Member of the Public	Myself	Support
Donnelly, Ryan	A Member of the Public	Granite State Independent Living	Support
SKIDMORE, CLARENCE	A Member of the Public	Myself	Support
Stearns, Susan	A Member of the Public	Myself	Support
Hunnewell, Richard	A Member of the Public	Myself	Support
Hunnewell, Anne	A Member of the Public	Myself	Support
Hitchcock, Elizabeth	A Member of the Public	Myself	Support
thompson, julia	A Member of the Public	Myself	Support
Murray, Kate	An Elected Official	Myself	Support
Dolkart, Vivian	A Member of the Public	Myself	Support
. King, Samantha	A Member of the Public	Myself	Support
Dolkart, Kenneth	A Member of the Public	Myself	Support
inkson-burke, ilsa	A Member of the Public	Myself	Support
Luemmerle, Nancy	A Member of the Public	Myself	Support
Hamblet, Joan	A Member of the Public	Myself	Support
Stamatakis, Carol	A Member of the Public	NH State Commission on Aging	Support
Sherman, Senator	An Elected Official	SD24	Support
Belanger, Kelsey	A Member of the Public	Myself	Support

Griggs, Judy	A Member of the Public	Myself	Support
Cranage, Amy	A Member of the Public	Myself	Support
Robinson, Ellis	A Member of the Public	Myself	Support
DeJoie, John	A Lobbyist	National Assoc of Social Workers -NH Chapter	Suppo-
Bernardin, Melissa	A Lobbyist	NH Public Health Association	Suppo
Rosenberg, Karen	A Lobbyist	Disability Rights Center - NH	Support
HALLOCK, LINDA	A Member of the Public	Myself	Support

and the second of the second o

# Testimony

rom:

Christine Gauvain <donahuec21@gmail.com>

sent:

Friday, April 8, 2022 3:27 PM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

Yes HB 1526

My name is Christine Gauvain and I am a clinical social worker in Nashua, NH and a member of NASW. I work for a community mental health center and am placed in the schools and on a mobile crisis response team. Please vote YES on HB 1526. In my experience providers often feel pressured to add on services for Clients who have high spend downs so that their spend downs can be met. Once they are met they are able to receive medications and much needed medical care. Centers are then burdened with writing off tens of thousands of dollars of this revenue because the Clients cannot pay the spend downs to the centers, and the centers cannot refuse care. This feeds into our mental health crisis because centers cannot afford to pay staff competitive wages, clients with spend downs receive an abundance of services and strain the system, and if the spend downs are not met some individuals go without medical care or medications. NH is one of the few states that has the spend down system. It may safe the state money to do this, but our communities have suffered especially in the realm of mental health. There is no one fix to the mental health crisis in our state but this would alleviate a financial and administrative burden. Thank you for your consideration.

Sincerely Christine Gauvain, MSW

rom:

Krystal Chase <krystal@bianh.org>

Sent:

Friday, April 8, 2022 3:36 PM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

HB1526

Hello,

My name is Krystal Chase and I am a licensed social worker and a resident of Manchester. I am also the director of programs at the Brain Injury Association of New Hampshire. I am asking that you vote YES on HB 1526 relative to in/out Medicaid. I have personally worked with hundreds of people on in/out Medicaid who cannot access appropriate services on a regular basis due to challenges meeting their spenddowns each month. The spenddown system is antiquated and is not used in any other states except Connecticut, as far as I am aware. Improving access to medical care benefits all of the members of our communities.

Thank you,

Krystal L. Chase, LICSW, CBIS
Director of Programs and Services
Brain Injury Association of New Hampshire
52 Pleasant Street
Concord, NH 03301
603-225-8400 Office
603-568-6284 Cell
603-228-6749 Fax
Krystal@bianh.org
www.bianh.org



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From:

Megan Daniels <mrouleau22@gmail.com>

Sent:

Saturday, April 9, 2022 5:03 PM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

HB 1526

### Dear Senators,

I am writing as a Licensed Independant Clinical Social Worker and a member of the NH NASW. I am writing to you requesting that you vote YES on HB 1526 regarding in-and-out Medicaid. This program is for those who make too much income to qualify for regular Medicaid but really don't have enough to spend on their medical bills when their living expenses are factored in. They are required to spend down their deductible every month in order to have access to necessary medical care, including mental health services. Some people would argue that every employer or private insurance company has a deductible so why shouldn't this population as well; a yearly deductible would be one thing but this is EVERY month, which is far and beyond excessive for most people not to mention those who are in financial hardship already.

