LEGISLATIVE COMMITTEE MINUTES

HB238

Bill as Introduced

HB 238 - AS AMENDED BY THE HOUSE

22Mar2023... 0841h

2023 SESSION

23-0420 06/08

HOUSE BILL

238

AN ACT

relative to the role of quality control and the developmental disability service

system.

SPONSORS:

Rep. McMahon, Rock. 17; Rep. Schapiro, Ches. 16; Rep. M. Pearson, Rock. 34; Rep. Lynn, Rock. 17; Rep. Potucek, Rock. 13; Rep. Guthrie, Rock. 15; Rep. Edwards, Rock. 31; Rep. Popovici-Muller, Rock. 17; Rep. Kuttab, Rock. 17; Sen.

Gannon, Dist 23; Sen. Birdsell, Dist 19

COMMITTEE:

Health, Human Services and Elderly Affairs

ANALYSIS

This bill requires the department of health and human services to seek out and receive input from the developmental quality control council.

Explanation:

Matter added to current law appears in bold italics.

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

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT

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relative to the role of quality control and the developmental disability service system.

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

- Developmental Services Quality Council. Amend RSA 171-A:33 to read as follows:
 171-A:33 Developmental Services Quality Council Established; Membership; Duties.
 - I. There is established the developmental services quality council to provide leadership for consistent, systemic review and improvement of the quality of the developmental disability and acquired brain disorder services provided within New Hampshire's developmental services system. At least 51 percent of the members of the council shall be individuals with disabilities served by the system or parents of individuals served by the system. The members of the council shall be as follows:
 - (a) The commissioner of the department of health and human services, or designee.
 - (b) A representative of People First of New Hampshire, appointed by such organization.
 - (c) A representative of Advocates Building Lasting Equality in New Hampshire (ABLE NH), appointed by such organization.
 - (d) A representative of the New Hampshire council on autism spectrum disorders who. shall be either the individual who has an autism spectrum disorder or the family member of a person who has an autism spectrum disorder, appointed by the council.
 - (e) A representative of the Brain Injury Association of New Hampshire, appointed by the association.
 - (f) Two representatives of the New Hampshire Developmental Disabilities Council, at least one of whom shall be a person with a developmental disability, appointed by the council.
 - (g) Three representatives of local Family Support Councils, appointed by the state Family Support Council.
 - (h) One direct support professional and one enhanced family care provider, appointed by the New Hampshire Developmental Disabilities Council.
 - (i) Three representatives of area agency boards of directors including at least 2 persons with a developmental disability or family members of such persons, appointed by the Community Support Network Incorporated.
- 27 (j) A representative of the Community Support Network Incorporated, appointed by such
 28 organization.
 - (k) A representative of the Private Provider Network, appointed by such organization.
- 30 (l) The director of the Institute on Disability, University of New Hampshire, or designee.

HB 238 - AS AMENDED BY THE HOUSE - Page 2 -

1	(m) A representative of the [Disabilities] Disability Rights Center - NH, appointed by							
2	the center.							
3	(n) Up to 5 additional members, nominated by the council and appointed by the							
4	governor.							
5	II. The groups represented under paragraph I are encouraged to provide, according to their							
6	ability, the in-kind and other resources necessary for the council to succeed. The council may							
7	request information and analysis on quality from the department of health and human services, area							
8	agencies, and providers. The council shall have access to all non-confidential information on quality							
9	for services funded all or in part by public funds.							
10	III. The council shall regularly review information on the quality of developmental services							
11	in New Hampshire and make recommendations for improving service quality and the quality							
12	assurance and continuous improvement systems, including but not limited to:							
13	(a) Standards of quality and performance expected of area agencies and provider							
14	agencies.							
15	(b) Types of data to be collected, analyzed, and disseminated to determine whether							
16	standards are being met.							
17	(c) Quality assurance and oversight mechanisms to be used to gather data and							
18	information.							
19	(d) Content, frequency, and recipients of quality evaluation and improvement reports.							
20	(e) Expectations and procedures for following up on identified areas where							
21	improvements are needed.							
22	(f) Structures, policies, rules, and practices, including staffing or organizational changes,							
23	to ensure that the developmental services system works as intended in RSA 171-A:1, including:							
24	(1) Ways of supporting values-based and person-centered service planning and							
25	provision, as well as problem solving, innovation, and learning;							
26	(2) Recognizing and disseminating what is working well (best/model practices); [and]							
27	(3) Significant changes proposed by the department relating to, or which							
28	may impact any of, the practices, policies, standards, rates, budgets, funding formulae, or							
29	rights pertaining to eligibility or provision of supports and services under RSA 171-A; and							
30	[(3)] (4) Reviewing, interpreting, and disseminating data and information on a							
31	regular basis to bring about transparency for all stakeholders and the public.							
32	IV. For proposed consulting or service contracts involving the provision of							
33	developmental services, the department shall:							
34	(a) Confer and receive input from the council on provisions to be included in							
35	any request for proposals and contracts.							

HB 238 - AS AMENDED BY THE HOUSE - Page 3 -

(b) Require the selected contractor to solicit input from the council prior to issuing any findings or recommendations to the department or any other government entity.

- V. The department shall respond to the council's recommendations for improving service quality and the quality assurance and continuous improvement systems in writing within 30 days of receipt of the council's recommendations. The department's response shall include the following:
- (a) A statement indicating whether it agrees or disagrees with each of the council's recommendations;
- (b) For each recommendation it agrees with, a detailed plan for how the department will address the areas identified as needing improvement including the specific steps the department plans to take, along with a timeline for each step; and
- (c) For any recommendation it does not agree with, an explanation of the basis for its disagreement and rationale for its decision not to take action on any specific recommendation.
- [IV] VI. The council shall make an annual report beginning on November 1, 2010 that includes its recommendations and an assessment of the actions taken in response to previous recommendations to the governor, the speaker of the house of representatives, the president of the senate, the members of the house committee on health, human services and elderly affairs and the members of the senate committee on health and human services.
- [¥] VII. The meetings shall be convened by the chair or vice chair of the council or commissioner of the department of health and human services, [or-designee,] and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations. [A quorum of the council shall be a majority plus one member of the appointed members of the council.] For the purpose of convening council meetings in compliance with RSA 91-A, a quorum of the council shall be a majority plus one member of the appointed members of the council. Members who are not able to be physically present at council meetings due to their disabilities or the disability of a family member shall be counted as attending "in person" for the purpose of the establishment of a quorum provided that each member participating electronically or otherwise is able to simultaneously hear ands speak to each other council member during the meeting, and shall be audible or otherwise discernable to public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating.
- VIII. When the department of health and human services is evaluating or determining the need or desirability for any changes relating to, or which may impact, any

HB 238 - AS AMENDED BY THE HOUSE - Page 4 -

of the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining 1 2 to eligibility or provision of supports and services under RSA 171-A, including, but not limited to, the components listed in RSA 171-A:33, III, the department shall solicit input 3 and recommendations from the council at the initial stages of such consideration and at 4 all stages thereafter and give due deference to the council's input and recommendations on 5 whether, or how, to make any such changes. The department shall receive input from the 6 council on provisions to be included in any request for proposal and contract and give due 7 deference to the council's input when finalizing a request for proposal or contract. The 8 department shall also request the council to select a council member to be part of the 9 selection process for the bidder and shall include a provision in the contract requiring the 10 contractor selected to solicit input from the council on any findings or recommendations 11 12 the contractor is considering or intending to make to the department or any other 13 government entity.

2 Effective Date. This act shall take effect 60 days after its passage.

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HB 238 - AS AMENDED BY THE SENATE

22Mar2023... 0841h 05/11/2023 1534s

2023 SESSION

23-0420 06/08

HOUSE BILL

238

AN ACT

relative to the role of quality control and the developmental disability service

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SPONSORS:

Rep. McMahon, Rock. 17; Rep. Schapiro, Ches. 16; Rep. M. Pearson, Rock. 34; Rep. Lynn, Rock. 17; Rep. Potucek, Rock. 13; Rep. Guthrie, Rock. 15; Rep. Edwards, Rock. 31; Rep. Popovici-Muller, Rock. 17; Rep. Kuttab, Rock. 17; Sen.

Gannon, Dist 23; Sen. Birdsell, Dist 19

COMMITTEE:

Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill directs the developmental services quality council to provide periodic recommendations to the department of health and human services and directs the department to respond to the council within a specified period of time.

Explanation:

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23-0420 06/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to the role of quality control and the developmental disability service system.

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

- Developmental Services Quality Council; Developmental Services Quality Council 1 1 2 Established; Membership; Duties. RSA 171-A:33 is repealed and reenacted to read as follows: 3 171-A:33 Developmental Services Quality Council Established; Membership; Duties. 4 I. There is established the developmental services quality council to provide leadership for 5 consistent, systemic review and improvement of the quality of the developmental disability and 6 acquired brain disorder services provided within New Hampshire's developmental services system. 7 At least 51 percent of the members of the council shall be individuals with disabilities served by the 8 system or parents of individuals served by the system. The members of the council shall be as 9 follows: 10 (a) The commissioner of the department of health and human services, or designee. 11 (b) A representative of People First of New Hampshire, appointed by such organization. 12 (c) A representative of Advocates Building Lasting Equality in New Hampshire (ABLE 13 NH), appointed by such organization. 14 (d) A representative of the New Hampshire council on autism spectrum disorders who
 - who has an autism spectrum disorder, appointed by the council.

 (e) A representative of the Brain Injury Association of New Hampshire, appointed by the

shall be either the individual who has an autism spectrum disorder or the family member of a person

- (f) Two representatives of the New Hampshire Developmental Disabilities Council, at least one of whom shall be a person with a developmental disability, appointed by the council.
- (g) Three representatives of local Family Support Councils, appointed by the state Family Support Council.
- (h) One direct support professional and one enhanced family care provider, appointed by the New Hampshire Developmental Disabilities Council.
- (i) Three representatives of area agency boards of directors including at least 2 persons with a developmental disability or family members of such persons, appointed by the Community Support Network Incorporated.
- (j) A representative of the Community Support Network Incorporated, appointed by such organization.

