LEGISLATIVE COMMITTEE MINUTES

SB105

Bill as Introduced

SB 105-FN - AS INTRODUCED

2023 SESSION

23-0795
05/08

SENATE BILL ***105-FN***

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Rep. T. Lekas, Hills. 38; Rep. Nutter-Upham, Hills. 8; Rep. Edwards, Rock. 31

COMMITTEE: Executive Departments and Administration

ANALYSIS

This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

SB 105-FN - AS INTRODUCED

23-0795
05/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

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

1 New Paragraph; Vital Records Administration; Duties and Responsibilities; Application of Criminal Penalty Limited. Amend RSA 5-C:14 by inserting after paragraph II the following new paragraph:

II-a. Subparagraph II(a) shall apply only to the information on the mother's worksheet that is used for the birth certificate and shall not apply to the mother's, father's, or the mother's female partner's information, or the mother's statistical information.

2 New Paragraphs; Vital Records Administration; Duties and Responsibilities; Application of Violation Limited; Consent Required. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraphs:

V. Paragraph IV shall not apply to an individual who refuses consent for disclosure of her statistical information or that of her newborn, or any other personally identifiable health information contained on the facility worksheet for certificate of live birth.

VI. Mothers shall be given the opportunity to give or withhold consent for release of their identifiable health information from their and their newborn's medical records on the facility worksheet for certificate of live birth.

3 Revision of Worksheet Forms.

I. No later than January 1, 2024, the division of vital records, in consultation with the division of public health services, hospitals, and freestanding birth centers, shall present revised mother and facility worksheet forms and a signature document for the mother's consent to disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

II. No later than 12 months after receiving that approval, revised paper and electronic forms shall be in use.

4 Repeal. RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet, are repealed.

5 Effective Date. This act shall take effect upon its passage.

LBA
23-0795
Revised 1/23/23

SB 105-FN- FISCAL NOTE
AS INTRODUCED

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	($0 to $169,000)	($0 to $169,000)	($0 to $169,000)
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes class B felony penalties and violations penalties for certain criteria pertaining to a mother's worksheet and refusal of consent for disclosure of certain items. It also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet. Lastly it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent to disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract with the CDD, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay

personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds to cover the costs.

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)
Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count	$90/Hour up to $2,000	$90/Hour up to $2,000

toward the cap.		
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223
FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688

The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

SB 105-FN - AS INTRODUCED

2023 SESSION

23-0795
05/08

SENATE BILL ***105-FN***

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Rep. T. Lekas, Hills. 38; Rep. Nutter-Upham, Hills. 8; Rep. Edwards, Rock. 31

COMMITTEE: Executive Departments and Administration OTP 5-0 Consent

---

ANALYSIS

This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently.

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

SB 105-FN - AS INTRODUCED

23-0795
05/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

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

1 New Paragraph; Vital Records Administration; Duties and Responsibilities; Application of Criminal Penalty Limited. Amend RSA 5-C:14 by inserting after paragraph II the following new paragraph:

II-a. Subparagraph II(a) shall apply only to the information on the mother's worksheet that is used for the birth certificate and shall not apply to the mother's, father's, or the mother's female partner's information, or the mother's statistical information.

2 New Paragraphs; Vital Records Administration; Duties and Responsibilities; Application of Violation Limited; Consent Required. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraphs:

V. Paragraph IV shall not apply to an individual who refuses consent for disclosure of her statistical information or that of her newborn, or any other personally identifiable health information contained on the facility worksheet for certificate of live birth.

VI. Mothers shall be given the opportunity to give or withhold consent for release of their identifiable health information from their and their newborn's medical records on the facility worksheet for certificate of live birth.

3 Revision of Worksheet Forms.

I. No later than January 1, 2024, the division of vital records, in consultation with the division of public health services, hospitals, and freestanding birth centers, shall present revised mother and facility worksheet forms and a signature document for the mother's consent to disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

II. No later than 12 months after receiving that approval, revised paper and electronic forms shall be in use.

4 Repeal. RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet, are repealed.

5 Effective Date. This act shall take effect upon its passage.

LBA
23-0795
Revised 1/23/23

SB 105-FN- FISCAL NOTE
AS INTRODUCED

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	($0 to $169,000)	($0 to $169,000)	($0 to $169,000)
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes class B felony penalties and violations penalties for certain criteria pertaining to a mother's worksheet and refusal of consent for disclosure of certain items. It also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet. Lastly it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent to disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract with the CDD, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay

personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds to cover the costs.

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)
Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count	$90/Hour up to $2,000	$90/Hour up to $2,000

toward the cap.		
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223
FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688

The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

LBA
23-0795
Revised 3/13/23

SB 105-FN FISCAL NOTE
AS INTRODUCED

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	($0 to $169,000)	($0 to $169,000)	($0 to $169,000)
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes class B felony penalties and violations penalties for certain criteria pertaining to a mother's worksheet and refusal of consent for disclosure of certain items. It also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet. Lastly it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent to disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract with the CDD, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC

may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds to cover the costs.

The Department of Health and Human Services (DHHS) states in the extreme instance allowing access to aggregated, de-identified and accurate birth certificate worksheet data is reduced or incomplete the result could be the loss of federal funding that supports the work of the state's CDC Pregnancy Risk Assessment Monitoring System, CDC's Preventing Maternal Deaths through the Maternal Mortality Review Committee, the Health Resources and Services Administrations Title V Block Grant activities, Maternal and Child Health State Systems Development Initiative, Maternal, Infant and Early Childhood Home Visiting program and Child Abuse Prevention and Treatment Act programming. If that were to happen the estimate cost in grants of $8m (see details below) could be placed in jeopardy.

- HRSA MCH/Title V Block grant $1,981,378 (annual)
- CDC Pregnancy Risk Assessment Monitoring System $160,020 (annual)
- CDC Preventing Maternal Deaths: Supporting Maternal Mortality Review Committees $150,000 (annual)
- HRSA State Systems Development Initiative (SSDI) $160,000 (annual)
- HRSA Maternal, Infant and Early Childhood Home Visiting grant $3,004,211 (annual)
- Child Abuse Prevention and Treatment Act (CAPTA) $1,825,000 (5 year grant to DCYF)

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)
Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count toward the cap.	$90/Hour up to $2,000	$90/Hour up to $2,000
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223
FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688

The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Department of Health and Human Services, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

SB 105-FN - AS AMENDED BY THE SENATE

03/23/2023 1037s

2023 SESSION

23-0795
05/08

SENATE BILL ***105-FN***

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Rep. T. Lekas, Hills. 38; Rep. Nutter-Upham, Hills. 8; Rep. Edwards, Rock. 31

COMMITTEE: Executive Departments and Administration

AMENDED ANALYSIS

This bill removes the criminal penalty for information requested on the mother's birth worksheet that is not required for the birth certificate; provides that only de-identified information shall be submitted on the facility worksheet for a live birth; and repeals the requirement that the birth worksheet be retained permanently.

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

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

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

1 New Paragraph; Vital Records Administration; Penalties; Live Birth; Mother's Worksheet. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraph:

V. When a live birth is reported to the division of vital records, subparagraph II(a) and paragraph IV shall apply only to the information on the mother's worksheet that is required for the birth certificate.

2 Completion of Birth Worksheet for Hospital or Institutional Births. Amend RSA 5-C:19, II(a) to read as follows:

(a) The hospital or institution birth registrar or designee shall provide, ***with all personally identifiable information regarding the mother, father, and infant removed prior to submission***:

(1) Information regarding the child, including [~~name,~~] date and time of birth, and sex.

(2) Information regarding the facility, including name, street address, city or town, and county.

(3) Information regarding the mother including:

(A) [~~Current name and maiden name.~~

~~(B) Date of birth and birthplace.~~

~~(C) City or town, county, and state of residence.~~

~~(D) Residential address and complete mailing address if different from the residential address, or, if the same as the residential address, her zip code only.~~

~~(E) Social security number.~~

~~(F)~~] Usual occupation and the business or industry in which employed.

[~~(G)~~] ***(B)*** Race.

[~~(H)~~] ***(C)*** Level of education.

[~~(I)~~] ***(D)*** Whether she was married at the time of the birth of child, or conception of child, or any time between.

(4) Information regarding the father including:

(A) [~~Name.~~

~~(B) Date of birth and birthplace.~~

~~(C) City or town, county, and state of residence.~~

~~(D) Residential address and complete mailing address if different from the residential address, or, if the same as the residential address, his zip code only.~~

~~(E) Social security number.~~

~~(F)~~] Usual occupation and the business or industry in which employed.

[~~(G)~~] *(B)* Race.

[~~(H)~~] *(C)* Level of education.

(5) The method of payment for prenatal care and for delivery.

(6) Statistical information from the mother, medical reports, and her physician regarding the mother and child including:

(A) Number of live births, not including this child, now living and now dead.

(B) Date of the last live birth.

(C) Other terminations of pregnancy, any time after conception.

(D) Date of the last other termination of pregnancy.

(E) Date last normal menses began.

(F) Month that prenatal care began.

(G) Total number of prenatal visits.

(H) Birth weight of the child.

(I) Clinical estimation of gestation in weeks.

(J) Plurality of the child, including but not limited to single, twin, or triplet.

(K) Birth order of the child.

(L) The Apgar score, which is an evaluation of a newborn infant's physical status, at one minute and at 5 minutes.

(7) If the mother is transferred to another facility before or after giving birth, transfer information for the mother and child including:

(A) Whether the mother was transferred prior to delivery or after delivery.

(B) Whether the infant was transferred after delivery.

(C) Whether the child was living or dead at the time of the report.

(8) Information regarding the medical aspects of the pregnancy including:

(A) Any medical risk factors for the pregnancy.

(B) Any other risk factors for the pregnancy.

(C) Any obstetric procedures performed during the course of the pregnancy.

(D) Any complications of labor and delivery.

(E) The method of delivery.

(F) Any abnormal conditions of the newborn.

(G) Any congenital anomalies of the child.

(9) Indication from one parent whether the division shall be authorized to provide the Social Security Administration with data from the birth record in order for the Social Security Administration to issue a social security number.

(10) Indication from one parent whether the division shall be authorized to release birth record information to the New Hampshire immunization registry.

(11) Signature of the individual who interviewed the parent or other informant certifying that the information has been recorded exactly as given by the parent or other informant or has been taken from medical records.

(12) The hospital, birthing center, or institution shall not disclose on the facility worksheet the mother's medical record number or the infant's medical record number.

3 Revision of Worksheet Forms.

I. No later than January 1, 2024, the division of vital records, in consultation with the division of public health services, hospitals, and freestanding birth centers, shall present revised mother and facility worksheet forms to the oversight committee on health and human services for approval.

II. No later than 12 months after receiving that approval, revised paper and electronic forms shall be in use.

4 Repeal. RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet, are repealed.

5 Effective Date. This act shall take effect upon its passage.

LBA
23-0795
Amended 4/20/23

SB 105-FN- FISCAL NOTE
AS AMENDED BY THE SENATE (AMENDMENT #2023-1037s)

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Expenditures	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund and Federal Funds			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently. Lastly, it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent for disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract with the CDC, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC

may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds.

The Department of Health and Human Services (DHHS) states vital records include births, deaths, marriages, divorces, and fetal deaths. The National Vital Statistics System is one of the oldest and most successful examples of data collection and sharing. It is a complex system that incorporates entities at the local, state, and federal level, each with its own role. Federal law mandates uniform collection and publication of this data.

Birth registration is the process of recording a child's birth. It is a permanent and official record of a child's existence and provides legal recognition of that child's identity. In addition to its role in assuring an accurate count of births and creating a legal identity for an individual, birth records are used to identify and quantify health related issues. This foundational information is collected in the same manner by every state. Standardized birth records are used in the prevention of preterm birth, maternal and fetal deaths, birth defects and other labor, delivery and birth related outcomes. Birth records identify health trends at the state, local and national levels including rates of infant mortality, maternal mortality and fetal death. The Standard Certificate of Live Birth collects information on the use of prenatal care, maternal sociodemographic and behavioral data, place of birth, information pertaining to medical and obstetric complications of pregnancy, and Apgar scores. The registration of births is the responsibility of the birth attendant, generally a physician, midwife or hospital, and must be reported promptly.

The DHHS states hospitals, birthing centers, towns and cities enter birth records into the New Hampshire Division of Vital Records Administration (NHDVRA) electronic system. In accordance with RSA 126:24-c and a Memorandum of Understanding between the DHHS and the NH Secretary of State, a file transfer of the entire contents of birth records is shared with the DHHS 4 times a day on a 24-hour, 7-day per week basis, via a remote data download so that DHHS can administer a wide range of authorized services and activities. The DHHS also states the Office of Secretary of State is not a covered entity by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). However, the DHHS is covered by HIPAA.

The DHHS states this bill amends RSA 5-C:19, II(a) to require the removal of the all personally identifiable information for the mother, father and infant on the birth work sheet for institutional births by the hospital or institution's birth registrar or designee prior to submission to the NHDVRA. The bill also prohibits any hospital, birthing center, or institution

from disclosing on the facility worksheet the mother's medical record number or the infant's medical record number.

This bill also requires that no later than January 1, 2024, the NHDVRA in consultation with the DHHS, hospitals, and freestanding birth centers present a revised draft of the mother and facility worksheet form for review to the Committee on Health and Human Services Oversight for approval. The revised and approved birth worksheet (written or electronic copy) will be required to be in use no later than one year after approval. The DHHS states the changes required by this bill are in conflict with reporting requirements of the National Center for Health Statistics. (RSA 5-C:5)

The bill removes the criminal penalty for not providing the information requested on the mother's birth worksheet (health information) that is not required for the birth certificate. This bill also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet.

The DHHS estimates that a significant unintended consequence of this bill could be the loss of critical and timely data from the information provided by the Live Birth Worksheet as described below. It is anticipated that without this data, the programs that depend on this information to plan access to prenatal care, health screenings for life saving treatment, fraud and program integrity protection for state and federal entitlements, health promotion planning and required evaluation efforts of the health and safety of New Hampshire mothers and infants could be at risk of losing critical federal funding.

Additionally, the DHHS understands that some of the information within this bill would prohibit collection of is needed by the Secretary of State's office and Social Security Administration (SSA) in order to issue a birth certificate and social security number (SSN) for a newborn. Information needed for this process includes the child's name, mailing address, mother's name, father's name, mother's SSN and father's SSN. This information is currently collected as part of the birth registration process as a convenience for parents, and the information is sent directly to the SSA by the state. It is unclear how the SSA will confirm the birth information and the parent requesting the SSN at the time of application. The DHHS states there is a chance this may lead to the need for the parents of approximately 12,000 New Hampshire infants per year to physically take their child's birth certificate to a Social Security Office to complete a process that is now done electronically and seamlessly.

The DHHS notes this bill will impact its Division of Public Health Services newborn screening program; hearing screening; birth conditions program; maternal mortality review;

identification of emerging or known infectious threats during pregnancy; pregnancy risk assessment monitoring system; rural health and primary care; and certain data analysis and needs assessments for various grants or the data portal. It will also impact the Division of Economic Supports Child Support Services, Medicaid (DMS) Integrated Eligibility Services, Division for Children, Youth and Families, and the Estate Recovery Unit - Division of Legal Services.

The DHHS anticipates the fiscal impact from this bill will begin in FY 2024. The DHHS states in extreme instances this bill could have an impact in excess of $26 million in federal funds due to becoming ineligible for a variety of programmatic grants, with costs for data system, quality assurance and fraud prevention being indeterminable at this time and may result in the need to eliminate in excess of 13 full-time positions, mainly in the Division of Public Health Services.

The Division of Legal Services, Estate Recovery Unit (ERU) estimates the bill could have a negative impact on the general fund as this bill could decrease the State General Fund by an indeterminable amount because it is impossible to predict who will pass away with what surviving heirs. The ERU would be unable to confirm the relationship between a deceased Medicaid recipient and survivors. Without this information, the ERU will be unable to enforce recovery properly and could have a negative impact on the State General Fund because it will unnecessarily subject the State to liability should recovery be made where it is inappropriate.

Also, there may be an indeterminable impact to community-based, safety-net health organizations including Federally Qualified Health Centers. Without federal designations of need based in part on local birth data, critical federal funds for Federally Qualified Health Centers and workforce loan repayment programs for healthcare workforce are in jeopardy.

The overall fiscal impact is indeterminable at this time because no other state has enacted similar restrictions in access to Birth Data and there may be additional unintended consequences.

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)

Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count toward the cap.	$90/Hour up to $2,000	$90/Hour up to $2,000
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223

FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688
The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.		

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Department of Health and Human Services, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

LBA
23-0795
Amended 4/20/23

SB 105-FN FISCAL NOTE
AS AMENDED BY THE SENATE (AMENDMENT #2023-1037s)

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Expenditures	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund and Federal Funds			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently. Lastly, it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent for disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract

with the CDC, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds.

The Department of Health and Human Services (DHHS) states vital records include births, deaths, marriages, divorces, and fetal deaths. The National Vital Statistics System is one of the oldest and most successful examples of data collection and sharing. It is a complex system that incorporates entities at the local, state, and federal level, each with its own role. Federal law mandates uniform collection and publication of this data.

Birth registration is the process of recording a child's birth. It is a permanent and official record of a child's existence and provides legal recognition of that child's identity. In addition to its role in assuring an accurate count of births and creating a legal identity for an individual, birth records are used to identify and quantify health related issues. This foundational information is collected in the same manner by every state. Standardized birth records are used in the prevention of preterm birth, maternal and fetal deaths, birth defects and other labor, delivery and birth related outcomes. Birth records identify health trends at the state, local and national levels including rates of infant mortality, maternal mortality and fetal death. The Standard Certificate of Live Birth collects information on the use of prenatal care, maternal sociodemographic and behavioral data, place of birth, information pertaining to medical and obstetric complications of pregnancy, and Apgar scores. The registration of births is the responsibility of the birth attendant, generally a physician, midwife or hospital, and must be reported promptly.

The DHHS states hospitals, birthing centers, towns and cities enter birth records into the New Hampshire Division of Vital Records Administration (NHDVRA) electronic system. In accordance with RSA 126:24-c and a Memorandum of Understanding between the DHHS and the NH Secretary of State, a file transfer of the entire contents of birth records is shared with the DHHS 4 times a day on a 24-hour, 7-day per week basis, via a remote data download so that DHHS can administer a wide range of authorized services and activities. The DHHS also states the Office of Secretary of State is not a covered entity by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). However, the DHHS is covered by HIPAA.

The DHHS states this bill amends RSA 5-C:19, II(a) to require the removal of the all personally identifiable information for the mother, father and infant on the birth work sheet for institutional births by the hospital or institution's birth registrar or designee prior to submission to the NHDVRA. The bill also prohibits any hospital, birthing center, or institution from disclosing on the facility worksheet the mother's medical record number or the infant's medical record number.

This bill also requires that no later than January 1, 2024, the NHDVRA in consultation with the DHHS, hospitals, and freestanding birth centers present a revised draft of the mother and facility worksheet form for review to the Committee on Health and Human Services Oversight for approval. The revised and approved birth worksheet (written or electronic copy) will be required to be in use no later than one year after approval. The DHHS states the changes required by this bill are in conflict with reporting requirements of the National Center for Health Statistics. (RSA 5-C:5)

The bill removes the criminal penalty for not providing the information requested on the mother's birth worksheet (health information) that is not required for the birth certificate. This bill also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet.

