Bill as Introduced

5jan00.....2123h

HB 618-FN-A – AS AMENDED BY THE HOUSE

1999 SESSION

99-0444
01/09

HOUSE BILL ***618-FN-A***

AN ACT establishing a voucher program for smoking cessation.

SPONSORS: Rep. Wendelboe, Belk 2

COMMITTEE: Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill establishes a smoking cessation voucher program to be administered by the department of health and human services and funded from the tobacco use prevention fund.

- -

Explanation: Matter added to current law appears in ***bold italics.***
Matter removed from current law appears [~~in brackets and struckthrough.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

HB 618-FN-A – AS AMENDED BY THE HOUSE

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord One Thousand Nine Hundred and Ninety-Nine

AN ACT establishing a voucher program for smoking cessation.

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

1 New Chapter; Smoking Cessation Voucher Program. Amend RSA by inserting after chapter 126-M the following new chapter:

CHAPTER 126-N

SMOKING CESSATION VOUCHER PROGRAM

126-N:1 Definitions. In this chapter:

I. "Commissioner" means the commissioner of the department of health and human services.

II. "Department" means the department of health and human services.

126-N:2 Program Established; Rulemaking.

I. There is established the smoking cessation program which shall be administered by the department. The department shall make available to persons receiving temporary assistance to needy families, vouchers which may be issued to persons for smoking cessation aids and educational programs. Vouchers shall not be issued for pharmaceuticals which are covered under medicaid.

II. The commissioner shall adopt rules pursuant to RSA 541-A, relative to:

(a) An application process and manner of distribution of vouchers.

(b) Authorized smoking cessation aids and educational programs.

(c) Any other matter necessary to the administration of this chapter.

2 Appropriation. There is hereby appropriated, the sum of $150,000 for the fiscal year ending June 30, 2001, and $150,000 for each of fiscal years 2002 and 2003, from the moneys received under RSA 126-K:15, the tobacco use prevention fund.

3 Repeal. RSA 126-N, relative to a smoking cessation voucher program, is repealed.

4 Effective Date.

I. Section 3 of this act shall take effect July 1, 2003.

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

HB 618-FN-A - FISCAL NOTE

The Department stated that administrative costs for one full-time Health Promotion Advisor, labor grade 22, minimum, with associated costs for benefits, office equipment, and supplies would be $25,514 in FY 2000 (1/2 year), and $46,765 in FY 2001. Program expenditures are shown as follows:

	FY 2000 (1/2 Year)	FY 2001
Beginning Balance	$2,000,000	$987,243
Administrative Costs	25,514	46,765
Adult Vouchers (91%)	898,391	855,835
Youth Vouchers (9%)	88,852	84,643
Total Voucher	987,243	940,478
Program Total	1,012,757	987,243
Available Balance	987,243	0

Committee Minutes

Date: April 24, 2000
Time: 2:15 PM
Room: LOB 102

The Senate Committee on Public Institutions/Health Human Services held a hearing on the following:

HB 618-FN (New Title) establishing a voucher program for smoking cessation.

Members of Committee present: Senator Squires
Senator Fernald
Senator McCarley

The Chair, Senator James Squires, opened the hearing.

Representative Francine Wendelboe, Belk. D. 2: Good afternoon Senators. For the record, my name is Fran Wendelboe. I represent Belknap County District 2 and I'm here to speak with you House Bill 618, establishing a voucher program for smoking cessation, which went through the House Health and Human Services Committee and Finance. I tell you that when this bill started out it was much different. It had a fiscal note of $2 million attached to it and it was much wider in scope. For instance it wasn't only just for participants in TANF but teenagers, college students, anyone that did not have the means to afford smoking cessation methods whether they be the patch or a rehabilitation program.

I found in my experience that when people express that they couldn't give up smoking, they expressed a desire that they'd like to but they couldn't afford the cost of the product up front. Even though when you looked at them and said "but you're spending that much in cigarettes", they didn't comprehend it that way because they're used to spending a couple dollars a day for a pack rather than thinking of having to come up with $50 for a two weeks supply up front or $28. So that's what started the idea of having a voucher program.