HB 238 - AS AMENDED BY THE SENATE - Page 2 -

1	(k) A representative of the Private Provider Network, appointed by such organization.						
2	(1) The director of the Institute on Disability, University of New Hampshire, or designee.						
3	(m) A representative of the Disability Rights Center - NH, appointed by the center.						
4	(n) Up to 5 additional members, nominated by the council and appointed by the						
5	governor.						
6	II. The groups represented under paragraph I are encouraged to provide, according to their						
7	ability, the in-kind and other resources necessary for the council to succeed. The council may						
8	request information and analysis on quality from the department of health and human services, area						
9	agencies, and providers. The council shall have access to all non-confidential information on quality						
10	for services funded all or in part by public funds.						
11	III. The council shall regularly review information on the quality of developmental services						
12	in New Hampshire and make recommendations for improving service quality and the quality						
13	assurance and continuous improvement systems, including, but not limited to:						
14	(a) Standards of quality and performance expected of area agencies and provider						
15	agencies.						
16	(b) Types of data to be collected, analyzed, and disseminated to determine whether						
17	standards are being met.						
18	(c) Quality assurance and oversight mechanisms to be used to gather data and						
19	information.						
20	(d) Content, frequency, and recipients of quality evaluation and improvement reports.						
21	(e) Expectations and procedures for following up on identified areas where						
22	improvements are needed.						
23	(f) Structures, policies, rules, and practices, including staffing or organizational changes,						
24	to ensure that the developmental services system works as intended in RSA 171-A:1, including:						
25	(1) Ways of supporting values-based and person-centered service planning and						
26	provision, as well as problem solving, innovation, and learning;						
27	(2) Recognizing and disseminating what is working well (best/model practices);						
28	(3) Significant changes proposed by the department relating to, or which may impact						
29	any of, the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining to						
30	eligibility or provision of supports and services under RSA 171-A; and						
31	(4) Reviewing, clarifying, and disseminating data and information on a regular basis						
32	to bring about transparency for all stakeholders and the public.						
33	IV. The council shall provide the department with recommendations for improving service						
34	quality and the quality assurance and continuous improvement systems, no more frequently than						
35	quarterly. The department shall respond in writing within 30 business days of receipt of the						
36	council's recommendations with a statement indicating whether it agrees or disagrees with each of						
27	the council's recommendations. Following receipt of the department's response the council shall						

HB 238 - AS AMENDED BY THE SENATE - Page 3 -

place the response on the next council meeting agenda for discussion by the commissioner's designee on the council. Within 60 business days of the council meeting, discussion, and record of the discussion in the minutes, the department shall provide:

- (a) For each recommendation it agrees with, a detailed plan for how the department will address the areas identified as needing improvement including the specific steps the department plans to take, along with a timeline for each step;
- (b) For any recommendation it does not agree with, an explanation of the basis for its disagreement and rationale for its decision not to take action on any specific recommendation; and
- (c) If the department is unable to respond to the council's recommendations within the time frames above, the department shall inform the council in writing and include the reasons for not being able respond within the time frames.
- V. The quarterly limit as described in paragraph IV is not intended restrict the council's ability to comment on rules, regulations, proposals, or other initiatives impacting the quality of services for people with developmental disabilities and acquired brain disorders as needed throughout the year.
- VI. The council shall make an annual report beginning on November 1, 2010 that includes its recommendations and an assessment of the actions taken in response to previous recommendations to the governor, the speaker of the house of representatives, the president of the senate, the members of the house committee on health, human services and elderly affairs and the members of the senate committee on health and human services.
- VII. The meetings shall be convened by the chair or vice chair of the council or commissioner of the department of health and human services, or designee, and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations. For the purpose of convening council meetings in compliance with RSA 91-A, a quorum of the council shall be a majority plus one member of the appointed members of the council. Members who are not able to be physically present at council meetings due to their disabilities or the disability of a family member shall be counted as attending "in person" for the purpose of the establishment of a quorum provided that each member participating electronically or otherwise is able to simultaneously hear and speak to each of the other council members during the meeting, and shall be audible or otherwise discernable to public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating.
 - 2 Effective Date. This act shall take effect 60 days after its passage.

HB 238 - VERSION ADOPTED BY BOTH BODIES

22Mar2023... 0841h 05/11/2023 1534s

2023 SESSION

23-0420 06/08

HOUSE BILL

238

AN ACT

relative to the role of quality control and the developmental disability service

system.

SPONSORS:

Rep. McMahon, Rock. 17; Rep. Schapiro, Ches. 16; Rep. M. Pearson, Rock. 34; Rep. Lynn, Rock. 17; Rep. Potucek, Rock. 13; Rep. Guthrie, Rock. 15; Rep. Edwards, Rock. 31; Rep. Popovici-Muller, Rock. 17; Rep. Kuttab, Rock. 17; Sen.

Gannon, Dist 23; Sen. Birdsell, Dist 19

COMMITTEE:

Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill directs the developmental services quality council to provide periodic recommendations to the department of health and human services and directs the department to respond to the council within a specified period of time.

Explanation:

Matter added to current law appears in bold italics.

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HB 238 - VERSION ADOPTED BY BOTH BODIES

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23-0420 06/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to the role of quality control and the developmental disability service system.

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

Developmental Services Quality Council; Developmental Services Quality Council

- 2 Established; Membership; Duties. RSA 171-A:33 is repealed and reenacted to read as follows: 171-A:33 Developmental Services Quality Council Established; Membership; Duties. 4 I. There is established the developmental services quality council to provide leadership for consistent, systemic review and improvement of the quality of the developmental disability and
 - acquired brain disorder services provided within New Hampshire's developmental services system. At least 51 percent of the members of the council shall be individuals with disabilities served by the system or parents of individuals served by the system. The members of the council shall be as follows:
- 10 (a) The commissioner of the department of health and human services, or designee.
 - (b) A representative of People First of New Hampshire, appointed by such organization.
 - (c) A representative of Advocates Building Lasting Equality in New Hampshire (ABLE NH), appointed by such organization.
 - (d) A representative of the New Hampshire council on autism spectrum disorders who shall be either the individual who has an autism spectrum disorder or the family member of a person who has an autism spectrum disorder, appointed by the council.
 - (e) A representative of the Brain Injury Association of New Hampshire, appointed by the association.
 - (f) Two representatives of the New Hampshire Developmental Disabilities Council, at least one of whom shall be a person with a developmental disability, appointed by the council.
 - (g) Three representatives of local Family Support Councils, appointed by the state Family Support Council.
 - (h) One direct support professional and one enhanced family care provider, appointed by the New Hampshire Developmental Disabilities Council.
- 25 (i) Three representatives of area agency boards of directors including at least 2 persons 26 with a developmental disability or family members of such persons, appointed by the Community 27 Support Network Incorporated.
- 28 (j) A representative of the Community Support Network Incorporated, appointed by such 29 organization.

HB 238 - VERSION ADOPTED BY BOTH BODIES - Page 2 -

1	(k) A representative of the Private Provider Network, appointed by such organization.					
2	(1) The director of the Institute on Disability, University of New Hampshire, or designee.					
3	(m) A representative of the Disability Rights Center - NH, appointed by the center.					
4	(n) Up to 5 additional members, nominated by the council and appointed by the					
5	governor.					
6	II. The groups represented under paragraph I are encouraged to provide, according to their					
7	ability, the in-kind and other resources necessary for the council to succeed. The council may					
8	request information and analysis on quality from the department of health and human services, area					
9	agencies, and providers. The council shall have access to all non-confidential information on quality					
10	for services funded all or in part by public funds.					
11	III. The council shall regularly review information on the quality of developmental services					
12	in New Hampshire and make recommendations for improving service quality and the quality					
13	assurance and continuous improvement systems, including, but not limited to:					
14	(a) Standards of quality and performance expected of area agencies and provider					
15	agencies.					
16	(b) Types of data to be collected, analyzed, and disseminated to determine whether					
17	standards are being met.					
18	(c) Quality assurance and oversight mechanisms to be used to gather data and					
19	information.					
20	(d) Content, frequency, and recipients of quality evaluation and improvement reports.					
21	(e) Expectations and procedures for following up on identified areas where					
22	improvements are needed.					
23	(f) Structures, policies, rules, and practices, including staffing or organizational changes,					
24	to ensure that the developmental services system works as intended in RSA 171-A:1, including:					
25	(1) Ways of supporting values-based and person-centered service planning and					
26	provision, as well as problem solving, innovation, and learning;					
27	(2) Recognizing and disseminating what is working well (best/model practices);					
28	(3) Significant changes proposed by the department relating to, or which may impact					
29	any of, the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining to					
30	eligibility or provision of supports and services under RSA 171-A; and					
31	(4) Reviewing, clarifying, and disseminating data and information on a regular basis					
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33	IV. The council shall provide the department with recommendations for improving service					
34	quality and the quality assurance and continuous improvement systems, no more frequently than					
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HB 238 - VERSION ADOPTED BY BOTH BODIES - Page 3 -

place the response on the next council meeting agenda for discussion by the commissioner's designee on the council. Within 60 business days of the council meeting, discussion, and record of the discussion in the minutes, the department shall provide:

- (a) For each recommendation it agrees with, a detailed plan for how the department will address the areas identified as needing improvement including the specific steps the department plans to take, along with a timeline for each step;
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- V. The quarterly limit as described in paragraph IV is not intended restrict the council's ability to comment on rules, regulations, proposals, or other initiatives impacting the quality of services for people with developmental disabilities and acquired brain disorders as needed throughout the year.
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 - 2 Effective Date. This act shall take effect 60 days after its passage.

CHAPTER 183 HB 238 - FINAL VERSION

22Mar2023... 0841h 05/11/2023 1534s

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23-0420 06/08

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AN ACT

relative to the role of quality control and the developmental disability service

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SPONSORS:

COMMITTEE:

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Edwards, Rock. 31; Rep. Popovici-Muller, Rock. 17; Rep. Kuttab, Rock. 17; Sen. Gannon, Dist 23; Sen. Birdsell, Dist 19

Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

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- Family Support Council.
 (h) One direct support professional and one enhanced family care provider, appointed by

least one of whom shall be a person with a developmental disability, appointed by the council.

(h) One direct support professional and one enhanced family care provider, appointed by the New Hampshire Developmental Disabilities Council.

(f) Two representatives of the New Hampshire Developmental Disabilities Council, at

(g) Three representatives of local Family Support Councils, appointed by the state

- (i) Three representatives of area agency boards of directors including at least 2 persons with a developmental disability or family members of such persons, appointed by the Community Support Network Incorporated.
- 28 (j) A representative of the Community Support Network Incorporated, appointed by such29 organization.

