

Senate Finance Committee

Deb Martone 271-4980

Amendment #2017-1345s to HB 517, relative to state fees, funds, revenues and expenditures.

Amendment #2017-1344s to HB 144, making appropriations for the expenses of certain departments of the state for fiscal years ending June 30, 2018 and June 30, 2019.

Hearing Date: May 2, 2017

Time Opened: 1:00 p.m.

Time Closed: 10:27 p.m.

Members of the Committee Present: Senators Daniels, Reagan, Giuda, Morse, D'Allesandro and Feltes

Bill Analysis: This bill:

1. Authorizes the department of administrative services to consolidate state agency human resources, payroll, and business processing functions.
2. Clarifies that information in a state employee's health risk appraisal is protected health information.
3. Provides for application of the state employees health plan to unrepresented active state employees.
4. Authorizes the commissioner of administrative services to collect a premium contribution of at least 10 percent from the retirement allowance of a retired state employee or spouse, or a retired judge or spouse in the judicial retirement plan, who is eligible for Medicare and who was born on or after January 1, 1949.
5. Increases the minimum premium contribution percentage for retired state employees or spouses receiving medical benefits who are not Medicare eligible.
6. Excludes medications available without a prescription from the New Hampshire retiree health care program.
7. Requires the liquor commission to reimburse the cost for any legal services provided by the department of justice to the commission that would not normally be included as part of the statewide cost allocation paid by the commission.
8. Limits the number of judges on the superior court and the number of full time judges on the circuit court and suspends the authorization to convert marital master positions to full time judicial positions for the biennium ending June 30, 2019.

9. Permits the supreme court to transfer funds among judicial branch accounts.
10. Changes the name of the department of resources and economic development to the department of natural and cultural resources.
11. Eliminates the department of cultural resources, and transfers that department's operations to the department of natural and cultural resources.
12. Creates the department of business and economic affairs.
13. Transfers the functions of the division of economic development and the division of travel and tourism development in the former department of resources and economic development to the department of business and economic affairs.
14. Adjusts the salaries for the division directors within the departments of natural and cultural resources and business and economic affairs and requires a salary review for the positions of commissioner of the 2 departments.
15. Changes the name of the office of energy and planning to the office of strategic initiatives.
16. Repeals the authorization for the department of health and human services to pay funeral expenses of a recipient of public assistance.
17. Provides that federal emergency assistance grants shall be collected by the appropriate agency and appropriated to the department of transportation.
18. Establishes a public school infrastructure revitalization trust fund and commission, and suspends school building aid from the department of education for the biennium.
19. Permits all agencies to provide documents by electronic mail in lieu of mail.
20. Increases annual funding for the alcohol abuse prevention and treatment fund to 3.4 percent of the previous fiscal year gross profits derived from liquor sales.
21. Maintains distribution of meals and rooms tax revenue to cities and towns at no more than the amount of the fiscal year 2017 distribution.
22. Provides that the department of health and human services shall not authorize, without prior consultation with the house health, human services and elderly affairs committee and the senate health and human services committee and the approval of the fiscal committee of the general court and governor and council, any change to program eligibility standards or benefit levels that might be expected to increase or decrease enrollment in the program or increase expenditures from any

source of funds.

23. Suspends home health services rate setting for the biennium ending June 30, 2019.

24. Suspends provisions of congregate housing and congregate services for the biennium ending June 30, 2019.

25. Requires the commissioner of the department of health and human services to submit a Medicaid state plan amendment to suspend direct and indirect graduate medical education payments to hospitals for the biennium ending June 30, 2019.

26. Requires the commissioner of the department of health and human services to make quarterly reports to the governor, speaker of the house of representatives, and senate president on the status of estimated Medicaid payments and their relation to actual costs.

27. Permits the governor to transfer funds among office accounts.

28. Caps the maximum monthly temporary assistance for needy families cash benefit at 60 percent of federal poverty guidelines.

29. Modifies the provisions for county reimbursements for nursing home services through state fiscal year 2019.

30. Suspends revenue sharing with cities and towns for the biennium ending June 30, 2019.

31. Establishes an Internet crimes against children fund and makes an appropriation for each year of the biennium ending June 30, 2019.

32. Establishes the position of financial research analyst I within the department of justice.

33. Redesignates the banking department's general counsel as an unclassified position.

34. Permits departments and agencies, with permission of the department of administrative services, to rent, lease, or lease-purchase vehicles from outside vendors.

35. Amends definitions for chartered public schools and revises funding levels for chartered public schools.

36. Amends the additional grant amount for chartered public schools and establishes a funding formula for the Virtual Learning Academy Charter School.

37. Removes references to "catastrophic aid" in the special education statutes.
38. Consolidates information technology functions between the department of health and human services and the department of information technology.
39. For the biennium ending June 30, 2019, authorizes the liquor commission to implement business strategies, enter into contracts, and hire support personnel to support merchant card activity.
40. Prohibits the public utilities commission from expending funds on the implementation of the energy efficiency resource standard or changing the system benefits charge without prior approval of the fiscal committee of the general court, except as authorized by a certain public utilities order.
41. Removes a reference to a 2016 disaster response appropriation from the renewable energy fund.
42. Permits the department of education to accept gifts to fund the New Hampshire scholars program.
43. Establishes the governor's scholarship program.
44. Repeals a statutory provision governing revenue shortfalls within the liquor commission.
45. Creates a division of taxpayer services within the department of revenue administration.
46. Eliminates the document processing division within the department of revenue administration.
47. Transfers jurisdiction over licensing of assemblies on state waters or ice from the commissioner of the department of safety to local fire department chiefs.
48. Revises certain provisions relating to the layout of state highways.
49. Amends provisions relating to the acquisition and relocation of certain highways acquired in 1945 or earlier.
50. Suspends the crediting of a portion of meals and rooms tax revenue to the department of business and economic affairs for the biennium ending June 30, 2019.
51. Allows the joint committee on legislative facilities to meet as needed, removes the cap on the house and senate subaccount balances in the legislative account,

and modifies requirements for prior approval by the respective committees for funds to be transferred from subaccounts.

52. Increases the appropriation to the governor's commission on disability for funding the "Newslite for the Blind."

53. Provides that settlement funds received by the state and deposited in the revenue stabilization reserve account shall not be included in any amount subsequently transferred to the general fund.

54. Establishes dedicated accounts for the purpose of paying for costs of the capital budget projects related to a revenue information management system in the department of revenue administration and state heating system savings in the department of administrative services.

55. Makes an appropriation to the office of professional licensure and certification for the purposes of the controlled drug prescription health and safety program, and makes an additional appropriation to the office of professional licensure and certification for the purposes of the controlled drug prescription health and safety program contingent upon approval of the fiscal committee of the general court.

56. Requires an annual appropriation from the general court to the national guard scholarship fund.

57. Repeals the milk producers emergency relief fund.

58. Allows the commissioner of the department of agriculture to set milk prices in consultation with the agricultural advisory board.

59. Makes an appropriation to the department of corrections to purchase body scanners for use in state correctional facilities and to fund 2 canine teams at the department of corrections.

60. Allows the department of corrections to fill certain unfunded positions.

61. Clarifies funding responsibility for custody and control of prisoners for purposes of video arraignments.

62. Requires the department of justice to undertake every reasonable legal effort to collect all amounts due to the state of New Hampshire as a result of the Merrimack River flood control compact.

63. Clarifies the terms "usual and customary price" and "contracted copayment" for the purposes of filling prescriptions.

64. Suspends RSA 489, relative to integrated land development permits, for the

biennium ending June 30, 2019.

65. Places a moratorium on new infrastructure projects that would have been eligible for state aid grants under RSA 486, RSA 486-A, and RSA 149-M.

66. Provides workers' compensation coverage to certain volunteers for the fish and game department.

67. Makes an appropriation to the fire standards and training and emergency medical services fund.

68. Authorizes the commissioner of the department of transportation to acquire land to build a turnpike service plaza in the town of Hampton on Interstate 95.

69. Authorizes the commissioner of the department of transportation to lease, develop, and/or reconstruct state liquor and wine outlets along the turnpikes and highways of the state.

70. Directs the treasurer to credit revenue collected from the airways toll to the department of transportation.

71. Grants the lottery commission the authority to purchase real property for use as the lottery commission's headquarters.

72. Requires the commissioner of the department of education to issue a request for proposals to secure a reading specialist to provide technical assistance for dyslexia and related disorders to school districts and to submit a report assessing the effectiveness of the reading specialist.

73. Authorizes the comptroller to transfer sufficient funds from the general fund to eliminate a deficit in the education trust fund.

74. Amends the chartered public school funding statute to add provisions for payments to chartered public schools.

75. Establishes a robotics education development program to encourage students to pursue education in science, technology, engineering, and mathematics.

76. Removes the interim rulemaking provision relating to methadone detoxification or methadone maintenance programs.

77. Makes an appropriation to the department of administrative services to mitigate the impact to the Concord school district due to the closure of Concord Steam Corporation.

78. Revises the procedures for placement and detention of minors at the Sununu

youth services center and other appropriate placements and makes an appropriation therefor.

79. Provides that expenditures for operational costs of the Sununu youth services center and the alcohol and drug abuse treatment facility at the center which the commissioner of the department of health and human services determines to be necessary may be funded from governor's commission funds without the prior approval of the fiscal committee.

80. Makes an appropriation for development of a New Hampshire partnership for long-term care plan.

81. Requires the commissioner of the department of health and human services to develop a universal online prior authorization form for drugs used to treat mental illness by July 15, 2017 and require community mental health centers and managed care organizations to begin using it by September 1, 2017.

82. Increases the rates for certain services, placements, and programs that are payable by the department of health and human services.