The DHHS estimates that a significant unintended consequence of this bill could be the loss of critical and timely data from the information provided by the Live Birth Worksheet as described below. It is anticipated that without this data, the programs that depend on this information to plan access to prenatal care, health screenings for life saving treatment, fraud and program integrity protection for state and federal entitlements, health promotion planning and required evaluation efforts of the health and safety of New Hampshire mothers and infants could be at risk of losing critical federal funding.

Additionally, the DHHS understands that some of the information within this bill would prohibit collection of is needed by the Secretary of State's office and Social Security Administration (SSA) in order to issue a birth certificate and social security number (SSN) for a newborn. Information needed for this process includes the child's name, mailing address, mother's name, father's name, mother's SSN and father's SSN. This information is currently collected as part of the birth registration process as a convenience for parents, and the information is sent directly to the SSA by the state. It is unclear how the SSA will confirm the birth information and the parent requesting the SSN at the time of application. The DHHS

states there is a chance this may lead to the need for the parents of approximately 12,000 New Hampshire infants per year to physically take their child's birth certificate to a Social Security Office to complete a process that is now done electronically and seamlessly.

The DHHS notes this bill will impact its Division of Public Health Services newborn screening program; hearing screening; birth conditions program; maternal mortality review; identification of emerging or known infectious threats during pregnancy; pregnancy risk assessment monitoring system; rural health and primary care; and certain data analysis and needs assessments for various grants or the data portal. It will also impact the Division of Economic Supports Child Support Services, Medicaid (DMS) Integrated Eligibility Services, Division for Children, Youth and Families, and the Estate Recovery Unit - Division of Legal Services.

The DHHS anticipates the fiscal impact from this bill will begin in FY 2024. The DHHS states in extreme instances this bill could have an impact in excess of $26 million in federal funds due to becoming ineligible for a variety of programmatic grants, with costs for data system, quality assurance and fraud prevention being indeterminable at this time and may result in the need to eliminate in excess of 13 full-time positions, mainly in the Division of Public Health Services.

The Division of Legal Services, Estate Recovery Unit (ERU) estimates the bill could have a negative impact on the general fund as this bill could decrease the State General Fund by an indeterminable amount because it is impossible to predict who will pass away with what surviving heirs. The ERU would be unable to confirm the relationship between a deceased Medicaid recipient and survivors. Without this information, the ERU will be unable to enforce recovery properly and could have a negative impact on the State General Fund because it will unnecessarily subject the State to liability should recovery be made where it is inappropriate.

Also, there may be an indeterminable impact to community-based, safety-net health organizations including Federally Qualified Health Centers. Without federal designations of need based in part on local birth data, critical federal funds for Federally Qualified Health Centers and workforce loan repayment programs for healthcare workforce are in jeopardy.

The overall fiscal impact is indeterminable at this time because no other state has enacted similar restrictions in access to Birth Data and there may be additional unintended consequences.

This bill contains penalties that may have an impact on the New Hampshire judicial and

correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)
Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count toward the cap.	$90/Hour up to $2,000	$90/Hour up to $2,000
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223
FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688

The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Department of Health and Human Services, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

SB 105-FN - AS AMENDED BY THE HOUSE

03/23/2023 1037s
8Jun2023... 1728h

2023 SESSION

23-0795
05/08

SENATE BILL ***105-FN***

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Rep. T. Lekas, Hills. 38; Rep. Nutter-Upham, Hills. 8; Rep. Edwards, Rock. 31

COMMITTEE: Executive Departments and Administration

AMENDED ANALYSIS

This bill limits the potential criminal penalty for misinformation on a birth worksheet to that required for the birth certificate; and requires the birth worksheet to be retained for 7 years rather than indefinitely.

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

SB 105-FN - AS AMENDED BY THE HOUSE

03/23/2023 1037s
8Jun2023... 1728h

23-0795
05/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

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

1 New Paragraph; Vital Records Administration; Penalties; Live Birth; Mother's Worksheet. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraph:

V. When a live birth is reported to the division of vital records, subparagraph II(a) and paragraph IV shall apply only to the information on the mother's worksheet that is required for the birth certificate.

2 Record Retention. Amend RSA 5-C:96, II(d) and (e) to read as follows:

(d) Birth worksheet, hospital birth: retained [~~permanently~~] ***for 7 years.***

(e) Birth worksheet, home birth: retained [~~permanently~~] ***for 7 years.***

3 Effective Date. This act shall take effect upon its passage.

LBA
23-0795
Amended 4/20/23

SB 105-FN- FISCAL NOTE
AS AMENDED BY THE SENATE (AMENDMENT #2023-1037s)

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Expenditures	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund and Federal Funds			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently. Lastly, it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent for disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract with the CDC, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC

may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds.

The Department of Health and Human Services (DHHS) states vital records include births, deaths, marriages, divorces, and fetal deaths. The National Vital Statistics System is one of the oldest and most successful examples of data collection and sharing. It is a complex system that incorporates entities at the local, state, and federal level, each with its own role. Federal law mandates uniform collection and publication of this data.

Birth registration is the process of recording a child's birth. It is a permanent and official record of a child's existence and provides legal recognition of that child's identity. In addition to its role in assuring an accurate count of births and creating a legal identity for an individual, birth records are used to identify and quantify health related issues. This foundational information is collected in the same manner by every state. Standardized birth records are used in the prevention of preterm birth, maternal and fetal deaths, birth defects and other labor, delivery and birth related outcomes. Birth records identify health trends at the state, local and national levels including rates of infant mortality, maternal mortality and fetal death. The Standard Certificate of Live Birth collects information on the use of prenatal care, maternal sociodemographic and behavioral data, place of birth, information pertaining to medical and obstetric complications of pregnancy, and Apgar scores. The registration of births is the responsibility of the birth attendant, generally a physician, midwife or hospital, and must be reported promptly.

The DHHS states hospitals, birthing centers, towns and cities enter birth records into the New Hampshire Division of Vital Records Administration (NHDVRA) electronic system. In accordance with RSA 126:24-c and a Memorandum of Understanding between the DHHS and the NH Secretary of State, a file transfer of the entire contents of birth records is shared with the DHHS 4 times a day on a 24-hour, 7-day per week basis, via a remote data download so that DHHS can administer a wide range of authorized services and activities. The DHHS also states the Office of Secretary of State is not a covered entity by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). However, the DHHS is covered by HIPAA.

The DHHS states this bill amends RSA 5-C:19, II(a) to require the removal of the all personally identifiable information for the mother, father and infant on the birth work sheet for institutional births by the hospital or institution's birth registrar or designee prior to submission to the NHDVRA. The bill also prohibits any hospital, birthing center, or institution

from disclosing on the facility worksheet the mother's medical record number or the infant's medical record number.

This bill also requires that no later than January 1, 2024, the NHDVRA in consultation with the DHHS, hospitals, and freestanding birth centers present a revised draft of the mother and facility worksheet form for review to the Committee on Health and Human Services Oversight for approval. The revised and approved birth worksheet (written or electronic copy) will be required to be in use no later than one year after approval. The DHHS states the changes required by this bill are in conflict with reporting requirements of the National Center for Health Statistics. (RSA 5-C:5)

The bill removes the criminal penalty for not providing the information requested on the mother's birth worksheet (health information) that is not required for the birth certificate. This bill also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet.

The DHHS estimates that a significant unintended consequence of this bill could be the loss of critical and timely data from the information provided by the Live Birth Worksheet as described below. It is anticipated that without this data, the programs that depend on this information to plan access to prenatal care, health screenings for life saving treatment, fraud and program integrity protection for state and federal entitlements, health promotion planning and required evaluation efforts of the health and safety of New Hampshire mothers and infants could be at risk of losing critical federal funding.

Additionally, the DHHS understands that some of the information within this bill would prohibit collection of is needed by the Secretary of State's office and Social Security Administration (SSA) in order to issue a birth certificate and social security number (SSN) for a newborn. Information needed for this process includes the child's name, mailing address, mother's name, father's name, mother's SSN and father's SSN. This information is currently collected as part of the birth registration process as a convenience for parents, and the information is sent directly to the SSA by the state. It is unclear how the SSA will confirm the birth information and the parent requesting the SSN at the time of application. The DHHS states there is a chance this may lead to the need for the parents of approximately 12,000 New Hampshire infants per year to physically take their child's birth certificate to a Social Security Office to complete a process that is now done electronically and seamlessly.

The DHHS notes this bill will impact its Division of Public Health Services newborn screening program; hearing screening; birth conditions program; maternal mortality review;

identification of emerging or known infectious threats during pregnancy; pregnancy risk assessment monitoring system; rural health and primary care; and certain data analysis and needs assessments for various grants or the data portal. It will also impact the Division of Economic Supports Child Support Services, Medicaid (DMS) Integrated Eligibility Services, Division for Children, Youth and Families, and the Estate Recovery Unit - Division of Legal Services.

The DHHS anticipates the fiscal impact from this bill will begin in FY 2024. The DHHS states in extreme instances this bill could have an impact in excess of $26 million in federal funds due to becoming ineligible for a variety of programmatic grants, with costs for data system, quality assurance and fraud prevention being indeterminable at this time and may result in the need to eliminate in excess of 13 full-time positions, mainly in the Division of Public Health Services.

The Division of Legal Services, Estate Recovery Unit (ERU) estimates the bill could have a negative impact on the general fund as this bill could decrease the State General Fund by an indeterminable amount because it is impossible to predict who will pass away with what surviving heirs. The ERU would be unable to confirm the relationship between a deceased Medicaid recipient and survivors. Without this information, the ERU will be unable to enforce recovery properly and could have a negative impact on the State General Fund because it will unnecessarily subject the State to liability should recovery be made where it is inappropriate.

Also, there may be an indeterminable impact to community-based, safety-net health organizations including Federally Qualified Health Centers. Without federal designations of need based in part on local birth data, critical federal funds for Federally Qualified Health Centers and workforce loan repayment programs for healthcare workforce are in jeopardy.

The overall fiscal impact is indeterminable at this time because no other state has enacted similar restrictions in access to Birth Data and there may be additional unintended consequences.

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)

Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count toward the cap.	$90/Hour up to $2,000	$90/Hour up to $2,000
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223

FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688
The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.		

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Department of Health and Human Services, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

SB 105-FN - VERSION ADOPTED BY BOTH BODIES

03/23/2023 1037s
8Jun2023... 1728h

2023 SESSION

23-0795
05/08

SENATE BILL ***105-FN***

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Rep. T. Lekas, Hills. 38; Rep. Nutter-Upham, Hills. 8; Rep. Edwards, Rock. 31

COMMITTEE: Executive Departments and Administration

AMENDED ANALYSIS

This bill limits the potential criminal penalty for misinformation on a birth worksheet to that required for the birth certificate; and requires the birth worksheet to be retained for 7 years rather than indefinitely.

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

SB 105-FN - VERSION ADOPTED BY BOTH BODIES

03/23/2023 1037s
8Jun2023... 1728h

23-0795
05/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

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

1 New Paragraph; Vital Records Administration; Penalties; Live Birth; Mother's Worksheet. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraph:

V. When a live birth is reported to the division of vital records, subparagraph II(a) and paragraph IV shall apply only to the information on the mother's worksheet that is required for the birth certificate.

2 Record Retention. Amend RSA 5-C:96, II(d) and (e) to read as follows:

(d) Birth worksheet, hospital birth: retained [~~permanently~~] ***for 7 years.***

(e) Birth worksheet, home birth: retained [~~permanently~~] ***for 7 years.***

3 Effective Date. This act shall take effect upon its passage.

LBA
23-0795
Amended 4/20/23

SB 105-FN- FISCAL NOTE
AS AMENDED BY THE SENATE (AMENDMENT #2023-1037s)

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

FISCAL IMPACT: [X] State [X] County [ ] Local [ ] None

	Estimated Increase / (Decrease)			
STATE:	**FY 2023**	**FY 2024**	**FY 2025**	**FY 2026**
Appropriation	$0	$0	$0	$0
Revenue	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Expenditures	$0	Indeterminable Decrease	Indeterminable Decrease	Indeterminable Decrease
Funding Source:	[X] General [ ] Education [ ] Highway [X] Other - Vital Records Administration Fund and Federal Funds			

COUNTY:

Revenue	$0	$0	$0	$0
Expenditures	$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently. Lastly, it requires, no later than January 1, 2024, the Division of Vital Records, in consultation with the Division of Public Health Services, hospitals, and freestanding birth centers, to present revised mother and facility worksheet forms and a signature document for the mother's consent for disclosure of identifiable health information contained in the facility worksheet to the oversight committee on health and human services for approval.

The Department of State indicates requiring the Division of Vital Records Administration to update its paper forms will not have an impact as those form changes are regularly recorded by the Division. However, the Department states updating the electronic forms has an estimated cost of $100,000 in FY 2024. The Department also notes currently the Division has a contract with the CDC, the Vital Statistics Cooperative Program Contract, which requires the Division to share vital record information from the birth form. Changing the data reported to the CDC

may cause NH to default on the contract resulting in a potential loss in contract revenue going into the Vital Records Administration Fund of $169,000 per a year. This fund is used to pay personnel costs in vital records. Any lost revenue in this fund would need to be supported by the General Funds.

The Department of Health and Human Services (DHHS) states vital records include births, deaths, marriages, divorces, and fetal deaths. The National Vital Statistics System is one of the oldest and most successful examples of data collection and sharing. It is a complex system that incorporates entities at the local, state, and federal level, each with its own role. Federal law mandates uniform collection and publication of this data.

Birth registration is the process of recording a child's birth. It is a permanent and official record of a child's existence and provides legal recognition of that child's identity. In addition to its role in assuring an accurate count of births and creating a legal identity for an individual, birth records are used to identify and quantify health related issues. This foundational information is collected in the same manner by every state. Standardized birth records are used in the prevention of preterm birth, maternal and fetal deaths, birth defects and other labor, delivery and birth related outcomes. Birth records identify health trends at the state, local and national levels including rates of infant mortality, maternal mortality and fetal death. The Standard Certificate of Live Birth collects information on the use of prenatal care, maternal sociodemographic and behavioral data, place of birth, information pertaining to medical and obstetric complications of pregnancy, and Apgar scores. The registration of births is the responsibility of the birth attendant, generally a physician, midwife or hospital, and must be reported promptly.

The DHHS states hospitals, birthing centers, towns and cities enter birth records into the New Hampshire Division of Vital Records Administration (NHDVRA) electronic system. In accordance with RSA 126:24-c and a Memorandum of Understanding between the DHHS and the NH Secretary of State, a file transfer of the entire contents of birth records is shared with the DHHS 4 times a day on a 24-hour, 7-day per week basis, via a remote data download so that DHHS can administer a wide range of authorized services and activities. The DHHS also states the Office of Secretary of State is not a covered entity by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). However, the DHHS is covered by HIPAA.

The DHHS states this bill amends RSA 5-C:19, II(a) to require the removal of the all personally identifiable information for the mother, father and infant on the birth work sheet for institutional births by the hospital or institution's birth registrar or designee prior to submission to the NHDVRA. The bill also prohibits any hospital, birthing center, or institution

from disclosing on the facility worksheet the mother's medical record number or the infant's medical record number.

This bill also requires that no later than January 1, 2024, the NHDVRA in consultation with the DHHS, hospitals, and freestanding birth centers present a revised draft of the mother and facility worksheet form for review to the Committee on Health and Human Services Oversight for approval. The revised and approved birth worksheet (written or electronic copy) will be required to be in use no later than one year after approval. The DHHS states the changes required by this bill are in conflict with reporting requirements of the National Center for Health Statistics. (RSA 5-C:5)

The bill removes the criminal penalty for not providing the information requested on the mother's birth worksheet (health information) that is not required for the birth certificate. This bill also repeals RSA 5-C:96, II(d) and (e), relative to permanent retention of the birth worksheet.

The DHHS estimates that a significant unintended consequence of this bill could be the loss of critical and timely data from the information provided by the Live Birth Worksheet as described below. It is anticipated that without this data, the programs that depend on this information to plan access to prenatal care, health screenings for life saving treatment, fraud and program integrity protection for state and federal entitlements, health promotion planning and required evaluation efforts of the health and safety of New Hampshire mothers and infants could be at risk of losing critical federal funding.

Additionally, the DHHS understands that some of the information within this bill would prohibit collection of is needed by the Secretary of State's office and Social Security Administration (SSA) in order to issue a birth certificate and social security number (SSN) for a newborn. Information needed for this process includes the child's name, mailing address, mother's name, father's name, mother's SSN and father's SSN. This information is currently collected as part of the birth registration process as a convenience for parents, and the information is sent directly to the SSA by the state. It is unclear how the SSA will confirm the birth information and the parent requesting the SSN at the time of application. The DHHS states there is a chance this may lead to the need for the parents of approximately 12,000 New Hampshire infants per year to physically take their child's birth certificate to a Social Security Office to complete a process that is now done electronically and seamlessly.

The DHHS notes this bill will impact its Division of Public Health Services newborn screening program; hearing screening; birth conditions program; maternal mortality review;

identification of emerging or known infectious threats during pregnancy; pregnancy risk assessment monitoring system; rural health and primary care; and certain data analysis and needs assessments for various grants or the data portal. It will also impact the Division of Economic Supports Child Support Services, Medicaid (DMS) Integrated Eligibility Services, Division for Children, Youth and Families, and the Estate Recovery Unit - Division of Legal Services.

The DHHS anticipates the fiscal impact from this bill will begin in FY 2024. The DHHS states in extreme instances this bill could have an impact in excess of $26 million in federal funds due to becoming ineligible for a variety of programmatic grants, with costs for data system, quality assurance and fraud prevention being indeterminable at this time and may result in the need to eliminate in excess of 13 full-time positions, mainly in the Division of Public Health Services.

The Division of Legal Services, Estate Recovery Unit (ERU) estimates the bill could have a negative impact on the general fund as this bill could decrease the State General Fund by an indeterminable amount because it is impossible to predict who will pass away with what surviving heirs. The ERU would be unable to confirm the relationship between a deceased Medicaid recipient and survivors. Without this information, the ERU will be unable to enforce recovery properly and could have a negative impact on the State General Fund because it will unnecessarily subject the State to liability should recovery be made where it is inappropriate.

Also, there may be an indeterminable impact to community-based, safety-net health organizations including Federally Qualified Health Centers. Without federal designations of need based in part on local birth data, critical federal funds for Federally Qualified Health Centers and workforce loan repayment programs for healthcare workforce are in jeopardy.

The overall fiscal impact is indeterminable at this time because no other state has enacted similar restrictions in access to Birth Data and there may be additional unintended consequences.