CHAPTER 183 HB 238 - FINAL VERSION - Page 2 -

1	(k) A representative of the Private Provider Network, appointed by such organization.
2	(l) The director of the Institute on Disability, University of New Hampshire, or designee.
3	(m) A representative of the Disability Rights Center - NH, appointed by the center.
4	(n) Up to 5 additional members, nominated by the council and appointed by the
5	governor.
6	II. The groups represented under paragraph I are encouraged to provide, according to their
7	ability, the in-kind and other resources necessary for the council to succeed. The council may
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12	in New Hampshire and make recommendations for improving service quality and the quality
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15	agencies.
16	(b) Types of data to be collected, analyzed, and disseminated to determine whether
17	standards are being met.
18	(c) Quality assurance and oversight mechanisms to be used to gather data and
19	information.
20	(d) Content, frequency, and recipients of quality evaluation and improvement reports.
21	(e) Expectations and procedures for following up on identified areas where
22	improvements are needed.
23	(f) Structures, policies, rules, and practices, including staffing or organizational changes,
24	to ensure that the developmental services system works as intended in RSA 171-A:1, including:
25	(1) Ways of supporting values-based and person-centered service planning and
26	provision, as well as problem solving, innovation, and learning;
27	(2) Recognizing and disseminating what is working well (best/model practices);
28	(3) Significant changes proposed by the department relating to, or which may impact
29	any of, the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining to
30	eligibility or provision of supports and services under RSA 171-A; and
31	(4) Reviewing, clarifying, and disseminating data and information on a regular basis
32	to bring about transparency for all stakeholders and the public.
33	IV. The council shall provide the department with recommendations for improving service
34	quality and the quality assurance and continuous improvement systems, no more frequently than
35	quarterly. The department shall respond in writing within 30 business days of receipt of the
36	council's recommendations with a statement indicating whether it agrees or disagrees with each of
37	the council's recommendations. Following receipt of the department's response, the council shall

CHAPTER 183 HB 238 - FINAL VERSION - Page 3 -

place the response on the next council meeting agenda for discussion by the commissioner's designee on the council. Within 60 business days of the council meeting, discussion, and record of the discussion in the minutes, the department shall provide:

- (a) For each recommendation it agrees with, a detailed plan for how the department will address the areas identified as needing improvement including the specific steps the department plans to take, along with a timeline for each step;
- (b) For any recommendation it does not agree with, an explanation of the basis for its disagreement and rationale for its decision not to take action on any specific recommendation; and
- (c) If the department is unable to respond to the council's recommendations within the time frames above, the department shall inform the council in writing and include the reasons for not being able respond within the time frames.
- V. The quarterly limit as described in paragraph IV is not intended restrict the council's ability to comment on rules, regulations, proposals, or other initiatives impacting the quality of services for people with developmental disabilities and acquired brain disorders as needed throughout the year.
- VI. The council shall make an annual report beginning on November 1, 2010 that includes its recommendations and an assessment of the actions taken in response to previous recommendations to the governor, the speaker of the house of representatives, the president of the senate, the members of the house committee on health, human services and elderly affairs and the members of the senate committee on health and human services.
- VII. The meetings shall be convened by the chair or vice chair of the council or commissioner of the department of health and human services, or designee, and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations. For the purpose of convening council meetings in compliance with RSA 91-A, a quorum of the council shall be a majority plus one member of the appointed members of the council. Members who are not able to be physically present at council meetings due to their disabilities or the disability of a family member shall be counted as attending "in person" for the purpose of the establishment of a quorum provided that each member participating electronically or otherwise is able to simultaneously hear and speak to each of the other council members during the meeting, and shall be audible or otherwise discernable to public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating.

183:2 Effective Date. This act shall take effect 60 days after its passage.

Approved: August 04, 2023 Effective Date: October 03, 2023

Amendments

30 31

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organization.

Amendment to HB 238

1	Amend the bill by replacing all after the enacting clause with the following:
2	
3	1 Developmental Services Quality Council RSA 171-A:33 is repealed and reenacted to read as
4	follows:
5	171-A:33 Developmental Services Quality Council Established; Membership; Duties.
6	I. There is established the developmental services quality council to provide leadership for
7	consistent, systemic review and improvement of the quality of the developmental disability and
8	acquired brain disorder services provided within New Hampshire's developmental services system.
9	At least 51 percent of the members of the council shall be individuals with disabilities served by the
10	system or parents of individuals served by the system. The members of the council shall be as
11	follows:
12	(a) The commissioner of the department of health and human services, or designee.
13	(b) A representative of People First of New Hampshire, appointed by such organization.
14	(c) A representative of Advocates Building Lasting Equality in New Hampshire (ABLE
15	NH), appointed by such organization.
16	(d) A representative of the New Hampshire council on autism spectrum disorders who
17	shall be either the individual who has an autism spectrum disorder or the family member of a person
18	who has an autism spectrum disorder, appointed by the council.
19	(e) A representative of the Brain Injury Association of New Hampshire, appointed by the
20	association.
21	(f) Two representatives of the New Hampshire Developmental Disabilities Council, at
22	least one of whom-shall be a person with a developmental disability, appointed by the council.
23	(g) Three representatives of local Family Support Councils, appointed by the state
24	Family Support Council.
25	(h) One direct support professional and one enhanced family care provider, appointed by
26	the New Hampshire Developmental Disabilities Council.
27	(i) Three representatives of area agency boards of directors including at least 2 persons
28	with a developmental disability or family members of such persons, appointed by the Community
29	Support Network Incorporated.

(j) A representative of the Community Support Network Incorporated, appointed by such

(k) A representative of the Private Provider Network, appointed by such organization.

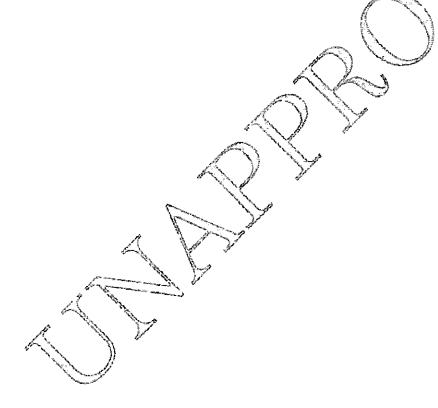
Amendment to HB 238 - Page 2 -

1	(l) The director of the Institute on Disability, University of New Hampshire, or designee.
2	(m) A representative of the Disability Rights Center - NH, appointed by the center.
3	(n) Up to 5 additional members, nominated by the council and appointed by the
4	governor.
5	II. The groups represented under paragraph I are encouraged to provide, according to their
6	ability, the in-kind and other resources necessary for the council to succeed. The council may
7	request information and analysis on quality from the department of health and human services, area
8	agencies, and providers. The council shall have access to all non-confidential information on quality
9	for services funded all or in part by public funds.
10	III. The council shall regularly review information on the quality of developmental services
11	in New Hampshire and make recommendations for improving service quality and the quality
12	assurance and continuous improvement systems, including but not limited to:
13	(a) Standards of quality and performance expected of area agencies and provider
14	agencies.
15	(b) Types of data to be collected, analyzed, and disseminated to determine whether
16	standards are being met.
17	(c) Quality assurance and oversight mechanisms to be used to gather data and
18	information.
19	(d) Content, frequency, and recipients of quality evaluation and improvement reports.
20	(e) Expectations and procedures for following up on identified areas where
21	improvements are needed.
22	(f) Structures, policies, rules, and practices, including staffing or organizational changes,
23	to ensure that the developmental services system works as intended in RSA 171-A:1, including:
24	(1) Ways of supporting values-based and person-centered service planning and
25	provision, as well as problem solving, innovation, and learning;
26	(2) Recognizing and disseminating what is working well (best/model practices);
27	(3)-Significant changes proposed by the department relating to, or which may impact
28	any of, the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining to
29	eligibility or provision of supports and services under RSA 171-A; and
30	(4) Reviewing, interpreting, and disseminating data and information on a regular
31	basis to bring about transparency for all stakeholders and the public.
32	IV. The council shall make an annual report beginning on November 1, 2010 that includes
33	its recommendations and an assessment of the actions taken in response to previous
34	recommendations to the governor, the speaker of the house of representatives, the president of the
35	senate, the members of the house committee on health, human services and elderly affairs and the
36	members of the senate committee on health and human services.

Amendment to HB 238 - Page 3 -

V. The meetings shall be convened by the chair or vice chair of the council or commissioner of the department of health and human services, or designee, and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations. For the purpose of convening council meetings in compliance with RSA 91-A, a quorum of the council shall be a majority plus one member of the appointed members of the council. Members who are not able to be physically present at council meetings due to their disabilities or the disability of a family member shall be counted as attending "in person" for the purpose of the establishment of a quorum provided that each member participating electronically or otherwise is able to simultaneously hear and speak to each other council member during the meeting, and shall be audible or otherwise discernable to public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating.

2 Effective Date. This act shall take effect 60 days after its passage



Sen. Pearl, Dist 17 Sen. Perkins Kwoka, Dist 21 April 20, 2023 2023-1452s 05/08

31

Amendment to HB 238

1	Amend RSA 171-A:33 as inserted by section 1 of the bill by replacing it with the following:
2	
3	171-A:33 Developmental Services Quality Council Established; Membership; Duties.
4	I. There is established the developmental services quality council to provide leadership for
5	consistent, systemic review and improvement of the quality of the developmental disability and
6	acquired brain disorder services provided within New Hampshire's developmental services system.
7	At least 51 percent of the members of the council shall be individuals with disabilities served by the
8	system or parents of individuals served by the system. The members of the council shall be as
9	follows:
10	(a) The commissioner of the department of health and human services, or designee.
11	(b) A representative of People First of New Hampshire, appointed by such organization.
12	(c) A representative of Advocates Building Lasting Equality in New Hampshire (ABLE
13	NH), appointed by such organization.
14	(d) A representative of the New Hampshire council on autism spectrum disorders who
15	shall be either the individual who has an autism spectrum disorder or the family member of a person
16	who has an autism spectrum disorder, appointed by the council.
17	(e) A representative of the Brain Injury Association of New Hampshire, appointed by the
18	association.
19	(f) Two representatives of the New Hampshire Developmental Disabilities Council, at
20	least one of whom shall be a person with a developmental disability, appointed by the council.
21	(g) Three representatives of local Family Support Councils, appointed by the state
22	Family Support Council.
23	(h)) One direct support professional and one enhanced family care provider, appointed by
24	the New Hampshire Developmental Disabilities Council.
25	(i) Three representatives of area agency boards of directors including at least 2 persons
26	with a developmental disability or family members of such persons, appointed by the Community
27	Support Network Incorporated.
28	(j) A representative of the Community Support Network Incorporated, appointed by such
29	organization.
30	(k) A representative of the Private Provider Network, appointed by such organization.

(1) The director of the Institute on Disability, University of New Hampshire, or designee.