83. Provides that legislative members of the advisory board on services for children, youth and families shall serve a term coterminous with their term in office.

84. Authorizes the commissioner of the department of health and human services to fill unfunded positions for the biennium ending June 30, 2019 under certain circumstances.

85. Requires the department of health and human services to develop a plan to relocate the individuals with developmental disabilities currently placed at the designated receiving facility on the Laconia state school property.

86. Permits the transfer of the appropriation for the administration of the client assistance program that is received by the governor's commission on disability for fiscal years 2018 and 2019 to another qualified agency.

87. Requires the commissioner of the department of health and human services to issue certain requests for applications and requests for proposals.

88. Replaces the position of senior division director with the position of associate commissioner, whose responsibilities shall include oversight of the division for children, youth, and families.

89. Establishes the position of mental health medical supervisor in the department of health and human services, requires the position of director of legal services to be physically located in the department of justice, and requires the 2 departments to enter into a memorandum of understanding regarding abuse and

neglect cases.

90. Establishes an independent office of the child advocate and an oversight commission on children's services and juvenile justice.

91. Amends the purpose of the child protection act.

92. Amends the definition of an unfounded report by replacing "no probable cause to believe" with "insufficient evidence to substantiate a finding."

93. Inserts a definition of "serious impairment."

94. Amends the evidentiary standards for abuse and neglect cases by allowing into evidence prior founded or unfounded reports of abuse or neglect in order to establish pattern or course of conduct.

95. Directs the department of health and human services to establish a Medicaid home and community-based behavioral health services program for children with severe emotional disturbances.

96. Establishes requirements for budget transfers by agencies for salaries and benefits.

97. Requires the commissioner of the department of health and human services to establish and utilize a competitive bidding process for family planning services.

98. Removes the requirement in the administrative procedure act for agencies to give notice to legislative committees for proposed rules on newly enacted authority.

99. Requires the New Hampshire drinking water and groundwater advisory commission to administer the drinking water and groundwater trust fund and makes changes to the membership and duties of the New Hampshire drinking water and groundwater advisory commission.

100. Establishes a chartered public school program officer position in the department of education.

101. Requires the department of transportation to address safety concerns at a certain intersection in Ossipee.

102. Requires the state to reimburse the sheriff's office for court security at rates provided in the collective bargaining agreement.

103. Prohibits reproductive health care facilities from using state funds to provide abortion services.

104. Authorizes a temporary Milford substation for the division of motor vehicles.

105. Reduces the rates of the business profits tax and the business enterprise tax in 2019 and in 2021.

106. Increases the amount of the expense deduction under the business profits tax.

107. Directs the department of health and human services to seek a waiver from CMS in order to establish certain work requirements for participation in the New Hampshire health protection program.

108. Incorporates by reference all appropriations and sections of the house finance committee amendments to HB 1-A and HB 2-FN-A of the 2017 regular legislative session.

Sponsors: Senator Morse

Who supports the bill: Please refer to Committee Sign-in Sheets.

Who opposes the bill: Please refer to Committee Sign-in Sheets.

Summary of testimony presented:

Tony Tulo:

- Ten years ago Mr. Tulo broke his C5 and C6 vertebrae, which paralyzed him from the chest down.
- He has someone come in 15 hours a week to help him perform basic tasks. He is able to do this through the CFI program.
- Over the course of ten years he's had about 30 people come in and out of his house to help him. "You can't really can't say too much to them, because they will just walk out the door." Currently, he cannot find anyone to come in and help him out.

Robert Clegg:

- Mr. Clegg explained the payment for services provided by case managers. They are currently not appropriately compensated for services they provide. This has resulted in being unable to secure new hires.
- Mr. Clegg provided a sheet detailing duties provided by personal care service providers. Their wages max out at \$10.25, which is much lower than what individuals can make at both MacDonalds and Dunkin Donuts.
- The cost to the taxpayer of a personal care service provider is one-fifth of what it would cost if the client were in a nursing home.

Jeff Dickinson:

- Mr. Dickinson is the advocacy director at Granite State Independent Living (GSIL).

- They have clients that use their personal care services and they hire people to help them out with everyday activities. The wage that these workers are paid is very low, and is not keeping up with other entry level service type jobs that are out there in the marketplace.
- Mr. Dickinson asked the Finance Committee to look at ways to increase funding for the Class 506 line in the budget.

Rep. Debra Altschiller:

- Ms. Altschiller is a Representative from Stratham and requests funding for the 13 crisis centers in the state, which provide critical 24-hour service and support.
- Victims of crime are in dire need of services. The crisis centers are the only resource for support. The Legislature has an obligation to include this type of funding as a priority in the budget.

Linda Vayens:

- She is a CFI client, who believes there is a severe lack of funds for personal care service providers.
- Workers need to be able to take her to the grocery store or to go shopping. Right now, Ms. Vayens needs to take public transportation to get her anywhere, and she needs to give at least 5 days in advance for a ride.
- Ms. Vayens' personal care provider just received her first pay raise in 7 years. "Why would anyone stay at a job where they do not get a pay increase, let alone when they could be making more money flipping burgers?"

Amy Moore:

- The Choices For Independence Program has been underfunded for years, and the provider network is rapidly deteriorating. These types of workers can make a higher wage at Market Basket and Walmart.
- Ms. Moore suffered a traumatic brain injury, but was fortunate to recover better than anyone expected due to her neurologist and physical, occupational, vision and speech therapists.
- It costs the state about \$17,500 per year to provide care for a CFI client at home, compared to more than \$56,000 for a nursing home. CFI is a good investment.
- She invited members of the Senate Finance Committee to meet constituents who rely on these services.

Laura Clark

- Laura is a CFI patient who has paralysis in all four limbs due to an accident in 2004, when she was 20 years old. If it wasn't for this program, she would have ended up in a nursing home.
- Ms. Clark emphasized the Independence Waiver Program itself, and explained her caretakers are the reason she gets up every morning and hasn't given up.
- She requests an increase for personal attendant services that provide assistance. The increase will help to administer these services, recruitment, and retention.

Mark Lambert:

- Mr. Lambert is an employee of Unitil, and a board member of the New Hampshire Scholars Program.
- It is estimated the number of New Hampshire high school graduates will decline over the next seven years. The workforce is aging, and continuing to decline.
- More needs to be done to attract and retain these graduates. As students, they should be encouraged to take a rigorous course of study to prepare them to enter the workforce.

Jayne O'Conner:

- Tourism in New Hampshire receives 3.15 percent of the net Room and Meals Tax.
- A level funded budget would mean less advertising dollars over the next biennium.
- Ms. O'Conner requests an increase to the tourism budget to \$9.4 million.

Jim Culhane:

- Mr. Culhane is the CEO of the Lake Sunapee Region Visiting Nurse Association.
- He encouraged committee members to fund a rate increase for home care providers in the Choices for Independence Program.
- For every one percent that can remain at home through CFI, rather than in a nursing home, New Hampshire saves \$2.8 million per year.
- Many home care agencies such as his limit the number of CFI clients, or have stopped serving the program. The current rates make it hard to recruit and retain workers, cover benefits, transportation, workers' compensation and other operating costs.
- Personal care providers and home health aides are the core of the CFI program, and staffing is dire. Without support for these critical positions, the CFI program is not sustainable.

Gregg Pittman:

- Mr. Pittman has worked in the tourism sector for a good portion of his life, and agrees tourism needs to grow.
- An increase to the tourism budget would help the New Hampshire economy. It is the second largest industry in our state. Tourism is part of the solution, not the problem.

Jessica Eskeland:

- Ms. Eskeland is the Public Policy Coordinator for the New Hampshire Coalition Against Domestic and Sexual Violence.
- Advocates provide housing for victims of domestic and sexual violence and focus on treating the trauma.
- Funding is the difference between life and death, and will help stop the cycle of violence.
- Ms. Eskeland urged committee members to help save lives. She requests funding be a priority for the ever increasing needs of these victims.

Laura Ryan:

- Ms. Ryan is a volunteer at the Sullivan County Crisis Center. She is very nervous about the lack of funding for the prevention of domestic and social violence.
- These crisis centers can help reduce the amount of uncompensated visits to hospitals, mental health services, and numbers in our prisons.

Deb Mozden:

- Ms. Mozden described the experiences of 3 different women with the Points Network in Sullivan County, which provides services free of charge. She also detailed her own personal experience.
- Advocates make a difference in the lives of these victims.
- Points Network needs funding from the state.

Jennifer Horn:

- Ms. Horn is a mother from Nashua who explained her daughter's experience as a victim. Unfortunately, her daughter did not relay what had happened until a few years after the assault.
- Our state has one of the highest rates of domestic violence and sexual assault per capita in the US.
- Ms. Horn asked the committee to send a clear message to end domestic violence and sexual assault in NH.
- She requests \$1 million dollars to fund the crisis centers.

Alisha Hill:

- Ms. Hill is a senior at UNH. She urged full funding for the domestic violence and rape crisis centers.
- New Hampshire is the best place to raise a family, but the current situation with funding is unacceptable.

Sarah Shanahan:

- On any given day in 2016, 77 percent of New Hampshire's crisis centers could not meet the housing needs of victims.
- Without crisis centers, we are increasing the number of people who return to violence.
- Two-thirds of adults who have drug problems have experienced trauma as a child. These crisis centers help children work through their trauma.
- These programs need to be prioritized.

Jane Downes:

- Ms. Downes described the months of turmoil she endured when her father attempted to kill her mother, and then threatened to kill himself.
- Victims should not have to appear every two years to testify for additional funding.
- Ms. Downes urged full funding for these services.