As it progressed through the system we sat down with the people from the companion – what's been known as the companion bill of $3 million total that's been appropriated for all smoking programs and hammered it out and kind of came to a mutual agreement to reduce this one to $150,000 and to

target it to TANF recipients. Under Medicaid, the product itself like the smoking patch is covered, however, if they wanted to take a behavior modification course or do a combination of the patch and a behavior modification course, it is not covered.

The other thing is that it's something that wasn't very well advertised and so what we came up with was that is, for example, on intake when an applicant was coming in initially or coming in for renewal for welfare applications, that they would be specifically asked "are you a smoker" and "would you be interested in taking part in a smoking cessation program" and that they would have made available to them not only the product, whether it be the patch or the gum or the inhalers that they have now, that as part of that package would be a physicians office visit, the product itself as well as the behavior modification.

So that's where this bill ended up being refined to. I think it will go hand and hand with the other smoking programs that are being established through the sister bill that came about through the tobacco use prevention study committee last year. I'd be more than happy to answer any questions you might have.

Senator James W. Squires, D. 12: Senator Fernald.

Senator Mark Fernald, D. 11: Is this – I'm sure I've forgotten quite where we ended up. I know we've passed recently in the Senate what we're going to do with the $3 million....

Representative Wendelboe: This is part of the $3 million but it was kept as a stand alone bill as an agreement. So, in other words when you passed that $3 million it encompassed this program in that $3 million. If you look at the fiscal note on here, it talks about the $2 million but this is part of the $3 million. It's really kind of confusing. Perhaps Brook can explain it better but this is not in addition to the $3 million. This is part of the $3 million that was passed as part of that legislation.

Senator Mark Fernald, D. 11: So, the legislation that we passed in the Senate, did it not add up to $3 million?

Representative Wendelboe: It...

Brook Dupee, Department of Health and Human Services: $3 million minus $150,000.

Lynn Brownell, American Lung Association of NH: $2,850,000.

Senator Mark Fernald, D. 11: Alright.

Representative Wendelboe: The fiscal note on this is not accurate where it talks about – I guess it is. No because it still talks about a $2 million balance. This is from last February. So this total fiscal note is for $150,000 for the fiscal year. The fiscal year 2000.

Senator James W. Squires, D. 12: I don't have any line numbers on my bill but it says – it's labeled: *"Repeal RSA 126-N, relative to a smoking cessation voucher program, is repealed."* What is that?

Representative Wendelboe: Thank you Senator Squires. I left that out. This is a three year pilot program. So at the end of three years, we wanted it to be able to just go out of being. If it was not successful that we felt that a three year period would give time to look at the number of people that participated. We might find that it doesn't work, that TANF recipients won't be interested in taking part of this program. What also happens is this $150,000 automatically – whatever is left of it – say only $70,000 is used this year, the balance left automatically reverts to the tobacco prevention fund. It does not go to the general fund. So, it's a "hold harmless" clause to make that non of the smoking money gets to go somewhere else if this program isn't fully utilized as we hope it will be. But we figured three years was a good time to look at it. We didn't want it to be – if it doesn't work, fine or in three years it might want to be expanded, but we thought the three years would be a good timeframe.

Senator James W. Squires, D. 12: Alright. Thank you. Brook Dupee.

Brook Dupee, Department of Health and Human Services: Written testimony handed in. **See Attachment A.**

Senator James W. Squires, D. 12: What measures will we be taking to know whether or not this works?

Mr. Dupee: I guess the first measure will be how many TANF recipients elect to avail themselves to the process. That would be the first measure. The second measure would be of those who participate, how many find themselves actually quitting. It may be a tougher measurer to get that second number because there may be some confidentiality here, but we can certainly figure how many people are taking on services.

Senator James W. Squires, D. 12: Well, that's certainly one measure but if everybody quits for one month and then resumes, it doesn't seem like a good

investment. So, there has to be some, it would seem to me that when you sign people up you might indicate that as part of this program you have to agree to come back in 6 months and take a carbon monoxide test or something to see if they're still smoking.