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would not be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Branch	FY 2023	FY 2024 through 12/31/23	FY 2024 (Starting 1/1/24 with repeal of Felonies First)

Violation and Misdemeanor Level Offense	$119	$122	$122
Complex Felony Case	$3,195	$3,244	$3,366
Routine Criminal Case	$644	$657	$779
Appeals	Varies	Varies	Varies

Judicial Council	FY 2023	FY 2024
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney - Felony	$825/Case $105 administrative fee $200 incarceration fee (If applicable)	$825/Case $105 administrative fee $200 incarceration fee (If applicable)
Contract Attorney – Misdemeanor	$300/Case $70 administrative fee $100 incarceration fee (If applicable)	$300/Case $70 administrative fee $100 incarceration fee (If applicable)
Contract Attorney - Major Crimes (aggravated felonious sexual assault, felonious sexual assault and first degree assault)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)	$2,490/Case $140 administrative fee $200 incarceration fee (If applicable)
Assigned Counsel - Felony. Homicide including capital cases. Travel time to court does not count toward the cap.	$125/Hour up to $20,000	$125/Hour up to $20,000
Assigned Counsel - Major Crimes. Aggravated felonious sexual assault, felonious sexual assault, first degree assault, class A felony robbery and felony arson. Travel time to court does not count toward the cap.	$125/Hour up to $12,500	$125/Hour up to $12,500
Assigned Counsel - Felony. Travel time to court does not count toward the cap.	$90/Hour up to $5,500	$90/Hour up to $5,500
Assigned Counsel- Misdemeanor. Travel time to court does not count toward the cap.	$90/Hour up to $2,000	$90/Hour up to $2,000
Assigned Counsel - Supreme Court Appeal	$125/Hour up to $10,000	$125/Hour up to $10,000

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake of new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple appointments.

Department of Corrections	FY 2023	FY 2024
FY 2022 Average Cost of Incarcerating an Individual	$64,223	$64,223

FY 2022 Annual Marginal Cost of a General Population Inmate	$6,123	$6,123
FY 2022 Average Cost of Supervising an Individual on Parole/Probation	$688	$688
The Department notes any increase in the incarcerated population will have a direct impact on overtime costs given the Department's history of challenges associated with recruitment. In addition, the NH State Prison for Men has a degrading infrastructure which will only be exacerbated if an increase in the incarcerated population were to occur.		

NH Association of Counties	FY 2023	FY 2024
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	$105 to $125	$105 to $125

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly fewer cases or handle less appeals, then costs will decrease by an indeterminable amount.

AGENCIES CONTACTED:

Department of State, Department of Health and Human Services, Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

CHAPTER 211
SB 105-FN - FINAL VERSION

03/23/2023 1037s
8Jun2023... 1728h

2023 SESSION

23-0795
05/08

SENATE BILL ***105-FN***

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

SPONSORS: Sen. Rosenwald, Dist 13; Sen. Perkins Kwoka, Dist 21; Sen. Fenton, Dist 10; Rep. T. Lekas, Hills. 38; Rep. Nutter-Upham, Hills. 8; Rep. Edwards, Rock. 31

COMMITTEE: Executive Departments and Administration

AMENDED ANALYSIS

This bill limits the potential criminal penalty for misinformation on a birth worksheet to that required for the birth certificate; and requires the birth worksheet to be retained for 7 years rather than indefinitely.

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

CHAPTER 211
SB 105-FN - FINAL VERSION

03/23/2023 1037s
8Jun2023... 1728h

23-0795
05/08

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Three

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

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

211:1 New Paragraph; Vital Records Administration; Penalties; Live Birth; Mother's Worksheet. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraph:

V. When a live birth is reported to the division of vital records, subparagraph II(a) and paragraph IV shall apply only to the information on the mother's worksheet that is required for the birth certificate.

211:2 Record Retention. Amend RSA 5-C:96, II(d) and (e) to read as follows:

(d) Birth worksheet, hospital birth: retained [~~permanently~~] ***for 7 years***.

(e) Birth worksheet, home birth: retained [~~permanently~~] ***for 7 years***.

211:3 Effective Date. This act shall take effect upon its passage.

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

Amendments

SENATE FINANCE

Sen. Rosenwald, Dist 13

March 13, 2023

2023-0948s

05/08

Amendment to SB 105-FN

Amend the bill by replacing sections 1-3 with the following:

1 New Paragraph; Vital Records Administration; Penalties; Live Birth; Mother's Worksheet. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraph:

V. When a live birth is reported to the division of vital records, subparagraph II(a) and paragraph IV shall apply only to the information on the mother's worksheet that is required for the birth certificate.

2 Completion of Birth Worksheet for Hospital or Institutional Births. Amend RSA 5-C:19, II(a) to read as follows:

(a) The hospital or institution birth registrar or designee shall provide, ***with all personally identifiable information regarding the mother, father, and infant removed prior to submission***:

(1) Information regarding the child, including [~~name,~~] date and time of birth, and sex.

(2) Information regarding the facility, including name, street address, city or town, and county.

(3) Information regarding the mother including:

(A) [~~Current name and maiden name.~~

~~(B) Date of birth and birthplace.~~

~~(C) City or town, county, and state of residence.~~

~~(D) Residential address and complete mailing address if different from the residential address, or, if the same as the residential address, her zip code only.~~

~~(E) Social security number.~~

~~(F)~~] Usual occupation and the business or industry in which employed.

[~~(G)~~] ***(B)*** Race.

[~~(H)~~] ***(C)*** Level of education.

[~~(I)~~] ***(D)*** Whether she was married at the time of the birth of child, or conception of child, or any time between.

(4) Information regarding the father including:

(A) [~~Name.~~

~~(B) Date of birth and birthplace.~~

~~(C) City or town, county, and state of residence.~~

~~(D) Residential address and complete mailing address if different from the residential address, or, if the same as the residential address, his zip code only.~~

~~(E) Social security number.~~

~~(F)~~] Usual occupation and the business or industry in which employed.

[~~(G)~~] ***(B)*** Race.

[~~(H)~~] ***(C)*** Level of education.

(5) The method of payment for prenatal care and for delivery.

(6) Statistical information from the mother, medical reports, and her physician regarding the mother and child including:

(A) Number of live births, not including this child, now living and now dead.

(B) Date of the last live birth.

(C) Other terminations of pregnancy, any time after conception.

(D) Date of the last other termination of pregnancy.

(E) Date last normal menses began.

(F) Month that prenatal care began.

(G) Total number of prenatal visits.

(H) Birth weight of the child.

(I) Clinical estimation of gestation in weeks.

(J) Plurality of the child, including but not limited to single, twin, or triplet.

(K) Birth order of the child.

(L) The Apgar score, which is an evaluation of a newborn infant's physical status, at one minute and at 5 minutes.

(7) If the mother is transferred to another facility before or after giving birth, transfer information for the mother and child including:

(A) Whether the mother was transferred prior to delivery or after delivery.

(B) Whether the infant was transferred after delivery.

(C) Whether the child was living or dead at the time of the report.

(8) Information regarding the medical aspects of the pregnancy including:

(A) Any medical risk factors for the pregnancy.

(B) Any other risk factors for the pregnancy.

(C) Any obstetric procedures performed during the course of the pregnancy.

(D) Any complications of labor and delivery.

(E) The method of delivery.

(F) Any abnormal conditions of the newborn.

(G) Any congenital anomalies of the child.

(9) Indication from one parent whether the division shall be authorized to provide the Social Security Administration with data from the birth record in order for the Social Security Administration to issue a social security number.

(10) Indication from one parent whether the division shall be authorized to release birth record information to the New Hampshire immunization registry.

(11) Signature of the individual who interviewed the parent or other informant certifying that the information has been recorded exactly as given by the parent or other informant or has been taken from medical records.

(12) The hospital, birthing center, or institution shall not disclose on the facility worksheet the mother's medical record number or the infant's medical record number.

3 Revision of Worksheet Forms.

I. No later than January 1, 2024, the division of vital records, in consultation with the division of public health services, hospitals, and freestanding birth centers, shall present revised mother and facility worksheet forms to the oversight committee on health and human services for approval.

II. No later than 12 months after receiving that approval, revised paper and electronic forms shall be in use.

ADOPTED

2023-0948s

AMENDED ANALYSIS

This bill removes the criminal penalty for information requested on the mother's birth worksheet that is not required for the birth certificate; provides that only de-identified information shall be submitted on the facility worksheet for a live birth; and repeals the requirement that the birth worksheet be retained permanently.

UNAPPROVED

Senate Finance
March 16, 2023
2023-1037s
05/08

Amendment to SB 105-FN

Amend the bill by replacing sections 1-3 with the following:

1 New Paragraph; Vital Records Administration; Penalties; Live Birth; Mother's Worksheet. Amend RSA 5-C:14 by inserting after paragraph IV the following new paragraph:

V. When a live birth is reported to the division of vital records, subparagraph II(a) and paragraph IV shall apply only to the information on the mother's worksheet that is required for the birth certificate.

2 Completion of Birth Worksheet for Hospital or Institutional Births. Amend RSA 5-C:19, II(a) to read as follows:

(a) The hospital or institution birth registrar or designee shall provide, ***with all personally identifiable information regarding the mother, father, and infant removed prior to submission***:

(1) Information regarding the child, including [~~name,~~] date and time of birth, and sex.

(2) Information regarding the facility, including name, street address, city or town, and county.

(3) Information regarding the mother including:

(A) [~~Current name and maiden name.~~

~~(B) Date of birth and birthplace.~~

~~(C) City or town, county, and state of residence.~~

~~(D) Residential address and complete mailing address if different from the residential address, or, if the same as the residential address, her zip code only.~~

~~(E) Social security number.~~

~~(F)~~] Usual occupation and the business or industry in which employed.

[~~(G)~~] ***(B)*** Race.

[~~(H)~~] ***(C)*** Level of education.

[~~(I)~~] ***(D)*** Whether she was married at the time of the birth of child, or conception of child, or any time between.

(4) Information regarding the father including:

(A) [~~Name.~~

~~(B) Date of birth and birthplace.~~

~~(C) City or town, county, and state of residence.~~

~~(D) Residential address and complete mailing address if different from the residential address, or, if the same as the residential address, his zip code only.~~

~~(E) Social security number.~~

~~(F)~~] Usual occupation and the business or industry in which employed.

[~~(G)~~] ***(B)*** Race.

[~~(H)~~] ***(C)*** Level of education.

(5) The method of payment for prenatal care and for delivery.

(6) Statistical information from the mother, medical reports, and her physician regarding the mother and child including:

(A) Number of live births, not including this child, now living and now dead.

(B) Date of the last live birth.

(C) Other terminations of pregnancy, any time after conception.

(D) Date of the last other termination of pregnancy.

(E) Date last normal menses began.

(F) Month that prenatal care began.

(G) Total number of prenatal visits.

(H) Birth weight of the child.

(I) Clinical estimation of gestation in weeks.

(J) Plurality of the child, including but not limited to single, twin, or triplet.

(K) Birth order of the child.

(L) The Apgar score, which is an evaluation of a newborn infant's physical status, at one minute and at 5 minutes.

(7) If the mother is transferred to another facility before or after giving birth, transfer information for the mother and child including:

(A) Whether the mother was transferred prior to delivery or after delivery.

(B) Whether the infant was transferred after delivery.

(C) Whether the child was living or dead at the time of the report.

(8) Information regarding the medical aspects of the pregnancy including:

(A) Any medical risk factors for the pregnancy.

(B) Any other risk factors for the pregnancy.

(C) Any obstetric procedures performed during the course of the pregnancy.

(D) Any complications of labor and delivery.

(E) The method of delivery.

(F) Any abnormal conditions of the newborn.

(G) Any congenital anomalies of the child.

(9) Indication from one parent whether the division shall be authorized to provide the Social Security Administration with data from the birth record in order for the Social Security Administration to issue a social security number.

(10) Indication from one parent whether the division shall be authorized to release birth record information to the New Hampshire immunization registry.

(11) Signature of the individual who interviewed the parent or other informant certifying that the information has been recorded exactly as given by the parent or other informant or has been taken from medical records.

(12) The hospital, birthing center, or institution shall not disclose on the facility worksheet the mother's medical record number or the infant's medical record number.

3 Revision of Worksheet Forms.

I. No later than January 1, 2024, the division of vital records, in consultation with the division of public health services, hospitals, and freestanding birth centers, shall present revised mother and facility worksheet forms to the oversight committee on health and human services for approval.

II. No later than 12 months after receiving that approval, revised paper and electronic forms shall be in use.

2023-1037s

AMENDED ANALYSIS

This bill removes the criminal penalty for information requested on the mother's birth worksheet that is not required for the birth certificate; provides that only de-identified information shall be submitted on the facility worksheet for a live birth; and repeals the requirement that the birth worksheet be retained permanently.

Committee Minutes

SENATE CALENDAR NOTICE
Executive Departments and Administration

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

Date: January 25, 2023

HEARINGS

Wednesday	02/01/2023
(Day)	(Date)

Executive Departments and Administration	State House 103	9:00 a.m.
(Name of Committee)	(Place)	(Time)

9:00 a.m.	**SB 75-FN**	relative to the division of personnel in the department of administrative services.
		(The previous hearing for SB 75-FN was recessed on January 25th)
9:15 a.m.	**SB 103**	relative to proclaiming an observance of Fort Constitution Days.
9:30 a.m.	**SB 105-FN**	relative to information collected by the division of vital records administration as part of the live birth worksheet.
9:45 a.m.	**SB 94**	relative to residential child care licensing of child care institutions and agencies.
10:00 a.m.	**SB 106-FN**	establishing an emerging professional certificate for child care programs.
10:15 a.m.	**SB 206**	prohibiting corporal punishment in child day care agencies.
10:30 a.m.	**SB 150-FN**	relative to the family mediator certification board.

EXECUTIVE SESSION MAY FOLLOW

Sponsors:

SB 75-FN

Sen. Carson

SB 103

Sen. Perkins Kwoka	Sen. Watters	Sen. Altschiller	Rep. M. Murray
Rep. Hamblet	Rep. Vogt	Rep. Meuse	Rep. Hobson

SB 105-FN

Sen. Rosenwald	Sen. Perkins Kwoka	Sen. Fenton	Rep. T. Lekas
Rep. Nutter-Upham	Rep. Edwards		

SB 94

Sen. Carson	Sen. Gray

SB 106-FN

Sen. Fenton	Sen. Ward

SB 206

Sen. Carson	Sen. Birdsell	Sen. Whitley	Sen. Chandley
Rep. McLean			

SB 150-FN

Sen. Prentiss	Sen. Altschiller	Sen. Perkins Kwoka	Sen. Watters
Sen. Fenton	Sen. Soucy	Sen. Whitley	Rep. Morse

Phil Jasak 271-1403

Howard Pearl
Chairman

Senate Executive Departments and Administration Committee

Phil Jasak 271-1403

SB 105-FN, relative to information collected by the division of vital records administration as part of the live birth worksheet.

Hearing Date: February 1, 2023

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

Members of the Committee Absent : Senator Perkins Kwoka

Bill Analysis: This bill removes the possibility that omission of certain information on a live birth worksheet may result in a violation or criminal penalty; requires that the mother affirmatively consent to the inclusion of certain identifiable health information on the live birth worksheet; and repeals the requirement that the birth worksheet be retained permanently.

Sponsors:

Sen. Rosenwald	Sen. Perkins Kwoka	Sen. Fenton
Rep. T. Lekas	Rep. Nutter-Upham	Rep. Edwards

Who supports the bill: Sen. Donovan Fenton, Sen. Perkins Kwoka, Rep. Tony Lekas, Monica Staples, Frances Nutter-Upham, Frank Knaack (ACLU NH)

Who opposes the bill: None

Who is neutral on the bill: Neal Kurk, Erin Hennessey (SOS), Chiahui Chawla (NH DHHS), Paul Minnehan (NHHA).

Summary of testimony presented:
Jenn Gallagher for Sen. Rosenwald:

- Ms. Gallagher said that this bill removes the criminal penalty associated with the omission of certain info on a live birth worksheet. She also said that the mother must affirmatively consent to giving the information on the live birth worksheet ratemeter than being compelled by a criminal penalty to do so.

Neil Kurk:

- Mr. Kurk said he supports the bill because it protects the informational privacy of mothers and allows them to omit any information that doesn't go on the birth certificate.
- He then said that a lot of the information that is required in the worksheet violates the right to privacy in the New Hampshire Constitution.
- Mr. Kurk continued that the state must demonstrate that there is a compelling interest in order to violate this right and that simple generalized interests don't count. He then said the state must prove that the information is essential and prove that it is the only way to acquire the information.
- Mr. Kurk added that the information is stored forever under current law.
- Mr. Kurk said that this bill would bring the current statues into compliance with the New Hampshire Constitution.
- Sen Carson asked if the information is collected for statistical purposes
    - Mr. Kurk answered that he is unsure but DHHS does use it for reporting purposes and is reported to the federal government in a redacted form.
    - Sen Carson asked if there is a purpose to hold onto the information forever
    - Mr. Kurk said that the answer must be answered by the legislature and if the need for this information is so compelling that the department can hold onto the information.
    - Sen Carson asked if any personal information gets redacted would it then be acceptable to collect information.
    - Mr. Kurk answered that he doesn't know the answer constitutionally but even though he's unsure he does think it is a better approach than the current one. He then said that working with DHHS on this could potentially show it is possible, but he is not sure if that process could be trusted.

Chiahui Chawla and Abby Rodgers:

- Ms. Chawla said that there will be impacts on the public health if mothers are able to redact all of their information because the department won't be able to properly track birth defects or other negative health impacts of certain activities.
- She then said that DHHS is covered by HIPAA which means that the personal identification is held confidentially.
- She added that because of this bill NH could be left out of certain studies funded by the federal government and there would not be a way for the department to compare their statistics to those of other states since the stats for New Hampshire my not be reliable.
- She said that it is possible for DHHS and the Department of Vital Records to work together to review and revise the elements on the worksheet.
- Sen. Carson asked if other states collect this same information in the same way.

- Ms. Chawla answered that she is not sure but to her knowledge yes they do.
- Sen. Carson then asked if there is a federal requirement to provide this data.
- Ms. Rogers answered that multiple states use the same worksheet and that the department is neutral but is ok with removing the criminal penalty. She also said that they are willing to work to propose a new worksheet.

- Sen. Altschiller asked if the data collected is used for DHHS to access federal grant money for treatment or prevention programs.
  - Ms. Chawla answered yes but that most of it comes from regular birth data and only some comes from the worksheet.

Erin Hennessey:

- Ms. Hennessey said that the Department of Vital Records is a division within the SOS office. She said that the department is not taking a position on the bill and it is up to the legislature to decide what data is collected.
- Ms. Hennessey said that there is a contract with CDC that says the state will give the information form the live birth worksheet to the CDC. She added that this information is reported by all 50 states and there is a federal law that allows the federal government to collect this information from the states.
- Ms.Hennessey then said that the current contract term is from 2022-2026 and this bill could impact that contract and potentially affect the money received for collecting the information.
- Sen. Pearl asked if the withholding of the worksheet was decriminalized would that have an impact on how much information is received.
  - Ms. Hennessey answered that she is unsure of the effect.

Sen Rosenwald:

- Sen. Rosenwald said that this bill comes from a study committee from last year under SB 454.
- Sen. Rosenwald said that the information required for a birth certificate is collected by the Division of Vital Records under the Secretary of State. She then said that it is a felony to not give this information or to give incorrect information which not the part she takes issue with.
- Sen. Rosenwald then said the birth sheet has many personal medical questions and mothers are coerced by law to answer them. She added that these answers are then sent to Vital Records which is not covered by HIPAA like DHHS.
- Sen. Rosenwald said that this constitutes an infringement on privacy. She added that this bill removes the criminal penalties that require mandatory sharing of medial information and allows the mother to withhold release of the information if she chooses. She then added that DHHS uses the medical information but only in de-identified form.