Joi Smith:

- Ms. Smith, a resident of Exeter, related the most important program these crisis centers offer is prevention education. The information is critical to end the cycle of violence in our communities.

Debbie Verdicchio:

- Ms. Verdicchio stressed the importance of funding. Crisis centers are the last resort for victims, who have a unique set of needs. These needs include healing from trauma.
- Crisis centers help victims navigate the criminal justice and social services systems.
- Ms. Verdicchio urged funding for programs to combat domestic violence and sexual assault.

Shauna Bertuele:

- Ms. Bertuele is the Program Manager for the crisis center serving Belknap County.
- Investment in crisis centers is an investment in the future.

Erin Noonan:

- Ms. Noonan is a survivor of violence who urged committee members to restore funding.
- Early intervention and prevention is important for children.
- One in three teens experience violence in their young lives. Twenty percent end up in abusive relationships.

Katie Parent:

- Ms. Parent urged the committee to significantly increase funding to the 13 crisis centers in New Hampshire.
- She asked committee members to consider how much the state can save taxpayers when adequate funding is provided to these crisis centers. It reduces the amount taxpayers spend in the long run on other programs.

Marian Cahill:

- Fully funding crisis centers is critical.
- The percentage of those under the age of 18 who are raped is 49.8 percent; 250 of these will be raped again as adults.

Kim Gibson:

- The Legislature needs to prioritize funding for the crisis centers as they are a form of prevention.

Lissa Curtis:

- Ms. Curtis is a rape and sexual assault survivor, currently fighting for justice from her perpetrator more than three years later.
- She has survived due to the love and support she receives from her family, as well as the assistance she has received from the crisis centers.
- She suffers from complex PTSD every day.

- These crisis centers helped Ms. Curtis attain restraining orders against her perpetrator, navigate national and local media to get her story out, helped with various good/bad/oblivious therapists, sat with her during court dates, and most importantly, encouraged her to be brave and never give up on life.
- Survivors of sexual assault fight for their lives on a daily basis. Pushing through the trauma is the absolute hardest thing to do.
- Crisis centers are assisting survivors in big ways and small to help keep victims alive and well.
- Ms. Curtis urged New Hampshire's funding for these programs be higher than any other New England state's funding.

Brian Harlow:

- Mr. Harlow urged increased funding for domestic violence.
- One of his loved ones has an opioid problem due to abuse.
- He is a sexual assault survivor, who believes it shouldn't happen to anyone.
- Crisis centers are critical.

Pat Whitney:

- Ms. Whitney urged funding for the New Hampshire Coalition Against Domestic and Sexual Violence. She explained she speaks for all New Hampshire men and women who weren't able to attend the public hearing, some of which might be in hospitals suffering from injuries they received from abusers; for those who can't take time away from work, and those home with children; and for all those who have died at the hands of their abusers, some in front of their children.
- The Coalition provides healing and recovery services, as well as tools and support to help build self esteem and confidence to become an independent and contributing member of society.
- Ms. Whitney supports the budget appropriation.

Carol Calkins:

- Ms. Calkins asked the committee increase funding for domestic violence work.

Marsha Stern:

- Ms. Stern completed 30 hours of training with a domestic violence organization.
- We have some of the stiffest laws in the country regarding domestic violence, but lack funding.
- The Legislature managed to find \$2M in funding for dairy farmers. Funding for women and child is just as critical.

Kassie Eafrazi:

- Ms. Eafrazi asked committee members to substantially raise funding for domestic and sexual violence crisis centers. They help keep citizens safe.

David Holmstock:

- Captain Holmstock is a member of the Durham Police Department with 31 years' experience. He urged additional funding, citing law enforcement alone cannot do the job.

- UNH provides survivors of violence with support from two agencies.
- Funding impacts both survivors and families.
- It takes a lifetime for some of these victims to heal.

Lizabeth Valez:

- For those in abusive relationships it can be very hard to get out. Crisis centers help women get out of an abusive relationship safely.
- Ms. Valez described her experience with 5 different shelters that had turned her away. She lived out of her car for two weeks until a shelter accepted her. The shelter helped her and her children with counseling.
- It has been 5 years since she left that abusive relationship. She looks forward to graduating from nursing school next year.

Wendy Ann Paquette:

- New Beginnings in Laconia provided Ms. Paquette and her 6 year-old daughter with empowerment and shelter. She is thriving, and grateful she was not turned away in her time of need.
- No one asks to be abused. It is difficult to escape such a situation.
- Don't perpetuate the cycle of violence.

Nikki Donahue:

- Many people turn to substance abuse due to trauma. They lack the support and care they need. Crisis centers are able to help these people deter substance abuse.

Chesley Hill:

- Ms. Hill represented the Crisis Center of Upper Grafton County.
- Crisis centers provide emergency shelter for hundreds of victims and children each year.
- Approximately 50 percent of all women who are homeless report domestic violence as the immediate cause.
- In these shelters trained advocates work with domestic violence victims on budgeting, financial literacy, obtain protective orders, safety planning, boundaries and self-care. They help victims identify child care, employment opportunities, legal representation, affordable housing and countless other resources.
- During a previous biennium, crisis centers in this state were forced to turn away 3,724 victims from emergency shelter due to lack of capacity. Those victims made the brave choice to reach out for help and leave their perpetrator. Due to underfunding, they were forced to choose between homelessness and returning to their abuser.
- Ms. Hill urged increased funding for these centers to keep more New Hampshire families safe.

Elizabeth Sprince:

- Ms. Sprince urged increased funding for domestic violence and sexual assault

crisis centers.

- For women and children with limited economic resources, domestic violence leaves them with very few options. Mothers are faced with the choice to leave and oftentimes become homeless, or stay with their abuser and continue to expose themselves and their children to violence.
- By age 12, 83 percent of homeless children have been exposed to at least one serious violent event, and nearly 25 percent have witnessed acts of violence within their families.
- In one year, 1,204 children were turned away from New Hampshire domestic violence shelters due to capacity.
- Homeless children are more likely to miss school, have lower standardized test scores, and are 87 percent more likely to leave school than their peers.
- Domestic violence shelters work with children to develop homework plans, and provide emotional support to work through the trauma they have experienced. Mothers learn to identify affordable child care outside of school, attend parenting classes and learn to establish a parenting plan to help kids be successful.

Mackenzie Seely:

- Ms. Seely is an advocate with the YWCA.
- New Hampshire's domestic violence shelters offer families a safe place to live and thrive.
- Please adequately fund domestic violence shelters that empower women and children to prosper.

Miranda Demetra:

- Ms. Demetra volunteers at SHARPE at UNH. She has seen firsthand how domestic violence affects lives, and how these centers help victims.
- Domestic violence victims should be the funding priority.

Meg Kennedy Dugan:

- Ms. Dugan is the Executive Director of Voices Against Violence, one of the 13 crisis centers across the state, serving 18 rural towns in New Hampshire.
- Funding for domestic violence prevention services can literally mean the difference between life and death.
- Every day, staff and volunteers go above and beyond to try to meet the ever expanding needs of their clients, despite the personal toll and lack of sufficient resources.
- Often victims come to crisis centers with no clothing, money, transportation and home, and have no idea what the future will hold for them and their children.
- It takes money to help these victims rebuild their lives and achieve independence.
- In 2014, Voices Against Violence served over 700 victims and their children, and the numbers continue to rise.
- Childhood victimization and exposure to violence leads to severe consequences as

adults: alcoholism, drug and alcohol abuse, running away from home and future victimization.

- The very modest funding for these vital services continues to be cut.
- Please fully restore funding to the Domestic Violence Prevention Program.

Barbara Silk:

- Ms. Silk is the mother of Lissa Curtis.
- Their close knit family was devastated when they learned what had happened to Lissa.
- They have experienced ongoing support from crisis centers. Advocates have been a shoulder to cry on when hopelessness starts to set in.
- Education at a young age would make a positive impact.

Phillip Curtis:

- Mr. Curtis is the husband of Lissa Curtis.
- The amount of money they have spent as a family to get Lissa the help she needs has been astronomical, including payment for different types of therapies, ongoing legal proceedings, hospital and prescription costs, and the loss of Lissa's employment.
- There has to be a way to provide funding to sexual assault centers.

Laurie Murdock:

- Ms. Murdock had volunteered at one of New Hampshire's 13 crisis centers for over 20 years.
- She pleaded with committee members to adequately fund the crisis centers for domestic violence and sexual assault survivors.

Don Silk:

- Mr. Silk is Lissa Curtis' father.
- What is the cost to society of a victim not being able to hold a job, or hold the career for which they have trained, let alone the cost of incarceration for acting out criminally? The financial collateral damage is almost unquantifiable; i.e., basic medication preventing a lengthy hospital stay, or a blinking yellow light or a crosswalk at a dangerous intersection preventing countless tragedies and thousands of dollars of cost.
- How many victims have no financial, family or community support?
- How many victims, with just a few counseling sessions or a small amount therapy, would not have turned to alcohol, drugs, criminal behavior or suicide as their "therapy"?
- The law of unintended consequences in this case is ignoring the sizeable long term costs to society and taxpayers of not caring and not treating sexual assault victims.
- Please consider funding sexual assault crisis centers.

Stacey Pawlick:

- Ms. Pawlick is a former prosecutor who worked on felonies and homicide cases in

New Hampshire.

- The percentage of homicides in this state due to domestic violence is 62 percent. Funding of crisis centers could prevent situations such as these from happening.
- We must provide services to those in need, when they need it the most.