Thank you for taking your time to read my testimony on this issue and for voting YES to HB 1526. Respectfully,
Megan Daniels, LICSW
Raymond, NH

rom:

Weare Representative <rep03281@aol.com>

Sent:

Monday, April 11, 2022 11:38 AM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

HB 1526

**Attachments:** 

clip\_image001.tiff



April 11, 2022

N.H. Senate Committee on Health and Human Services

Legislative Office Building

33 North State Street

Concord NH 03301

Re: HB 1526, relative to income eligibility for in and out medical assistance

Dear Mr. Chairman and Members of the Committee:

Granite State Taxpayers is New Hampshire's oldest statewide taxpayer advocacy group, founded in 1990 by the late Governor Mel Thomson and the late N.H. Senator George Lovejoy.

GST opposes HB 1526. This bill repeals a provision in the trailer bill that retained the income eligibility standard for the "in and out" Medicaid population at 133% of the federal poverty level for the biennium. In so doing, the bill re-opens the budget, appropriating an additional \$5.3 million in general funds, in violation of long-standing legislative practice: we have a two-year budget, not an annual budget.

The appropriate place for this proposal is in the next biennial budget. For that reason, GST asks the Committee to find the bill ITL at this time.

Respectfully,

Neal Kurk

for Granite State Taxpayers

rom:

Rik Cornell < cornellr@mhcgm.org>

sent:

Monday, April 11, 2022 1:11 PM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

HP1526

I am a member of NASW and a Therapist for over 48 years. I am asking that you vote YES on HB 1526 and put an end to waiting to use funds to get the treatments they need.

Rik Cornell, MSW, ACSW, LICSW Vice President of Community Relations 2 Wall Street, Second Floor Manchester, New Hampshire 03101

Phone: 603-668-4111 ext. 4133 Email: cornell@mhogm.org

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rom: Jent: Ali Huddy <huddyali@mhcgm.org>

Monday, April 11, 2022 1:21 PM

To: Subject: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Vote YES on HB1526

Please vote YES on HB 1526. Increasing the income level to \$901 would eliminate many individuals from being on a spenddown. This would allow them continuous access to benefits and coverage each month without the need to meet a monthly spenddown before their benefits kick in. There would be less barriers to access given continuous coverage. Individuals would no longer need to worry if they've met their spenddown each month before seeking or scheduling services or receiving much needed medications. Please support this bill and vote YES!



li Huddy | Director of Revenue Cycle Management

The Mental Health Center of Greater Manchester

2 Wall Street, Suite 300

Manchester, NH 03101

huddyali@mhcgm.org

Direct (603)206-8584 [Fax (603)628-7800] Main (603)668-4111 ext. 4151

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rom: Pete Costa <costapet@mhcgm.org>

**Sent:** Monday, April 11, 2022 3:02 PM

To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject: HB1526

### Good Afternoon

My name is Peter Costa and I am a Licensed Independent Clinical Social Worker who has worked in the mental health field in New Hampshire since 1997. During this time, I have worked almost exclusively with the most vulnerable of our population—those with severe mental illness and/or substance misuse issues and of little economic means. I have personally seen the desperation of their situation—lack of social supports, housing instability/homelessness, serious medical illness, lack of access to adequate vision and dental care, vocational instability. I have also seen their tremendous resilience, tenacity, and hope—along with an unquenchable desire to be a valued, productive, and integrated member of our society. If you have the opportunity to really talk to these individuals, you would be humbled with their fearless pursuit of what you and I take for granted every day, all while dealing with a mental health issue that was NOT a choice of theirs.

I have personally seen the devastating and crushing burden of the concept of "spenddown" on these individuals. The idea that individuals need to meet a spenddown in order to access coverage for crucial healthcare—dental, medical, vision, and behavioral—is a concept that is poorly conceived and punitive to our most vulnerable. I have seen individual with life threatening medical illness choose not to pursue adequate care because of the burden of the spenddown. I have seen individuals forgo life-saving, necessary psychiatric treatment because of the fear of "incurring a bill" for which hey have no ability to pay—which costs the system more money in the long run. I have personally seen patient decided to forgo necessary treatments because they have to decide whether to pay their rent, or buy groceries, or keep their electricity on because of the burden of the spenddown.