Amendment to HB 238 - Page 2 -

1	(m) A representative of the [Disabilities] Disability Rights Center - NH, appointed by
2	the center.
3	(n) Up to 5 additional members, nominated by the council and appointed by the
4	governor.
5	II. The groups represented under paragraph I are encouraged to provide, according to their
6	ability, the in-kind and other resources necessary for the council to succeed. The council may
7	request information and analysis on quality from the department of health and human services, area
8	agencies, and providers. The council shall have access to all non-confidential information on quality
9	for services funded all or in part by public funds.
10	III. The council shall regularly review information on the quality of developmental services
11	in New Hampshire and make recommendations for improving service quality and the quality
12	assurance and continuous improvement systems, including, but not limited to:
13	(a) Standards of quality and performance expected of area agencies and provider
14	agencies.
15	(b) Types of data to be collected, analyzed, and disseminated to determine whether
16	standards are being met.
17	(c) Quality assurance and oversight mechanisms to be used to gather data and
18	information.
19	(d) Content, frequency, and recipients of quality evaluation and improvement reports.
20	(e) Expectations and procedures for following up on identified areas where
21	improvements are needed.
22	(f) Structures, policies, rules, and practices, including staffing or organizational changes
23	to ensure that the developmental services system works as intended in RSA 171-A:1, including:
24	(1) Ways of supporting values-based and person-centered service planning and
25	provision, as well as problem solving, innovation, and learning;
26	(2) Recognizing and disseminating what is working well (best/model practices); [and]
27	(3)—Significant changes proposed by the department relating to, or which
28	may impact any of, the practices, policies, standards, rates, budgets, funding formulae, or
29	rights pertaining to eligibility or provision of supports and services under RSA 171-A; and
30	[(3)] (4) Reviewing, interpreting, and disseminating data and information on a
31	regular basis to bring about transparency for all stakeholders and the public.
32	IV. The council shall provide the department with recommendations for improving
33	service quality and the quality assurance and continuous improvement systems, no more
34	frequently than quarterly. The department shall respond in writing within 30 business
35	days of receipt of the council's recommendations with a statement indicating whether it
36	agrees or disagrees with each of the council's recommendations. Following receipt of the
37	department's response, the council shall place the response on the next council meeting

agenda for discussion by the commissioner's designee on the council. Within 60 business days of the council meeting, discussion, and record of the discussion in the minutes, the department shall provide:

- (a) For each recommendation it agrees with, a detailed plan for how the department will address the areas identified as needing improvement including the specific steps the department plans to take, along with a timeline for each step;
- (b) For any recommendation it does not agree with, an explanation of the basis for its disagreement and rationale for its decision not to take action on any specific recommendation; and
- (c) If the department is unable to respond to the council's recommendations within the timeframes above, the department shall inform the council in writing and include the reasons for not being able respond within the time frames.
- [IV] V. The council shall make an annual report beginning on November 1, 2010 that includes its recommendations and an assessment of the actions taken in response to previous recommendations to the governor, the speaker of the house of representatives, the president of the senate, the members of the house committee on health, human services and elderly affairs and the members of the senate committee on health, and human services.
- [V] VI. The meetings shall be convened by the chair or vice chair of the council or commissioner of the department of health and human services, or designee, and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations. [A quorum of the council shall be a majority plus one member of the appointed members of the council.] For the purpose of convening council meetings in compliance with RSA 91-A, a quorum of the council shall be a majority plus one member of the appointed members of the council. Members who are not able to be physically present at council meetings due to their disabilities or the disability of a family member shall be counted as attending "in person" for the purpose of the establishment of a quorum provided that each member participating electronically or otherwise is able to simultaneously hear and speak to each of the other council members during the meeting, and shall be audible or otherwise discernable to public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating.

2023-1452s

AMENDED ANALYSIS

This bill directs the developmental services quality council to provide periodic recommendations to the department of health and human services and directs the department to respond to the council within a specified period of time.



Sen. Pearl, Dist 17 April 21, 2023 2023-1460s 06/05

Amendment to HB 238

Amend RSA 171-A:33, III(f)(3) and (4) as inserted by section 1 of the bill by replacing it with the following:

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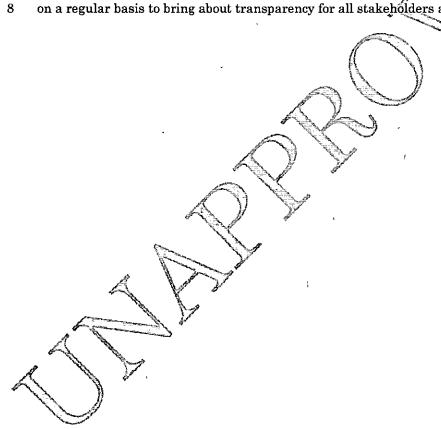
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(3) Significant changes proposed by the department relating to, or which may impact any of, the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining to eligibility or provision of supports and services under RSA 171-A; and

(4) Reviewing, [interpreting] clarifying, and disseminating data and information on a regular basis to bring about transparency for all stakeholders and the public.



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Amendment to HB 238

Developmental Services Quality Council; Developmental Services Quality Council

Amend RSA 171-A:33 as inserted by section 1 of the bill by replacing it with the following:

4	Established; Membership; Duties. RSA 171-A:33 is repealed and reenacted to read as follows:							
5	171-A:33 Developmental Services Quality Council Established; Membership; Duties.							
6	I. There is established the developmental services quality council to provide leadership fo							
7	consistent, systemic review and improvement of the quality of the developmental disability and							
8	acquired brain disorder services provided within New Hampshire's developmental services system							
9	At least 51 percent of the members of the council shall be individuals with disabilities served by the							
10	system or parents of individuals served by the system. The members of the council shall be a							
11	follows:							
12	(a) The commissioner of the department of health and human services, or designee.							
13	(b) A representative of People First of New Hampshire, appointed by such organization.							
14	(c) A representative of Advocates Building Lasting Equality in New Hampshire (ABLE							
15	NH), appointed by such organization.							
16	(d) A representative of the New Hampshire council on autism spectrum disorders who							
17	shall be either the individual who has an autism spectrum disorder or the family member of a person							
18	who has an autism spectrum disorder, appointed by the council.							
19	(e) A representative of the Brain Injury Association of New Hampshire, appointed by the							
20	association.							
21	(f) Two representatives of the New Hampshire Developmental Disabilities Council, at							
22	least one of whom shall be a person with a developmental disability, appointed by the council.							
23	(g) Three representatives of local Family Support Councils, appointed by the state							
24	Family Support Council.							
25	(h) One direct support professional and one enhanced family care provider, appointed by							
26	the New Hampshire Developmental Disabilities Council.							
27	(i) Three representatives of area agency boards of directors including at least 2 persons							
28	with a developmental disability or family members of such persons, appointed by the Community							
29	Support Network Incorporated.							
30	(j) A representative of the Community Support Network Incorporated, appointed by such							
31	organization.							

(k) A representative of the Private Provider Network, appointed by such organization.

Amendment to HB 238 - Page 2 -

1	(1) The director of the Institute on Disability, University of New Hampshire, or designee.
2	(m) A representative of the Disability Rights Center - NH, appointed by the center.
3	(n) Up to 5 additional members, nominated by the council and appointed by the
4	governor.
5	II. The groups represented under paragraph I are encouraged to provide, according to their
6	ability, the in-kind and other resources necessary for the council to succeed. The council may
7	request information and analysis on quality from the department of health and human services, area
8	agencies, and providers. The council shall have access to all non-confidential information on quality
9	for services funded all or in part by public funds.
10	III. The council shall regularly review information on the quality of developmental services
11	in New Hampshire and make recommendations for improving service quality and the quality
12	assurance and continuous improvement systems, including, but not limited to:
13	(a) Standards of quality and performance expected of area agencies and provider
14	agencies.
15	(b) Types of data to be collected, analyzed, and disseminated to determine whether
16	standards are being met.
17	(c) Quality assurance and oversight mechanisms to be used to gather data and
18	information.
19	(d) Content, frequency, and recipients of quality evaluation and improvement reports.
20	(e) Expectations and procedures for following up on identified areas where
21	improvements are needed.
22	(f) Structures, policies, rules, and practices, including staffing or organizational changes,
23	to ensure that the developmental services system works as intended in RSA 171-A:1, including:
24	(1) Ways of supporting values-based and person-centered service planning and
25	provision, as well as problem solving, innovation, and learning;
26	(2) Recognizing and disseminating what is working well (best/model practices);
27	(3) Significant changes proposed by the department relating to, or which may impact
28	any of, the practices, policies, standards, rates, budgets, funding formulae, or rights pertaining to
29	eligibility or provision of supports and services under RSA 171-A; and
30	(4) Reviewing, clarifying, and disseminating data and information on a regular basis
31	to bring about transparency for all stakeholders and the public.
32	IV. The council shall provide the department with recommendations for improving service
33	quality and the quality assurance and continuous improvement systems, no more frequently than
34	quarterly. The department shall respond in writing within 30 business days of receipt of the
35	council's recommendations with a statement indicating whether it agrees or disagrees with each of
36	the council's recommendations. Following receipt of the department's response, the council shall
37	place the response on the next council meeting agenda for discussion by the commissioner's designee

Amendment to HB 238 - Page 3 -

on the council. Within 60 business days of the council meeting, discussion, and record of the discussion in the minutes, the department shall provide:

- (a) For each recommendation it agrees with, a detailed plan for how the department will address the areas identified as needing improvement including the specific steps the department plans to take, along with a timeline for each step;
- (b) For any recommendation it does not agree with, an explanation of the basis for its disagreement and rationale for its decision not to take action on any specific recommendation; and
- (c) If the department is unable to respond to the council's recommendations within the time frames above, the department shall inform the council in writing and include the reasons for not being able respond within the time frames.
- V. The quarterly limit as described in paragraph IV is not intended restrict the council's ability to comment on rules, regulations, proposals, or other initiatives impacting the quality of services for people with developmental disabilities and acquired brain disorders as needed throughout the year.
- VI. The council shall make an annual report beginning on November 1, 2010 that includes its recommendations and an assessment of the actions taken in response to previous recommendations to the governor, the speaker of the house of representatives, the president of the senate, the members of the house committee on health, human services and elderly affairs and the members of the senate committee on health and human services.

VII. The meetings shall be convened by the chair or vice chair of the council or commissioner of the department of health and human services, or designee, and shall meet regularly as determined by the council. The meetings shall be open to the public and subject to the provisions of RSA 91-A, the right-to-know law. The council may establish bylaws for governing its meetings, decisions, and other operations. For the purpose of convening council meetings in compliance with RSA 91-A, a quorum of the council shall be a majority plus one member of the appointed members of the council. Members who are not able to be physically present at council meetings due to their disabilities or the disability of a family member shall be counted as attending "in person" for the purpose of the establishment of a quorum provided that each member participating electronically or otherwise is able to simultaneously hear and speak to each of the other council members during the meeting, and shall be audible or otherwise discernable to public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating.

Amendment to HB 238 - Page 4-

2023-1534s

AMENDED ANALYSIS

This bill directs the developmental services quality council to provide periodic recommendations to the department of health and human services and directs the department to respond to the council within a specified period of time.