Ellen Edgerly:

- Ms. Edgerly is the Community Organizer for the Brain Injury Association of New Hampshire.
- Supporting individuals with brain injuries is a longterm and life long. The needs of these individuals should be carefully integrated into our communities because of the vulnerability and the fragility of those receiving services.
- Ms. Edgerly requests the committee fully fund the Acquired Brain Disorder (ABD) Waiver Waitlist in the amount of \$1.7 million in General Funds.
- It is more cost effective for the state to provide supports and services for individuals on the ABD Waiver compared to institutionalization at skilled nursing facilities. These community based services save the state an average of \$49,941 per individual.
- The current wave of opioid/drug overdoses has produced an increase in the number of brain injury survivors. For every single opioid overdose death there are 47 who survive, some with severe brain damage from the effects of the overdose, with cessation of blood flow to the brain.

Rosemary D'Arcy:

- Ms. D'Arcy sits on the Board of Directors of Voices Against Violence in Plymouth.
- One in 3 women and one in 5 men are victims of sexual abuse.
- New Hampshire is among the states with the highest number of victims, and a poor record of support.
- The services of these crisis centers provide lifesaving support.
- It is vitally important to fund the 13 crisis centers.

Saundra Maisey:

- Ms. Maisey urged support of the Workforce Initiative Program proposed by Governor Sununu.
- The intent of the program is to increase the wages paid to providers of home health care for the elderly and disabled in the state.
- Those who are handicapped and on total disability have many serious medical issues. Oftentimes their only income is Social Security Disability income. They find it difficult surviving month to month. They very much want to stay in their own home or apartment, but need much help doing so. Assistance can include transportation, grocery shopping, personal care, laundry and housecleaning.
- We need to provide better wages for those caring for the elderly and disabled living in their homes. Paying minimal wages means we are not employing those who may be the most qualified to perform these tasks.
- It is difficult to hire and retain home health care workers with New Hampshire's

low employment rate, and with the minimal salaries we pay them.

- It costs much less money to provide the support needed to stay home than it does to be cared for in a nursing home environment.
- Please support seniors by raising CFI rates, and providing the best care possible for our elderly and disabled.

Roger Desrosiers:

- Mr. Desrosiers is the Chair of the AARP Capital City Area Task Force.
- We need an increase in compensation to retain and attract home and community based providers.
- Please include at least a 5 percent increase in compensation for in-home providers.

Todd Fahey:

- Mr. Fahey is the State Director for AARP New Hampshire.
- AARP New Hampshire supports the Governor's Workforce Incentive Program, which provides much needed relief to a workforce that, while caring for some of the most vulnerable and needy among us, has not seen a wage increase in nearly 10 years.
- We are an aging state in an aging nation.
- To care for our seniors with dignity, we need to care for those who facilitate the care of our seniors.

Guy Chapdelane:

- Mr. Chapdelane is a member of AARP.
- He supports an increase in CFI funding.
- One of his family members was cared for by a personal care provider, and was able to live out the last years of her life in her own home. With this help the family was able to continue being contributing members of society.

Cathy Stayee:

- Ms. Stayee has a 35 year-old daughter with developmental disabilities.
- She requests full funding for the Bureau's line items in the budget.
- Many older family members are the support for these individuals, but cannot do it alone. It is truly a public/private partnership.
- Ms. Stayee works many more hours to support her daughter.
- Agency funding helps provide experienced, loving, dedicated support staff to assist her daughter.

Martha LaFluer:

- Ms. LaFluer requests support for the Workforce Initiative Program. This program's fund could be used to increase rates for home and community based service providers.
- This is needed because as citizens we do care about our aging population and their needs.
- CARE: Compassionate and qualified people are needed to do this vital job.

Action speaks louder than words. A raise for these providers would help keep them doing these jobs. Eventually, most of us will need the support of a community based service provider.

Jennifer Collins:

- Ms. Collins requests increased funding for domestic and sexual violence crisis centers. Ms. Collins is the daughter of a battered woman.
- These crisis centers need to be appropriately funded. Their services are critical. Her mother was able to take advantage of their services.
- Children can be resilient when they and their parents are protected.

Paula Lesmerises:

- Ms. Lesmerises is a survivor of child sexual abuse. She was abused from age 3 through age 11, and has spent half her life recovering from the abuse.
- Fully fund the crisis centers across the state.
- The safety net that crisis centers provide must be there in the single moment when the victim has the courage to reach out. The Legislature must prioritize these centers so that no victim is turned away.

Mary Roberge:

- Ms. Roberge requests full funding for budgets for people with disabilities and seniors who receive services under the DD, ABD, IHS and CFI Waivers.
- This funding is important not only to support those currently on the waivers, but to individuals waiting to receive these services.
- Please increase wages to retain and recruit direct care staff.
- Adequate staffing allows people with disabilities and seniors to remain in their homes and become independent and active in the community.

Parker Thornton:

- Mr. Thornton contracted viral meningitis as a newborn. He was paralyzed on his left side. He has major learning disabilities, a complete inability to do math, and an obsessive-compulsive anxiety disorder.
- He was helped through Gateways Community Services in Nashua, and graduated from an employment program. As a result, he has worked for the past 5 years at a home health care agency as an administrative assistant.
- He now engages in public speaking, has obtained his driver's license, bought his first car one month ago, and is saving to move into his own apartment.
- Gateways helped Mr. Thornton become a contributing member of his community.

Mark Thornton:

- Mr. Thornton is Parker Thornton's father.
- Gateways Area Agency is a well run program. He has served 10 years on their Board of Directors.
- Gateways' fundamental philosophy is limited government, citizen involvement, low cost, high efficiency and maximum outcomes.
- As a parent he has directly seen the benefits of this program with his son. The

support Parker has received has helped him beyond measure.

- When he passes away, his son will need outside support.
- Please expand funding for the area agencies.

Stephen Pierce:

- Mr. Pierce requests full funding for the state's Alcohol Fund.
- Liquor sales represent significant funding opportunities for the opioid epidemic, alcoholism and other substance misuse and co-occurring mental health disorders.
- Mr. Pierce is in long-term recovery from an alcohol and cocaine addiction, with acute depression as a result. He grew up with an alcoholic father.
- Mr. Pierce spent a year in jail and 28 months on probation.
- He is clean today and able to help others on their path to recovery.

Laurie Duff:

- Ms. Duff served on an AARP Task Force.
- She is requesting increased rates for home care providers. They can't live on the rates they currently are receiving.
- Home health care is essential for the elderly and disabled. They respond to their caregivers. They need their assistance to remain independent.

Richard Gulla:

- Mr. Gulla is the President of the NH State Employees' Association, SEIU Local 1984.
- The state promised fully paid health benefits in retirement in acknowledgment of the fact that while they may have had better paying options in the private sector, a career with the state meant that they could count on health care in retirement.
- Over the course of the last 8 years, early retirees have had their health benefit go from being fully paid, to \$65/month to 12.5 percent to 17.5 percent. Meanwhile, all retirees have seen their cost sharing go up on the deductible side as well as on prescription drugs.
- The Governor's proposal would set a 10 percent floor on the over-65 group. Having a 10 percent premium thrust upon this group threatens their ability to keep and afford their health plan at all.
- Retirees have not seen a cost of living increase in their pension since 2009.
- The state did away with the under-65 retiree health plan in HB 2 of 2011. It has a date certain in which it will no longer exist.

Brendan Williams:

- Mr. Williams is President of the Health Care Association of NH, representing 90 long term care facilities statewide.
- Approximately 55 percent of residents of nursing homes in his association are on Medicaid.
- New Hampshire has the nation's third worst gap between Medicaid payments and nursing home care costs.
- The proposed state budget is a facility-closure budget.

- They are experiencing a staffing crisis. Care suffers when the continuity of care giving is disrupted by the inability of facilities to retain caregivers.
- The disconnection between quality and funding cannot continue any longer.
- In New Hampshire, to care for the Medicaid poor is to become poor yourself.
- The Association asks for restoration of the longtime budget footnote that ensures resources appropriated for nursing home care, however inadequate, are at least spent on nursing home care.
- An increase in funding is required
- Absent a proactive approach, headlines about facility closures will soon crowd the opioid crisis off of the front page. And, the damage will be measured in human lives.

Barbara Walsh:

- Ms. Walsh's husband received a terminal diagnosis. As a registered nurse, she never would have been able to take him home and care for him for the last 3 weeks of their lives together, if it wasn't for the valuable support services provided by all of the agencies dependent on funding from the budget.
- As the state's population ages, increasing support for these agencies makes sound fiscal sense.

Duncan Blow:

- Mr. Blow has been sober for almost a year and a half. Sobriety is something he couldn't have accomplished on his own. It should be the right of all citizens.
- He urges support for a fully funded Alcohol Fund. Our youth need access to this treatment, education, and prevention.

Patricia Ramsey:

- Ms. Ramsey owns the Edgewood Centre in Portsmouth, providing short term skilled nursing and rehabilitation and long term residential care/nursing home care.
- The inadequate reimbursement methodology is a problem. In the last 2 years of the 50+ nurses they employ, they lost 24 nurses to the hospital environment for better pay, 8 nurses to doctors' offices for better scheduling (no weekends, evenings or nights), 1 nurse to a local hospice, and 3 to assisted living facilities.
- The State of New Hampshire recently recognized the need for a 15 percent wage increase for state-employed nurses. Why would it not recognize the need for greater resources to providers who are caring for residents that the state has committed to help via the Medicaid program?
- They are losing licensed nursing assistants, the backbone of their facility, to other entry level job markets because of more pay. When Dunkin Donuts in Portsmouth is paying \$15.00 per hour, it's impossible to compete.
- For the first time in Ms. Ramsey's 34 years of managing the Edgewood Centre, she has great doubt that they can continue.
- Although licensed as a 156-bed facility, she has 107 residents in her building as

they don't have the staff to care for more.