Contrary to what you might believe, our patients have a sense of their duty, their burden to society, their need to be fiscally responsible. Every month, we have seen our patients distress about their "spenddown". This is one worry with which we should not be burdening our most vulnerable. As a community, we are only as healthy as the most vulnerable member, and the concept of a spenddown places an undo burden and responsibility on the victim. The bureaucratic game of "in and out" Medicaid is something that needs to be retired. I wonder how many decades we will waste before we grasp the concept that a bit of preventative medicine saves lives and money in the long run? Adequate and timely access to preventative and cost effective care results in an individual's situation reaching crisis and then requiring our most expensive, reactive services.

This bill is an opportunity for the NH legislature to demonstrate that they stand for the needs of all NH citizens—including the most vulnerable. It is an opportunity to demonstrate that NH values preventative healthcare in the spirit of better human outcomes and better fiscal stewardship. It is an opportunity to demonstrate that legislation can embody compassion. Please vote "yes" on HB 1526. The individuals this bill impacts are not strangers—they are your neighbors, your friends, your family, your community. Thank you.

Peter Costa, LICSW
Director of Training, MHCGM
2 Wall Street

Manchester, NH 03101

603) 854-8384

Pronouns: He/Him/His



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52 Pleasant Street | Concord, NH 03301

Helpline: (800) 773-8400 Tel: (603) 225-8400 Fax: (603) 228-6749

www.bianh.org

THE VOICE OF BRAIN INJURY

April 11, 2022

Senate Health and Human Services State House, Room 302 107 North Main Street Concord NH 03301

RE: HB 1526, relative to income eligibility for in and out medical assistance

Dear Senate Chairman Jeb Bradley and Health and Human Services Committee Members,

On behalf of the Brain Injury Association of New Hampshire's 2,000 member families and caregivers, we urge your support of HB 1526, relative to income eligibility for in and out medical assistance.

The In and Out Medicaid program provides individuals who are living with a brain injury or stroke the support that is needed for them to continue to live a health life within their communities. The current income rate of \$591 for an individual and \$675 for a couple excludes individuals who have worked and paid into the Social Security system. Individuals are unable to meet the required cost of care under the In and Out program to ensure they receive needed medical services, so these individuals will forgo these services to ensure they are able to pay rent and put food on their tables.

Increasing the rate to \$901 for an individual and \$1,047 for a couple, will allow these individuals to access healthcare services that would otherwise not be covered under their Medicare insurance. This will allow them to remain within their communities and sustain a healthy life.

Thank you for your consideration of support for HB 1526.

Senior Director

Exin Hall
Erin Hall, MS, CBIST

Mission: To create a better future through brain injury prevention, education, advocacy and support.

;rom:

Emily Cowan <emilycowanlcsw@gmail.com>

ent:

Tuesday, April 12, 2022 11:12 AM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

vote YES on HB 1526

### Dear Legislators,

I am a clinical social worker. I've been practicing in NH for over 22 years (and hope to for 22 more), and am a member of the National Association of Social Workers. I have worked with clients who have in-and-out Medicaid, and as a single mother I've had Medicaid coverage for my child. Health care is most effective when it's continuous and there are no barriers to it. When a household of limited means is forced to allocate those means differently each month to meet a Medicaid threshhold, it is impossible to create the stability and predictability needed for security, health and peace of mind. Imagine if one month you could afford your doctor's visit for bronchitis, and the next month you had to decide between repairing your car and having that same doctor's visit. Now imagine that if you don't pay for that doctor's visit, it will be even longer until you do meet the threshold for medical coverage. This is not a recipe for effective health care.

Please vote yes on this bill, and give our Medicaid recipients the same access to health care that those with private insurance and Medicare have.

Sincerely, Emily Cowan, LICSW, NH license #933 Concord NH, and formerly of Lancaster NH

Emily Cowan, MSW, LCSW 16 Fayette Street Concord NH 03301

tel. 603 631-5152

NOTE: I cannot guarantee I will see and respond to an email the day you send it. If your message is time-sensitive, it is best to leave me a phone message.