Committee Minutes

SENATE CALENDAR NOTICE Executive Departments and Administration

Sen Howard Pearl, Chair Sen Sharon Carson, Vice Chair Sen Carrie Gendreau, Member Sen Rebecca Perkins Kwoka, Member Sen Debra Altschiller, Member

Phil Jasak 271-1403

Date: April 5, 2023

HEARINGS

Wednesday			04/12/2023			
	T)	Day)		(Date)		
Executive I	Departmen	its and Adn	ninistration	State House	103	9:00 a.m.
(Name of C	ommittee)			(Place)		(Time)
			relative to the membership and reporting responsibilities of the examining board of medicine.			
9:15 a.m.	HB 258		relative to anima	l chiropractors.		
9:30 a.m.	9:30 a.m. HB 421 requiring menstrual hygiene products to be provided to prisoner menstruate in state and county correctional facilities.					
9:45 a.m. HB 238 relative to the role of quality conservice system.			le of quality control :	control and the developmental disability		
10:00 a.m.	HB 228		relative to repeal	ing the commission	on demograph	nic trends.
		EXE	CUTIVE SESSIO	ON MAY FOLLOW		
Sponsors: HB 454 Rep. Edwards HB 258 Rep. D. Kelley HB 421		Rep. Layon		Rep. M. Pearson		
Rep. Read Rep. A. Mun		Rep. A. Murra Sen. Altschille		Rep. Kenney	Rep. Po	povici-Muller
Rep. McMahon Rep. Potucek Rep. Kuttab HB 228 Rep. G. Griffin		Rep. Schapiro Rep. Guthrie Sen. Gannon		Rep. M. Pearson Rep. Edwards Sen. Birdsell	Rep. Ly Rep. Po	nn povici-Muller

Howard Pearl Chairman

Senate Executive Departments and Administration Committee

Phil Jasak 271-1403

HB 238, relative to the role of quality control and the developmental disability service system.

Hearing Date:

April 12, 2023

Members of the Committee Present: Senators Pearl, Carson, Gendreau and

Perkins Kwoka

Members of the Committee Absent: Senator Altschiller

Bill Analysis: This bill requires the department of health and human services to

seek out and receive input from the developmental quality control council.

Sponsors:

Rep. McMahon

Rep. Schapiro

Rep. M. Pearson

Rep. Lynn

Rep. Potucek

Rep. Guthrie

Rep. Edwards

Rep. Popovici-Muller

Rep. Kuttab

Sen. Gannon

Sen. Birdsell

Who supports the bill: In total 50 individuals signed in, for HB 238. The full sign in sheet is available upon request to the Legislative Aide, Phillip Jasak.

Who opposes the bill: In total 50 individuals signed in, for HB 238. The full sign in sheet is available upon request to the Legislative Aide, Phillip Jasak.

Who is neutral on the bill: In total 50 individuals signed in, for HB 238. The full sign in sheet is available upon request to the Legislative Aide, Phillip Jasak.

Summary of testimony presented:

Representative Charles McMahon

(Rockingham District 17)

- Stated that years ago the quality control council was established in order to assist with policies handled by the department of health and human services (DHHS) regarding the developmental service system.
- Rep. McMahon added that this bill is in response to hearing the challenges that parents are facing, further stated that there was a restructuring that took place after the Alvarez & Marsal (A&M) report, where a consulting company was

- hired to assess the efficiency and effectiveness of various DHHS programs. Rep. McMahon added that during this time the open communication between DHHS and the Quality Control Council was not present.
- Rep. McMahon stated that this quality control council in this bill will play a material role in developing policies, services, and the contents of contracts in working with the department. He clarified that this bill is not designed to take over the responsibilities of DHHS but to address the problems on the ground.
- Rep. McMahon acknowledged an issue that came up prior to the House hearings, which was the concern over the conflict of interest through putting a council member on the selection process of the contractor. Stated that this section appears in rules that are handled by DHHS but that this section was taken out of the amended version of HB 238.

Representative Mark Pearson

(Rockingham District 34)

- Rep. Pearson noted that constituents and members of agencies began voicing their concerns to him specifically around the topic of the change in waivers for the developmentally disabled community. He added that within the last year, he has tried to get the developmentally disabled loved ones, area agency members, and members of the DHHS. Found through these meetings that there was very little communication between these stakeholders.
- Rep. Pearson concluded that by building into the system this requirement for DHHS to be consulted by the quality control council, it makes this practice a standard, which he believes is a logical requirement for the department.

Christine Santaniello & Nathan White

(Associate Commissioner of DHHS & Chief Financial Officer of DHHS)

- Ms. Santaniello asserted that the department has serious concerns over HB 238
 as presented, and noted that there are 3 similar house bills that deal with the
 developmental services were filed this session. Noted that these bills are a
 reaction to the A&M report.
- Brought up the concerns over the DHHS involvement with Alvarez and Marsal and stated that there assessment and consulting was due to anticipated major fiscal concerns in the fall of 2020, for the 2021-2023 budget due to the pandemic.
- Acknowledged that this independent review, analysis, and report provided findings and recommendations for all areas of the DHHS. Stated that this report led to subsequent recommendations to improve developmental services, along with other areas in the department.
- Ms. Santaniello referred to the testimony from different advocacy groups, stakeholders, and families who raised concerns over not being consulted by A&M on its report. She furthered that the DHHS understands the core issue of transparency and communication, and stated that for the past year and a half

the DHHS has conducted community outreach and that the DHHS's current work is focused on compliance with the corrective action plan that the DHHS is under through the center for Medicare and Medicaid services.

- 205 different stakeholder sessions have occurred since fall of 2021.
- Ms. Santaniello noted that HB 608, which established a pilot program to support the bureau of developmental services, was retained by the House Health and Human Services and Elderly Affairs Committee.
- Provided sections of the bill that DHHS has no issues with; Page 2 lines 1-2, page 2 lines 27-29, page 3 lines 21-22, page 3 lines 26-35.
- Nathan White stated that his previous position was the Bureau Director for Contracts and Procurement, and said that he is approaching this bill from that financial contract and procurement lens.
- Mr. White drew out his major concern begins on page 3 line 36 that continues on to page 4. This section would effectively require input from the council during the request for proposal development stage and would require that the individual would sit in the review committee. Mr. White furthered that RSA 21 G-37, a state procurement law, makes sure that public funds are used in a transparent and objective manner. Stated that as written the department should give due deference to the council and that the department has to disclose the input on the development of the request for proposal (RFP). Mr. White explained that this means that there could be external parties, such as members from boards of organizations that receive contracts, have the ability to influence the RFP at the development stage and have the ability to influence the terms of the contracts given the due deference clause which could affect the payment terms and contracting terms which could run contrary to other department requirements.
- Noted that this would bill would create a major fundamental change to state procurement.
- Sen. Carson said that a lot of work has been done on how the state enters into procurement stated that there are were two departments that the committee did not deal with, DHHS and Transportation, this was due to their wide scope of work. Provided the example of the state procuring PPP, which worked beautifully. Agreed with Mr. White that she does not believe that this should be part of the scope of this council.

Meredith Telus

(Director of the Division of Program Quality and Integrity at DHHS)

- Echoed Mr. White's concerns and added that RSA 99-D addresses state employees working in good faith in the course of their work, and asserted her confusion with how that would work with a non-state employee acting in procurement where there could be resulting damages.
- Addressed page 3 roman numeral V, where it mandates that the DHHS must respond to the council within 30 days of a recommendation on improving service quality, quality assurance, and improving systems. Ms. Telus stated that she

- does not have an individual specialized with quality metrics for the bureau of developmental services waivers. Noted that she does not believe that her division would be able to be responsive in that time period.
- Ms. Telus addressed her larger concern on section VIII of the bill, also page 3 line 36 through lines 2 on page 4. This section is about the practices, policies, and standards which Ms. Telus stated can be interpreted very broadly to the entirety of management at the DHHS. Stated that this section needs further clarification and was confused on how and why there was a need to insert a third party into the creation of all of the DHHS's internal policies and procedures. Requested further definition and clarification.
- Sen. Carson echoes Ms. Telus's concerns and understands that the council wants to bring transparency. Agreed with prior testimony on how making the requirement for the department to confirm and receive input on provisions from the council, is going well beyond what the council is supposed to do. Also brought up the requirement for the selected contractor to solicit input from the council and brought up how during the RFP process that is not public information and this would allow the council under roman numeral III(4), to disseminate that data before the RFP process is done. Added that the RFP process can take more than 30 days and understands that would be difficult for Ms. Telus's division to respond to in an accurate manner. Concluded that this bill sounds like it is proposing that this quality control council will oversee the RFP process and that the council will have control over and the state will have respond to do what the council recommends. And asked whether the department found this appropriate.
- Ms. Telus stated that the DHHS shares the same concerns that Sen. Carson is bringing up.
- Ms. Santaniello returned and agreed with Ms. Telus that the department has
 serious concerns. Further pointed that the DHHS totally understands and
 respects the role of the quality council and acknowledged road bumps in
 relationships, but pointed out there are other stakeholders within DHHS where
 the quality council would be given significantly more authority over those other
 commissions.
- Sen. Carson followed up and stated that it appears that this council was created to be an advisory group to the DHHS, not to be an oversight commission, and agrees with Ms. Santaniello that this power is well beyond the scope of the original intent of this council.
- Sen. Altschiller said that from this bill she recognizes a disconnect and wanted to clarify that the DHHS had 205 different stakeholder sessions in the past two years.
- Ms. Santaniello responded that the correct information was 205 different stakeholder sessions since the fall of 2021.
- Sen. Altschiller followed-up and asked what was meant by stakeholder sessions.
- Ms. Santaniello responded that these sessions include meetings with the quality council, members, commissions, families, provider agencies, and area agencies.
 Further added that she can provide the committee with the breakdown of these meetings and who was represented at them.

- Sen. Altschiller noted that clearly this legislation is a result of the developmental disability population not feeling heard, and asked where the people who developed this legislation fit in regards to the stakeholders.
- Ms. Santaniello answered that some of them have been a part of these stakeholder meetings, and re-emphasized from earlier testimony that this legislation and the other similar bills have been a natural result from the A&M report. Noted that the DHHS has committed to monthly reports with the oversight committee and changed who represents the DHHS in meetings with the quality council due to the acknowledgement that past communication was not the best from the department.

