



“Where Recovery Becomes Your Way of Life”
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Testimony on HB-1794 FN before the New Hampshire House of Representatives, Health, Human Services and Elderly Affairs Committee, February 18, 2026

Good Morning and thank you for the opportunity to testify in support of HB 1794. My name is Jaime Powers and I currently serve as the Chief Executive Officer of the GateHouse family of companies located in Nashua and Manchester. I began in the SUD field almost 20 years ago providing direct care at the Phoenix House that was then located in Franklin. I then spent 11 years with the state, eventually rising to the role of Director of the Bureau of Drug and Alcohol Services. In 2022, I felt called to return to community-based care and began my time with GateHouse. Throughout my career, I have had the pleasure of seeing the massive positive impact that Medicaid and other changes have made to the SUD system of care in New Hampshire.

When I started at Phoenix House, in 2007 there was no Medicaid coverage for SUD treatment services outside of pregnant and parenting women and most private insurance would only cover outpatient services, if even those. The only public funding for services was through the Federal Block Grant and that amount was minimal. The result of these factors was that there were maybe a dozen providers with extremely limited funding trying to provide care to virtually all NH residents seeking substance use disorder treatment. One of the programs that we ran at Phoenix House was a social detox program which was intended to provide a supervised, safe, sober environment for approximately 7 days while individuals went through acute detox. The reality was that the residential programs these clients were supposed to move on to had waiting lists 30+ days long and clients had to come directly from a controlled environment such as Phoenix House to these programs so this 7-day program ended up being 30 days or more for most clients. This also meant that we could not admit new clients until a bed opened and were ourselves often running a 30+ day waitlist. Imagine telling someone seeking help for a substance use disorder that they would have to wait a month to get that help. As you might imagine, many of these folks never made it into care and returned to active use resulting in significant costs to the medical, legal, and other systems that they used as a result. The greatest cost though was in the human lives lost because of these wait times as well as the children and families impacted by the individuals' continued use.

Beginning in 2014, we began to see a shift on the Federal level with substance use disorder treatment and mental health treatment services being identified as essential benefits making coverage mandatory under both Medicaid and private insurance as well as the advent of Medicaid expansion which meant that far more individuals with substance use disorders became eligible for these critical benefits. I had the honor of leading the development of the substance use disorders treatment benefit for NH Medicaid during my time with the state. We were able to craft an SUD benefit that was one of the most comprehensive in the nation and these benefits became available beginning in 2016. The additional funding not only allowed the existing provider network to expand their services but also brought new providers into the state. While it certainly did not happen overnight and the road was not always smooth, the result of this was that individuals with substance use disorders were much more likely to be able to get the care they needed, when they needed it. This meant a reduced burden on other systems, less negative impact on individuals and families and fewer lives lost.



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Today, I have the pleasure of leading a family of companies that includes GateHouse Treatment, MAT Care Clinics, and GateHouse Sober Communities. We provide partial hospitalization and intensive outpatient treatment services, medication assisted treatment, and recovery housing for individuals with substance use disorders as well as psychiatric evaluation and medication management and transcranial magnetic stimulation therapy to individuals both with and without SUD. Across all lines of business, we primarily serve the NH Medicaid population. As of this morning, we are providing PHP/IOP services to 127 individuals, many of whom also receive MAT and psychiatric services with an additional 300 or so individuals engaged in MAT and/or psychiatric services only. On average, 90% of those we serve are covered by Medicaid. In my programs alone, that’s roughly 400 lives being touched directly extending to countless children, families, and communities as well as reducing the burden on other safety net services.

Like so many of us who serve the Medicaid population, I watched the, Federal Medicaid and Federal and State budget proceedings with great trepidation, fearing a return to the “bad old days” if Medicaid benefits were cut or eliminated entirely. While this was thankfully not the case, the provisions that have been put into place such as premiums, work requirements and more frequent revalidation will have a yet to be determined impact on the Medicaid population. Clients who are in care with agencies such as mine will have support with meeting these requirements while those who are not engaged in services are likely to be largely on their own resulting in gaps in or complete loss of coverage.

The Medicaid Impact Study proposed in this legislation is a critical step towards monitoring and responding to how these changes are impacting the Medicaid population and ensuring that they are receiving the services and supports that they need either to remain covered by Medicaid or through other channels available in the state. Failure to identify and mitigate these impacts will have significant financial consequences for other systems and agencies including unreimbursed medical services in emergency departments; increased criminal activity leading to higher criminal justice, court, and corrections costs; unemployment and lost wages; and a higher burden on other safety net services. Most importantly, lives will be lost and families and communities will be negatively impacted by increased untreated substance use disorders. As one Representative pointed out, there may also be positive impacts to these changes and being able to identify those early on will allow the state to support and maximize these gains. I urge you to help avoid these consequences by supporting HB1794.

Sincerely,
Jaime Powers, MS
Chief Executive Officer