RSA 126-A:13
Health and Human Services Oversight Committee
May 17, 2019
LOB 205

Present: Representatives Weber, MacKay, McMahon
Absent: Representatives Campion and Nordgren; Senators Rosenwald, Fuller-Clark and Bradley

1. Call to Order/Approval of Minutes

Rep. Weber called the meeting to order at 10:00 AM.

Review and approval of the minutes of the April 19, 2019 meeting were deferred until the next meeting.

2. Community Services Block Grant (CSBG)/Grant Eligibility: *Melissa Hatfield, Bureau Chief, Bureau of Housing Supports, DHHS Division of Economic & Housing Stability*

Ms. Hatfield reviewed the CSBG state plan and explained that it is administered by five community action agencies who fund local programs that aim to reduce poverty, revitalize low income communities and empower low income individuals. Oversight is in the Division of Economic and Housing Stability.

Rep. McMahon asked how the programs were facilitated in towns and how they were overseen by the Department. Ms. Hatfield answered that the funded local programs were required to collect data that allowed for an annual Department review.

Rep. Weber asked if supported housing for people exiting NH Hospital would fall within the goals of the block grant, and Ms. Hatfield replied that it would. The programs focus on housing, employment and childcare to help families move out of poverty.

Rep. Weber asked how this block grant was related to the Community Development Block Grant that the county delegations vote on, and Ms. Hatfield explained that the two block grants are different, but in many ways complementary.

3. Advisory Council on Child Care Annual Report: *Debra Nelson, DHHS Child Development Bureau Administrator and Anne Grassie, Advisory Council Chair*

Ms. Grassie presented the annual report to the Committee. The Council is currently working on a quality control system, and part of that is in the budget this year. They are working on helping childcare providers by organizing a purchasing group, and examining what steps they could take to support professional development (TEACH scholarships and internships for early childhood education), research on how to increase retention, and a pilot program in good business practices to stabilize program budgets.

She explained that it was getting harder and harder in the world of childcare. Centers are closing or closing rooms. One difficulty is that it is hard to find qualified staff. Once staff are trained they find better compensated work as paraprofessionals in the school system. In recent years the federal government has increased the necessary standards for childcare workers, but wages have remained flat. Turnover can be difficult for children emotionally. Even though childcare helps to support the workforce by allowing

parents who want work to take jobs, many of those parents aren't able to pay tuition to fully cover the cost, leading to shortfalls and closures.

Rep. MacKay asked if there was a shortage of childhood mental health providers, and Ms. Grassie answered that it was a problem, but hopefully it would be partially addressed as the ten-year mental health plan is implemented. There needs to be more of an emphasis on prevention – there are children as young as three in NH Hospital.

Rep. MacKay asked if there were any representatives on the advisory council, and Ms. Grassie replied that there was one, but they couldn't attend meetings, generally held on Thursdays, due to scheduling issues. The advisory council has a membership representative of all parts of the state. They are reviewing their membership now for potential revisions. Rep. McMahon suggested moving meetings from Thursdays to a different day of the week when the House wasn't in session.

Rep. McMahon asked if there were any concrete legislative recommendations – what is the council's top priority? Ms. Grassie explained that a lot depends on childcare rates, and whether they are adequate or not, especially for infant care. The federal government recommends rates that are at the 75th percentile, but while rates are adjusted every three years based on market surveys, NH's rates are consistently set near the 50th percentile. Higher rates would lead to better staff pay and retention of qualified workers. Rep. McMahon asked what was the source of the funds, and Ms. Grassie said it was the Child Care and Development Block Grant, which contained a fund that provided child care tuition scholarships and also a set aside for quality control.

Rep. McMahon asked about the total population of in children in need, and Ms. Nelson explained that it was 8,991 in April, and that covered children from newborns through 170 months. After school programs are included in the same system.

4. DHHS Commissioner's Update and Dashboard Report: *Commissioner Jeffrey A. Meyers*

Commissioner Meyers explained that there was no new dashboard report, but that he had come to answer any questions the committee might have. The Department is working closely with the Senate Finance committee on the budget.

Rep. MacKay stated that the recent continuing education program for legislators on the Department's new ten-year mental health plan had gone very well. Commissioner Meyers and praised Erica Ungarelli, Katja Fox and Juilianne Carbin as well as others for their excellent work. The State is in a better financial position than in 2008, and there are high hopes for the implementation of the plan. Rep. MacKay asked if there had been any thought to expanding mental health services in the Department of Corrections. Commissioner Meyers said that the federal government was encouraging states to explore Medicaid waivers for certain targeted services related to substance use disorder and mental health in state and county facilities. That will be an area for investigation once the budget process is over. No other states have filed a waiver application on this topic yet, and the Department needs to do its due diligence. The next waiver they plan to work on is to allow reimbursement within 30 days for certain subpopulations (children with mental illness and adults with serious mental illness) in facilities with more than 16 beds. Rep. MacKay noted that he was planning another continuing education program for legislators on the topic of mental health and the corrections system in September.