"A hungry people listens not to reason, nor cares for justice, nor is bent by any prayers." -- Lucius Annaeus Seneca

rom: Pam Hoskins <hoskinsp@mhcgm.org>

**Sent:** Tuesday, April 12, 2022 3:25 PM

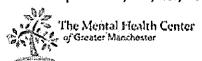
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject: HB 1526

Hello – I am Pam Hoskins, LICSW, a therapist with the Mental Health Center of Greater Manchester. I live in Derry, NH and am a member of the National Association of Social Workers.

I strongly urge you to vote "yes" on HB 1526, as it will alleviate burdensome and frankly downright hurtful encumbrances placed on many people in NH, most particularly the population I have had the privilege to serve over the last 13+ years as a therapist. I can't TELL you how many times clients of mine have been unable to pay for critically important medications, testing, or other services that could have aided in their recoveries from both physical and mental health issues — simply because they did not meet their monthly spend down. It borders on criminal the way people who are on Medicaid are forced to choose between medicine and food, or their therapy and their rent. Please put an end to this nightmare with your "yes" vote.

Pam Hoskins, LICSW
Therapist – Bedford Counselling Associates
2 Wall St. Manchester, NH 03104
603-623-1916 X6321
Preferred pronouns, she, her, hers



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om:

Sarah Hart Wills <sarah@branchoutandgrow.com>

Sent:

Tuesday, April 12, 2022 6:24 PM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

re: HB 1526 relative to income eligibility for in and out medical assistance

Dear Health and Human Services Committee.

I am an NASW Social Worker/therapist in private practice as well as working for Monadnock Family Services part-time. I am asking you to please vote yes on HB1526.

In my role as a private practitioner, with mostly Medicaid clients, when they have in and out Medicaid, it technically means they do not get full medical coverage until they meet their spend down (like a deductible) each month. As most of these folks live very close to the poverty line, they can rarely pay for the services they need each month until their Medicaid kicks in. For me it means that much of their mental health care ends up not being paid for. This is hard on private practitioners at a time when we need as many clinicians willing to work as there can be. We do not want to be providing more free care (most of us already do a fair amount) and we do not want more clinicians to give up on Medicaid clients or leave the field entirely!

Please vote yes on HB 1526.

Thank you for your time.

arah Hart Wills

working in Keene, living and voting in Westmoreland

Jom:

carol@justicenh.org

Sent:

Tuesday, April 12, 2022 11:09 PM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

HB 1526

Chairman Bradley and Members of the Committee,

I am writing as a member of the New Hampshire Commission on Aging, to express support of HB 1526.

Many older adults have difficulty paying for needed medical services and prescription drugs that are not fully covered by Medicare. The Medicaid program is one option for those who are eligible to obtain additional coverage and thus be able to access needed care and have more money available for other necessities. This can help alleviate financial insecurity for those on limited and largely fixed incomes. This bill will allow more older adults and people with disabilities to avoid the often burdensome "spend down" requirements that apply if their income exceeds a certain level. The "spend down" requirements can be particularly challenging for people who experience cognitive decline or have difficulty managing complicated paperwork.

Sincerely yours,

Carol Stamatakis Lempster, NH

603-398-5389 (mobile) Carol@JusticeNH.org

rom:

Shanna R. Griffin <Shanna.R.Griffin@hitchcock.org>

Sent:

Wednesday, April 13, 2022 10:17 AM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

Bill HB1526

- My name is Shanna Griffin and I am a licensed social worker and I live in Bradford, NH and work at Dartmouth Hitchcock in Concord.
- Please vote YES on HB 1526
- It is very important that our families have access to mental health services regardless of ability to pay. Making it more difficult by adding extra costs to already stressed families is not something our government should be doing.. This appropriated money will alleviate these challenges and provide better access to necessary mental and physical health services

Thanks, Shanna

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April 14, 2022

Honorable Chairman Jeb Bradley Senate Health and Human Services Committee Legislate Office Building Room 101 North Main St., Concord, NH 03301

Re: NAMI New Hampshire's support of HB 1526-FN

Dear Chairman and Members of the Committee:

Thank you for the opportunity to testify today. My name is Holly Stevens, and I am the Director of Public Policy at NAMI New Hampshire, the National Alliance on Mental Illness. NAMI NH is a non-profit, grassroots organization whose mission is to improve the lives of all people impacted by mental illness and suicide through support, education and advocacy. On behalf of NAMI NH, I am here today to speak in favor of HB 1526-FN, relative to income eligibility for in and out medical assistance.