- Her small business needs the increased financial support if they are going to continue providing care for the residents who will need their care in the future.

Carol Bowden:

- Ms. Bowden is the Chair of the Board of Directors for the Derry Friendship Center, a place for people seeking help from addiction.
- Between 400-500 people come through their doors every month seeking help.
- Please fully fund the Alcohol Fund at 5 percent.

Jill Prakop:

- Ms. Prakop requests full funding for the Bureau of Developmental Services, which provides important services for many New Hampshire families.
- Her two daughters currently receive family support services and in-home support waiver. They experience complex medical challenges in addition to experiencing global developmental disabilities. They require consistent supervision and adult assistance to navigate their environments successfully.
- Both girls need assistance with all aspects of daily living skills.
- The girls are actively involved in their community because of the supports and services they receive through their local agency.
- Without these supports many children would not develop the necessary skills they need for adulthood.

Donka Facciolo:

- Donka requests full funding of the Developmental Disabilities budget, and is supported through Lakes Region Community Services through the DD Waiver in the SDS Program. She has lived independently for 10 years.
- Donka works 2 jobs and is working towards a career in early childhood education. Through LRCS, she accesses transportation to both jobs, and is able to do necessary errands in the community.
- Due to her disability, she relies on LRCS staff for support with problem solving and finding resources. Without that support, she would struggle with maintaining her safety and wellbeing.

Elizabeth Atwood:

- Ms. Atwood requests full funding for the Alcohol Fund.
- Three years ago she became homeless and was nearly incarcerated. She qualified for a detox program. She now has a career, home and her child back, because she was lucky enough to have found a bed in a state treatment facility.

Lisa Beaudoin:

- Ms. Beaudoin requests full funding of the Developmental Disability waitlist.
- Her son, Forrest, is currently on the waitlist because he is a person with Trisomy 21. He is a high school graduate, reads and plays music, co-owns a small gluten-free bakery business, lives in his own apartment, volunteers around town, and is looking for a second job. However, he needs support because he doesn't drive.

- Inadequately funding DHHS diminishes its ability to provide elements like community access and striving for economic self-sufficiency. It is money well spent.
- It is unconscionable not to fully fund DHHS.

Forrest Beaudoin:

- Forrest is a 21 year-old graduate of Conant High School in Peterborough. He suffers from Down Syndrome. He is a smart, young man who owns a bakery with his brother, but needs supports.
- DD services are critical to his wellbeing.

Meredith Sanborn Briggs:

- Ms. Briggs is seeking increased compensation for direct support personnel, and fully funding the DD waitlist.
- Her daughter, Sarah, is 42 years old, is tube fed, has a colostomy and takes medicine twice a day for seizure control. She is non-verbal, totally handicapped and confined to a wheelchair.
- They provide a vehicle for Sarah's transportation, as well as a monthly stipend to the direct support personnel for therapies and community activities.
- Ms. Briggs believes they save the State of New Hampshire in excess of \$200,000 per year because they care for Sarah in the home where she grew up.
- Direct support personnel are worth "their weight in gold".
- Sarah's life has quality, meaning and purpose.

Carol Conforti-Adams:

- Ms. Adams begs the Senate Finance Committee to include an increase in funding for Choices for Independence Waiver services and home care services that provide home and community based supports to people with disabilities and seniors.
- Due to a car accident, she suffers from Quadriplegia, with no voluntary movement from her armpit down.
- Personal care attendants come to her home morning and night to get her in and out of her chair and provide basic daily living services.
- She lives alone, pays taxes, pays her own living expenses, works 3 jobs, and does not live in subsidized housing. She does not receive food stamps or fuel assistance. She pays a Medicaid premium of \$140 per month for the Medicaid CFI Waiver and the PCA services.
- Back in 2007 she was paying PCAs \$13-\$14 per hour, with no problem hiring or retaining help. In 2017 as she interviews potential PCAs, they laugh in her face at a wage of \$10.25 per hour.

David Michael Kaye:

- Mr. Kaye is an advocate with New Futures. He supports full funding of the Alcohol Fund at 5 percent.
- He has both a Bachelor of Arts and a Masters Degree.

- He has abused pain pills, alcohol, Ecstasy, Ketamine, Percocet, Cocaine, Oxycontin, methamphetamines, opiates and Heroin. He overdosed earlier this year and went into rehab.
- There is a small window of opportunity when someone is crying for help.
- Recovery does work.

Elissa Margolin

- Ms. Margolin is the Director of Housing Action NH, a coalition of 80 businesses and organizations centered around affordable housing policy and ending homelessness in NH.
- She would like increased funding for the homeless shelter program and the homeless housing axis revolving loan program.
- People need this help, especially in the southern half of the state.

Melissa Fernald:

- Ms. Fernald supports fully funding the Alcohol Fund.
- She has been in the mental health and addiction field for nearly 20 years, providing prevention and treatment to the citizens of this state.
- By funding the Alcohol Fund you will not only be allocating funds, but you will also be sending a clear message to our children that the State of New Hampshire will take care of them.
- Many clients are addicted to multiple substances.
- The Alcohol Fund is vital to providing the resources needed to combat the growing addiction crisis.
- The next generation is at a much greater risk of addiction than any we have seen. They suffer from mental health issues, live in an environment where drug use is the role model, and have a genetic predisposition to substance abuse.

Robert Gillis:

- Mr. Gillis is the Associate Director for Monadnock Worksource, a small organization that assists 35 individuals with intellectual, developmental and physical disabilities to live and work independently in their local communities through the Developmental Disabilities Waiver. He is asking for full funding for the Developmental Services budget.
- New Hampshire is currently in a staffing crisis as vendor agencies are unable to attract and retain qualified direct support professionals. Staff turnover is high statewide, leading to agencies constantly expending limited resources to the hiring process.
- Failure to provide adequate funding to achieve compliance with Medicaid rules does the individuals they support a disservice and places their entire waived services delivery system at risk.
- Fully funding Developmental Services provides jobs for the state's direct support professionals. It allows individuals with developmental disabilities the opportunity to secure jobs they would not be able to consider without support.
- Without appropriate funding, family members of adults with developmental disabilities end up providing care at home, and are unable to join New Hampshire's workforce.

Ernest Loomis:

- Major Loomis retired from the New Hampshire State Police after 27 years of service, during which he worked for a livable wage.
- In 1963, the state developed a retirement policy for its employees. The state agreed they shall provide health care retirement benefits as good as the private sector, and as well as surrounding states, with the full cost of premiums being paid by the state.
- This was not an issue until 3 budget cycles ago.

Jim Doremus:

- Mr. Doremus is the CEO of the Concord Family YMCA.
- He informed committee members he possessed a petition with 916 signatures seeking additional funding for childcare.

Julie Day:

- Ms. Day supports increased funding for the Alcohol Fund.
- Evidence informed prevention programs are the most cost effective way to prevent substance misuse.
- Prevention is a priority for ending our state's opioid crisis.
- As the Strengthening Families Director at the New Hampshire Children's Trust, Ms. Day counts on Family Resource Centers to provide resources and services to all families.
- Family Resource Centers are critical and cost effective. They prevent child abuse by offering different services as well as parent classes.
- Preventative services reduce substance abuse, job loss, health issues, child abuse and more.
- Ms. Day once belonged to the Children's Place, a Family Resource Center in Concord. It made her a better parent, and offered her opportunities to learn and grow.
- As a child of an alcoholic, she knew she did not want to parent the way her parents did, but she didn't know any different. The Family Resource Center helped give her the tools she needed to raise her children in a positive way.

Chris Muns:

- Mr. Muns is the CEO of One Sky Community Services, and a former State Representative.
- One Sky is one of the state's 10 designated developmental disability area agencies responsible for managing available state and federal Medicaid funding for individuals and families living with a developmental disability or an acquired brain disorder.
- At the present time, the Bureau of Developmental Services is providing services to nearly 4,900 individuals. The current number of individuals with identified and known unfunded needs is about 540. Governor Sununu's budget proposal will provide funding to address the needs of only 160 of those individuals. It will leave 380 without services in FY 2018.
- He urges support of the Bureau's budget request of an additional \$8.3 million in General Funds for FY 2018 and \$10.7 million in FY 2019.

Rebecca Woitkowski:

- Atty. Woitkowski is the Early Childhood Policy Coordinator at New Futures Kids Count. They strongly support funding of home visiting programs set out in the

Governor's budget. The funds support the provision of essential services to New Hampshire's most at-risk children and families.

- Home visiting programs in New Hampshire are a patchwork of federal grants and programs that provide a spectrum of services to risk families. It pairs families with skilled professionals such as nurses, social workers, and other clinical workers to ensure that at-risk children get a good start in life. By visiting in the home, professionals can identify issues early on and intervene before a problem develops.
- Home visiting programs make important connections for these families to improve maternal and child health, prevent child abuse and neglect, encourage positive parenting, and promote child development and school readiness.
- Services broadly range from multi-year programs, which assist young mothers, to short term targeted aid to help a family overcome a specific crisis.
- Intervention through home visiting in early childhood can dramatically alter a child's life trajectory in a positive way, mitigating toxic stress and reducing risk of future drug use.
- New Futures Kids Count also urges full funding of the Alcohol Fund.

Lindsey Hanson:

- Ms. Hanson is the Government Relations Manager for Save the Children. They support Governor Sununu's top priorities of early education opportunities and kindergarten programs. These types of initiatives result in lasting gains, and reduce the crime rate.
- The local Chambers of Commerce also support expanded kindergarten.