- Sen. Rosenwald continued that the public good of monitoring this information is enough incentive to release the information but it should not be required of mothers to release all of the information currently on the live birth worksheet.
- Sen Rosenwald added that the bill also removes the requirement for hospitals to keep the paper worksheet forever, but keeping the electronic copy at Vital Records.
- Sen. Carson asked why there is criminal charges for not offering personal medical information.
    - Sen. Rosenwald answered that the criminal charges are completely unnecessary. She added that the CDC requires states to report this information in de-identified form but the current mode of collection by Vital Records is not protected by HIPAA therefore making the personally identifiable information available to the state government.
    - Sen Carson then asked if it would be more appropriate to add that it's a felony to share information and if there should there be a new form that can accurately reflect the constitutional right to privacy by not requiring participation under penalty of law.
    - Sen. Rosenwald answered that vital records is tasked with making a new form under the bill. She added that HIPAA covers federal misuse of data but doesn't apply to the SOS. She then said that the SOS doesn't use the data and they have provisions requiring confidentiality but it should not be required to share personal medical information with the government.
    - Sen Carson then asked if a friendlier form would give assurances to mothers. She then asked if there was a section saying that it would be a felony to misuse the information rather than being a felony not to fill out the form would that be better approach.
    - Rosenwald answered that it could work that way also.
    - Sen Carson asked if there should be reporting of 2nd hand exposure to things like cigarette smoke during pregnancy since it is not in the worksheet.
    - Sen. Rosenwald said she would refer to DHHS.
- Sen. Gendreau then asked if the information collected would still be collected by the medical professionals without this form.
    - Sen. Rosenwald said this information would still be in the medical record and this bill makes no changes to that.

Paula Minnehan

- Ms. Minnehan said that the main worry for the hospitals is that if incorrect information is given it could lead to human trafficking. She then said that she would like to thank the committee for limiting criminal penalty and would support the repeal of requiring hospitals to keep the paper record in perpetuity. She added that there is a concern about the ability to give or withhold consent of

release for the information and requiring additional documentation to do so could potentially burden hospitals with more paperwork.

- Sen. Gendreau asked if the form is only being filled out by those giving birth in a hospital.
    - Ms. Minnehan answered that the worksheets are still submitted by birthing centers and midwives and that home births are still required to fill out these forms.
- Abby Rogers asked to clarify that the statistics inform collected by DHHS are about pregnancy mortality as well.

PJ
Date Hearing Report completed: February 7, 2023

Speakers

SENATE EXECUTIVE DEPARTMENTS & ADMINISTRATION COMMITTEE

Date 02/01/23 Time 9:30 A.M. Public Hearing on **SB 105-FN**

Relative to information collected by the division of vital records administration as part of the live birth worksheet.

Please check box(es) that apply.

SPEAKING	*FAVOR*	*OPPOSED*	*NAME(Please print)*	*REPRESENTING*
☒	☒	☐	Paula Minnehan	NH Hospital Association
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		

SENATE EXECUTIVE DEPARTMENTS & ADMINISTRATION COMMITTEE

Date 02/01/23 Time 9:30 A.M. Public Hearing on **SB 105-FN**

Relative to information collected by the division of vital records administration as part of the live birth worksheet.

Please check box(es) that apply.

SPEAKING	FAVOR	OPPOSED	NAME (Please print)	REPRESENTING
☐	☑	☐	Rep Tony Lekas	Hills 38
✓ ☑	☐	☐	Neal Kurk	Self
✓ ☑	☐	☐	Erin Hennessey	Secretary of State
✓ ☑	☐	☐	Chiahui Chawla	NH DHHS/DPHS
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		
☐	☐	☐		

Senate Remote Testify

Executive Departments and Administration Committee Testify List for Bill SB105 on 2

Support: 6 Oppose: 0

Name	Title	Representing	Position
Lekas, Tony	An Elected Official	Hillsborough District 38	Support
Perkins Kwoka, Senator Rebecca	An Elected Official	Myself	Support
Staples, Monica	A Member of the Public	Myself	Support
nutter-upham, frances	An Elected Official	Myself	Support
Fenton (SD 10), Senator Donovan	An Elected Official	Myself	Support
Knaack, Frank	A Lobbyist	ACLU of NH	Support

Testimony

State of New Hampshire
Mother's Worksheet for Child Birth Certificate

Child's Information

*1. Child's Name
1a. First
1b. Middle
1c. LAST
1d. Suffix (Sr., Jr., II, III, etc.)

*2. Date of Birth (MM/DD/YYYY) / /

*3. Time of Birth ☐ AM ☐ PM ☐ Military

4. Will this infant be placed for adoption? ☐ Yes ☐ No

5a. Type of Birthplace (Specify Type)
☐ Hospital ☐ Home-Planned ☐ Freestanding Birth Center
☐ Enroute ☐ Home-Un-planned ☐ Other (Specify): _____
☐ Clinic/Doctor's Office

5b. Planned Birth Place, If different,
Specify: _____

6. Sex
☐ Male
☐ Female
☐ Unknown

*7. Name of Facility (If not a facility, enter name of place and address)

*8. City, Town, or Location of Birth

*9. County of Birth

Include in Resident Report? ☐ Yes ☐ No

Mother's Information

*10. Mother's Name Before First Marriage/Civil Union
10a. First
10b. Middle
10c. LAST
10d. Suffix (Sr., Jr., II, III, etc.)

*14. Mother's Current Legal Name
14a. First
14b. Middle
14c. LAST
14d. Suffix (Sr., Jr., II, III, etc.)

*11. Date of Birth (MM/DD/YYYY) / /

*12. Birthplace (State, Territory, or Foreign Country)

13. Mother's Social Security Number

15. I authorize the State to provide to the Social Security Administration data from this form to issue a Social Security Number for my child ☐ Yes ☐ No

16a. Domestic Status? (At birth, conception or any time between?)
☐ MARRIED ☐ MARRIED, affidavit filed ☐ MARRIED, refused to state father's name
☐ CIVIL UNION ☐ CIVIL UNION, affidavit filed ☐ CIVIL UNION, refused to state partner's name
☐ UNMARRIED ☐ UNMARRIED, affidavit filed ☐ UNKNOWN

16b. If Applicable, Date of AOP (MM/DD/YYYY) / /

16c. NH Surrogacy Agreement? ☐ Yes ☐ No

17a. Residence: Number, Street and Apt. No. (e.g., 624 SE 5th St.)

17b. City or Town

17c. County

17d. State or Foreign Country

17e. Zip Code

18. Telephone Number ( )

19. How Long at Current Residence? Years: Months:

20a. Mother's Mailing Address, if **different** from Residence: Number, Street and Apt. No

20b. City or Town

20c. State

20d. Zip Code

21. Mother's Education (Check the box that best describes the highest degree or level of school completed at the time of delivery)
☐ 8th grade or less
☐ 9th - 12th grade; no diploma
☐ High school graduate or GED completed
☐ Some college credit, but no degree
☐ Associate's degree (e.g., AA, AS)
☐ Bachelor's degree (e.g., BA, AB, BS)
☐ Master's degree (e.g., MA, MS, MEng, MEd MSW, MBA)
☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
☐ Unknown

22. Mother of Hispanic Origin? (Check the box that best describes whether the mother is Spanish/Hispanic/Latina or check the "No" box if the mother is not Spanish/Hispanic/Latina)
☐ No, not Spanish/Hispanic/Latina
☐ Yes, Mexican, Mexican American, Chicana
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latina (Specify)
☐ Unknown

23. Mother's Race (Check one or more races to indicate what the mother considers herself to be)
☐ White ☐ Black or African American
☐ American Indian or Alaska Native (Name of the enrolled or principal tribe): _____
☐ Asian Indian ☐ Filipino
☐ Chinese ☐ Japanese
☐ Vietnamese ☐ Korean
☐ Other Asian (Specify): _____
☐ Native Hawaiian ☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander (Specify): _____
☐ Other (Specify): _____
☐ Unknown

24. Occupation (Indicate type of work done during last year)

25. Kind of Business/Industry (Do not use Company Name)

Father's/Spouse's Information

*26. Father's/Spouse's Name Before First Marriage/Civil Union (only if married or affidavit of paternity filed)
26a. First
26b Middle
26c. LAST
26d. Suffix (Sr., Jr., II, III, etc.)

*26. Father's/Spouse's Current Legal Name
26a. First
26f. Middle
26g. LAST
26h. Suffix (Sr., Jr., II, III, etc.)

*27. Date of Birth (MM/DD/YYYY) / /

*28. Birthplace (State, Territory, or Foreign Country)

29. Father's/Spouse's Social Security Number

26g. Father's/Spouse's Residence Address: Number & Street

26h. City or Town

26i. County

26j. State

26k. Zip Code

See other side for more worksheet information

Mother's Worksheet for Child Birth Certificate

continued...

30. Father's/Spouse's Education (Check the box that best describes the highest degree or level of school completed at the time of delivery)
- ☐ 8th grade or less
- ☐ 9th - 12th grade; no diploma
- ☐ High school graduate or GED completed
- ☐ Some college credit, but no degree
- ☐ Associate's degree (e.g., AA, AS)
- ☐ Bachelor's degree (e.g., BA, AB, BS)
- ☐ Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)
- ☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
- ☐ Unknown

31. Father's/Spouse's of Hispanic Origin? (Check the box that best describes whether the father is Spanish/Hispanic/Latino or check the "No" box if the father is not Spanish/Hispanic/Latino)
- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican American, Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino (Specify): _____
- ☐ Unknown

32. Father's/Spouse's Race (Check one or more races to indicate what the Father considers himself to be)
- ☐ White ☐ Black or African American
- ☐ American Indian or Alaska Native (Name of the enrolled or principal tribe): _____
- ☐ Asian Indian ☐ Filipino
- ☐ Chinese ☐ Japanese
- ☐ Vietnamese ☐ Korean
- ☐ Other Asian (Specify): _____
- ☐ Native Hawaiian ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander (Specify): _____
- ☐ Other (Specify): _____
- ☐ Unknown

33. Occupation (Indicate type of work done during last year)

34. Kind of Business/Industry (Do not use Company Name)

Mother's Female Partner's Information (Civil Union Only)

***77.** Mother's Female Partner's Last Name before first marriage or Civil Union

77a. First

77b. Middle

77c. LAST

77d. Suffix (Sr.,Jr., II, III, etc.)

***79.** Date of Birth (MM/DD/YYYY) / /

***80.** Birthplace (State, Territory, or Foreign Country)

81. Mother's Female Partner's SSN

***77e.** Mother's Female Partner's Current Legal Last Name

77f. Suffix (Sr.,Jr., II, III, etc.)

78a. Mother's Female Partner's Residence Address: Number & Street

78b. City or Town

78c. County

78d. State

78e. Zip Code

Mother's Statistical Information

35. Mother's Medical Record Number

36. Mother's PRE-pregnancy weight (Pounds) ☐ Unknown

37. Mother's Weight at Delivery (Pounds) ☐ Unknown

38. Mother's Height
Feet: Inches: ☐ Unknown

39. Did Mother get WIC food for herself during pregnancy?
☐ Yes ☐ No ☐ Unknown

40a. Alcohol use during pregnancy?
☐ Yes ☐ No ☐ Unknown
Average number of drinks per week _____

40b. Cigarette Smoking Before and During Pregnancy?
☒ Never smoked, or quit smoking more than 3 months before becoming pregnant
Otherwise: average number of cigarettes or packs per day:

	# of cigarettes		# of packs
3 months before pregnancy	_____	OR	_____
1st three months of pregnancy	_____	OR	_____
2nd three months of pregnancy	_____	OR	_____
Last three months of pregnancy	_____	OR	_____

☐ Unknown

84. I authorize release of birth and immunization information to the New Hampshire Immunization registry: ☐ Yes ☐ No

Please note the following as you complete this form:

According to NH Statute RSA 5-C:14, "Any person shall be guilty of a Class B felony if he wilfully and knowingly makes any false statement in a certificate or wilfully and knowingly supplies false information intending that such information be used in the preparation of any such report, record or certificate."

I, the undersigned, hereby certify that I have read the above cited statute and that the information I have supplied is a true and correct representation of the facts to the best of my knowledge. Additionally, I understand that all information shall be kept confidential and used solely for administrative and statistical purposes and that refusal of a parent to provide a social security number shall not be grounds for refusal to issue a birth certificate.

41. Informant's Signature
(If surname of child is other than mother, father, or combination of both names, then both shall sign)

42. Date

43. Relation to Child
- ☐ Mother ☐ Father/Parent
- ☐ Civil Union Partner
- ☐ Other, Specify _____

**Only these items will be displayed on Legal Certificate. However all items are required by law (RSA 5-C).*

State of New Hampshire
Facility Worksheet for Certificate of Live Birth

Mother's Current Legal Last Name

Mother's Medical Record Number

Mother's Statistical Information

44a. Number of Previous Live Births (Do not include this child)
Number Now Living ____ ☐ None ☐ Unknown
Number Now Dead ____ ☐ None ☐ Unknown

45a. Number of Other Pregnancy Outcomes (Spontaneous or induced losses or ectopic pregnancies)
Number of Other Outcomes ____
☐ None ☐ Unknown

46a. Date of First Prenatal Care Visit (MM/DD/YYYY)
/ /
☐ No Prenatal Care

44b. Date of Last Live Birth (MM/DD/YYYY)
/ /

45b. Date of Last Other Pregnancy Outcome (MM/DD/YYYY)
/ /

46b. Date of Last Prenatal Care Visit (MM/DD/YYYY)
/ /

47. Total Number of Prenatal Visits for this Pregnancy (If none, enter '0')

48. Date Last Normal Menses Began (MM/DD/YYYY)
/ /

49. Was mother transferred to higher level care for maternal medical or fetal indications for delivery?
☐ Yes ☐ No ☐ Unknown
If yes, name of facility mother was transferred from:

50. Principal Source of Payment for this Delivery
☐ Medicaid ☐ Self Pay
☐ NH CHIP ☐ Other Government
☐ Private Insurance ☐ Unknown
☐ Other ____ (Specify Name of Other Source)

Newborn's Statistical Information

51. Newborn Medical Record Number

52a. Birth Weight
lbs: ozs. or grams:

53. Obstetric Estimate of Gestation (Completed weeks) ____

52b. Head Circumference (in centimeters)

52c. Length (in inches):

54a. Apgar Score at 5 min.
____
☐ Unknown

54b. If score at 5 min. is less than 6, score at 10 min
____
☐ Unknown

55. Plurality – Single, Twin, Triplet etc Include all live births and fetal deaths from this pregnancy
Specify ____

56. If not single birth – Born 1st, 2nd, 3rd, etc. Include all live births and fetal deaths from this pregnancy:
Specify ____

57a. Was infant transferred to another facility within 24 hours of delivery?
☐ Yes ☐ No ☐ Unknown

57b. If yes, name of facility infant was transferred to:

58. Is infant living at the time of report?
☐ Yes ☐ No
☐ Unknown

59. Is infant being breastfed even partially?
☐ Yes ☐ No
☐ Unknown

See other side for more worksheet information

Facility Worksheet for Certificate of Live Birth

continued

72. Attendant's Name and Title
Name
☐ MD ☐ Hospital ADMIN ☐ CNM ☐ Midwife (NHCM)
☐ Father ☐ DO ☐ Other (Specify) _____

Attendant's Address

73. NPI of person delivering the baby

74. By my signature I certify that this child was born alive at the place, time and date stated.

75. Date Certified (MM/DD/YYYY)
/ /

76. Certifier's Name and Title (Type or Print)
Name
☐ MD ☐ Hospital ADMIN ☐ CNM
☐ Midwife (NHCM) ☐ DO ☐ Other (Specify) _____

Mother's Current Legal Last Name

Mother's Medical Record Number

60. Risk Factors in this Pregnancy
(Check all that apply)
☐ Diabetes
- ☐ Prepregnancy (Diagnosis prior to this pregnancy)
- ☐ Gestational (Diagnosis in this pregnancy)

☐ Hypertension
- ☐ Prepregnancy (Chronic)
- ☐ Gestational (PIH, preeclampsia)
- ☐ Eclampsia

☐ Previous preterm births
☐ Other previous poor pregnancy outcome (includes perinatal death, small-for-gestational age/intrauterine growth restricted birth)
☐ Pregnancy resulted from fertility enhancing drugs
☐ Pregnancy resulted from assisted reproductive technology
☐ Mother had a previous cesarean delivery?
If Yes, how many? ____
☐ Group B Streptococcus culture positive
☐ Vaginal bleeding during this pregnancy prior to the onset of labor
☐ None of the above
☐ Unknown

61. Infections Present and/or Treated During This Pregnancy
(Check all that apply)
☐ Gonorrhea
☐ Syphilis
☐ Herpes Simplex Virus (HSV)
☐ Chlamydia
☐ Hepatitis B
☐ Hepatitis C
☐ Other
Specify _____
☐ None of the above

62. Method of Delivery
A. Was delivery with forceps attempted but unsuccessful? ☐ Yes ☐ No
B. Was delivery with vacuum extraction attempted but unsuccessful? ☐ Yes ☐ No
C. Fetal presentation at birth
☐ Cephalic ☐ Breech ☐ Other
D. Final route and method of delivery
(Check one)
☐ Vaginal ☐ Spontaneous
☐ Forceps
☐ Vacuum Or:
Cesarean. ☐
If cesarean, was a trial of labor attempted?
☐ Yes ☐ No
attempted but unsuccessful?
☐ Yes ☐ No

63. Obstetric procedures
(Check all that apply)
☐ Cervical cerclage
☐ Tocolysis
☐ External cephalic version
- ☐ Successful
- ☐ Failed

☐ None of the above

64. Onset of Labor
(Check all that apply)
☐ Premature rupture of the membranes (prolonged, ≥ 12 hr)
☐ Precipitous Labor (< 3 hr)
☐ Prolonged Labor (≥ 20 hr)
☐ None of the above
☐ Unknown

65. Characteristics of Labor and Delivery
(Check all that apply)
☐ Induction of labor
☐ Augmentation of labor
☐ Non-vertex presentation
☐ Steroids (glucocorticoids) for fetal lung maturation received by the mother prior to delivery
☐ Antibiotics received by the mother during labor
☐ Clinical chorioamnionitis diagnosed during labor or maternal temperature ≥ 38° C (100.4°F)
☐ Moderate/heavy meconium staining of the amniotic fluid
☐ Fetal intolerance of labor such that one or more of the following actions was taken: in-utero resuscitative measures, further fetal assessment or operative delivery
☐ Epidural or spinal anesthesia during labor
☐ None of the above
☐ Unknown

66. Maternal Morbidity (complications associated with labor and delivery)
(Check all that apply)
☐ Maternal transfusion
☐ Third or fourth degree perineal laceration
☐ Ruptured uterus
☐ Unplanned hysterectomy
☐ Admission to intensive care unit
☐ Unplanned operating room procedure following delivery
☐ None of the above
☐ Unknown

67. Abnormal Conditions of the Newborn
(Occurring within 24 hours of Delivery)
(Check all that apply)
☐ Assisted ventilation required immediately following delivery
☐ Assisted ventilation required for more than six hours
☐ NICU admission
☐ Newborn given surfactant replacement therapy
☐ Antibiotics received by the newborn for suspected neonatal sepsis
☐ Seizure or serious neurologic dysfunction
☐ Significant birth injury (skeletal fracture(s), peripheral nerve injury, soft tissue or solid organ hemorrhage which requires intervention)
☐ None of the above
☐ Unknown

68. Congenital Anomalies of the Newborn
(Observed within 24 hours of delivery)
(Check all that apply)
☐ Anencephaly
☐ Microcephaly
☐ Meningomyelocele / Spina bifida
☐ Cyanotic congenital heart disease
☐ Congenital diaphragmatic hernia
☐ Omphalocele
☐ Gastroschisis
☐ Limb reduction defect (excluding congenital amputation and dwarfing syndromes)
☐ Cleft Lip with or without Cleft Palate
☐ Cleft Palate alone
☐ Down Syndrome
- ☐ Karyotype confirmed
- ☐ Karyotype pending

☐ Suspected Chromosomal disorder
- ☐ Karyotype confirmed
- ☐ Suspected, Karyotype pending

☐ Hypospadias
☐ None of the above
☐ Unknown

ADDITIONAL QUESTIONS ON PAGE 6

(Continue to next page)

State of New Hampshire
Facility Worksheet for Certificate of Live Birth

continued...