When a person meets all Medicaid eligibility requirements for one of the Medicaid programs, but is over the income limit, he or she can receive partial coverage through the In and Out Medicaid program. Every month (or every six months depending on which time duration a person chooses) there is an amount that each person must incur in medical bills that reduces their net income to \$591. After they have spent enough to reach a net monthly income of \$591, Medicaid benefits are turned on for the remainder of the month. Because many of these people simply cannot survive on \$591 per month, either individuals go without necessary medical services or providers, many of them safety net providers, don't get paid for the services that are provided.

Year over year, due to inflation, the costs of all goods and services increase. Yet, the spend down threshold in NH's Medicaid In and Out program has remained stagnant. Per the bill's fiscal note, as of last October here were 6,073 Granite Staters subject to this income spend down simply to receive their necessary medical care. The fiscal note goes on to state that if HB 1526-FN were to pass, 998 of these individuals would be able to qualify for one of the other Medicaid programs without a spend down. While it may seem like a small number, for those 998 people this would make a huge difference in their lives, not only financially, but administratively as well. They would no longer have to send medical bills to DHHS to prove they had spent down to the threshold of \$591. For the remaining 5,075 people, it would mean a few extra dollars for food, gas, or rent. Under HB 1526-FN. for a household of one, the threshold would increase to \$901 and for a household of two, the threshold would increase to \$1,047. According to the 2021 New Hampshire Residential Rental Cost Survey Report, the median rent for a two-bedroom apartment in New Hampshire is \$1,498, well more than the income threshold that this bill would establish.

Not only is the Medicaid In and Out program difficult for beneficiaries, it also creates administrative burdens for both providers and the state. DHIHS has to process and keep track of medical bills for each person on the program, and providers have no way of knowing when a patients Medicaid

benefit has been turned back on, without checking daily. Increasing the income limit would reduce the number of people on the program, thus leading to less administrative burden and cost to the state and its many providers who serve these patients.

For these reasons, NAMI NH strongly supports HB 1526-FN and urges the committee vote ought to pass.

Please do not hesitate to contact me if you have any questions.

Sincerely,

Holly A. Stevens, Esq.

# TESTIMONY ON HB 1526 HOUSE HHS COMMITTEE – APRIL 13, 2022

Thank you very much for the opportunity to testify before you today. My name is Kelley Capuchino and I am testifying on behalf of the NH Community Behavioral Health Association (CBHA), representing all ten community mental health centers in New Hampshire.

The CBHA stands strongly in support of HB 1526 which aims to extend health care coverage to individuals who exceed NH's Medicaid income limits but cannot afford to pay for their medical bills. The proposed increases originally passed into law in 2020 lifted a financial burden on both the individuals who struggle to access and/or pay for their healthcare needs, as well as the providers who serve them.

While many providers may require guarantee of payment, community mental health centers are required by RSA 135-C to provide services to certain individuals without regard to their ability to pay. In 2019 the ten centers incurred losses of over \$7.5M from write-offs due to spenddowns. These losses are incurred by the CMHC's year after year.

As you know, a spenddown is similar to a monthly healthcare deductible. Individuals must incur the expense prior to their Medicaid becoming effective.

To illustrate the need for this bill I would like to share the following from my recent lived experience:

Individual's monthly income \$1,255.10

Monthly Spenddown/deductible \$664.10

Basic Monthly expenses -\$1,200.00

(rent \$850.00; Medicare B \$170.10; auto insurance \$80; utilities \$75; This individual cannot afford Medicare Part D premium)

Remaining available monthly income is only \$55.10 for food, gas, medications, toiletries, copays AND spenddown.

I hope that this real life illustration helps you to understand the significant impact this bill could have by expanding healthcare access to individuals in need of medical services.

The NH CBHA respectfully asks that the Committee recommend this bill ought to pass. Thank you all for your time and consideration of this very important bill. I am happy to answer any questions the committee may have.



advocate • educate • collaborate to improve the health and wellness of all Granite Staters

April 14, 2022

The Honorable Jeb Bradley, Chair Senate Health and Human Services Committee Legislative Office Building, Room 101 33 North State Street Concord, NH 03301

Re: New Futures Support for HB 1526-FN (relative to income eligibility for in and out medical assistance),

Dear Senator Bradley and Honorable Members of the Committee,

New Futures appreciates the opportunity to testify in support of HB 1526-FN, relative to income eligibility for in and out medical assistance. New Futures is a nonpartisan, nonprofit organization that advocates, educates and collaborates to improve the health and wellness of all New Hampshire residents. In this role, we work extensively with policy makers, service providers and families to improve overall public health and health equity across the Granite State.