Emily James:

- Ms. James' daughter was born with significant disabilities. With the state's help and programs, she is able to raise her child.
- The DD budget needs to be fully funded to help these children, as well as their families, by providing services such as the in home program and HIP.
- People with DD are the neediest people in our community. They need our help the most.

John Amrol:

- Mr. Amrol is a retired state employee, whose length of service was 44 years. He retired 19 years ago and gave committee members specific examples of how living expenses for electricity, cable, water and sewer have all increased dramatically since retiring.
- Retired state employees living on a fixed income have received no COLAs for 9 years, yet they are still trying to live independently.
- The majority of state employee retirees cannot afford the increases being proposed for their health insurance benefits.
- He implored committee members to find the funds to offset these costs.

Jen Clayton:

- Ms. Clayton is the Daytime Client Services Coordinator for HAVEN, one of the 13 crisis centers in the state. She advocates for survivors of domestic and sexual violence.
- HAVEN serves a population of 385,879, and does so with approximately 10 full time advocates and a valued group of volunteers.

- In 2016 they stood in court with 291 individuals who were in fear for their lives due to sexual and domestic violence and needed the court's protection.
- Often times these crimes upon children have been perpetrated by someone the family trusted, and because of that their social supports have diminished.
- To decrease funding is to leave these families and children without support, without guidance and without a voice.

Annika Stanley-Smith:

- Ms. Smith is a Substance Misuse Prevention Coordinator for the Capital Area Public Health Network.
- Substance use disorders and other widespread public and economic health issues have common factors that lead to their occurrence. Adverse childhood experiences are traumatic experiences that have shown to be a factor in the cause of substance use disorders, and other behavioral health disorders. Children having 3 or more of these experiences were twice as likely to start drinking prior to the age of 15. Children who use substances before the age of 14 are four times more likely to develop a substance use disorder.
- Addressing adverse childhood experiences is a highly impactful way to prevent substance use disorders and other costly behavioral health disorders.
- Supporting the Alcohol Fund, full day kindergarten and affordable childcare are all ways to impact the many deficits Ms. Smith sees today in the state's ability to combat the opioid crisis and other behavioral health emergencies.

Jennifer Bertrand:

- Ms. Bertrand's nearly 18 year-old daughter, Chloe, has a profound disability and is diagnosed with Autism. She cannot talk and requires direct support and direction day and night to ensure her safety and wellbeing. With appropriate supports and services, she is a determined, energetic, and passionate young lady who loves biking, adaptive skiing and bowling.
- On behalf of the NH Council on Developmental Disabilities, Ms. Bertrand and her family are asking for the committee's support to fully fund developmental services.
- The Bertrand's journey has included navigating multiple systems, learning as much as possible about how to help, support and advocate for Chloe so that she can reach her fullest potential, be as independent as possible, and plan for her future. At times it can be an exhausting day-to-day struggle to find a balance in their personal and professional lives.
- It is a steadfast partnership with families who are doing the routine heavy lifting and make daily sacrifices with a little assistance from the state to ensure individuals like Chloe with developmental disabilities and others with acquired brain disorders be afforded the same civil rights and dignity as anyone else, and to remain at home in their community with their families where they belong. This partnership also affords huge savings to NH taxpayers, as costly institutional placements would completely drain our state budget.
- Families need the State of New Hampshire to fulfill their part in this partnership and fully fund developmental services.

Erin French:

- Ms. French is a case manager for 30 adults and families who receive family

directed services at the Moore Center in Manchester. She has seen how vital and necessary these services are for her clients and their family unit, and how these services can positively impact many lives.

- Some of her clients have held the same job for more than 10 years because of the supports they receive through this funding.
- Individuals with acquired brain injuries are living in their own home and working full time jobs.
- Please support the Bureau of Developmental Services' budget.

Charlie Ryfarm:

- Practically every family has at least one person with mental illness. Please expand funding for mental health.

Grace Murdoch Roy:

- Please increase funding for mental health services.

Richard Wiggins:

- Mr. Wiggins grew up in an environment of mental illness and substance misuse. He went on to also abuse drugs and alcohol, and has been in recovery for 22 years. He is a Peer Support Recovery Specialist and works in a transitional housing facility in Concord.
- More funding is necessary to increase the capacity and efficiency of our system of care for these vulnerable citizens.
- Mobile Crisis Units are beginning to take some of the pressure off the hospital emergency rooms, but we need more of them in the less populated areas of the state.
- Thank you for your consideration of funding mental health services and substance misuse treatment, education and prevention.

Debbie Baird:

- Ms. Baron's son suffered with undiagnosed depression and committed suicide at 29 years of age. He kept it well hidden, and was consumed by guilt and shame.
- Please restore funding to our mental health system, increase beds and provide for an additional ACT team for in home crisis support. These highly trained teams understand family dynamics.

Laurie Foster:

- Ms. Foster is in support of the Governor's proposed budget.
- She is the mother of three adult children, two of whom have significant mental health challenges. She works at NAMI NH as the family support piece of FAST Forward Wraparound.
- Wraparound services put families in control of the help they need. It works to build on the strengths of the family. Wraparound works to keep children home within their communities, out of residential placement, out of juvenile detention and out of psychiatric hospitalizations.

Kim Murdoch:

- One out of five individuals are impacted by mental illness.
- Individuals deserve prompt access to mental health beds in a crisis.
- Please increase the number of beds, and supports in the communities.

George West:

- Mr. West related the support his 94 year-old mother received from NH Legal

Assistance with her property tax exemption case.

- It is extremely important the State of New Hampshire continue to fund the activities of NH Legal Assistance.

Rachel Glover:

- Ms. Glover is a domestic violence survivor. Her father killed her mother. She now volunteers for a crisis hotline, and also works on an ACT team.
- Please provide proper funding to help those affected by domestic violence and sexual assault.

Michele Merritt:

- Atty. Merritt is the Senior Vice President for New Futures.
- The additional funding for behavioral health workforce development, loan forgiveness programs and drug courts, are all critical pieces of the Governor's budget, required to address our state's opiate crisis.
- The NHHPP is a critical health insurance program for low-income Granite Staters, which provides comprehensive coverage for substance use disorder. Nowhere in the Governor's budget is reauthorization of the NHHPP included or contemplated, despite its being the state's single most important tool in combating the opiate epidemic. New Hampshire has drawn down more than \$450 million in federal match per year for this program.
- The expansive and robust substance use disorder service array provided through the NHHPP has allowed the state to reallocate funding previously used for treatment to other important service areas, such as prevention and building up the state's recovery support network.
- Included, as well, in the Governor's budget is an increase to the Alcohol Fund of 3.4 percent of gross profits from the sale of alcohol, with a potential increase of 4 percent in the second year of the biennium if a majority of the funds are expended. New Futures urges the committee to preserve this funding at the 3.4 percent level, but asks that the incentive amount for the second year of the biennium be increased to 5 percent, the amount intended under the law. The money from this fund is disbursed for alcohol and other drug abuse prevention, intervention, and treatment services by the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery.
- Despite overwhelming public support for fully funding the Alcohol Fund at the statutory 5 percent level, every year but one since the fund was created, either the Governor or the Legislature has suspended the formula, transferring fund revenue to the General Fund.
- Since 2004, had the Alcohol Fund been fully funded, \$97 million would have been available for critically needed prevention, treatment and recovery services. Instead, only \$37 million in General Funds has been appropriated for those purposes.
- Fully funding the Alcohol Fund, adequately supporting workforce initiatives, and reauthorizing the NHHPP are priorities that should be addressed and adequately funded in any budget, if we hope to turn the tide of addiction in our state.

Elizabeth Greenwood:

- Ms. Greenwood is a former client of NH Legal Assistance. It has made a huge

impact on her and her son's life.

- Please increase funding for NH Legal Assistance.

Susan Stearns:

- Ms. Stearns is employed by NAMI NH, and is in support of increased funding for essential mental health services. She also has family members living with mental illness.
- New Hampshire's mental health system--once rated the best in the country--is in crisis, and the individuals and families it is designed to serve are in even greater crisis. The system is failing to meet the essential needs of Granite Staters living with mental illness.
- Nearly every single day at NAMI NH we hear from families whose loved ones are waiting for a bed at NH Hospital.
- Ms. Stearns strongly urges support for funding for additional designated receiving facility beds, expanded mobile crisis response, wraparound services for children, an appropriate psychiatric facility for our children, and the infrastructure to fully restore our mental health system.
- Ms. Stearns' 47 year-old family member benefitted from the efforts of an ACT team, assisting him with activities of daily living, helping him engage in community based activities, and ensuring he was able to maintain his health. As a result of the efforts of the ACT team, not only is her family member able to safely live in his own apartment in the community without harming himself, but the quality of his life has improved dramatically. He is actually employed, part-time for the first time in over 20 years.

Cynthia Varney:

- Ms. Varney has experienced the brokenness of our mental health system. She is the parent of a son who is bright, articulate, well educated and mentally ill. He has been a patient at NH Hospital dozens of times since his first admission in 2005.
- Ms. Varney's son has waited as long as 9 days in an emergency room to be admitted to NH Hospital. The staff at the hospital are very caring, but unable to give the program of treatment he can receive at NH Hospital.
- His most recent admission was to a local hospital's psychiatric ward, where he was taken out of the queue and treated successfully without needing to go to NH Hospital.
- Ms. Varney's hope is that the new opportunities to expand the capacity for care in this state will mean that others may not have such lengthy waits for a bed.

Norma MacKinley-Smith:

- Ms. Smith supports the Governor's proposed budget, particularly the 40 transitional community beds.
- Skimping on community services in years past has led to more people in crisis, resulting in the need for more expensive acute care.
- Prior to receiving the acute care our loved ones need and deserve at NH Hospital or the few designated receiving facilities across the state, most languish in inappropriate settings such as emergency departments or even correctional facilities for weeks on end with NO treatment. This exacerbates the distress and significantly delays recovery.