Mother's Current Legal Last Name

Mother's Medical Record Number

Prenatal Substance Exposure

82A. Was the infant monitored for effects of nutero substance exposure?

☐ Yes ☐ No

If YES, Type of substance(s):
(check all that apply)

- ☐ opioids
- ☐ stimulants (amphetamines, methamphetamines, other)
- ☐ cocaine
- ☐ cannabis
- ☐ benzodiazepines
- ☐ barbiturates
- ☐ alcohol
- ☐ nicotine
- ☐ bath salts
- ☐ Kratom
- ☐ Other (Specify)_____

B. Was the infant identified as being affected by substance misuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder?

☐ Yes ☐ No

Plan of Safe/Supportive Care

83. Was a Plan of Safe/Supportive Care (POSC) created?

☐ Yes ☐ No

END

STATE OF NEW HAMPSHIRE
LEGITIMATION OF A CHILD
RSA 5-C:22

A confidential report to the town or city clerk relative to a legitimation.

TYPE OR PRINT LEGIBLY IN BLACK INK. THIS IS A PERMANENT RECORD.

PART I
To identify a birth record.
Items 1-5 shall be taken from a certified copy of the child's birth record.

1. NAME OF CHILD AS ORIGINALLY RECORDED

2. CHILD'S DATE OF BIRTH (Month) (Day) (Year)

3. CHILD'S PLACE OF BIRTH

4. FULL NAME OF NATURAL MOTHER PRIOR TO FIRST MARRIAGE/CIVIL UNION

5. MOTHER'S TOWN OF RESIDENCE

6. MOTHER'S SOCIAL SECURITY NUMBER

PART II
Name of child by legitimation and facts relative to the natural father.

7. FULL NAME OF CHILD BY LEGITIMATION

8. FULL NAME OF NATURAL FATHER PRIOR TO FIRST MARRIAGE/CIVIL UNION

9. FATHER'S DATE OF BIRTH

10. FATHER'S STATE OF BIRTH

11. FATHER'S SOCIAL SECURITY NUMBER

PART III
Affidavit

We, _____ and _____
Print Current Full Name of Father *Print Current Full Name of Mother*

hereby acknowledge that we are the natural parents of the child described above and hereby submit a certified copy of our marriage certificate as proof of our marriage. We further state that we have recognized said child as our own and desire that he henceforth be known as:

_____
First, Middle and Last Name of Child by Legitimation

PART IV
Notice regarding falsification of information

PLEASE NOTE THE FOLLOWING AS YOU COMPLETE THIS FORM:
In accordance with New Hampshire law, RSA 5-C:14, "Any person shall be guilty of a Class B felony if he willfully and knowingly makes any false statement in a certificate, record, or report required to be filed by statute or in an application for an amendment thereof or in any application for a certified copy of a vital record, or who willfully and knowingly supplies false information intending that such information be used in the preparation of any such report, record, or certificate, or amendment thereof;"

We, the undersigned, hereby certify that we have read the above cited law and that the above information is a true and correct representation of facts to the best of our knowledge.

PARENTS SIGN

Signature of Father Signature of Mother

12 PARENTS CURRENT MAILING ADDRESS: (STREET NUMBER AND NAME/RFD NUMBER)

13. CITY/TOWN

14 STATE

15 ZIP CODE

PART V
Notary or Justice of the Peace

16. SUBSCRIBED AND SWORN TO BEFORE ME IN THE CITY/TOWN OF

17. STATE OF:

18 COUNTY OF

19. SIGNATURE OF NOTARY OR JUSTICE OF THE PEACE

20. SUBSCRIBED AND SWORN TO ME ON:

21 DATE COMMISSION EXPIRES

SEAL
(If applicable)

PART VI
To be completed by the Town/City Clerk of the place of the child's birth.

22 CERTIFIED CERTIFICATE OF MARRIAGE PRESENTED
YES ☐ NO ☐ **If "NO" is checked, can not process without prior approval from the State Registrar.*

23. DATE RECEIVED BY CLERK

24 DATE NEW RECORD MADE

25. CLERK OF THE TOWN/CITY OF

26 SIGNATURE OF TOWN/CITY CLERK

Debra Martone

From: Erin Hennessey <Erin.Hennessey@sos.nh.gov>
Sent: Wednesday, March 15, 2023 2:43 PM
To: Debra Martone
Subject: SB105

Caution! This message was sent from outside your organization.

Deb,
Could you please share this with Chairman Gray and the Finance Committee?
Thank you,
Erin

Good Afternoon Chairman Gray and Honorable Members of the Senate Finance Committee,

My apologies for being unable to attend your executive session today. I was out of town at a post-election audit.

Today you passed out of committee SB105-FN. Chairman Gray had asked me to work with DHHS to follow-up with the CDC to confirm if Vital Records would lose its grant funding with the passage of SB105. It does appear that our fiscal note remains accurate with one addition. At times, DHHS receives data modernization funding from the CDC, a portion of this funding is earmarked for Vital Records and goes into the Vital Records Improvement Fund. As this funding is not continuous like our grant, I cannot estimate at this time the loss of future funding.

In summary, SB105 would have a one-time expense of $100,000 for system changes to our system, NHVRIN, and $169,000 in annual lost grant revenue that helps to fund our vital records division.

Please let me know if you have any questions.

Kind regards,
Erin

Erin T. Hennessey
Deputy Secretary of State
(603) 271-3242
Erin.Hennessey@sos.nh.gov

New Hampshire Hospital Association

SENATE EXECUTIVE DEPARTMENTS AND ADMINISTRATION COMMITTEE

Wednesday, February 1, 2023

SB 105 – Relative to Information Collected by the Division of Vital Records Administration as Part of the Live Birth Worksheet

Testimony

Good morning, Mr. Chairman, and members of the committee. My name is Paula Minnehan, Senior Vice President, State Government Relations with the New Hampshire Hospital Association (NHHA), representing all 26 of the state's community hospitals, including 16 birthing hospitals, as well as all specialty hospitals throughout New Hampshire.

NHHA is not taking a position on this bill but would like to share our feedback for your consideration. NHHA participated during the Committee to Study Information Collected as Part of the Live Birth Worksheet between August and October of 2022. The study committee was a result of SB 454, which passed in 2022. The study committee report included a number of recommendations, which focused on improving upon the current process of data collection, and we believe that several changes in this bill will benefit both patients and hospitals.

First, we want to thank the committee for limiting the criminal penalty for providing false information from RSA 5-C:14 to only those data elements on the mother's worksheet that will be used for the birth certificate and removing this penalty from all additional statistical information from the mother, father, or female partner's worksheets.

We also fully support the change that repeals RSA 5-C:96, II(d) and (e) which removes the requirement that hospitals retain copies of the birth records permanently. This eliminates an undue burden on the hospitals, especially considering that any changes to the birth record after a mother and baby leave the hospital occur at the town clerk's office. These post-discharge birth record changes are rarely, if ever, reported back to the birth hospital. This change will also allow hospitals to align the birth record retention with their established retention policies for minors' medical records.

NHHA remains concerned about the bill's requirement to provide the opportunity to give or withhold consent for release of the mother or baby's statistical information or other personally identifiable health information for the facility worksheet. We agree that literature and education about how the data collected on the birth worksheet is used should be provided to the patient. However, requiring additional documentation to obtain the mother's consent places an increased burden on the hospitals. In addition, this workflow can become very complex if mothers choose to withhold some but not all data elements from the worksheet.

NHHA is ready and willing to work closely with the division of vital records, the division of public health services, and freestanding birth centers to create updated worksheet forms and signature documents. We believe the streamlining of these documents will ultimately positively impact patients, hospital workflow, and record collection.

Thank you for the opportunity to provide our comments on SB 105. I am happy to answer any questions you may have.

State of New Hampshire
Mother's Worksheet for Child Birth Certificate

Child's Information

*1. Child's Name 1a. First 1b. Middle		*2. Date of Birth (MM/DD/YYYY) / / *3. Time of Birth ☐ AM ☐ PM ☐ Military
1c. LAST	1d. Suffix (Sr., Jr., II, III, etc.)	4. Will this infant be placed for adoption? ☐ Yes ☐ No

5a. Type of Birthplace (Specify Type) ☐ Hospital ☐ Home-Planned ☐ Freestanding Birth Center ☐ Enroute ☐ Home-Un-planned ☐ Other (Specify): _____ ☐ Clinic/Doctor's Office	5b. Planned Birth Place, if different, Specify: _____	6. Sex ☐ Male ☐ Female ☐ Unknown

*7. Name of Facility (If not a facility, enter name of place and address)	*8. City, Town, or Location of Birth	*9. County of Birth	Include in Resident Report? ☐ Yes ☐ No

Mother's Information

*10. Mother's Name Before First Marriage/Civil Union 10a. First 10b. Middle 10c. LAST 10d. Suffix (Sr., Jr., II, III, etc.)	*14. Mother's Current Legal Name 14a. First 14b. Middle 14c. LAST 14d. Suffix (Sr., Jr., II, III, etc.)	*11. Date of Birth (MM/DD/YYYY) / / *12. Birthplace (State, Territory, or Foreign Country) 13. Mother's Social Security Number 15. I authorize the State to provide to the Social Security Administration data from this form to issue a Social Security Number for my child ☐ Yes ☐ No

16a. Domestic Status? (At birth, conception or any time between?) ☐ MARRIED ☐ MARRIED, affidavit filed ☐ MARRIED, refused to state father's name ☐ UNKNOWN ☐ CIVIL UNION ☐ CIVIL UNION, affidavit filed ☐ CIVIL UNION, refused to state partner's name ☐ UNMARRIED ☐ UNMARRIED, affidavit filed	16b. If Applicable, Date of AOP (MM/DD/YYYY) / /

16c. NH Surrogacy Agreement? ☐ Yes ☐ No	17a. Residence: Number, Street and Apt. No. (e.g., 624 SE 5th St.)	17b. City or Town
17c. County	17d. State or Foreign Country	17e. Zip Code
18. Telephone Number ( )	19. How Long at Current Residence? Years: Months:	
20a. Mother's Mailing Address, if different from Residence: Number, Street and Apt No		
20b. City or Town	20c. State	20d. Zip Code

21. Mother's Education (Check the box that best describes the highest degree or level of school completed at the time of delivery) ☐ 8th grade or less ☐ 9th - 12th grade; no diploma ☐ High school graduate or GED completed ☐ Some college credit, but no degree ☐ Associate's degree (e.g., AA, AS) ☐ Bachelor's degree (e.g., BA, AB, BS) ☐ Master's degree (e.g , MA, MS, MEng, MEd, MSW, MBA) ☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD) ☐ Unknown	22. Mother of Hispanic Origin? (Check the box that best describes whether the mother is Spanish/Hispanic/Latina or check the "No" box if the mother is not Spanish/Hispanic/Latina) ☐ No, not Spanish/Hispanic/Latina ☐ Yes, Mexican, Mexican American, Chicana ☐ Yes, Puerto Rican ☐ Yes, Cuban ☐ Yes, other Spanish/Hispanic/Latina (Specify) _____ ☐ Unknown	23. Mother's Race (Check one or more races to indicate what the mother considers herself to be) ☐ White ☐ Black or African American ☐ American Indian or Alaska Native (Name of the enrolled or principal tribe): _____ ☐ Asian Indian ☐ Filipino ☐ Chinese ☐ Japanese ☐ Vietnamese ☐ Korean ☐ Other Asian (Specify): _____ ☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan ☐ Other Pacific Islander (Specify): _____ ☐ Other (Specify): _____ ☐ Unknown

24. Occupation (Indicate type of work done during last year)	25. Kind of Business/Industry (Do not use Company Name)

Father's/Spouse's Information

*26. Father's/Spouse's Name Before First Marriage/Civil Union (only if married or affidavit of paternity filed) 26a. First 26b. Middle 26c. LAST 26d. Suffix (Sr., Jr., II, III, etc.)	*26. Father's/Spouse's Current Legal Name 26e. First 26f. Middle 26g. LAST 26h. Suffix (Sr., Jr., II, III, etc.)	*27. Date of Birth (MM/DD/YYYY) / / *28. Birthplace (State, Territory, or Foreign Country) 29. Father's/Spouse's Social Security Number

26g. Father's/Spouse's Residence Address: Number & Street			
26h. City or Town	26i. County	26j. State	26k. Zip Code

See other side for more worksheet information

Mother's Worksheet for Child Birth Certificate

continued...

30. Father's/Spouse's Education (Check the box that best describes the highest degree or level of school completed at the time of delivery)
- ☐ 8th grade or less
- ☐ 9th - 12th grade; no diploma
- ☐ High school graduate or GED completed
- ☐ Some college credit, but no degree
- ☐ Associate's degree (e.g., AA, AS)
- ☐ Bachelor's degree (e.g., BA, AB, BS)
- ☐ Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)
- ☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
- ☐ Unknown

31. Father's/Spouse's of Hispanic Origin? (Check the box that best describes whether the father is Spanish/Hispanic/Latino or check the "No" box if the father is not Spanish/Hispanic/Latino)
- ☐ No, not Spanish/Hispanic/Latino
- ☐ Yes, Mexican, Mexican American, Chicano
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other Spanish/Hispanic/Latino (Specify): _____
- ☐ Unknown

32. Father's/Spouse's Race (Check one or more races to indicate what the Father considers himself to be)
- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaska Native (Name of the enrolled or principal tribe): _____
- ☐ Asian Indian
- ☐ Filipino
- ☐ Chinese
- ☐ Japanese
- ☐ Vietnamese
- ☐ Korean
- ☐ Other Asian (Specify): _____
- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander (Specify): _____
- ☐ Other (Specify): _____
- ☐ Unknown

33. Occupation (Indicate type of work done during last year)

34. Kind of Business/Industry (Do not use Company Name)

Mother's Female Partner's Information (Civil Union Only)

***77. Mother's Female Partner's Last Name before first marriage or Civil Union**

77a. First

77b. Middle

77c. LAST

77d. Suffix (Sr.,Jr., II, III, etc.)

***79. Date of Birth (MM/DD/YYYY)** / /

***80. Birthplace (State, Territory, or Foreign Country)**

81. Mother's Female Partner's SSN

***77e. Mother's Female Partner's Current Legal Last Name**

77f. Suffix (Sr.,Jr., II, III, etc.)

78a. Mother's Female Partner's Residence Address: Number & Street

78b. City or Town

78c. County

78d. State

78e. Zip Code

Mother's Statistical Information

35. Mother's Medical Record Number

36. Mother's PRE-pregnancy weight (Pounds) ☐ Unknown

37. Mother's Weight at Delivery (Pounds) ☐ Unknown

38. Mother's Height

Feet: Inches: ☐ Unknown

39. Did Mother get WIC food for herself during pregnancy?

☐ Yes ☐ No ☐ Unknown

40a. Alcohol use during pregnancy?

☐ Yes ☐ No ☐ Unknown

Average number of drinks per week _____

40b. Cigarette Smoking Before and During Pregnancy?

☐ Never smoked, or quit smoking more than 3 months before becoming pregnant

Otherwise: average number of cigarettes or packs per day:

	# of cigarettes		# of packs
3 months before pregnancy	_____	OR	_____
1st three months of pregnancy	_____	OR	_____
2nd three months of pregnancy	_____	OR	_____
Last three months of pregnancy	_____	OR	_____

☐ Unknown

84. I authorize release of birth and immunization information to the New Hampshire immunization registry: ☐ Yes ☐ No

Please note the following as you complete this form:

"According to NH Statute RSA 5-C:14, "Any person shall be guilty of a Class B felony if he wilfully and knowingly makes any false statement in a certificate or wilfully and knowingly supplies false information intending that such information be used in the preparation of any such report, record or certificate."

I, the undersigned, hereby certify that I have read the above cited statute and that the information I have supplied is a true and correct representation of the facts to the best of my knowledge. Additionally, I understand that all information shall be kept confidential and used solely for administrative and statistical purposes and that refusal of a parent to provide a social security number shall not be grounds for refusal to issue a birth certificate.

41. Informant's Signature

(If surname of child is other than mother, father, or combination of both names, then both shall sign)

42. Date

43. Relation to Child
- ☐ Mother
- ☐ Father/Parent
- ☐ Civil Union Partner
- ☐ Other, Specify _____

**Only these items will be displayed on Legal Certificate. However all items are required by law (RSA 5-C).*

State of New Hampshire
Facility Worksheet for Certificate of Live Birth

Mother's Current Legal Last Name

Mother's Medical Record Number

Mother's Statistical Information

44a. Number of Previous Live Births
(Do not include this child)

Number Now Living ____ ☐ None ☐ Unknown

Number Now Dead ____ ☐ None ☐ Unknown

44b. Date of Last Live Birth
(MM/DD/YYYY)
/ /

45a. Number of Other Pregnancy Outcomes
(Spontaneous or induced losses or ectopic pregnancies)

Number of Other Outcomes ____

☐ None ☐ Unknown

45b. Date of Last Other Pregnancy Outcome
(MM/DD/YYYY)
/ /

46a. Date of First Prenatal Care Visit
(MM/DD/YYYY)
/ /
☐ No Prenatal Care

46b. Date of Last Prenatal Care Visit
(MM/DD/YYYY)
/ /

47. Total Number of Prenatal Visits for this Pregnancy (If none, enter '0')

48. Date Last Normal Menses Began
(MM/DD/YYYY)
/ /

49. Was mother transferred to higher level care for maternal medical or fetal indications for delivery?
☐ Yes ☐ No ☐ Unknown
If yes, name of facility mother was transferred from:

50. Principal Source of Payment for this Delivery
☐ Medicaid ☐ Self Pay
☐ NH CHIP ☐ Other Government
☐ Private Insurance ☐ Unknown
☐ Other ____
(Specify Name of Other Source)

Newborn's Statistical Information

51. Newborn Medical Record Number

52a. Birth Weight
lbs: ozs. or grams:

53. Obstetric Estimate of Gestation
(Completed weeks) ____

52b. Head Circumference (in centimeters):

52c. Length (in inches):

54a. Apgar Score at 5 min.
____
☐ Unknown

54b. If score at 5 min. is less than 6, score at 10 min
____
☐ Unknown

55. Plurality – Single, Twin, Triplet, etc
Include all live births and fetal deaths from this pregnancy.
Specify ____

56. If not single birth – Born 1st, 2nd, 3rd, etc. Include all live births and fetal deaths from this pregnancy:
Specify ____

57a. Was infant transferred to another facility within 24 hours of delivery?
☐ Yes ☐ No ☐ Unknown

57b. If yes, name of facility infant was transferred to:

58. Is infant living at the time of report?
☐ Yes ☐ No
☐ Unknown

59. Is infant being breastfed even partially?
☐ Yes ☐ No
☐ Unknown

See other side for more worksheet information

Facility Worksheet for Certificate of Live Birth

continued. .