William Walker

(Private Citizen of Hollis and Legislative Liaison for Gateways Community Services)

- Mr. Walker stated that his wife, son and himself rely upon a functional developmental disability service delivery system, and expect this system to work. Noted that in order for this delivery system to work their need to be clear rules on how change is brought about, without those clear rules there is usually a sort of falling apart, which Mr. Walker referred to friction in the relationship between the members of the developmental disability service system and the DHHS.
- Mr. Walker acknowledged that this bill is a reaction to the Bureau of Developmental Services (BDS) proposal from the past year. Noted that this proposal had a major change, which would restructure all DHHS bureaus. However, Mr. Walker noted that the issue with this change is that they forgot about RSA 170 A, which calls for the participation of individuals with disabilities and their families in changes.
- Mr. Walker noted that the result of this mistake was that the walls went up with parents and families as they didn't feel like they were participating in the restructuring proposal to the DHHS. This frustration came from not only parents and families but also from BDS.
- Noted that the BDS staff is exhausted by this change and hearing the frustration from families and individuals with developmental disabilities.
- Mr. Walker suggested that tightening up the rules of the quality control council does, it would help prevent a future situations like this one. Further noted that if this rule was in place the BDS systems change would have been much smoother and would have engaged families, instead of developing a rift.
- Urged the committee to support HB 238, and to keep the focus on the collaborative aspect to provide a quality system for those that rely on it.
- Sen. Altschiller asked what participation was like prior to the rifts that have seemed to develop in the last few years.
- Mr. Walker responded that he came into this issue in the middle of it but to his understanding there was a pretty good working relationship between the BDS and families. Further noted that this situation has caused a lot of wounds.

Jennifer Bertrand

(Private Citizen of Mount Vernon NH)

- Ms. Bertrand is a parent to her daughter who experiences significant
 intellectual and developmental disability and is serviced by Gateway
 Community Services. Further noted that her disability requires her to have 24/7
 support and has developed a more serious seizure condition over the last few
 years.
- Ms. Bertrand brought up the importance of family voices of developmentally disabled persons and the significance of having at least 51% of the quality control council member as individuals with developmental disabilities or their family members.
- Ms. Bertrand stated that people with disabilities remain the most marginalized and discriminated population, which is apparent in areas such as economic disadvantages, lower rates of employment, worse health outcomes, people holding attitudes towards certain populations, and experiencing higher rates of all kinds of abuse.
- Ms. Bertrand noted that this is why their voices are so important and that the
 intent of HB 238 is not to supersede the DHHS. Addressed the department's
 decision to evaluate the developmental service system and added that they did
 not include the quality control council or the families of these individuals about
 what is needed especially with aging parents as 80% of developmentally
 disabled individuals still live at home.
- Provided her personal experience and said that her and her husband were lucky
 to be able to work from home, because if they could not they would have to
 employ a separate service in order to take care of her daughter. Noted that these
 service programs are very expensive.
- Added that this bill gives the council more teeth to ensure that the department is starting with the quality control council as it is made up of all of the stakeholders involved in supporting the developmental service system.
- Agreed with previous testimony that there are a lot of well-intentioned people
 that work at the department but stated that the council has certain
 responsibilities that they have to meet and if the council is not provided with
 information in a timely fashion it makes it difficult or impossible to fulfill these
 responsibilities. Emphasized that the council should be given some due
 deference because of what happened around A&M, and that this bill is to ensure
 that their voices are heard.
- Concluded that HB 238 is to help clarify and enhance the role of the
 developmental services quality control council and would require the DHHS to
 solicit input from the council on developmental service systems change before
 key decisions and recommendations are made by the department. Further looks
 to clarify the departments role to respond to quality control council for
 information that they need, and finally addresses accessibility needs.
- Responded to testimony on robust stakeholder meetings, and said that members
 of the media stakeholder groups said that the department continues to not
 answer questions or address their concerns, and provided example of the
 department setting up a zoom with no camera availability and simply asked the
 family members and individuals to type their questions or concerns in the text

option. Noted that this was an issue for some families as it is difficult to type your questions with a physical disability and even harder to do so with a developmental disability.

Stephanie Patrick

(Chair for the Quality Council)

- The quality council is unique in its role as the council was created in 2017 in looking at the problems with the developmental disability services system with the help from legislators, administrators, advocates, and individuals with developmental disabilities and their families.
- Re-emphasized from earlier testimony the importance of the council's makeup that at least 51% of the members have to be individuals with developmental disabilities or their family members acting on their behalf.
- Addressed the statement that this legislation and friction is due to the A&M report, but disagreed saying that issues did escalate but that there were existing issues prior to the A&M report.
- Ms. Patrick expanded on the departments concerns regarding the scope of this bill, and further emphasized that the department had failed to respond to multiple letters of recommendations, which is an issue as the quality council then cannot do its job without the information requested. Provided that last year the department failed to respond to 4 letters and this year the council has submitted another 4 letters, 2 related to the rules the department is considering to adopt, 1 regarding training, and the last regarding ARPA funds.
- With the letter related to ARPA funds, it was found that ARPA funds have not been distributed equitably throughout the regions. Resulted in Participant Directed and Managed Services (PDMS) families not receiving their retention and recruitment bonuses. Provided that the only reason why this issue was discovered was because of the quality councils' discussions.
- Ms. Patrick added that the council would be fine with the removing of section 8 of HB 238.
- Re-emphasized prior testimony that HB 238 does not mandate the department to act on the recommendations of the council, just that they ask and listen to the input of the council prior to accepting an RFP.
- Sen. Altschiller asked to recap with Ms. Patrick and stated that the council would be ok with eliminating section 8, and provided a suggestion in section 4 that would replace the word "interpreting" with "clarifying".
- Ms. Patrick responded that the council is an entity of its own and that she would need time to discuss the language changes.
- Sen. Altschiller further suggested to use the phrase, "space to be consulted" rather than "space to rewrite/veto contracts" in the development of the RFP process, and asked whether this language was suitable.
- Ms. Patrick affirmed this suggestion.
- Sen. Altschiller followed-up and questioned whether the language on page 3 lines 1-3 was intended to put the council in a consultant role.
- Ms. Patrick responded that the council was trying to be very careful with language and that this language doesn't require anyone to do anything with the

input they receive, and agreed that this section was meant to be viewed as a consultant role.

Matthew Cordeiro

(CEO of One Sky Community Services)

- Noted that there have been three pieces of legislation put forward because a
 large group of stakeholders have not been heard. Noted that the only voices in
 the decision making room after the A&M report was released were individuals
 in DHHS leadership, who determined how the findings of A&M were to be
 implemented.
- Mr. Cordeiro agreed with prior testimony that communication has not been fixed between the department and the council, and provided that as of yesterday One Sky Community and their providers found out that DHHS was cutting the amount of "out-of-bed" days for residential programs and the amount of "out-of-program" days for day service programs. Mr. Cordeiro explained that this amounts to a 6% loss of revenue for CPS services and a 2.5% loss of revenue for vendor agencies of residential programs. Accompanied with these revenue losses, according to the Mr. Cordeiro's conversations with residential providers, is that these residential programs will take a more careful look into who they accept into these programs to minimize the amount of individuals who may end up in the hospital for more than 30 days, as the program will not be paid for any services beyond that time frame but their expenses will still remain for the services associated with treating that person.
- Provided a similar example but with day program providers and stated that the unintended consequences of not consulting the quality council for recommendations is that providers will not invite costly individuals back as they need a steady stream of revenue.
- Mr. Cordeiro brought up the programs yearly spending of \$440 million and emphasized the absurdity of not having a dedicated quality assurance individual.
- Provided that One Sky Community uses three waivers in order to target specific
 populations, and noted that in order for individuals to access their service is
 through the submission of said waiver to CMS. When One Sky Community
 heard about DHHS's amending of these waivers from somebody reading a
 newspaper in Nashua, not because DHHS reached out and provided information
 in a transparent way. DHHS responded that that they publicly posted the
 information.
- Testified that this potential law is necessary for future collaboration between the DHHS and the stakeholders, and that this bill is just asking for the quality council to be at the table. Emphasized the importance of collaboration.
- Stated that the opinion of the people who are actually managing the organized care system, the people providing the services, and the people receiving the services have been completely cut out of the input process.

- Mr. Cordeiro concluded that he has put forth plenty of right-to-know requests with an outside attorney and that the information received from their requests are labelled drafts or working drafts, therefore the council does not have access to this information. He concluded by asking the committee when dealing with an entire care system that manages a yearly budget of \$440 million, provides support to nearly 12,000 people and employs thousands of people across multiple companies, with the existence of turmoil between the department and these stakeholders, how do these companies know who to hire, when to hire, when to fire, how to reorganize, what's required of the service and what systems to buy.
- Sen. Altschiller asked about the 205 stakeholder sessions that were brought up by DHHS and asked if One Sky Community was included in those.
- Mr. Cordeiro responded that in order to be able to attend and participate, the groups wanting to be involved had to write an essay as to why they support the changes. Mr. Cordeiro stated that he wrote his in a way so it would interpret as completely neutral. Further noted that these meetings are highly scripted and choreographed and when the members of DHHS in those meetings hear a question they don't want to answer they respond that they will get back to said person, but never do. Noted that by not consulting with the actual stakeholders of the developmental disability population, the cutting of costs will lead to less independence and higher costs for individuals that rely on this system of care.

Alex Kotroubas

(CSNI)

- Stated that developmental services make up 14% of the Developmental Disability budget and 6% of the state budget overall.
- Re-emphasized the hiring of A&M and the restructuring of DHHS causing confusion and stress with stakeholders and families as there was a lack of communication and transparency which caused friction between the department and the stakeholders, including families, providers, and area agencies.
- Stated that this restructure created confusion with the area agencies as there was already work undertaken by the DHHS prior to the hiring of the outside consultant over the mandate of CMS services and how providers are allowed to bill under Medicaid for developmental services and how to ensure that casemanagement in the DD system is conflict free.
- Noted that this issue still needs to be resolved, and that the position of the area
 agencies is that the sole focus of the DHHS and other stakeholders should have
 been on compliance with the CMS mandates and any consulting work that the
 department engaged with should have been focused on assisting with federal
 compliance.
- Agreed with prior testimony on the completion of the A&M report and the
 release of recommendations. Subsequent announcement of a stakeholder session
 occurred however noted that the quality council, which Mr. Kotroubas said
 really represents virtually all of the DD system stakeholders, was not consulted
 while the recommendations were being formulated.

- Agreed with prior testimony on the intent of this bill to require the department to ask and listen to the quality councils recommendations, not to give the quality council a veto.
- Concluded that he believes that a correction to the relationship between the department and the quality council is happening and that the department has acknowledged some of their missteps. Further added that he is open to working with the committee and department in amending this bill.