- Insufficient community supports following hospitalization greatly contribute to relapses in treatment.
- Investing in 40 transitional beds to support those individuals who *have* received acute care will leverage the "investment" in treatment provided by hospitalization.

Ellen Nordstrom:

- Ms. Nordstrom is a music teacher, musical director, voice professor, vocal coach, voice therapist of sorts, and a semiretired opera singer.
- Please support funding the arts, music programs in particular.
- If daylong kindergarten is a consideration and a draw to newcomers or to NH graduates, so should cultural offerings be within our schools and throughout our great state.
- Surely New Hampshire's opioid epidemic and veteran suicide rate might be lessened by our proactive support of music programs, not to mention helping the emotional wellbeing of abuse victims.

Brian Collins:

- Mr. Collins is the Executive Director of Community Partners, an area agency for developmental services as well as mental health services in Strafford County. He supports increased funding for mental health services.

Jay Couture:

- Mr. Couture works with Seacoast Mental Health Center in Portsmouth.
- Medicaid rates have a direct impact on access to care.
- They can't attract and retain staff; they have plenty of vacancies. Everyone is competing for the same staff.
- We need a children's wing at NH Hospital, and a stabile mental health system in this state.

Gabriele Grossman:

- Ms. Grossman is requesting full funding of the Developmental Services budget.
- Her 12 year-old son, Eli, was diagnosed with Autism and a Chromosome 15 duplication when he was 3 years old. He faces many challenges with his communication, safety awareness and self-care skills.
- The Grossman family relies on In Home Supports Waiver, relationship with their school system, and their area agency, One Sky, to help support Eli in the community and at home with them.
- It is our moral and ethical obligation to support our vulnerable members of society with dignity.

Amy and Ally Girouard:

- Ms. Girouard and her daughter, Ally, asked the committee to fully fund developmental services.
- Ally is supported by the In Home Support Waiver through Community Bridges, as she has a rare neurogenetic disorder called Angelman Syndrome. It is a Chromosome 15 disorder which severely affects Ally's ability to be independent with dressing, eating and her ability to communicate. Other medical issues such as gastrointestinal and seizure disorders also complicate life for people with Angelman Syndrome.
- Ally receives In Home Supports for 12.5 hours per week. The Girouards pay for

the program and In Home Supports funds the aide to attend the program with her. She attends Broken Ground School in Concord, and is involved in meditation programs and yoga. She is learning how to have positive relationships with other girls. This would not be possible without In Home Supports.

Ann Sanok:

- Ms. Sanok asked committee members to fully fund the budget for services of developmental disabilities--a system that is already woefully inadequate and already not meeting the needs of our most vulnerable citizens.
- Vote to ensure the protection of our most disadvantaged as provided in RSA 171-A.
- Vote for a budget that ensures the historic and enduring principles of humanity and general benevolence set forth in New Hampshire's Constitution.
- Legislators should be accountable and responsive.

Courtney Tanner:

- Ms. Tanner is the Executive Director of the NH Providers Association, which is comprised of 110 recovery providers throughout the state.
- She supports increasing the Alcohol Fund, increasing treatment capacity, building up recovery support structures and investing in New Hampshire's workforce.

Cady Hickman:

- Ms. Hickman is a preschool teacher who highlighted the importance of the Childcare Scholarship Fund with the example of a family who moved to Merrimack from China. Through this fund, the mother, Laing, was able to go to school and become an LRN. The daughter, Stella, has learned English, is friendly, social and ready for first grade.

Norine Elliott:

- Ms. Elliott is a single mom of a 31 year-old son with Down Syndrome. She is asking for full funding of the developmental services budget.
- After helping her son secure an apartment, he happily lived and worked for 4 wonderful, productive years. Unfortunately, due to his innocent nature, he was physically, sexually and emotionally abused by "a friend" behind closed doors in his apartment. By the time it was discovered, he had developed a severe anxiety disorder. He needed psychiatric treatment and Ms. Elliott left her job as a nurse practitioner to facilitate his recovery, and help him establish a new life in her home.
- Without support from the In Home and Family Support Waivers, Ms. Elliott would not have been able to help her son find a job and have a quality of life in his new community.

Nancy Kellerher:

- Ms. Kelleher urged support for the DD waiver.
- She has a 25 year-old with a developmental disability, who is very ill.
- She has done much with the support of her area agency to help raise her child with a healthy lifestyle.

Debbie Ryan:

- Atty. Ryan is a mediator with the NH court system for 24 years. She is also a

board member of NH Legal Assistance. She supports a state appropriation for NH Legal Assistance, to enable access to justice for all. Unfortunately, they turn away hundreds of family members due to a lack of resources.

- Atty. Ryan urged increased state funding to increase services in the North Country and the western part of the state.

Andrea Reude:

- Ms. Reude expressed support for the critically important services provided by the sexual violence and domestic violence shelter programs, which include medical and child care, as well as emotional support.
- Domestic violence shelters provide services to keep mothers and children safe from violence.
- We cannot expect our most vulnerable citizens or our children to be able to cope with this trauma. We need to fully fund the crisis centers.

Cathleen Voisine:

- Ms. Voisine's 19 year-old son has been living with mental illness since the age of 8. He is also autistic and has Asperger's Syndrome.
- In February of this year he attempted suicide. He was transported by ambulance to a very busy emergency room where he waited behind a curtain for 3 days because there were no receiving beds available in mental health facilities in the entire state. While in the emergency room he waited 16 hours before he was seen by a mental health professional, who evaluated him for 10 minutes only. During those days he was riddled with fear and anxiety.
- Funding for 20 additional designated receiving beds would have prevented her son's traumatizing experience.
- Respite peer beds are effective and would achieve positive outcomes for some of our most vulnerable young adults.
- Increasing beds and adding an additional Mobile Crisis Unit will make a significant impact on decreasing the wait time in emergency departments.

Dick Chevrefils:

- Mr. Chevrefils is the President of the Board of NAMI NH. He supports the proposed budget that addresses the needs of people within our state who experience the challenges of mental illness.
- Some of the proposed budget items that would make a difference include:
 - 20 additional designated receiving facility beds;
 - 40 transitional community beds;
 - 8 respite peer beds;
 - 1 additional Mobile Crisis Unit;
 - an integrated data management system;
 - an independent study to understand the involuntary treatment capacity and needs within New Hampshire;
 - a clinical expert position to provide statewide mental health oversight and leadership; and
 - wraparound services for children.

Sarah Aiken:

- Ms. Aiken is a Director for Community Bridges. She has a 15 year-old son, Colby, who has Autism.

- Ms. Aiken received early support services from Community Bridges. Colby has grown into a young man who has a girlfriend and rows crew.
- Early support services and intervention are great investments.
- Funding for the DD waitlist is imperative.

Ken Norton:

- Mr. Norton serves as the Executive Director of NAMI NH. He also has family members with serious mental illness and co-occurring substance use disorder.
- Mr. Norton urged strong support of increased funding for mental health, especially the specific community based supports included in the proposed amendment to HB 400.
- At the time of the public hearing on May 2, 2017, there were 16 adults and 1 child in a mental health crisis being boarded in emergency departments throughout our state. Those low numbers are not reflective of the magnitude of the crisis and are likely the result of a historical dip in the springtime.
- Over the past 24 months the average number of people in a mental health crisis being boarded in emergency departments for lack of an inpatient bed has more than tripled. During the month of March 2017, we averaged 46 adults and 4 children each day.
- This practice is wrong medically, ethically, morally and economically, and has become the primary symptom of a mental health system in desperate need of improvement.
- Reductions in staff at the Bureau of Behavioral Health and a lack of leadership and vision on mental health services within the Department of Health and Human Services over the past decade have led to a steady decline.
- Establishing a mental health system which meets the needs of our most vulnerable citizens will require a long term commitment.
- Part of the current challenge is the ability to discharge people from NH Hospital in a timely way when they are ready to leave.
- Mobile crisis response successfully diverts hospitalization, incarceration rates and contact with law enforcement. Mr. Norton strongly supports the addition of more mobile crisis response teams, and hopes the state can work toward developing statewide mobile crisis response capacity.
- Several peer support programs in the state have been successfully managing peer respite beds.
- A real time data management system will allow for more effective and efficient management of inpatient and community residential programs.
- Waiting times for an intake at community mental health centers can currently take up to 4 months. Once assessed, getting an appointment with a psychiatrist or prescriber can be months in addition to that.

Michael Bradley:

- Mr. Bradley is a master licensed Alcohol and Drug Counselor, and a licensed Clinical Mental Counselor working at the Mental Health Center of Greater Manchester. In his 29 years of professional experience, he has seen firsthand the ravages substance misuse imposes on individuals, families and the community.
- Alcohol kills far more people than opioids, though not as quickly and dramatically as the instances of opioid overdose constantly in the news.

- The innovative Safe Station Program has done an excellent job of identifying and shepherding into treatment the members of our community needing help to manage and recover from this disease. But the facilities tasked with providing the ongoing, comprehensive, chronic treatment needed are overwhelmed.
- Mr. Bradley urged the committee to fund the Alcohol Prevention and Treatment Fund at the 5 percent level originally intended as the bare minimum.
- Do not balance the budget on the backs of individuals struggling with the disease of addiction and their suffering families.