72. Attendant's Name and Title:
Name
☐ MD ☐ Hospital ADMIN ☐ CNM ☐ Midwife (NHCM)
☐ Father ☐ DO ☐ Other (Specify)_____

Attendant's Address

73. NPI of person delivering the baby:

74. By my signature I certify that this child was born alive at the place, time and date stated.

75. Date Certified (MM/DD/YYYY)
/ /

76. Certifier's Name and Title (Type or Print)
Name
☐ MD ☐ Hospital ADMIN ☐ CNM
☐ Midwife (NHCM) ☐ DO ☐ Other (Specify)_____

Mother's Current Legal Last Name

Mother's Medical Record Number

60. Risk Factors in this Pregnancy
(Check all that apply)
- ☐ Diabetes
  - ☐ Prepregnancy (Diagnosis prior to this pregnancy)
  - ☐ Gestational (Diagnosis in this pregnancy)
- ☐ Hypertension
  - ☐ Prepregnancy (Chronic)
  - ☐ Gestational (PIH, preeclampsia)
  - ☐ Eclampsia
- ☐ Previous preterm births
- ☐ Other previous poor pregnancy outcome (includes perinatal death, small-for-gestational age/intrauterine growth restricted birth)
- ☐ Pregnancy resulted from fertility enhancing drugs
- ☐ Pregnancy resulted from assisted reproductive technology
- ☐ Mother had a previous cesarean delivery?
  If Yes, how many? _____
- ☐ Group B Streptococcus culture positive
- ☐ Vaginal bleeding during this pregnancy prior to the onset of labor
- ☐ None of the above
- ☐ Unknown

61. Infections Present and/or Treated During This Pregnancy
(Check all that apply)
- ☐ Gonorrhea
- ☐ Syphilis
- ☐ Herpes Simplex Virus (HSV)
- ☐ Chlamydia
- ☐ Hepatitis B
- ☐ Hepatitis C
- ☐ Other
  Specify: _____
- ☐ None of the above

62. Method of Delivery
A. Was delivery with forceps attempted but unsuccessful? ☐ Yes ☐ No
B. Was delivery with vacuum extraction attempted but unsuccessful? ☐ Yes ☐ No
C. Fetal presentation at birth
☐ Cephalic ☐ Breech ☐ Other
D. Final route and method of delivery
(Check one)
Vaginal: ☐ Spontaneous ☐ Forceps ☐ Vacuum Or:
Cesarean: ☐
If cesarean, was a trial of labor attempted?
☐ Yes ☐ No
attempted but unsuccessful?
☐ Yes ☐ No

63. Obstetric procedures
(Check all that apply)
- ☐ Cervical cerclage
- ☐ Tocolysis
- ☐ External cephalic version
  - ☐ Successful
  - ☐ Failed
- ☐ None of the above

64. Onset of Labor
(Check all that apply)
- ☐ Premature rupture of the membranes (prolonged, ≥ 12 hr)
- ☐ Precipitous Labor (< 3 hr)
- ☐ Prolonged Labor (≥ 20 hr)
- ☐ None of the above
- ☐ Unknown

65. Characteristics of Labor and Delivery
(Check all that apply)
- ☐ Induction of labor
- ☐ Augmentation of labor
- ☐ Non-vertex presentation
- ☐ Steroids (glucocorticoids) for fetal lung maturation received by the mother prior to delivery
- ☐ Antibiotics received by the mother during labor
- ☐ Clinical chorioamnionitis diagnosed during labor or maternal temperature ≥ 38° C (100.4°F)
- ☐ Moderate/heavy meconium staining of the amniotic fluid
- ☐ Fetal intolerance of labor such that one or more of the following actions was taken: in-utero resuscitative measures, further fetal assessment or operative delivery
- ☐ Epidural or spinal anesthesia during labor
- ☐ None of the above
- ☐ Unknown

66. Maternal Morbidity (complications associated with labor and delivery)
(Check all that apply)
- ☐ Maternal transfusion
- ☐ Third or fourth degree perineal laceration
- ☐ Ruptured uterus
- ☐ Unplanned hysterectomy
- ☐ Admission to intensive care unit
- ☐ Unplanned operating room procedure following delivery
- ☐ None of the above
- ☐ Unknown

67. Abnormal Conditions of the Newborn
(Occurring within 24 hours of Delivery)
(Check all that apply)
- ☐ Assisted ventilation required immediately following delivery
- ☐ Assisted ventilation required for more than six hours
- ☐ NICU admission
- ☐ Newborn given surfactant replacement therapy
- ☐ Antibiotics received by the newborn for suspected neonatal sepsis
- ☐ Seizure or serious neurologic dysfunction
- ☐ Significant birth injury (skeletal fracture(s), peripheral nerve injury, soft tissue or solid organ hemorrhage which requires intervention)
- ☐ None of the above
- ☐ Unknown

68. Congenital Anomalies of the Newborn
(Observed within 24 hours of delivery)
(Check all that apply)
- ☐ Anencephaly
- ☐ Microcephaly
- ☐ Meningomyelocele / Spina bifida
- ☐ Cyanotic congenital heart disease
- ☐ Congenital diaphragmatic hernia
- ☐ Omphalocele
- ☐ Gastroschisis
- ☐ Limb reduction defect (excluding congenital amputation and dwarfing syndromes)
- ☐ Cleft Lip with or without Cleft Palate
- ☐ Cleft Palate alone
- ☐ Down Syndrome
  - ☐ Karyotype confirmed
  - ☐ Karyotype pending
- ☐ Suspected Chromosomal disorder
  - ☐ Karyotype confirmed
  - ☐ Suspected, Karyotype pending
- ☐ Hypospadias
- ☐ None of the above
- ☐ Unknown

ADDITIONAL QUESTIONS ON PAGE 6

(Continue to next page)

State of New Hampshire
Facility Worksheet for Certificate of Live Birth

continued...

Mother's Current Legal Last Name

Mother's Medical Record Number

Prenatal Substance Exposure

82A. Was the infant monitored for effects of in utero substance exposure?

☐ Yes ☐ No

If YES, Type of substance(s):
(check all that apply)

- ☐ opioids
- ☐ stimulants (amphetamines, methamphetamines, other)
- ☐ cocaine
- ☐ cannabis
- ☐ benzodiazepines
- ☐ barbiturates
- ☐ alcohol
- ☐ nicotine
- ☐ bath salts
- ☐ Kratom
- ☐ Other (Specify)_____

B. Was the infant identified as being affected by substance misuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder?

☐ Yes ☐ No

Plan of Safe/Supportive Care

83. Was a Plan of Safe/Supportive Care (POSC) created?

☐ Yes ☐ No

END

STATE OF NEW HAMPSHIRE
LEGITIMATION OF A CHILD
RSA 5-C:22

A confidential report to the town or city clerk relative to a legitimation.

TYPE OR PRINT LEGIBLY IN BLACK INK. THIS IS A PERMANENT RECORD.

PART I
To identify a birth record.
Items 1-5 shall be taken from a certified copy of the child's birth record.

1. NAME OF CHILD AS ORIGINALLY RECORDED

2. CHILD'S DATE OF BIRTH (Month) (Day) (Year)

3. CHILD'S PLACE OF BIRTH

4. FULL NAME OF NATURAL MOTHER PRIOR TO FIRST MARRIAGE/CIVIL UNION

5. MOTHER'S TOWN OF RESIDENCE

6. MOTHER'S SOCIAL SECURITY NUMBER

PART II
Name of child by legitimation and facts relative to the natural father.

7. FULL NAME OF CHILD BY LEGITIMATION

8. FULL NAME OF NATURAL FATHER PRIOR TO FIRST MARRIAGE/CIVIL UNION

9. FATHER'S DATE OF BIRTH

10. FATHER'S STATE OF BIRTH

11. FATHER'S SOCIAL SECURITY NUMBER

PART III
Affidavit

We, _____ and _____
Print Current Full Name of Father *Print Current Full Name of Mother*

hereby acknowledge that we are the natural parents of the child described above and hereby submit a certified copy of our marriage certificate as proof of our marriage. We further state that we have recognized said child as our own and desire that he henceforth be known as:

_____
First, Middle and Last Name of Child by Legitimation

PART IV
Notice regarding falsification of information.

PLEASE NOTE THE FOLLOWING AS YOU COMPLETE THIS FORM:
In accordance with New Hampshire law, RSA 5-C.14. "Any person shall be guilty of a Class B felony if he willfully and knowingly makes any false statement in a certificate, record, or report required to be filed by statute or in an application for an amendment thereof or in any application for a certified copy of a vital record, or who willfully and knowingly supplies false information intending that such information be used in the preparation of any such report, record, or certificate, or amendment thereof;"

We, the undersigned, hereby certify that we have read the above cited law and that the above information is a true and correct representation of facts to the best of our knowledge.

PARENTS SIGN

Signature of Father _____ Signature of Mother _____

12. PARENTS' CURRENT MAILING ADDRESS: (STREET NUMBER AND NAME/RFD NUMBER)

13. CITY/TOWN

14 STATE

15 ZIP CODE

PART V
Notary or Justice of the Peace

SEAL
(If applicable)

16. SUBSCRIBED AND SWORN TO BEFORE ME IN THE CITY/TOWN OF:

17. STATE OF:

18 COUNTY OF

19. SIGNATURE OF NOTARY OR JUSTICE OF THE PEACE

20. SUBSCRIBED AND SWORN TO ME ON:

21 DATE COMMISSION EXPIRES

PART VI
To be completed by the Town/City Clerk of the place of the child's birth.

22. CERTIFIED CERTIFICATE OF MARRIAGE PRESENTED
YES ☐ NO* ☐ **If "NO" is checked, can not process without prior approval from the State Registrar.*

23. DATE RECEIVED BY CLERK

24. DATE NEW RECORD MADE

25. CLERK OF THE TOWN/CITY OF:

26 SIGNATURE OF TOWN/CITY CLERK

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
1-4	Date of Birth (Infant)--Year	4	IDOB_YR		4 digit year; current data year
5-6	State of Birth		BSTATE		NCHS Part 8A (from FIPS table 5-2)
7-12	Certificate Number		FILENO		left 0 filled; 000001-999999
13	Void flag		VOID	0	default; valid record
				1	VOID record
14-25	Auxiliary State file number		AUXNO		000000000001-999999999999; blank
26-29	Time of Birth	2	TB		0000-2359, 9999
30	Sex	3	ISEX	M	Male
				F	Female
				N	Not Yet Determined
31-32	Date of Birth (Infant)--Month	4	IDOB_MO		01-12
33-34	Date of Birth (Infant)--Day	4	IDOB_DY		01-31 (based on month)
35-37	County of Birth	7	CNTYO		NCHS Part 8A (from FIPS table 6-4)
38	Place Where Birth Occurred	26	BPLACE	1	Hospital
				2	Freestanding Birth Center
				3	Home (Intended)
				4	Home (Not Intended)
				5	Home (Unknown if Intended)
				6	Clinic/Doctor's Office
				7	Other
				9	Unknown
39-50	Facility ID (NPI) - if available	17	FNPI		
51-54	Facility ID (State-Assigned)		SFN		
55-58	Date of Birth (Mother)--Year	8b	MDOB_YR		4 digit year; < year of birth of child, 9999
59-60	Date of Birth (Mother)--Month	8b	MDOB_MO		01-12, 99
61-62	Date of Birth (Mother)--Day	8b	MDOB_DY		01-31 (based on month), 99
63	Date of Birth (Mother)--Edit Flag		MAGE_BYPASS	0	Edit Passed
				1	Data Queried
64-65	Birthplace--State	8d	BPLACEC_ST_TER		NCHS Part 8A (from FIPS table 5-2)
66-67	Birthplace--Country	8d	BPLACEC_CNT		NCHS Part 8A (from FIPS table 10-4)
68-72	Residence of Mother--City	9c	CITYC		NCHS Part 8A (from FIPS table 55-3)
73-75	Residence of Mother--County	9b	COUNTYC		NCHS Part 8A (from FIPS table 6-4)
76-77	Residence of Mother--State	9a	STATEC		NCHS Part 8A (from FIPS table 5-2)
78-79	Residence of Mother--Country	9a	COUNTRYC		NCHS Part 8A (from FIPS table 10-4)
80	Residence of Mother--Inside City Limits	9g	LIMITS	Y	Yes
				N	No
				U	Unknown
81-84	Date of Birth (Father)--Year	10b	FDOB_YR		4 digit year; < year of birth of child, 9999
85-86	Date of Birth (Father)--Month	10b	FDOB_MO		01-12, 99
87-88	Date of Birth (Father)--Day	10b	FDOB_DY		01-31 (based on month), 99
89	Date of Birth (Father)--Edit Flag		FAGE_BYPASS	0	Edit Passed
				1	Data Queried
90	Mother Married?--Ever		MARE	Y	Yes
				N	No
				U	Unknown
91	Mother Married?-- At Conception, at Birth or any Time in Between	15	MARN	Y	Yes
				N	No
				U	Unknown
92	Mother Married?--Acknowledgement of Paternity Signed		ACKN	Y	Yes
				N	No
				X	Not Applicable

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect
					changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
				U	Unknown
93	Mother's Education	20	MEDUC	1	8th grade or less
				2	9th through 12th grade; no diploma
				3	High School Graduate or GED Completed
				4	Some college credit, but no degree
				5	Associate Degree
				6	Bachelor's Degree
				7	Master's Degree
				8	Doctorate Degree or Professional Degree
				9	Unknown
94	Mother's Education--Edit Flag		MEDUC_BYPASS	0	Edit Passed
				1	Edit Failed, Data Queried and Verified
				2	Edit Failed, Data Queried, but not Verified
95	Mother of Hispanic Origin?--Mexican	21	METHNIC1	N	No, Not Mexican
				H	Yes, Mexican
				U	Unknown
96	Mother of Hispanic Origin?--Puerto Rican	21	METHNIC2	N	No, Not Puerto Rican
				H	Yes, Puerto Rican
				U	Unknown
97	Mother of Hispanic Origin?--Cuban	21	METHNIC3	N	No, Not Cuban
				H	Yes, Cuban
				U	Unknown
98	Mother of Hispanic Origin?--Other	21	METHNIC4	N	No, Not other Hispanic
				H	Yes, other Hispanic
				U	Unknown
99-118	Mother of Hispanic Origin?--Other Literal	21	METHNIC5		literal; blank
119	Mother's Race--White	22	MRACE1	Y	Yes, box for race checked
				N	No, box for race not checked
120	Mother's Race--Black or African American	22	MRACE2		Y, N
121	Mother's Race--American Indian or Alaska Native	22	MRACE3		Y, N
122	Mother's Race--Asian Indian	22	MRACE4		Y, N
123	Mother's Race--Chinese	22	MRACE5		Y, N
124	Mother's Race--Filipino	22	MRACE6		Y, N
125	Mother's Race--Japanese	22	MRACE7		Y, N
126	Mother's Race--Korean	22	MRACE8		Y, N
127	Mother's Race--Vietnamese	22	MRACE9		Y, N
128	Mother's Race--Other Asian	22	MRACE10		Y, N
129	Mother's Race--Native Hawaiian	22	MRACE11		Y, N
130	Mother's Race--Guamanian or Chamorro	22	MRACE12		Y, N
131	Mother's Race--Samoan	22	MRACE13		Y, N
132	Mother's Race--Other Pacific Islander	22	MRACE14		Y, N
133	Mother's Race--Other	22	MRACE15		Y, N
134-163	Mother's Race--First American Indian or Alaska Native Literal	22	MRACE16		literal; blank
164-193	Mother's Race--Second American Indian or Alaska Native Literal	22	MRACE17		literal; blank
194-223	Mother's Race--First Other Asian Literal	22	MRACE18		literal; blank
224-253	Mother's Race--Second Other Asian Literal	22	MRACE19		literal; blank
254-283	Mother's Race--First Other Pacific Islander Literal	22	MRACE20		literal; blank
284-313	Mother's Race--Second Other Pacific Islander Literal	22	MRACE21		literal; blank
314-343	Mother's Race--First Other Literal	22	MRACE22		literal; blank
344-373	Mother's Race--Second Other Literal	22	MRACE23		literal; blank
374-376			MRACE1E		Appendix E
377-379			MRACE2E		Appendix E
380-382			MRACE3E		Appendix E
383-385			MRACE4E		Appendix E

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
386-388	Race Tabulation Variables		MRACE5E		Appendix E
389-391			MRACE6E		Appendix E
392-394			MRACE7E		Appendix E
395-397			MRACE8E		Appendix E
398-400			MRACE16C		Appendix E
401-403			MRACE17C		Appendix E
404-406			MRACE18C		Appendix E
407-409			MRACE19C		Appendix E
410-412			MRACE20C		Appendix E
413-415			MRACE21C		Appendix E
416-418			MRACE22C		Appendix E
419-421			MRACE23C		Appendix E
422	Father's Education	23	FEDUC	1	8th grade or less
				2	9th through 12th grade; no diploma
				3	High School Graduate or GED Completed
				4	Some college credit, but no degree
				5	Associate Degree
				6	Bachelor's Degree
				7	Master's Degree
				8	Doctorate Degree or Professional Degree
				9	Unknown
423	Father's Education--Edit Flag		FEDUC_BYPASS	0	Edit Passed
				1	Edit Failed, Data Queried and Verified
				2	Edit Failed, Data Queried, but not Verified
424	Father of Hispanic Origin?--Mexican	24	FETHNIC1	N	No, Not Mexican
				H	Yes, Mexican
				U	Unknown
425	Father of Hispanic Origin?--Puerto Rican	24	FETHNIC2	N	No, Not Puerto Rican
				H	Yes, Puerto Rican
				U	Unknown
426	Father of Hispanic Origin?--Cuban	24	FETHNIC3	N	No, Not Cuban
				H	Yes, Cuban
				U	Unknown
427	Father of Hispanic Origin?--Other	24	FETHNIC4	N	No, Not other Hispanic
				H	Yes, other Hispanic
				U	Unknown
428-447	Father of Hispanic Origin?--Other Literal	24	FETHNIC5		literal; blank
448	Father's Race--White	25	FRACE1	Y	Yes, box for race checked
				N	No, box for race not checked
449	Father's Race--Black or African American	25	FRACE2		Y, N
450	Father's Race--American Indian or Alaska Native	25	FRACE3		Y, N
451	Father's Race--Asian Indian	25	FRACE4		Y, N
452	Father's Race--Chinese	25	FRACE5		Y, N
453	Father's Race--Filipino	25	FRACE6		Y, N
454	Father's Race--Japanese	25	FRACE7		Y, N
455	Father's Race--Korean	25	FRACE8		Y, N
456	Father's Race--Vietnamese	25	FRACE9		Y, N
457	Father's Race--Other Asian	25	FRACE10		Y, N
458	Father's Race--Native Hawaiian	25	FRACE11		Y, N
459	Father's Race--Guamanian or Chamorro	25	FRACE12		Y, N
460	Father's Race--Samoan	25	FRACE13		Y, N
461	Father's Race--Other Pacific Islander	25	FRACE14		Y, N
462	Father's Race--Other	25	FRACE15		Y, N
463-492	Father's Race--First American Indian or Alaska Native Literal	25	FRACE16		literal; blank