New Futures stands strongly in support of HB 1526-FN as it aims to increase access to health care coverage through New Hampshire's "In & Out Medical Assistance" program, which supports certain individuals in need. The "In & Out" program, also referred to as the Medicaid spenddown, plays a critical role extending health insurance coverage to individuals who exceed Medicaid's income limits but can't afford their medical bills. This population includes many individuals who have recently gained employment or increased working hours but are still trying to establish greater financial stability.

Currently, single adults earning more than \$591 per month qualify for the program once they have incurred a certain amount of medical expenses; and the income limit is \$675 for a family of two adults. These income limits, which haven't increased in about 30 years, rank among the lowest in the country.

As proposed, HB 1526-FN would increase those income limits \$901 and \$1,047, respectively. These increases, as originally passed into law in 2020 but suspended in the 2021 budget, would expand eligibility to another 1,000 households. For these individuals and families, "In and Out Medical Assistance" can be a lifeline, helping them to maintain access to needed health care and mental health and substance use treatment, among other services, despite changes in income and work status.

For these reasons, New Futures respectfully requests that the Committee recommend this bill Ought to Pass. Please do not hesitate to contact me if you have questions or need additional information.

Respectfully submitted,

Jake Berry

Vice President of Policy

**New Futures** 

rom:

Maryellen Hurley <mhurley25@gmail.com>

Sent:

Thursday, April 14, 2022 9:40 AM

To:

Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine

Subject:

HB1526

Dear Legislators,

I am writing in support of HB1526. As a retired social worker, I know how difficult the financial spend down policy is for many medicaid recipients. People do not get the care they need because they are unable to afford the spend down.

Thank you for addressing this issue.

Maryellen Hurley LICSW

# Voting Sheets

# Senate Health and Human Services Committee

# EXECUTIVE SESSION RECORD

2021-2022 Session

	1		Bill# HB	1526
Hearing date: 4-14-22				
Executive Session date: U-	14-22			
Motion of:			Vote:	50
Committee Member	Presen			Yes No
Sen. Bradley, Chair				
Sen. Gray, Vice Chair	<u> </u>		and the state of t	
Sen. Avard	<u> </u>			
Sen. Sherman Sen. Whitley				
Sen. Whitley				
Motion of:			Vote:	5-0
Committee Member	Presen	t Made by		Yes No
Sen. Bradley, Chair				X
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Sen. Sherman	<u> </u>	<b>\_</b>		
Sen. Whitley		10 mg 10 mg 20 mg 20 Mg 20 mg	×	
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Motion of:				
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Sen. Gray, Vice Chair				
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Sen. Sherman Sen. Whitley				
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Reported out by: Sent Bradk				
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# Senate Finance Committee

# EXECUTIVE SESSION

/		Bill # HB 1526-FN
Hearing date:N/A	<del></del>	· · · · · · · · · · · · · · · · · · ·
Executive session date:	04/26/22	
DTO		VOTE
Motion of:	<del></del>	VOTE:
Made by Daniels 🗆 💆	<u>Seconded</u> Daniels	Reported Daniels
Senator: Reagan 🖳 b	oy Senator: Reagan 🗌	by Senator: Reagan
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D'Allesandro 🗌	D'Allesandro 🗌	D'Allesandro
Morse 🗌	Morse $\Box$	Morse $\square$
Hennessey 🔲	Hennessey 🗌	Hennessey, $\square$
Motion of: Nove And	1 + # 1741 SC	OMM. And T
Motion of:	<u>~/ // ///</u> 5 /	VOTE: SP
Made by Daniels	Seconded Daniels 🗌	Reported Daniels
	by Senator: Reagan	<u>by Senato</u> r: Reagan $\square$
Giuda 🗆	Giuda	Giuda □
Rosenwald	Rosenwald $\Box$	Rosenwald $\square$
D'Allesandro	D'Allesandro 🗌	D'Allesandro 🗆
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<u>Committee Member</u> Senator Daniels , Chairman	Present Yes	No Reported out by
Senator Reagan, Vice-Chair		
Senator Giuda	Ū, U,	
Senator Hennessey		
Senator Rosenwald		
Senator Morse		
Senator D'Allesandro	$\sim$ $^{\prime}$ /	
Amendments:	3) OTP/A -	Girda - Motion
		Kosedwald -2ND
		5-0 Canjes

# Committee Report

### STATE OF NEW HAMPSHIRE

# **SENATE**

# REPORT OF THE COMMITTEE FOR THE CONSENT CALENDAR

Thursday, April 14, 2022

## THE COMMITTEE ON Health and Human Services

to which was referred HB 1526-FN

AN ACT

relative to income eligibility for in and out medical assistance.