Mr. Dupee: That would make some sense because the overall package sets aside, I believe, around $150 or so for program evaluation because as we pointed out to the Finance Committee, to this Committee and others, we intend to show we're making progress and it would make great sense, Senator, to have something in there that talks to how effective this program is going to be. So, I'm sure that one way or the other we'll evaluate how effective it's working.

Senator James W. Squires, D. 12: Mark.

Senator Mark Fernald, D. 11: Does anyone recall the bill number on that bill?

Senator James W. Squires, D. 12: Do you know the one that we passed Merideth?

Merideth Chandler, Committee Secretary: House Bill 1594?

Senator Caroline McCarley, D. 6: This is the bill that we put the amendment on that laid out exactly how the funds are disbursed? Senator Squires amendment specifically indicated the disbursements of the funds.

Mr. Dupee: This bill actually came from sort of a process that resulted from the study committee that met last summer, Senator McCarley, in which Jim Squires agreed to be the prime sponsor of that bill and laid out in there exactly what you're suggesting which is how the money will be spent. There's a separate bill which the Senator is sponsoring, SB 206, and that's important right now because it says that the $3 million that's being allocated, it comes of the top of the tobacco settlement money because there's wording right now that's not clear and there are those who fear without that clarifying language that this $3 million could be at risk in future sessions.

Senator Caroline McCarley, D. 6: What is the number on that? SB 206?

Mr. Dupee: SB 206. That will be before Finance, I think, shortly.

Senator James W. Squires, D. 12: I received a note Saturday about when that's going to be heard but I can't remember. Do you have that Mark, the one....

Senator Mark Fernald, D. 11: It's not in my book. Just the notes from Megan are in here. Unfortunately.

Senator James W. Squires, D. 12: Thank you. Lynn.

Lynn Brownell, American Lung Association of NH: Written testimony handed in. **See Attachment B.**

Senator James W. Squires, D. 12: So, just so I'm sure, House Bill 1594 was in the amount $2,850,000? Is that correct?

Ms. Brownell: That is correct Senator.

Senator James W. Squires, D. 12: This brings it up to $3 million?

Ms. Brownell: This brings it up to the $3 million total that was actually allocated.

Senator James W. Squires, D. 12: Alright. That's everybody's understanding? Ok. Thank you. That completes the list of people who have signed up to speak and I will close the hearing on House Bill 618.

Hearing closed at 2:15 pm.

Respectfully submitted,

Merideth A. Chandler,
Committee Secretary

Attachment A

Testimony on HB 618

Provided by the

Department of Health and Human Services

Before the

Senate Public Institutions, Health & Human Services Committee

April 24, 2000

Good afternoon, Mr. Chairman and members of the Committee. For the record, my name is Brook Dupee, and I am here today on behalf of the Department of Health and Human Services to offer testimony in support of HB 618 as amended.

HB 618 would establish a smoking cessation program to be administered by my department. The program would be available to persons receiving temporary assistance to needy families, and would be used to pay for smoking cessation aids and educational programs. Tobacco prevention funds would not be used for Medicaid eligible expenses such as nicotine replacment pharmaceuticals. The program is to be implemented by rulemaking, and will be funded for three years in the amount of $150,000 per year. The program then sunsets itself.

Cessation, as you have heard, and will hear more about from others who will testify today, is a direct medical intervention designed to make a particular person give up the use of tobacco. The intervention usually consists of clinical counseling, a freedom from smoking class, plus the use of various pharmaceuticals that alleviate the symptoms that accompany nicotine withdrawal.

In order for cessation to be effective the smoker really needs to want to quit. A comprehensive tobacco control program, such as the one established by HB 1594, helps smokers reach this stage of readiness in the following ways:

- Counter advertising puts tobacco use in a non-glamorous light.
- School-based programs teach a message to kids that is brought home to the parents.
- Community programs, such as the Dover Coalition for Smoke Free Youth, create a social environment where smoking is not OK and quitting is viewed as a smart decision.
- Statewide programs such as the American Lung Association, the Cancer Society, and the American Heart Association are able to reach larger numbers of people and continually reinforce the anti-tobacco message.
- Enforcement programs aimed at youthful smokers further emphasize society's changing attitude towards tobacco use as a cultural norm.
- Surveillance programs provide a measure of the success of quitting.