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
493-522	Father's Race--Second American Indian or Alaska Native Literal	25	FRACE17		literal; blank
523-552	Father's Race--First Other Asian Literal	25	FRACE18		literal; blank
553-582	Father's Race--Second Other Asian Literal	25	FRACE19		literal; blank
583-612	Father's Race--First Other Pacific Islander Literal	25	FRACE20		literal; blank
613-642	Father's Race--Second Other Pacific Islander Literal	25	FRACE21		literal; blank
643-672	Father's Race--First Other Literal	25	FRACE22		literal; blank
673-702	Father's Race--Second Other Literal	25	FRACE23		literal; blank
703-705	Race Tabulation Variables		FRACE1E		Appendix E
706-708			FRACE2E		Appendix E
709-711			FRACE3E		Appendix E
712-714			FRACE4E		Appendix E
715-717			FRACE5E		Appendix E
718-720			FRACE6E		Appendix E
721-723			FRACE7E		Appendix E
724-726			FRACE8E		Appendix E
727-729			FRACE16C		Appendix E
730-732			FRACE17C		Appendix E
733-735			FRACE18C		Appendix E
736-738			FRACE19C		Appendix E
739-741			FRACE20C		Appendix E
742-744			FRACE21C		Appendix E
745-747			FRACE22C		Appendix E
748-750			FRACE23C		Appendix E
751	Attendant	27	ATTEND	1	MD
				2	DO
				3	CNM/CM
				4	Other Midwife
				5	Other (Specify)
				9	Unknown
752	Mother Transferred?	28	TRAN	Y	Yes
				N	No
				U	Unknown
753-754	Date of First Prenatal Care Visit--Month	29a	DOFP_MO		01-12, 88, 99
755-756	Date of First Prenatal Care Visit--Day	29a	DOFP_DY		01-31 (based on month), 88, 99
757-760	Date of First Prenatal Care Visit--Year	29a	DOFP_YR		4 digit year; year of child's birth or
					(year of child's birth - 1), 8888, 9999
761-762	Date of Last Prenatal Care Visit--Month	29b	DOLP_MO		01-12, 88, 99
763-764	Date of Last Prenatal Care Visit--Day	29b	DOLP_DY		01-31 (based on month), 88, 99
765-768	Date of Last Prenatal Care Visit--Year	29b	DOLP_YR		4 digit year; year of child's birth or
					(year of child's birth - 1), 8888, 9999
769-770	Total Number of Prenatal Care Visits	30	NPREV		00-98, 99
771	Total Number of Prenatal Care Visits--Edit Flag		NPREV_BYPASS	0	Edit Passed
				1	Edit Failed, Number Verified
				2	Edit Failed, Number not Verified
772	Mother's Height--Feet	31	HFT		1-8, 9
773-774	Mother's Height--Inches	31	HIN		00-11, 99
775	Mother's Height--Edit Flag		HGT_BYPASS	0	Edit Passed
				1	Edit Failed, Verified
				2	Edit Failed, not Verified
776-778	Mother's Prepregnancy Weight	32	PWGT		050-400, 999
779	Mother's Prepregnancy Weight--Edit Flag		PWGT_BYPASS	0	Edit Passed
				1	Edit Failed, Verified
				2	Edit Failed, not Verified
780-782	Mother's Weight at Delivery	33	DWGT		050-450, 999

	200X NCHS Natality File Description				***** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process**
Position(s)	***Variable***	***Item#***	***Name***		***Code structure description***
783	Mother's Weight at Delivery--Edit Flag		DWGT_BYPASS	0	Edit Passed
				1	Edit Failed, Verified
				2	Edit Failed, not Verified
784	Did Mother get WIC Food for Herself?	34	WIC	Y	Yes
				N	No
				U	Unknown
785-786	Previous Live Births Now Living	35a	PLBL		00-30, 99
787-788	Previous Live Births Now Dead	35b	PLBD		00-30, 99
789-790	Previous Other Pregnancy Outcomes	36a	POPO		00-30, 99
791-792	Date of Last Live Birth--Month	35c	MLLB		01-12, 88, 99
793-796	Date of Last Live Birth--Year	35c	YLLB		4 digit year;
					(year of mother's birth + 10) through
					year of child's birth, 8888, 9999
797-798	Date of Last Other Pregnancy Outcome--Month	36b	MOPO		01-12, 88, 99
799-802	Date of Last Other Pregnancy Outcome--Year	36b	YOPO		4 digit year;
					(year of mother's birth + 10) through
					year of child's birth, 8888, 9999
803-804	Number of Cigarettes Smoked in 3 months prior to Pregnancy	37	CIGPN		00-98, 99
805-806	Number of Cigarettes Smoked in 1st 3 months	37	CIGFN		00-98, 99
807-808	Number of Cigarettes Smoked in 2nd 3 months	37	CIGSN		00-98, 99
809-810	Number of Cigarettes Smoked in ***third trimester (RECOMMENDED CHANGE EFFECTIVE 2004)***	37	CIGLN		00-98, 99
811	Principal source of Payment for this delivery	38	PAY	1	Medicaid
				2	Private Insurance
				3	Self-pay
				4	Indian Health Service
				5	CHAMPUS/TRICARE
				6	Other Government (Fed, State, Local)
				8	Other
				9	Unknown
812-815	Date Last Normal Menses Began--Year	39	DLMP_YR		4 digit year; year of child's birth or
					(year of child's birth - 1) or
					(year of child's birth - 2), 9999
816-817	Date Last Normal Menses Began--Month	39	DLMP_MO		01-12, 99
818-819	Date Last Normal Menses Began--Day	39	DLMP_DY		01-31 (based on month), 99
820	Risk Factors--Prepregnancy Diabetes	41	PDIAB	Y	Yes
	(NOTE: SEE INSERTED NOTES FOR RISK FACTOR LOCATIONS 820-831 AND 924-926 TO REFLECT			N	No
	RECOMMENDED CHANGES EFFECTIVE 2004)			U	Unknown
821	Risk Factors--Gestational Diabetes	41	GDIAB		Y, N, U
822	Risk Factors--Hypertension Prepregnancy	41	PHYPE		Y, N, U
823	Risk Factors--Hypertension Gestational ***(SEE ADDITIONAL HYPERTENSION CATEGORY IN LOCATION 924)***	41	GHYPE		Y, N, U
824	Risk Factors--Previous Preterm Births	41	PPB		Y, N, U
825	Risk Factors--Poor Pregnancy Outcomes	41	PPO		Y, N, U
826	Risk Factors--Vaginal Bleeding ***(RECOMMENDED DELETION EFFECTIVE 2004)***	41	VB		Y, N, U ***(BLANK IF DELETED)***
827	Risk Factors--Infertility Treatment ***(SEE ADDITIONAL SUBCATEGORIES IN LOCATIONS 925-926)***	41	INFT		Y, N, U
828	Risk Factors--Previous Cesarean	41	PCES		Y, N, U
829-830	Risk Factors--Number Previous Cesareans	41	NPCES		00-30, 99
831	Risk Factors--Number Previous Cesareans--Edit Flag		NPCES_BYPASS	0	Edit Passed
				1	Edit Failed, Verified
832	Infections Present--Gonorrhea	42	GON	Y	Yes
				N	No
				U	Unknown
833	Infections Present--Syphillis	42	SYPH		Y, N, U
834	Infections Present--Herpes Simplex (HSV) ***(RECOMMENDED DELETION EFFECTIVE 2004)***	42	HSV		Y, N, U ***(BLANK IF DELETED)***
835	Infections Present--Chlamydia	42	CHAM		Y, N, U

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
836	Infections Present--Hepatitis B	42	HEPB		Y, N, U
837	Infections Present--Hepatitis C	42	HEPC		Y, N, U
838	Obstetric Procedures--Cervical Cerclage	43	CERV	Y	Yes
				N	No
				U	Unknown
839	Obstetric Procedures--Tocolysis	43	TOC		Y, N, U
840	Obstetric Procedures--Successful External Cephalic Version	43	ECVS		Y, N, U
841	Obstetric Procedures--Failed External Cephalic Version	43	ECVF		Y, N, U
842	Onset of Labor--Premature Rupture of Membranes	44	PROM	Y	Yes
				N	No
				U	Unknown
843	Onset of Labor--Precipitous Labor	44	PRIC		Y, N, U
844	Onset of Labor--Prolonged Labor	44	PROL		Y, N, U
845	Characteristics of Labor & Delivery--Induction of Labor	45	INDL	Y	Yes
				N	No
				U	Unknown
846	Characteristics of Labor & Delivery--Augmentation of Labor	45	AUGL		Y, N, U
847	Characteristics of Labor & Delivery--Non-vertex Presentation	45	NVPR		Y, N, U
848	Characteristics of Labor & Delivery--Steroids	45	STER		Y, N, U
849	Characteristics of Labor & Delivery--Antibiotics	45	ANTB		Y, N, U
850	Characteristics of Labor & Delivery--Chorioamnionitis	45	CHOR		Y, N, U
851	Characteristics of Labor & Delivery--Meconium Staining	45	MECS		Y, N, U
852	Characteristics of Labor & Delivery--Fetal Intolerance	45	FINT		Y, N, U
853	Characteristics of Labor & Delivery--Anesthesia	45	ESAN		Y, N, U
854	Method of Delivery--Attempted Forceps	46a	ATTF	Y	Yes
				N	No
				U	Unknown
855	Method of Delivery--Attempted Vacuum	46b	ATTV	Y	Yes
				N	No
				U	Unknown
856	Method of Delivery--Fetal Presentation	46c	PRES	1	Cephalic
				2	Breech
				3	Other
				9	Unknown
857	Method of Delivery--Route and Method of Delivery	46d	ROUT	1	Spontaneous
				2	Forceps
				3	Vacuum
				4	Cesarean
				9	Unknown
858	Method of Delivery--Trial of Labor Attempted	46d	TLAB	Y	Yes
				N	No
				X	Not Applicable
				U	Unknown
859	Maternal Morbidity--Maternal Transfusion	47	MTR	Y	Yes
				N	No
				U	Unknown
860	Maternal Morbidity--Perineal Laceration	47	PLAC		Y, N, U
861	Maternal Morbidity--Ruptured Uterus	47	RUT		Y, N, U
862	Maternal Morbidity--Unplanned Hysterectomy	47	UHYS		Y, N, U
863	Maternal Morbidity--Admit to Intensive Care	47	AINT		Y, N, U
864	Maternal Morbidity--Unplanned Operation	47	UOPR		Y, N, U
865-868	Birthweight	49	BWG		0000-9999
869	Birthweight--Edit Flag		BW_BYPASS	0	Off
				1	Queried data correct, out of range

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
				2	Queried, failed birthweight/gestation edit
870-871	Obstetric Estimation of Gestation	50	OWGEST		00-98, 99
872	Obstetric Estimation of Gestation–Edit Flag		OWGEST_BYPASS	0	Off
				1	Queried data correct, out of range
873-874	Apgar Score at 5 Minutes	51	APGAR5		00-10, 99
875-876	Apgar Score at 10 Minutes	51	APGAR10		00-10, 88, 99
877-878	Plurality	52	PLUR		01-16, 99
879-880	Set Order	53	SORD		01-16, 99
881-882	Number of Live Born		LIVEB		01-16, 99
883-888	Matching Number		MATCH		left 0 filled; 000001-999999
889	Plurality–Edit Flag		PLUR_BYPASS	0	OFF
				1	Queried, and Correct
				2	Plurality/Set Order Queried, Inconsistent
890	Abnormal Conditions of the Newborn–Assisted Ventilation	54	AVEN1	Y	Yes
				N	No
				U	Unknown
891	Abnormal Conditions of the Newborn–Assisted Ventilation > 6 hours	54	AVEN6		Y, N, U
892	Abnormal Conditions of the Newborn–Admission to NICU	54	NICU		Y, N, U
893	Abnormal Conditions of the Newborn–Surfactant	54	SURF		Y, N, U
894	Abnormal Conditions of the Newborn–Antibiotics	54	ANTI		Y, N, U
895	Abnormal Conditions of the Newborn–Seizures	54	SEIZ		Y, N, U
896	Abnormal Conditions of the Newborn–Birth Injury	54	BINJ		Y, N, U
897	Congenital Anomalies of the Newborn–Anencephaly	55	ANEN	Y	Yes
				N	No
				U	Unknown
898	Congenital Anomalies of the Newborn–Meningomyelocele/Spina Bifida	55	MNSB		Y, N, U
899	Congenital Anomalies of the Newborn–Cyanotic congenital heart disease	55	CCHD		Y, N, U
900	Congenital Anomalies of the Newborn–Congenital diaphragmatic hernia	55	CDH		Y, N, U
901	Congenital Anomalies of the Newborn–Omphalocele	55	OMPH		Y, N, U
902	Congenital Anomalies of the Newborn–Gastroschisis	55	GAST		Y, N, U
903	Congenital Anomalies of the Newborn–Limb Reduction Defect	55	LIMB		Y, N, U
904	Congenital Anomalies of the Newborn–Cleft Lip with or without Cleft Palate	55	CL		Y, N, U
905	Congenital Anomalies of the Newborn–Cleft Palate Alone	55	CP		Y, N, U
906	Congenital Anomalies of the Newborn–Down Syndrome	55	DOWT	C	Confirmed
				P	Pending
				N	No
				U	Unknown
907	Congenital Anomalies of the Newborn–Suspected Chromosomal disorder	55	CDIT	C	Confirmed
				P	Pending
				N	No
				U	Unknown
908	Congenital Anomalies of the Newborn–Hypospadias	55	HYPO	Y	Yes
				N	No
				U	Unknown
909	Was Infant Transferred Within 24 Hours of Delivery?	56	ITRAN	Y	Yes
				N	No
				U	Unknown
910	Is Infant Living at Time of Report?	57	ILIV	Y	Yes
				N	No
				U	Infant Transferred, Status Unknown
911	Is Infant Being Breastfed ***at discharge***? ***(RECOMMENDED CHANGE EFFECTIVE 2004)***	58	BFED	Y	Yes
				N	No
				U	Unknown
912-915	NCHS USE ONLY: Receipt date -- Year		R_YR		>=year of birth of child

	200X NCHS Natality File Description				*** 01/13/04*** updates in BOLD to reflect changes from HHS clearance process
Position(s)	*Variable*	*Item#*	*Name*		*Code structure description*
916-917	NCHS USE ONLY: Receipt date -- Month		R_MO		01-12
918-919	NCHS USE ONLY: Receipt date -- Day		R_DY		01-31 (based on month)
920-921	Mother's Reported Age		MAGER		00-98, 99
922-923	Father's Reported Age		FAGER		00-98, 99
924	*Risk Factors–Hypertension Eclampsia (RECOMMENDED ADDITION EFFECTIVE 2004)*	*41*	*EHYPE*		*Y, N, U (BLANK IF NOT ADDED)*
925	*Risk Factors–Infertility: Fertility Enhancing Drugs (RECOMMENDED ADDITION EFFECTIVE 2004)*	*41*	*INFT_DRG*	*Y*	*Yes (BLANK IF NOT ADDED)*
				N	*No*
				X	*Not Applicable*
				U	*Unknown*
926	*Risk Factors–Infertility: Asst. Rep. Technology (RECOMMENDED ADDITION EFFECTIVE 2004)*	*41*	*INFT_ART*		*Y, N, X, U (BLANK IF NOT ADDED)*
927-1000	FILLER				BLANK
	TOTAL BYTES REQUIRED 1000				

Lori Weaver
Acting Commissioner

Patricia Tilley
Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

BUREAU OF PUBLIC HEALTH PROTECTION

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4524 1-800-852-3345 Ext. 4524
Fax: 603-271-8705 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

Testimony for SB105, relative to information collected by the division of vital records administration as part of the live birth worksheet.
Senate Finance Committee
State House, Room 100
Wednesday, March 15, 2023

Dear Senator Gray and Members of the Committee,

In addition to a Fiscal Note Worksheet submitted on March 7, 2023, the New Hampshire Department of Health and Human Services, Division of Public Health Services ("Department"), through this testimony, is providing additional information relative to SB105, *relative to information collected by the division of vital records administration as part of the live birth worksheet.* **The Department opposes this bill because of the potential cost to New Hampshire residents from risks to infant and maternal health and inability for the Department to provide efficient and effective services such as child protection, child support, TANF, Medicaid and other critical supports without access to the full birth record. Complete birth data ensures that these systems work as intended and there is no fraud or abuse.** The Department would also like to thank the sponsor of this bill for their interest and willingness to discuss the impact and potential solutions to reach shared policy goals. However, as the Department continues to research this issue, SB105 as passed and its potential amendments each limit access in different ways that will create significant financial and policy barriers.

New Hampshire Chapter Law 5-C requires the Secretary of State, Division of Vital Records Administration (DVRA) to complete birth certificates for all births. Federal law under 42 U.S.C. § 242k, Section 306(h) of the Public Health Service Act also mandates uniform collection and publication of births and other vital statistics data. New Hampshire Chapter Law 5-C:4 states that the Department of Health and Human Services shall have access to Vital Records in accordance with the provisions of RSA 126:24-c. RSA 126:24-c states that the Department shall have a direct and tangible interest in Vital Records data including personal identifiers. The Secretary of State shall provide continuous electronic access to the Department of the entire contents of the data files on a 24-hour, 7-day per week basis. **The Department uses this data with role-based access under strict data governance** procedures. Individuals in the Department are limited to see only the portions of the record that are applicable to their specific function.

SB 105 presents three broad areas of concern that have significant health, financial and statutory implications.

I. Activities the Department will no longer be able to do that would put public health at risk and would open the Department up for potential fraud.
II. Existing statutes that are in conflict with proposed legislation that would need to be changed.
III. Federal funds the Department and DVRA would lose for programs and data system modernization because New Hampshire would not have complete birth data.

Without complete birth data that includes identifiers and health information, the Department will no longer be able to do the following:

Department Activities and Responsibilities

Division of Public Health Services identifiers & health info	**Newborn Screening Program**- the Department will no longer be able to match newborn screening data received daily with vital records to ensure every infant is screened (if parents chose) and followed up with appropriately for life-saving care and treatment. identifiers & health info **Birth Conditions Program**- the department will no longer be able to cross match data to ensure infants with a reportable birth condition are screened and provided appropriate life-saving care and treatment. identifiers & health info **Maternal Mortality Review**- the Department will no longer have access to vital records data to verify death certificate data, identify and assess cause of death, and support preventative programs and education as a result of the review. The infant birth data is required to appropriately link to maternal deaths. identifiers & health info **Identification of emerging or known infectious threats during pregnancy** among pregnant people and their exposed infants including conditions such as Hepatitis C, Syphilis, and Zika that require timely identification to prevent significant health outcomes to the infant. identifiers & health info **Data Analysis**- Without mother's residence address or town/city, the Department will not be able to release health statistics information by sub-state geographic areas (county, county with Manchester and Nashua, public health regions, census track). All the sub-state geographic areas are compiled or grouped by political town not zip-code. **The Department would no longer have statistically accurate data regarding births and birth outcomes available to the public.**
Division of Economic Supports name & identifiers name & identifiers	**Child Support Services** - Access to vital records by Child Support Services is required by the Social Security Act, Title IV-D. Without access, the Department would not be able to establish paternity for children (or verify if it's been established) nor establish a legal order for child and medical support. The Department would no longer be able to assist in the investigation to locate parents or other legally liable people failing to pay child support through matching the vital records for identifiable birth information. Eligibility would be dependent on whatever information is voluntarily given to the state. **Integrated Eligibility (New HEIGHTS / NH Easy) Services** - The Department would no longer be able to independently verify citizenship or birth to aid in the eligibility determinations for public assistance programs which may result in fraud, waste, abuse and potential denials of services for TANF, SNAP and Medicaid.