Having considered the same, the committee recommends that the Bill

**OUGHT TO PASS** 

BY A VOTE OF: 5-0

Senator Jeb Bradley For the Committee

HB 1526, as amended by the House, repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the Department of Health and Human Services to amend the income eligibility standard for the "in and out medical assistance" policy. The bill also makes an appropriation to the Department to implement the revised income eligibility standard. The Committee heard testimony that this is a policy they have been looking to implement but have not been able to. The Committee was also informed that the population served by this program would primarily be the Aged, Blind, and Disabled population and would not be of any recipients of Medicaid expansion.

Cameron Lapine 271-2104

### FOR THE CONSENT CALENDAR

### **HEALTH AND HUMAN SERVICES**

HB 1526-FN, relative to income eligibility for in and out medical assistance. Ought to Pass, Vote 5-0. Senator Jeb Bradley for the committee.

HB 1526, as amended by the House, repeals the suspension for the biennium ending June 30, 2023, of 2020, 39:1, which required the Department of Health and Human Services to amend the income eligibility standard for the "in and out medical assistance" policy. The bill also makes an appropriation to the Department to implement the revised income eligibility standard. The Committee heard testimony that this is a policy they have been looking to implement but have not been able to. The Committee was also informed that the population served by this program would primarily be the Aged, Blind, and Disabled population and would not be of any recipients of Medicaid expansion.

# STATE OF NEW HAMPSHIRE

# SENATE

### REPORT OF THE COMMITTEE

Wednesday, April 27, 2022

THE COMMITTEE ON Finance

to which was referred HB 1526-FN

AN ACT

relative to income eligibility for in and out medical assistance.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS WITH AMENDMENT

BY A VOTE OF: 5-0

AMENDMENT # 1833s

Senator Cindy Rosenwald For the Committee

Deb Martone 271-4980

# **Docket of HB1526**

**Docket Abbreviations** 

**Bill Title:** (New Title) relative to income eligibility for in and out medical assistance and relative to the executive committee for the mental health counseling compact.

# Official Docket of HB1526.:

Date	Body	Description
12/9/2021	Н	Introduced 01/05/2022 and referred to Health, Human Services and Elderly Affairs
1/18/2022	Н	Public Hearing: 01/25/2022 10:20 am LOB 210-211
2/3/2022	Н	Executive Session: 02/08/2022 09:30 am LOB 210-211
2/9/2022	н	Committee Report: Ought to Pass (Vote 19-2; CC)
2/16/2022	Н	Ought to Pass: MA VV 02/16/2022 HJ 3
2/17/2022	Н	Referred to Finance 02/16/2022 HJ 3
3/11/2022	Н	Division III Work Session: 03/14/2022 03:00 pm LOB 210-211
3/18/2022	Н	==CONTINUED== Division III Work Session: 03/21/2022 10:00 am LOB 201-203
3/9/2022	Н	Executive Session: 03/23/2022 10:00 am LOB 210-211
3/24/2022	Н	Committee Report: Ought to Pass with Amendment <b>#2022-1181</b> (Vote 21-0; RC)
3/31/2022	Н	Amendment #2022-1181h: AA VV 03/31/2022 HJ 9
3/31/2022	Н	Ought to Pass with Amendment 2022-1181h: MA VV 03/31/2022 HJ 9
4/5/2022	S	Introduced 03/31/2022 and Referred to Health and Human Services; SJ 8
4/7/2022	S	Hearing: 04/14/2022, Room Reps Hali, SH, 10:30 am; SC 15
4/14/2022	S	Committee Report: Ought to Pass, 04/21/2022; Vote 5-0; CC; SC 16
4/21/2022	S	Ought to Pass: MA, VV; Refer to Finance Rule 4-5; 04/21/2022; SJ 9
4/27/2022	S	Committee Report: Ought to Pass with Amendment #2022-1833s, 05/05/2022; SC 18
5/5/2022	S	Committee Amendment #2022-1833s, AA, VV; 05/05/2022; SJ 11
5/5/2022	S	Sen. Kahn Floor Amendment #2022-1956s, AA, VV; 05/05/2022; SJ 11
5/5/2022	S	Ought to Pass with Amendments 2022-1833s and 2022-1956s, MA, VV; OT3rdg; 05/05/2022; SJ 11
5/13/2022	Н	House Concurs with Senate Amendment (Rep. M. Pearson): MA VV 05/12/2022 <b>HJ 13</b>
6/9/2022	S	Enrolled Bill Amendment <b>#2022-2108e</b> Adopted, VV, (In recess of 05/26/2022); SJ 13
6/9/2022	Н	Enrolled Bill Amendment <b>#2022-2108-</b> EBA: AA VV (in recess of) 05/26/2022
6/14/2022	S	Enrolled Adopted, VV, (In recess 05/26/2022); SJ 13
6/14/2022	Н	Enrolled (in recess of) 05/26/2022 HJ 14
6/29/2022	Н	Signed by Governor Sununu 06/27/2022; Chapter 265; I. Sec 3 eff as provided in sec 4 II. Rem eff. 01/01/2023 <b>HJ 14</b>