PJ Date Hearing Report completed: April 18, 2023

Speakers

SENATE EXECUTIVE DEPARTMENTS & ADMINISTRATION COMMITTEE

Date (04/12/23	3	Time	9:45 A.M.	Public H	earing on	HB 238	
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Senate Remote Testify

Executive Departments and Administration Committee Testify List for Bill HB238 on 2 Support: 36 Oppose: 0

<u>Name</u>	<u>Title</u>	Representing	<u>Position</u>
Ramirez, Aida	State Agency Staff	Myself	Support
AKINS, CAROLINE S	A Member of the Public	Myself	Support
Wood, Michael Ellen	A Member of the Public	Myself	Support
Gaul, Thomas and Gretchen	A Member of the Public	Myself	Support
Etzel, Michael	A Member of the Public	Myself	Support
Walker, Kelly	A Member of the Public	Myself	Support
Tocci, Elizabeth	A Member of the Public	Myself	Support
Sheehan, Jo-Ann	A Member of the Public	Myself	Support
Ehrhart, Kelly	A Member of the Public	Myself	Support
Smith, Rachelle	A Member of the Public	Myself	Support
Dolfini, Margaret	A Member of the Public	Myself	Support
Mahar, Cynthia	A Member of the Public	Myself	Support
Rosenberger, Teresa	A Lobbyist	NH Brain Injury Association	Support
Hornbaker, Julia	A Member of the Public	Myself	Support
Karcz, Danielle	A Member of the Public	Myself	Support
Darisse, Nicki	A Member of the Public	Myself	Support
Levesque, Jadine	A Member of the Public	Myself	Support
Stopyra, Peter	A Member of the Public	Myself	Support
Donnelly, Jamie	A Member of the Public	Myself	Support
Primeau, Marie	A Member of the Public	Myself	Support
Crocker, Richard	A Member of the Public	Myself	Support
Natoli, Mickey	A Member of the Public	Myself	Support
Natoli, Brianna	A Member of the Public	Myself	Support
Natoli, Brayla	A Member of the Public	Myself	Support
McDonough, Lisa	A Member of the Public	Myself	Support
Davies, Laura	A Member of the Public	Myself	Support
Duran, Carrie	A Member of the Public	Myself	Support
Coughlin, Leslie	A Member of the Public	Myself	Support
Steadman, Lisa	A Member of the Public	Myself	Support
Davies, Traci	A Member of the Public	Myself	Support
Jacques, Laurie	A Member of the Public	Myself	Support
Bertrand, Shawn	A Member of the Public	Myself	Support
Bertrand, Chloe	A Member of the Public	Myself	Support
Genthner, Deb	A Member of the Public	Myself	Support
Aboujaoude, Mickayla	A Member of the Public	Myself	Support
Lavin, Elaine	A Member of the Public	Myself	Support

Testimony

2023 Legislative Session
Testimony in Support of HB238

To: Senate Executive Departments and Administration Committee

My name is Cathy Spinney and I am a single parent of Kelly, a 40-year-old adult young woman with severe disabilities. I live in Pelham and I am IN-FAVOR of HB238 and its intention to strengthen the input and oversight of quality within the Developmental Disability (DD) service delivery system by the Developmental Services Quality Council.

The Developmental Services Quality Council was seated within RSA 171-A in 2009 with passage of legislation to create a seated council to monitor quality within this system. At the time, New Hampshire was the ONLY state in the union to have a permanent council devoted to quality. I have been on the council since its inception, serving as its Chair for 7 years. The Council's membership is comprised of all major stakeholder groups related to supporting people with disabilities. 51% of the membership must be individuals served or parents of those served. The Council is group of experts who are well versed in the delivery, substance, needs, and all other aspects of supports for those with disabilities.

The Quality Council in its capacity as an independent voice, meets monthly and monitors all aspects of the system that affect quality; administrative rules, legislation, Area Agency operations, waiver content, analysis of various data collected by the Bureau of Developmental Services (BDS), and most recently the work being proposed to fundamentally change our entire system's approach to supporting this constituency. It regularly issues letters of concerns, analysis, and offers ideas around systemic improvement to BDS.

For all the work the Council does, its role to date has largely been advisory. For years now, the membership has seen the need for the it to have a greater role in the influence and decision-making activities whenever there are proposals to make major systemic changes. It is in the best position to consider those proposals and offer questions, concerns, possible unintended consequences to vet and avoid, etc. for consideration prior to final decisions being made that can adversely affect the people our state supports.

This legislation seeks to expand the Council's ability and authority to influence decisions made by BDS and clarifies the responsibilities of BDS to respond to the Council's concerns. It is troubling that the Council was not included or consulted prior to BDS embarking on plans to implement the majority of the current re-design project initiatives, and to date, many of the Council's concerns and questions have not adequately been addressed or resolved. The Council needs all responses to its written inquiries, comments, suggestions, etc. be addressed in writing by BDS as well. It is the only way to foster clarity and keep track of the many, many issues the Council is concerned with throughout its years of work.

Another major concern this legislation seeks to remedy is removing barriers to participation by Council members. Notably, since COVID, it has become clear that some of the members with disabilities who are vulnerable, have transportation issues, and parents who cannot find and hire support staff in these times of workforce shortages benefitted greatly by having remote access to meetings. The safety of our members is primary and given the voices of members with disabilities and their families are the most crucial voices on the Council, forcing them to attend in person is not tenable nor reasonable. This bill seeks to ensure those who must attend remotely are still counted as "in attendance" for purposes of a quorum. The meetings allow members to see each other, hear each other, and have roll-call, votes. The meetings' log in information is available to the public and meetings are recorded and available upon request. It serves the public good and meets transparency requirements to allow this Council to offer its members remote access to meetings as an option to fully participate. It is time to embrace technology so people with disabilities and their families are not excluded from working to craft their own futures.

Cathy Spinney Pelham, NH (603) 635-9014 Cspinney58@gmail.com HB 238, relative to the role of quality control and the developmental disability service system

Good morning Mr. chair and members of the committee, Alex Koutroubas representing CSNI or the 10 area agencies that provide and coordinate services to about 13,000 individuals with developmental disabilities and acquired brain disorders.

In terms of this committee, the agencies in your districts are One Sky Community Services, Northern Human Services, Community Bridges, and the Moore Center.

By way of background, developmental services is a major component of the DHHS budget. DD comprises 14 % of DHHS' budget and 6% of the state budget overall.

As you have heard, several years ago a national consultant was retained by the department to conduct major systems change work. While that work was department wide, there was a special and intense focus on developmental services.

The area agencies were not opposed to that work. However, the timing of that major effort and its lack coordination and connection to another major system change initiative that was already underway within the DD system caused much confusion and stress for families, providers and other stakeholders. It also caused a lot of friction between DHHS and the area agencies.

The work already underway before the consultant was hired was mandated by the Centers for Medicare and Medicaid Services or CMS. NH needed to and still needs to change the way DD service providers are allowed to bill Medicaid and to ensure that developmental services case management is free from conflicts of interests.

The area agencies position is that the sole focus of DHHS and other stakeholders should have been on compliance with these CMS mandates. Any consulting work should have been to assist with the federal compliance. That did not happen and instead the consultant focused on other areas that are worthy of exploration, but the timing of the work was confusing and harmful.

When the consulting work was completed, a report with major system change recommendations was released. There was then an effort to seek input on the recommendations.

A major area of concern was that the stakeholders who comprise the quality council were not consulted before the report was issued. So, the Council as a whole nor the stakeholders who comprise the council were consulted before recommendations were released. We believe that it is vital that the consultant gather the input of these stakeholders before they release recommendations, even if those recommendations are only a basis for further discussion. How can you make a recommendation without talking to the providers and recipients of a service?

I believe that there is now a recognition of our concerns from the key department staff. We are now squarely focused on the federal compliance issues and other issues are on hold, which is a very positive development.

However, we need to help ensure a better process because staff are constantly changing, and new people may not have the same institutional knowledge.

The area agencies support this legislation because we believe it will help ensure that service recipients, families, and service providers are full participants in any future decisions about major changes in service provision in developmental services.

If there are amendments that maintain the intent of this bill, we are more than happy to work with DHHS and others to adjust the language.

Thank you



April 12, 2023

Chairman Howard Pearl
Senate Executive Departments and Administration Committee
Re: HB238

Dear Honorable Chair and Committee Members,

Thank you for the opportunity to testify in Support of HB238. For the record, my name is Krysten Evans and I am the Director of Policy and Advocacy for ABLE NH. ABLE is New Hampshire's only disability justice organization and we are a non partisan, non profit organization that fights for the civil and human rights of children and adults with disabilities.

The Developmental Quality Control Council (DQCC) was established to promote the quality of services and supports provided to individuals with developmental disabilities in New Hampshire. The council is made up of individuals with disabilities, family members, advocates, and professionals who work in the field of developmental disabilities. Therefore, the council has a unique perspective on the needs and experiences of individuals with developmental disabilities and their families.

People with developmental disabilities face significant challenges in accessing adequate and appropriate services and supports. Research has shown that people with developmental disabilities are more likely to experience poverty, unemployment, and social isolation than the general population. They also face significant barriers to accessing healthcare, education, and community services (National Council on Disability, 2018).

By requiring the DHHS to seek input from the DDQCC, House Bill 238 can help ensure that policies related to services and supports for people with developmental disabilities are developed in collaboration with the people who are most affected by them. This approach is consistent with the principles of disability justice, which emphasize the importance of centering the experiences and perspectives of people with disabilities in all

aspects of policy development and implementation (National Council on Independent Living, 2021).

Research has shown that involving people with disabilities in policy development and implementation can lead to better outcomes. For example, a study conducted by the National Council on Disability found that states with strong self-advocacy organizations and active participation of people with disabilities in policy development had better outcomes for people with disabilities, including higher rates of employment and greater access to community services (National Council on Disability, 2018).

In conclusion, House Bill 238 is a critical piece of legislation that can help ensure that policies related to services and supports for people with developmental disabilities are developed with the active participation of people with disabilities, family members, and advocates. By centering the experiences and perspectives of people with disabilities in policy development, we can help create a more just and equitable society for all.

Sources:

* National Council on Disability. (2018). National Disability Policy: A Progress Report. Retrieved from https://ncd.gov/sites/default/files/NCD_Policy_Report_508.pdf

* National Council on Independent Living. (2021). About Independent Living. Retrieved from https://www.ncil.org/about-il/

Sincerely,

Krysten Evans
Director of Policy and Advocacy

To: Senate Committee on Executive Departments and Administration

From: Devan Quinn, New Hampshire Women's Foundation

Re: Suggested language for amendment to HB 421 (with comparison to SB 209)

HB 421

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT requiring menstrual hygiene products to be provided to prisoners who menstruate in state and county correctional facilities.