	Without access to complete Vital Records new quality assurance methods and data systems would need to be developed to prevent potential fraud and waste.
Medicaid	The Department would no longer be able to utilize the identifiable vital records data to create a linked data set utilizing the birth records in support of **Medicaid fraud prevention**, or use birth data for analytics and program planning and implementation and evaluation.
Division for Children Youth and Families	DCYF accesses this data for ~~**international**~~ **adoptions**, which is a requirement of the Annual Progress and Services Report (APSR) for ACF. DCYF is currently seeking additional access to vital statistics birth and death data for matching child fatalities and causes of death. This information may assist in identifying preventative measures to decrease child maltreatment and fatalities. DCYF accesses vital statistics data to help **determine eligibility for financial programs** which help to provide fiscal support for services needed by children and families. DCYF is required through CAPTA/CARA to provide aggregate data on the number of infants born with substance exposure. Current **New Hampshire statute requires DPHS to gather that data from the birth record and then Public Health sends the aggregate data to DCYF**. This ensures privacy for individuals for whom there is no concern of abuse or neglect. Without identifiers, health care providers would likely need to send information with identifying information directly to DCYF. **This would be a loss of existing protections for privacy.**

Potential Federal and State Implications

The U.S. Census Bureau produces estimates of total resident population for all areas of general-purpose government on an annual basis. The sub-county areas consist of both incorporated places (such as cities, boroughs, and villages) and minor civil divisions (such as towns and townships). **Birth data with demographic characteristics is one of the important data sources used to calculate population estimates**. This data is provided to the US Census by the National Center for Health Statistics that receives this data from each state, including New Hampshire. These estimates have significant impact to local, county and state planning.

Additionally, the Department understands that some of the information that SB105 proposes to no longer collect or share is needed by the Social Security Administration (SSA) in order to issue a social security number for a newborn including the child's name, mailing address, mother's name, father's name, mother's Social Security Number and father's Social Security Number. This information is currently collected as part of the birth registration process as a convenience for parents, and the information is sent directly to the SSA by the state. If New Hampshire no longer collects or shares this information, parents will need to contact the SSA and apply for SSNs for their newborns on their own rather than having it done for them.

New Hampshire Statutes

If SB105 were enacted, several New Hampshire statutes would also need to be adjusted. Because access to Vital Records is used throughout the Department and other State Agencies, this may not be a complete list.

- **126:24-c Access to Information From Vital Records for Public Health Purposes.** The department shall have a direct and tangible interest in vital records data including personal identifiers. The secretary of state shall provide continuous electronic access to the department of the entire contents of the data files on a 24-hour, 7-day per week basis.
- **5-C:4 Registrar of Vital Records; Privacy; Duties.** – In collecting information, prime consideration shall be given to the protection of the privacy of the individuals about whom information is given. In accordance with the provisions of this chapter, the secretary of state shall ensure that, when information is collected, the minimum of data shall be collected to accomplish a specific purpose, that no information shall be available to unauthorized personnel, that only the minimum be made available to authorized personnel, and that no information that could possibly adversely affect an identified individual be made public. **The department of health and human services shall have access to vital records information in accordance with the provisions of RSA 126:24-c.** The New Hampshire retirement system shall have access to a limited data set of vital records information in accordance with the provisions of RSA 100-A:14, XVI. The department of corrections shall have access to a limited set of vital records information in accordance with the provisions of RSA 21-H:8, XI-c.
- **5-C:31 Notice of Adoption.** –VIII. The probate court information, including the date of the adoption decree; the name, county and state of the court and the name of the judge or justice presiding; the volume, page, and record number of the probate court filing; the signature and seal of the court and date signed; and the name of the city or town of birth and the date the report was sent by the probate court to the clerk of the town or city of birth occurrence, the department of health and human services, and the division
- **5-C:36 Birth Record of a Foundling.** – The department of health and human services shall record the following information for a "foundling," which shall mean an infant of unknown parentage: the name given to the child, if available; the date and place of filing; the child's sex; the approximate birth date of the child; the signature and title of the custodian; the name and address of the person or institution with whom the child has been placed for care by the department of health and human services; other available data regarding the physical condition of the child, as determined by approximation, in accordance with RSA 5-C:19; the notation "foundling;" the city or town where the child was found, which shall be entered as the place of birth; and parentage data, which shall be shown as "unknown."

Financial Implications

As the Department was not contacted by the LBA to provide fiscal analysis on the bill the following information was not available to share with the ED/A policy committee at the hearing on February 1, 2023. Subsequently, the Department contacted the LBA to request we be able to provide fiscal analysis. A fiscal note was submitted to the LBA on March 7, 2023. The fiscal analysis included the potential loss of the following core public health grants from the Centers for Disease Control and Prevention (CDC) and the US Department of Health and Human Services, Health Resources and Services Administration (HRSA) and Administration for Children Youth and Families (ACYF):

- HRSA MCH/Title V Block grant $1,981,378 (annual)
- CDC Pregnancy Risk Assessment Monitoring System $160,020 (annual)
- CDC Preventing Maternal Deaths: Supporting Maternal Mortality Review Committees $150,000 (annual)
- HRSA State Systems Development Initiative (SSDI) $160,000 (annual)
- HRSA Maternal, Infant and Early Childhood Home Visiting grant $3,004,211 (annual)
- ACYF Child Abuse Prevention and Treatment Act (CAPTA) $1,825,000 (5 year grant)

Additionally, these grants were not included in the fiscal impact statement, but would also be impacted:

- CDC Environmental Public Health Tracking Program - $550,000 (annual)
- CDC Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) - Surveillance and Monitoring of Emerging, Reemerging, or Persistent Infectious Threats and the Impact on Pregnant People, Infants, and Children- $300,000 (annual)
- CDC ELC Data Modernization Initiative (DMI) - $1,350,000

More than $10 million Federal public health dollars would be in jeopardy if access to the complete birth data set was unavailable. **CDC has indicated that without complete data sets they will not provide funds now or in the future regarding Data Modernization for Vital Records and it would impact eligibility for the programmatic grants listed above.**

Without access to Vital Records, individual New Hampshire families may not be able to receive child support (approximately $76 million annually). New Hampshire could be in violation of Federal requirements to establish paternity and support orders which may result in the loss of Federal funding (approximately $13 million annually) ~~including~~ in addition to financial penalties in the form of reduction ~~into~~ the TANF block grant.

The complete birth record allows the Department to verify citizenship and birth information to aid in eligibility for public assistance programs and investigate fraud, waste, abuse and potential denials or discontinuation of services for TANF (Cash Assistance), SNAP (Food Stamps) and Medicaid. This will delay the process for determinations as the current process is dependent on the access to the identifiable information to verify the individual's application for services. Family Assistance Workers and clients would need to rely on other means to get verifications needed for eligibility determinations and to protect against potential fraud. Without role-based access, the responsibility to provide proof/verification would fall to the client and their failure to provide could result in denial of benefits.

All of these risks will impact the work the Department does today and the work the Department could do in the future. **It will have an indeterminable impact on the General Fund not only from a loss of Federal revenue but also from the impact of poor health outcomes for pregnant women and infants, potential fraud of Department services, and the need to redesign eligibility and quality assurance data systems.** New Hampshire residents may need to take new responsibility for maintaining their own records to share with either the Department for specific services or with the Social Security Administration to obtain Social Security Numbers for their children

The Department takes seriously its role in protecting sensitive and private health data. We are committed to using birth records as authorized in current statute to help prevent poor birth outcomes, prevent child abuse and neglect, ensure that pregnant women and infants receive appropriate and timely care, and that New Hampshire residents have access to needed social services. We fully appreciate the need to protect privacy, but we request that the Finance Committee give consideration to the financial and public health implications if access to identifiable and complete data were removed.

Respectfully Submitted,

Patricia Tilley, MS Ed
Director
Division of Public Health Services
New Hampshire Department of Health and Human Services

Voting Sheets

Senate Executive Departments & Administration Committee

EXECUTIVE SESSION RECORD

2023-2024 Session

Bill # 105

Hearing date: 2/1

Executive Session date: 2/22

Motion of: OTP **Vote:** 5-0

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair	X			X	
Sen. Carson,VC	X	X		X	
Sen. Gendreau	X		X	X	
Sen. Perkins-Kwoka	X			X	
Sen. Altschiller	X			X	

Motion of: Consent **Vote:** 5-0

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair				X	
Sen. Carson,VC			X	X	
Sen. Gendreau		X		X	
Sen. Perkins-Kwoka				X	
Sen. Altschiller				X	

Motion of: _____ **Vote:** _____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair					
Sen. Carson,VC					
Sen. Gendreau					
Sen. Perkins-Kwoka					
Sen. Altschiller					

Motion of: _____ **Vote:** _____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair					
Sen. Carson,VC					
Sen. Gendreau					
Sen. Perkins-Kwoka					
Sen. Altschiller					

Motion of:_____ **Vote:**_____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair	☐	☐	☐	☐	☐
Sen. Carson,VC	☐	☐	☐	☐	☐
Sen. Gendreau	☐	☐	☐	☐	☐
Sen. Perkins-Kwoka	☐	☐	☐	☐	☐
Sen. Altschiller	☐	☐	☐	☐	☐

Motion of:_____ **Vote:**_____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair	☐	☐	☐	☐	☐
Sen. Carson,VC	☐	☐	☐	☐	☐
Sen. Gendreau	☐	☐	☐	☐	☐
Sen. Perkins-Kwoka	☐	☐	☐	☐	☐
Sen. Altschiller	☐	☐	☐	☐	☐

Motion of:_____ **Vote:**_____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair	☐	☐	☐	☐	☐
Sen. Carson,VC	☐	☐	☐	☐	☐
Sen. Gendreau	☐	☐	☐	☐	☐
Sen. Perkins-Kwoka	☐	☐	☐	☐	☐
Sen. Altschiller	☐	☐	☐	☐	☐

Motion of:_____ **Vote:**_____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair	☐	☐	☐	☐	☐
Sen. Carson,VC	☐	☐	☐	☐	☐
Sen. Gendreau	☐	☐	☐	☐	☐
Sen. Perkins-Kwoka	☐	☐	☐	☐	☐
Sen. Altschiller	☐	☐	☐	☐	☐

Motion of:_____ **Vote:**_____

Committee Member	Present	Made by	Second	Yes	No
Sen. Pearl, Chair	☐	☐	☐	☐	☐
Sen. Carson,VC	☐	☐	☐	☐	☐
Sen. Gendreau	☐	☐	☐	☐	☐
Sen. Perkins-Kwoka	☐	☐	☐	☐	☐
Sen. Altschiller	☐	☐	☐	☐	☐

Reported out by: Perkins Kwoka

Notes:_____

Senate Finance Committee

EXECUTIVE SESSION

Bill # SB 105-FN

Hearing date: N/A

Executive session date: 03/15/23

Motion of: OTP VOTE:

Made by Senator:	Gray	☐	**Seconded by Senator:**	Gray	☐	**Reported by Senator:**	Gray	☐
	Innis	☐		Innis	☐		Innis	☐
	Bradley	☐		Bradley	☑		Bradley	☐
	Birdsell	☑		Birdsell	☐		Birdsell	☐
	Pearl	☐		Pearl	☐		Pearl	☐
	D'Allesandro	☐		D'Allesandro	☐		D'Allesandro	☐
	Rosenwald	☐		Rosenwald	☐		Rosenwald	☐

Motion of: Move # 0948s VOTE: 6-1 D'Allesandro

Made by Senator:	Gray	☐	**Seconded by Senator:**	Gray	☐	**Reported by Senator:**	Gray	☐
	Innis	☐		Innis	☐		Innis	☐
	Bradley	☐		Bradley	☐		Bradley	☐
	Birdsell	☐		Birdsell	☐		Birdsell	☐
	Pearl	☐		Pearl	☑		Pearl	☐
	D'Allesandro	☐		D'Allesandro	☐		D'Allesandro	☐
	Rosenwald	☑		Rosenwald	☐		Rosenwald	☐

Committee Member	***Present***	**Yes**	**No**	**Reported out by**
Senator Gray , Chairman	☑	☑	☐	☐
Senator Innis, Vice-Chair	☑	☑	☐	☐
Senator Bradley	☑	☑	☐	☐
Senator Birdsell	☑	☑	☐	☑
Senator Pearl	☑	☑	☐	☐
Senator D'Allesandro	☑	☐	☑	☐
Senator Rosenwald	☑	☑	☐	☐

Amendments: OTP/A 6-1

Notes:

Committee Report

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE
FOR THE CONSENT CALENDAR

Thursday, February 23, 2023

THE COMMITTEE ON Executive Departments and Administration

to which was referred **SB 105-FN**

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS

BY A VOTE OF: 5-0

Senator Rebecca Perkins Kwoka
For the Committee

As introduced SB 105-FN removes the possibility of violation or a criminal penalty if certain information on a live birth worksheet are omitted. This bill requires that the mother affirmatively consents to the inclusion of certain identifiable health information on the live birth worksheet. SB 105-FN comes from a study committee in 2022 under SB 454 where the committee found that omitting certain information on the live birth worksheet is a felony.

Phil Jasak 271-1403

FOR THE CONSENT CALENDAR

EXECUTIVE DEPARTMENTS AND ADMINISTRATION

SB 105-FN, relative to information collected by the division of vital records administration as part of the live birth worksheet.
Ought to Pass, Vote 5-0.
Senator Rebecca Perkins Kwoka for the committee.

As introduced SB 105-FN removes the possibility of violation or a criminal penalty if certain information on a live birth worksheet are omitted. This bill requires that the mother affirmatively consents to the inclusion of certain identifiable health information on the live birth worksheet. SB 105-FN comes from a study committee in 2022 under SB 454 where the committee found that omitting certain information on the live birth worksheet is a felony.

STATE OF NEW HAMPSHIRE

SENATE

REPORT OF THE COMMITTEE

Thursday, March 16, 2023

THE COMMITTEE ON Finance

to which was referred **SB 105-FN**

AN ACT relative to information collected by the division of vital records administration as part of the live birth worksheet.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS WITH AMENDMENT

BY A VOTE OF: 6-1

AMENDMENT # 1037s

Senator Regina Birdsell
For the Committee

Deb Martone 271-4980

General Court of New Hampshire - Bill Status System

Docket of SB105

Docket Abbreviations

Bill Title: relative to information collected by the division of vital records administration as part of the live birth worksheet.

Official Docket of **SB105.**:

Date	Body	Description
1/19/2023	S	**Introduced** 01/05/2023 and Referred to Executive Departments and Administration; **SJ 4**
1/26/2023	S	**Hearing:** 02/01/2023, Room 103, SH, 09:30 am; **SC 8**
2/23/2023	S	Committee Report: Ought to Pass, 03/09/2023; Vote 5-0; CC; **SC 12**
3/9/2023	S	Sen. Whitley Moved to Remove SB 105 from the Consent Calendar; 03/09/2023; **SJ 9**
3/9/2023	S	Ought to Pass: **RC** 21Y-3N, MA; Refer to Finance Rule 4-5; 03/09/2023; **SJ 9**
3/16/2023	S	Committee Report: Ought to Pass with Amendment ***#2023-1037s***, 03/23/2023; **SC 14**
3/23/2023	S	Committee Amendment **#2023-1037s**, AA, VV; 03/23/2023; **SJ 11**
3/23/2023	S	**Ought to Pass with Amendment** 2023-1037s, **RC** 18Y-5N, MA; OT3rdg; 03/23/2023; **SJ 11**
3/28/2023	H	Introduced (in recess of) 03/23/2023 and referred to Executive Departments and Administration
4/12/2023	H	Public Hearing: 04/26/2023 11:30 am LOB 306-308
4/27/2023	H	Subcommittee Work Session: 05/10/2023 09:30 am LOB 306-308
5/30/2023	H	Executive Session: 05/24/2023 10:30 am LOB 306-308
5/30/2023	H	Committee Report: Ought to Pass with Amendment **#2023-1728h** 05/23/2023 (Vote 20-0; CC)
6/8/2023	H	Amendment **#2023-1728h**: AA VV 06/08/2023 **HJ 15** P. 6
6/8/2023	H	**Ought to Pass with Amendment** 2023-1728h: MA VV 06/08/2023 **HJ 15** P. 6
6/15/2023	S	Sen. Pearl Moved to Concur with the House Amendment, MA, VV; 06/15/2023; **SJ 19**
7/19/2023	H	Enrolled (in recess of) 06/29/2023 **HJ 17** P. 18
7/18/2023	S	Enrolled Adopted, VV, (In recess 06/29/2023); **SJ 20**
8/9/2023	S	Signed by the Governor on 08/04/2023; Chapter 0211; Effective 08/04/2023

NH House	NH Senate

Other Referrals

Senate Inventory Checklist for Archives

Bill Number: SB 105 **Senate Committee:** EDA

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

X Final docket found on Bill Status

Bill Hearing Documents: {Legislative Aides}

X Bill version as it came to the committee

X All Calendar Notices

X Hearing Sign-up sheet(s)

X Prepared testimony, presentations, & other submissions handed in at the public hearing

X Hearing Report

N/A Revised/Amended Fiscal Notes provided by the Senate Clerk's Office

Committee Action Documents: {Legislative Aides}

All amendments considered in committee (including those not adopted):

___ - amendment # _____ ___ - amendment # _____

___ - amendment # _____ ___ - amendment # _____

X Executive Session Sheet

X Committee Report

Floor Action Documents: {Clerk's Office}

All floor amendments considered by the body during session (only if they are offered to the senate):

___ - amendment # _____ ___ - amendment # _____

___ - amendment # _____ ___ - amendment # _____

Post Floor Action: (if applicable) {Clerk's Office}

___ Committee of Conference Report (if signed off by all members. Include any new language proposed by the committee of conference):

___ Enrolled Bill Amendment(s)

___ Governor's Veto Message

All available versions of the bill: {Clerk's Office}

___ as amended by the senate ___ as amended by the house

___ final version

Completed Committee Report File Delivered to the Senate Clerk's Office By:

[signature] 7/7/23

Committee Aide **Date**

Senate Clerk's Office [signature]

Senate Inventory Checklist for Archives

Bill Number: SB 105-FN **Senate Committee:** FINANCE - 2ND Comm Bill

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

X Final docket found on Bill Status

Bill Hearing Documents: {Legislative Aides}

X Bill version as it came to the committee

___ All Calendar Notices

___ Hearing Sign-up sheet(s)

X Prepared testimony, presentations, & other submissions handed in at the public hearing

___ Hearing Report

X Revised/Amended Fiscal Notes provided by the Senate Clerk's Office

Committee Action Documents: {Legislative Aides}

All amendments considered in committee (including those not adopted):

X - amendment # 0948s ___ - amendment #_____

X - amendment # 1037s ___ - amendment #_____

X Executive Session Sheet

X Committee Report

Floor Action Documents: {Clerk's Office}

All floor amendments considered by the body during session (only if they are offered to the senate):

___ - amendment #_____ ___ - amendment #_____

___ - amendment #_____ ___ - amendment #_____

Post Floor Action: (if applicable) {Clerk's Office}

___ Committee of Conference Report (if signed off by all members. Include any new language proposed by the committee of conference):

___ Enrolled Bill Amendment(s)

___ Governor's Veto Message

All available versions of the bill: {Clerk's Office}

X as amended by the senate X as amended by the house

X final version

Completed Committee Report File Delivered to the Senate Clerk's Office By:

Debra A. Martore 07/14/23

Committee Aide **Date**

Senate Clerk's Office