NH House	NH Senate	

# Other Referrals

### Enrolled Bill Amendment to HB 1526-FN

The Committee on Enrolled Bills to which was referred HB 1526-FN

AN ACT relative to income eligibility for in and out medical assistance.

Having considered the same, report the same with the following amendment, and the recommendation that the bill as amended ought to pass.

FOR THE COMMITTEE

### Explanation to Enrolled Bill Amendment to HB 1526-FN

This enrolled bill amendment corrects the title of the bill and makes a technical correction to RSA numbering.

### Enrolled Bill Amendment to HB 1526-FN

Amend the title of the bill by replacing it with the following:

AN ACT relative to income eligibility for in and out medical assistance and relative to the executive committee for the mental health counseling compact.

Amend RSA 330-D:8, IV as inserted by section 3 of the bill by replacing lines 8 through 12 with the following:

counselor organizations to be selected by their respective organizations; and

- (3) The commission may remove any member of the executive committee as provided in the bylaws;
  - (c) Meet at least annually; and
  - (d) Have the following duties and responsibilities:

# Senate Inventory Checklist for Archives

Bill Number: HB 1526 - FW Sens	te Committee: FIWANCE
Please include all documents in the order listed below and i included with an "X" beside	ndicate the documents which have been
X 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 submiss	sions handed in at the public hearing
Hearing Report	•
Revised/Amended Fiscal Notes provided by the Sens	ate Clerk's Office
Committee Action Documents: {Legislative Aides}	
All amendments considered in committee (including those r	ot adopted):
amendment # 17415 amendmen	
X - amendment # 1833 amendmen	t#
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):
X - amendment # 19565 amendmen	t#
amendment # amendmen	t#
Post Floor Action: (if applicable) {Clerk's Office}	
Committee of Conference Report (if signed off by all by the committee of conference):	members. Include any new language proposed
Enrolled Bill Amendment(s) 2\06	
Governor's Veto Message	
All available versions of the bill: {Clerk's Office}	
as amended by the senate	as amended by the house
Completed Committee Report File Delivered to the S	enate Clerk's Office By:
Debla a. Martone	06/15/22
Committee Aide	Date
Senate Clerk's Office	

# Senate Inventory Checklist for Archives

Bill Number: HB 1576-FN S	enate Committee: HHS
Please include all documents in the order listed below a included with an "X" beside	nd indicate the documents which have been
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 substituting Report	
All Calendar Notices	
Hearing Sign-up sheet(s)	
Prepared testimony, presentations, & other subs	nissions 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 tho	se not adopted):
amendment # amendment	nent#
- amendment# amendment	nent #
Executive Session Sheet	
Committee Report	
Floor Action Documents: {Clerk's Office}	
All floor amendments considered by the body during ses	sion (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 by the committee of conference):	all members. Include any new language proposed
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 th	e Senate Clerk's Office By:
Cameron M. Farine	6-11-11
Committee Aide	Date

Senate Clerk's Office