Together all of these programs create the climate in which a smoker can reach the decision that the right time to quit is now. This type of combined effort not only reaches those smokers who decide to quit, it also sends a health message to thousands more smokers and potential smokers. Remember that in public health, prevention is the name of the game. For these reasons we view HB 618 as an essential companion bill to HB 1594, the recently passed Tobacco Fund allocation bill, and we urge that you vote this bill out of committee with an "Ought to Pass" recommendation.

Thank you for this opportunity to speak with you today. I'll try to answer any questions you may have.

tes618s.doc

Attachment B

Chair, Board of Directors
Gina Machos Balkus, APR
Dartmouth-Hitchcock

Vice Chair, Board of Directors
Mark R. Windt, MD
Center for Asthma, Allergy and
Respiratory Disease

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& Middleton

Legal Counsel
Mary Susan Leahy
Orr & Reno, PA

President
Douglas A. Barry, CAE

9 Cedarwood Drive
Unit 12
Bedford, NH
03110
Phone: (603) 669-2411
Toll Free: (800) LUNG-USA
Fax: (603) 645-6220

E-mail: info@nhlung.org
Web Site: www.nhlung.org

When You Can't Breathe, Nothing Else Matters®

Founded in 1904, the American Lung Association includes affiliated associations throughout the U.S., and a medical section, the American Thoracic Society.

AMERICAN LUNG ASSOCIATION®
of New Hampshire

Testimony of Lynn Marie Brownell
Director of Government Affairs
American Lung Association of New Hampshire

House Bill 618
April 24, 2000

Good afternoon Senators. I am Lynn Marie Brownell and I am the Director of Government Affairs for the American Lung Association of New Hampshire. House Bill 618 in conjunction with House Bill 1594 will fund a well balanced and long-term tobacco education, prevention and cessation programs for the citizens of New Hampshire.

On March 23, 2000 the Senate passed House Bill 1594. These two pieces of legislation combine to form a comprehensive tobacco program, which is recommended by the Center of Disease Control Comprehensive Tobacco Prevention Plan.

We at the American Lung Association hope that you will report favorable on HB 618. Thank you.

Speakers

SENATE PI-HHS COMMITTEE

Date 4/24/00 Time 2:00 PM Public Hearing on HB 618-FN

Appearing in FAVOR: (Please print) **Please check box at left to speak.**

Speaking?	Name	Address	Representing
☒	Brook Dupee		NH DHHS
☒	Rep Fran Wendelboe		Belknap D-2
☒	Lynn Marie Brownell		ALA/NH
☐			
☐			
☐			
☐			
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Appearing in OPPOSITION: (Please Print) **Please check box at left to speak.**

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VOTED OP. 3/0

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Committee Report

Date: April 24, 2000 Time: 2:00 PM

The Senate Committee on Public Institutions/Health Human Services held its hearing in Room 102, LOB, Concord, New Hampshire.

BILL NO.: HB ~~610~~ FN 618 TITLE: (New Title) establishing a voucher program for smoking cessation.

Members of the Committee present: Senator Squires
Senator Fernald
Senator McCarley

Those appearing in favor:

Name and Address	Representing
See Attached.	

Those appearing in opposition:

Name and Address	Representing
See Attached.	

REPORT OF THE COMMITTEE:

- ☒ Ought to Pass
- ☐ Ought to Pass w/ Amendment
- ☐ Inexpedient to Legislate
- ☐ Rereferred
- ☐ Interim Study
- ☐ Continued Hearing
- ☐ Postponed Hearing

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE

Date: April 24, 2000

THE COMMITTEE ON Public Institutions/Health Human Services

to which was referred House Bill 618-FN-A

AN ACT (New Title) establishing a voucher program for smoking cessation.

VOTE: 3-0

Having considered the same, report the same without amendment and recommend that the bill: **OUGHT TO PASS.**

Senator James Squires
For the Committee