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

1 New Subdivision; County Departments of Correction; Care and Custody of Prisoners Who Biologically Menstruate. Amend RSA 30 B by inserting after section 26 the following new subdivision:

Care and Custody of Prisoners Who Menstruate

30-B:27 Provision of Menstrual Hygiene Products. The superintendent of each county correctional facility shall provide menstrual hygiene products to all people who biologically menstruate in the custody of the county in adequate amounts as necessary and at no cost to such person. The incarcerated person shall be provided a choice of standard issue menstrual hygiene products to include, and in such a manner that meets any immediate needs, at a minimum, pads, tampons, and pantyliners of varying strengths necessary for their menstrual needs. Adequacy shall be considered, at minimum, a combination of 20 standard issue menstrual hygiene products per individual's menstrual cycle. An individual shall receive additional menstrual hygiene products based exclusively on their cycle at no cost at the discretion of the Superintendent. The number and type of menstrual hygiene products kept in an incarcerated person's cell shall not be excessive so as not to create safety or security issues and shall only be used for the intended purpose. As used in this section, "menstrual hygiene products" means tampons, menstrual pads, and pantiliners. In this section, "menstrual hygiene products" shall mean any product designed to address menstruation.

Upon intake, undergarments shall be provided in-new eendition. Any clothing or bed items provided by the county to incarcerated persons that are impacted by menstruation shall be provided in an adequate number, unstained, and sanitized before being provided to another incarcerated person.

2 New Section; Care and Custody of Female Convicts; Provision of Menstrual Hygiene Products. Amend RSA 622 by inserting after section 37 the following new section: 622:37-a Provision of Menstrual Hygiene Products. The eommissioner Warden or Director of any state facility and any facility listed in RSA 169-B:14, I(c) or (e) shall provide menstrual hygiene products to all people who biologically menstruate in the custody of the state in adequate amounts as necessary and at no cost to such person. The incarcerated person shall be provided a choice of standard issue menstrual hygiene products to include, and in such a manner that meets any immediate needs, at a minimum, pads, tampons and pantyliners of varying strengths necessary for their menstrual needs. Adequacy shall be considered, at

minimum, a combination of 20 standard issue menstrual hygiene products per individual's menstrual cycle. An individual shall receive additional menstrual hygiene products based exclusively on their cycle at no cost at the discretion of the Warden or Director. The number and type of menstrual hygiene products kept in an incarcerated person's cell shall not be excessive so as not to create safety or security issues and shall only be used for the intended purpose. As used in this section, "menstrual hygiene products" means tampons, menstrual pads, and pantiliners. In this section, "menstrual hygiene products" shall mean any product designed to address menstruation.

Upon intake, undergarments shall be provided in new condition. Any clothing or bed items provided by the state to incarcerated persons that are impacted by menstruation shall be provided in an adequate number, unstained, and sanitized before being provided to another incarcerated person.

3 Effective Date. This act shall take effect 60 days after its passage.

For reference, the below is the language of SB 209 where the above additions to HB 421 are from (as well as notes from House Criminal Justice Committee hearing):

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to providing menstrual hygiene products at no cost to individuals who biologically menstruate in state and county correctional facilities.

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

1 New Subdivision; County Departments of Correction; Care and Custody of Individuals Who Biologically Menstruate. Amend RSA 30-B by inserting after section 26 the following new subdivision:

Care and Custody of Individuals Who Biologically Menstruate 30-B:27 Provision of Menstrual Hygiene Products. The superintendent of each county correctional facility shall provide sufficient menstrual hygiene products to individuals who are in the custody of the county who biologically menstruate, at no cost to such persons. Sufficiency shall be considered, at minimum, a combination of 20 standard issue menstrual hygiene products per individual's menstrual cycle. An individual may request additional menstrual hygiene products based exclusively on their cycle at no cost at the discretion of the superintendent. The number of menstrual hygiene products kept in a cell shall not be excessive so as not to create safety or security issues and shall only be used for the intended purpose. As used in this section, "menstrual hygiene products" means tampons, menstrual pads, sanitary napkins, and pantiliner.

- 2 New Section; Care and Custody of Female Convicts; Provision of Menstrual Hygiene Products. Amend RSA 622 by inserting after section 37 the following new section: 622:37-a Provision of Menstrual Hygiene Products. The superintendent of each county correctional facility and any facility listed in RSA 169-B:14, I(c) or (e) shall provide sufficient menstrual hygiene products to individuals who are in the custody of the state who biologically menstruate, at no cost to such persons. Sufficiency shall be considered, at minimum, a combination of 20 standard issue menstrual hygiene products per individual's menstrual cycle. An individual may request additional menstrual hygiene products based exclusively on their cycle at no cost at the discretion of the commissioner, or designee. The number of menstrual hygiene products kept in a cell shall not be excessive so as not to create safety or security issues and shall only be used for the intended purpose. As used in this section, "menstrual hygiene products" means tampons, menstrual pads, sanitary napkins, and pantiliners.
- 3 Effective Date. This act shall take effect August 1, 2023.

Voting Sheets

Senate Executive Departments & Administration Committee

EXECUTIVE SESSION RECORD

2023-2024 Session

- W/12		H	Bill# 2	38
Hearing date: 4/12 Executive Session date: 4	1/26	<u>.</u>		
Motion of:OT/		_	Vot	e:
Committee Member Sen. Pearl, Chair Sen. Carson,VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller	Present	Made by	Second	Yes No
Motion of: 1452 -7	(amhitt	re Alment	Vot	e: 5-0
Committee Member Sen. Pearl, Chair Sen. Carson, VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller	Present	Made by	Second	Yes No
Motion of:	A		Vot	e: 5-0_
Committee Member Sen. Pearl, Chair Sen. Carson,VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller	Present	Made by	Second	Yes No
Motion of: Con Sa	w		Vot	e: 5-0
Committee Member Sen. Pearl, Chair Sen. Carson,VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller	Present	Made by	Second	Yes No

Motion of:			Vote:	
Committee Member Sen. Pearl, Chair Sen. Carson, VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller			Second Yes	No
Motion of:			Vote:	
Committee Member Sen. Pearl, Chair Sen. Carson,VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller	Present	Made by	Second Yes	No
Motion of:			Vote:	
Committee Member Sen. Pearl, Chair Sen. Carson,VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller		Made by	Second Yes	No
Motion of:	•		Vote:	
Committee Member Sen. Pearl, Chair Sen. Carson,VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller	[]	Made by	Second Yes	No Control of the con
Motion of:			Vote:	
Committee Member Sen. Pearl, Chair Sen. Carson, VC Sen. Gendreau Sen. Perkins-Kwoka Sen. Altschiller Reported out by: Perkins			Second Yes	No
	-			

Committee Report

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE FOR THE CONSENT CALENDAR

Thursday, April 27, 2023

THE COMMITTEE ON Executive Departments and Administration

to which was referred HB 238

AN ACT

relative to the role of quality control and the developmental disability service system.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS WITH AMENDMENT

BY A VOTE OF: 5-0

AMENDMENT # 1534s

Senator Rebecca Perkins Kwoka For the Committee

HB 238 as amended will allow the developmental quality control council to provide feedback to DHHS on the quality of services provided to the developmentally disabled community in New Hampshire in a systematic way, and provide for DHHS feedback on a quarterly basis. As amended, the bill also creates dialogue between the department and the council on issues of concern."

Phil Jasak 271-1403

FOR THE CONSENT CALENDAR

EXECUTIVE DEPARTMENTS AND ADMINISTRATION

HB 238, relative to the role of quality control and the developmental disability service system. Ought to Pass with Amendment, Vote 5-0. Senator Rebecca Perkins Kwoka for the committee.

HB 238 as amended will allow the developmental quality control council to provide feedback to DHHS on the quality of services provided to the developmentally disabled community in New Hampshire in a systematic way, and provide for DHHS feedback on a quarterly basis. As amended, the bill also creates dialogue between the department and the council on issues of concern."

General Court of New Hampshire - Bill Status System

Docket of HB238

Docket Abbreviations

Bill Title: relative to the role of quality control and the developmental disability service system.

Official Docket of HB238.:

Date	Body	Description
1/9/2023	Н	Introduced (in recess of) 01/05/2023 and referred to Health, Human Services and Elderly Affairs HJ 2 P. 8
2/8/2023	Н	Public Hearing: 02/15/2023 11:00 am LOB 201-203
3/1/2023	Н	Full Committee Work Session: 03/08/2023 09:00 am LOB 201-203
3/1/2023	н	Executive Session: 03/08/2023 11:00 am LOB 201-203
3/14/2023	Н	Majority Committee Report: Ought to Pass with Amendment #2023-0841h 03/08/2023 (Vote 18-2; RC) HC 16 P. 32
3/14/2023	Н	Minority Committee Report: Ought to Pass with Amendment #2023-0909h 03/08/2023
3/22/2023	Н	Amendment #2023-0841h: AA VV 03/22/2023 HJ 10 P. 111
3/22/2023	Н	Ought to Pass with Amendment 2023-0841h; MA DV 362-13 03/22/2023 HJ 10 P. 113
3/24/2023	S	Introduced 03/23/2023 and Referred to Executive Departments and Administration; SJ 12
4/5/2023	S	Hearing: 04/12/2023, Room 103, SH, 09:45 am; SC 17
4/27/2023	S	Committee Report: Ought to Pass with Amendment #2023-1534s, 05/11/2023; Vote 5-0; CC; SC 21
5/11/2023	S	Committee Amendment #2023-1534s, AA, VV; 05/11/2023; SJ 14
5/11/2023	S	Ought to Pass with Amendment 2023-1534s, MA, VV; OT3rdg; 05/11/2023; SJ 14
6/15/2023	Н	House Concurs with Senate Amendment 2023-1534s (Reps. W. MacDonald, Layon): MA VV 06/15/2023 HJ 16 P. 2
7/18/2023	S	Enrolled Adopted, VV, (In recess 06/29/2023); SJ 20
7/19/2023	Н	Enrolled (in recess of) 06/29/2023 HJ 17 P. 18
8/9/2023	н	Signed by Governor Sununu 08/04/2023; Chapter 183; eff: 10/03/2023 HJ 17

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NH House	NH Senate	

Other Referrals

Senate Inventory Checklist for Archives

Bill Number: HB 138 Senate Committee: EDA
Please include all documents in the order listed below and indicate the documents which have been included with an "X" beside
Final docket found on Bill Status
Bill Hearing Documents: {Legislative Aides}
Bill version as it came to the committee
All Calendar Notices
Hearing Sign-up sheet(s)
K 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):
$\frac{X}{X}$ - amendment # $\frac{13705}{X}$ $\frac{X}{X}$ - amendment # $\frac{14525}{X}$
1 - amendment # 15345 X - amendment # 1460 s
K Executive Session Sheet
K 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:
Phillip 799k 7/1/23
Committee Aide Date
Senate Clerk's Office AV