Karen Irwin:

- Ms Irwin expressed her concerns relative to retiree health care benefits.
- Rather than having the state and retirees share the increase in health care benefits, the state should increase or maintain the post retirement rate it used in the 2016-2017 budget.
- Post retirement is used to reimburse the General Fund for retiree health insurance. Why did the post retirement rate decrease even though costs for health insurance have not?
- As the health insurance budget increases every year, so should the post retirement amount calculated. It should not remain level from year to year, or decrease.
- Those who have been retired for some time are experiencing greater costs for insurance as a percentage of their pension. These folks are less likely to be able to go back to work to maintain insurance, which may mean they go on Medicaid rolls.
- Drug cost increases need to be addressed on a federal level.
- Any changes in retiree health care premiums should first require a public hearing.
- No elected members of the Legislature should propose increases regarding retirees' health care benefits without fully exhausting all revenue and expenditure tools at their disposal.
- Eliminate the increases outlined in the current budget to the 65 and older retirees.

Will Walker:

- Mr. Walker's 18 year-old son has Autism, a developmental disability that severely impacts his ability to care for himself, communicate, interact with others, and adapt to unexpected changes.
- Please don't reduce funding for services for individuals with developmental disabilities.
- Via the In Home Supports Waiver, their local area agency, Gateways Community Services has provided Liam with critical services from an early age. The funds from the IHS Waiver allow Liam to access therapy that helps him learn and grow to the best of his ability. The funds also provide personal care so that Mr. Walker and his wife are able to work.
- With assistance from the IHS Waiver, Liam is developing independent living and social skills to prepare for employment when he leaves high school at age 21.
- Liam is building appropriate skills in real world situations, and the members of the community are growing to understand, accept and support people like Liam.

Darienne McGuinness:

- Ms. McGuinness' oldest son is supported by One Sky Community Services through the In Home Supports Waiver. He was diagnosed with Autism at age 4. He is now 13 and attends middle school.
- This agency has been a blessing for the McGuinness family, and for their son's development.
- Please fully fund Developmental Services.

Mandy Knight:

- The Developmental Services budget funds a job coach for her brother, Nathan. It helped to match Nathan's skills to a job that he loves, and where he is valued. The coach also helps with transportation, safety procedures and talking with coworkers.
- Fully fund DD services.

Heidi Toursie:

- Ms. Toursie has an adult daughter who lives with bipolar disorder.
- She stressed the importance of wraparound services for children. Wraparound is a planning and support process where a team develops and implements an individualized plan of care.
- Youth who receive wraparound services have significantly better outcomes, including improved living situations, fewer out of home placements, improved functioning and behavior, fewer days out of school, improved academic performance and decreased suspensions.
- Funding and expanding wraparound services for families helps prevent expensive out-of-home placements, psychiatric hospitalization and the involvement of the juvenile justice system. This saves the state and school districts money.
- Ms. Toursie is grateful for the promise of more beds.

Ashley Hurteau:

- Ms. Hurteau is a 16-month recovering heroin addict.
- She supports fully funding for the Alcohol Fund.
- Ms. Hurteau began with alcohol. She never imagined it would eventually lead her to shoot up heroin years later.
- Alcohol is as much of a problem as heroin.

Michelle Abbott:

- Ms. Abbott's 12 year-old daughter, Sarah, is currently supported by Gateways Community Services through the In Home Supports Waiver. Through Gateways and the In Home Supports Waiver, Michelle is able to work, keep health insurance, and keep her home. She receives behavioral training to help with the many day-to-day struggles.
- This funding changed their life.
- Individuals with disabilities, like Sarah, can't wait for funding. Please support Developmental Services funding.

Janet Merrithew:

- Ms. Merrithew's son, Kevin, was placed out of their home for 18 months. Back at home now, he is making continued progress due to a variety of wraparound services. He has a tutor, mentoring services, a service coordinator, a case

manager and the family receives therapy. These wraparound services have greatly benefited Kevin, and have been provided through the school system and their area agency. It's been a team effort and the results have been well worth the effort.

- Please continue to support and fund wraparound services.

Alan Goode:

- Please restore full funding of state retiree health care benefits. When you make a promise you should keep it.

Lyena Hayes Carroll:

- Ms. Carroll's father and grandfather served on the Executive Council and in the Legislature.
- There is a real need for additional beds for people in crisis. And, not just the beds but hiring and retaining a workforce that has knowledge of this group of patients, including RNs and doctors.
- Ms. Carroll has been hospitalized 5 times over the last 14 years. Luckily, she has never waited for a bed, due to having access to the best health insurance that money can buy, and numerous donations made by her family over the years to the local hospital.
- Her hospitalizations were due to a need for medicine management; she needed her pharmaceutical "cocktail" tweaked. She was simply manic. A Mobile Crisis Unit could have dealt with family members who were frightened and unsure of what to do.
- Whether the triggers are everyday stress, emotional distress or environmental stressors, something needs to be done.

Betsy McNamara:

- Ms. McNamara's son, Samuel, is 17 and requires 100 percent care with all aspects of life due to his Cerebral Palsy and Mitochondrial Disease. He is also a happy, smart and fun young man who enjoys his classes at Concord High School and is looking forward to college classes.
- Currently, Samuel receives support from Community Bridges through the In Home Supports Waiver for children under 21. Ms. McNamara and her husband provide a great deal of support, and pay out-of-pocket for additional help.
- Caring for Samuel at home with the support of a service provider from Community Bridges is much more cost effective than having him cared for in a facility such as a nursing home.
- Please support full funding of Developmental Services.

Mindy Pond:

- In her job, Ms. Pond reviews requests for DD services, and makes decisions regarding the waitlist.
- She is also a job coach who helps with social skills and eye contact.
- Fully fund Developmentally Disabled services.

Rep. Michael Brewster:

- The Governor's budget is \$12.1 billion. He wants transparency in the budget process and stressed quality of services.
- There are victims that need funding.

William Rider:

- Mr. Rider is President and CEO of the Greater Manchester Mental Health Center.
- Currently, they have 900 individuals waiting for a first appointment.
- They performed 5,500 emergency evaluations last year.
- There is a lack of funding for community mental health systems.
- With the loss of their workforce, they are unable to provide services the community needs.

Karen Trudel:

- Ms. Trudel lives with bipolar disease. Without the help she has received these last 3 years, she would have made the choice to end it all.
- She has been hospitalized several times within the last 22 years. However, in December 2015 she became a client of Riverbend's Mobile Crisis Unit. She was one of the first people to stay in their apartments. She was not locked into a unit, and could still go out in the community. There was a therapist in the building available 24/7, as well as peer support you can talk to anytime, day or night.
- Mental health services need to improve.
- Medicaid expansion needs to remain.
- Currently, Ms. Trudel is on 6 different medications. She requires two weekly therapy visits and sees her psychiatrist every 2 months. Medicaid helps her afford these services.
- Please increase funding to implement more Mobile Crisis Units across the state.

Regan Burke:

- New Hampshire is not investing in its citizens' mental health.
- The crisis costs more money to fight.
- Fully fund the DD Waiver services.

Tim Whitman:

- Mr. Whitman has a family member who has a developmental disability. DD Waivers are vital for individuals with disabilities to become contributing and taxpaying members of society.
- Currently, the Governor's budget is level funding this group. If that remains the case, they will not be able to provide services that are needed.
- Do not cut the budget. It is "bare bones" already. Please adequately fund these services.

Cynthia Oakey:

- Ms. Oakey struggles with Bipolar Disorder, which was triggered by moving in and caring for her father-in-law. After 2.5 years, they gave up caring for him.
- Health is the most important thing.
- Proper medications help Ms. Oakey feel better balanced.
- She is employed and has reduced the stress in her life. She's also made drastic changes to her health, such as bicycling everywhere and cutting out sugar.

Angela McInnis:

- Angela has a son, Cameron, living with Autism. Cameron is currently supported with one-to-one assistance through the DD budget, the Community Based Care Waiver and Family Directed/Consolidated Services of the Moore Center. The funding allows Cameron a quality of life with the focus on abilities, not disability.
- Through the patience, guidance and acceptance of family and members of their

community, medical and service providers allow Cameron an opportunity for inclusion, access to the community, an opportunity to practice daily, life and vocational skills, responsibility and public awareness.

- Ms. McInnis requests continuance of full funding of the budget for New Hampshire's most vulnerable citizens to have the freedom and necessary support to strive for independence and pursuit of the American dream.

Rebecca Bryant:

- Ms. Bryant has been managing the DD waitlist for Lakes Region Community Services for 10 years.
- She will continue to be an advocate for these individuals for as long as they have to wait.

John Dunn:

- Mr. Dunn's son has Autism. Developmental services provided to his son are important and amazing.
- It is vitally important to continue funding for developmental services.
- He has done a lot of work in the mental health field.
- Please continue to fund mental health services, as well.

Melissa Hinebauch:

- Ms. Hinebauch is a victim of rape. She asked committee members to prioritize funding for domestic and sexual violence prevention and intervention services.
- Crisis center services, including prevention and education, not only save lives but minimize cost to the state, because so many of the issues facing NH citizens are rooted in trauma. The emergency room boarding and mental health crisis did not develop in a vacuum--nor did the opioid crisis. Look for the common denominator of sexual assault in all of these pressing issues.
- Crisis centers are uniquely positioned to support victims of trauma throughout every step of their journey. The services they provide for victims including connecting them to mental health services, confidential support, legal advocacy and many other critical supports.
- Crisis centers provide all these supports and services free of charge.
- One in 5 women and one in 71 men report experiencing rape in their lifetimes. New Hampshire's statistics are worse than the national average.
- It is shocking and disheartening that New Hampshire is one of the few states in the nation appropriating zero dollars to sexual assault prevention and intervention.
- Fully fund the 13 crisis centers in New Hampshire.

Future Action: Pending

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Date Hearing Report completed: May 14, 2017