RSA 126-A:13
Health and Human Services Oversight Committee
January 26, 2018
LOB 205

Members Present: Representative Kotowski, Representative McMahon, Representative James MacKay, Senator Reagan; Representative Danielson attended the meeting as a guest.

The meeting opened at 10:04 AM.

1. Michael Bullek and Michelle Ricco Jonas of the NH Board of Pharmacy presented the annual report of the Prescription Drug Monitoring Program.

Representative Danielson asked about the goals of the program, whether it was controlling the amount of opioids prescribed and if the benefits of that could be measured. Ms. Jonas answered that the program covered all prescription controlled substances, which is a wider universe than opioids, and that a focus on opioids exclusively might distract from other substances like amphetamines, which are increasingly a problem. The program is beneficial in that it helps prescribers make good decisions by looking at patient history, avoiding overprescribing or the prescription of bad drug combinations.

Representative MacKay noted that a local paper reported that the Medical Examiner's Office had indicated that opioid overdose deaths were decreasing, and asked if that was consistent with Ms. Jonas's information. She replied that direct correlations can be difficult to discern. Potentially the program would be helpful in avoiding overdose deaths, but there are many factors.

2. Julianne Carbin, Director of the of the Bureau of Mental Health Services and Erica Ungarelli, Director of the Bureau of Children's Behavioral Health presented the Report on the Independent Evaluation of the Capacity of the Current Health System in NH to Respond to the Inpatient, Acute Care Psychiatric Needs of Patients.

Representative Kotowski asked, since NH has an average number of inpatient beds relative to its population, if other states also had long wait times for admission to their inpatient psychiatric facilities. Ms. Carbin said she did not have data on that subject. Ms. Ungarelli noted that the wait times for admission to NH Hospital are caused by problems in the flow of patients – insufficient community based services make it difficult to discharge patients and free up beds. Ms. Carbin explained that this report would be the foundation document for the next ten year plan, and that that plan would emphasize system design and continuum of care.

Representative Kotowski asked when the ten year plan would be ready. Ms. Carbin said that the deadline for its completion was July 1st, but that due to the wide array of stakeholders being consulted the Department would be seeking an extension to December 1st.

Representative MacKay asked if the report touched on how well the State was complying with the federal court agreement regarding mental health services. Ms. Carbin said that compliance was an

important priority for the Department, that it was working to meet expectations, and that the requirements of the agreement are being incorporated into the ten year plan.

Senator Reagan asked which State has the best mental health system which could be used as a model. Ms. Ungarelli answered that throughout the country there are pockets of excellence, but no full state system to emulate.

Representative McMahon asked about the prioritization of the issues facing the State's mental health system and asked if there was a timeline for meeting goals. Ms. Ungarelli answered that part of the ten year plan would be a constant review of the efficacy of the priorities set, and that outside events like economic downturns required adjustment to plans. A contractor is bringing on an economist to help model revenue and analyze priorities on an ongoing basis.

3. Michael Holt of the Office of Legal and Regulatory Services presented the Report of the Therapeutic Use of Cannabis Advisory Council. There were no questions.

4. Jeff Loughlin, Executive Director of the NH Health Information Organization Corporation (NHHIO) presented the NHHIO annual report. As of the end of 2017 the NHHIO has terminated all technical support services. Federal funds have spurred private vendors to provide the same services as the NHHIO at a lower cost. After some education and advocacy work in 2018 NHHIO will dissolve.

Senator Reagan congratulated Mr. Loughlin and asked if data existed showing what outcomes were realized as a result of more efficient exchange of information. Mr. Loughlin answered that he was unaware of the existence of any data and explained that it was difficult to capture the impact in cost terms.

John Williams of DHHS mentioned to the Committee that it might be advisable to amend RSA 332:I to repeal the annual reporting requirement of the NHHIO since it was dissolving.

5. Patricia Tilley, Deputy Director of the Division of Public Health Services, presented the annual report of the Newborn Screening Advisory Committee.

Representative Kotowski asked a question about the inclusion of Krabbe-Leukodystrophy on the list of conditions regularly screened. Ms. Tilley answered that the regular lab that processes newborn screening samples in Massachusetts couldn't do Krabbe screening, and that the nearest lab in New York that does do Krabbe screening doesn't want to test for all the other conditions on the screening list. The Department is talking to the regular lab in Massachusetts about potentially including Krabbe screenings in the future.

6. Jeffrey Meyers, Commissioner of DHHS, briefed the committee on the Department's monthly dashboard report, which will be published Monday January 29, 2018. The developmental disability waitlist numbers are trending down and most of the people on the list are already receiving some services, and only on the waitlist for additional services.

Representative McMahon asked if those on the waitlist were within the 90 days bound, and the Commissioner answered that some were not.

The Commissioner explained that the Medicaid caseload has decreased by less than projected, but because the acuity of the cases within the caseload mix has shifted so that per patient costs have fallen, he doesn't anticipate a significant budgetary impact.

Representative Kotowski asked how the acuity of cases could be controlled. The Commissioner responded that they can't be, or only to the extent that health needs are well managed so that problems do not become more severe.

The Commissioner explained that the State's CHIP program was in good shape. In past years it had been 88% federally funded, but due to the instability around CHIP funding in Congress the Department had budgeted for a 50/50 match in 2018. Now that the program has been reauthorized with the 88/12 match, the additional 13 million dollars can be put toward meeting the lapse. The Department is ending the fiscal year in good shape.

The Commissioner expressed to the Committee that the Department was working on re-procurement related to the NH Medicaid Managed Care Program, and that because of the deadlines in that process it would become very difficult to manage legislative changes to the program should they come in May. He asked that the legislature make decisions about any changes as soon as possible so that the Department could implement them in an orderly way.

Representative Kotowski adjourned the meeting. The next meeting will be held on February 23, 2018.

Respectfully submitted,

D.C. Bates, House Committee Research