Rep. McMahon thanked the Commissioner for his efforts to bring down the Developmental Disability waitlist. He asked about the funds to provide respite care to long term family caregivers. It saves quite a bit of money to keep people in their homes rather than a facility, but caregivers need breaks so they don't burnout. Chris Santaniello, former director of long term support services, answered that the state plan on long term aging is being reviewed now, and that is a topic included for review. Rep. McMahon asked if that would be completed this year, and Ms. Santaniello replied that she would follow up and get back to him. Rep. McMahon said that it would require roughly $5000 per address per year to make sure caregivers could take 1 or 2 days off each month – would the Department support that? Ms. Santaniello replied that they would need to look at it in the context of the entire funding stream.

Rep. McMahon asked about the $15 per hour cap for direct services, and the difficulty of attracting workers at that wage level. What action could the legislature take to get closer to a market rate? Ms. Santaniello explained that $15 per hour is not a hard cap, just Department guidance. It can go higher if there is a demonstrated need for an individual with a developmental disability, within the defined budget. The Department built a 2.5% increase per year over the biennium into their budget request. Commissioner Meyers told the Committee that SB 308, if passed and signed by the Governor, would raise all Medicaid rates.

Rep. MacKay asked if the Department had considered implementing the 1115 Medicaid Integrated Delivery Network waiver along county lines, rather than dividing the state into seven areas. Commissioner Meyers explained that they had considered using county lines, but that Medicaid populations were very unevenly spread across different counties, and it would have been impossible to reach necessary economies of scale in some counties. It hasn't been popular, but in terms of implementation it has worked. Rep. MacKay commented that initially in his county convention the decision hadn't been popular, but now the response was very positive.

5. Update on the State Doorway: Katja Fox; *DHHS Director of Behavioral Health*

Ms. Fox have the Committee a brief overview of the 2 year, $45.8 million dollar federal grant for opioid response and the establishment of the hub and spoke system, with 9 regional hub locations. She reviewed the quantitative summary, noting a jump of over 2000 unreplicated individuals served from March to April. The Department will be providing monthly updates.

Rep. Weber asked why the numbers for the Nashua hub were still at 4, and Ms. Fox replied that the Department was working with Granite Pathways, who run the hubs in Manchester and Nashua, to find out. They are perhaps not capturing their numbers correctly. Additionally, there are pre-existing safe-station programs that are already acting as central entry points. The Department will make sure they are coordinating with those programs. Rep. Weber asked if the number of individuals contacting safe-stations were included in the data presented, and Ms. Fox replied that they were not, although the Department collects those numbers and compares them in order to spot trends.

Ms. Fox noted that in addition to other substance use disorders, significant numbers of people were coming in with alcohol related problems. Methamphetamines are also a rising usage trend. The Department has only done limited marketing for the Doorway so far, in order to give the new program time to be stood up prior to a big public push. Revised marketing materials will be distributed soon, along with radio, television, print and online multimedia ads. The materials are being tweaked for regional markets – numbers in the North Country for instance are lower than expected and they want to target

messaging there specifically.

Rep. Weber asked if it was possible to breakdown statistics on a monthly basis. Ms. Fox replied that they had attempted to balance detail with simplicity in the presentation, but they would look at different formats. The Governor's Council on Alcohol and Drug Abuse had requested a separate breakdown on numbers for minors, but so far, the numbers were too small to report without compromising confidentiality. When the cumulative numbers are big enough they will be broken out.

Rep. McMahon asked why there was a jump in the distribution of naloxone kits in April, and Ms. Fox replied that it was due to a bulk purchase and distribution by the Department to the hubs.

Rep. MacKay asked if the mental health hubs were the same or separate from the substance use disorder hubs, and Ms. Fox replied that they were separate. The SUD hubs are for naloxone distribution, assessments, evaluations and referrals, with some flexible funds to provide transportation and childcare.

Rep. Weber noted that when a user finds the doorway for the Keene area online it says to call 211, and if the user tries the "find a doorway" feature it provides a street address for the local hub but no contact information. Better contact information is needed.

5. Adjournment

The meeting adjourned at 11:20 AM. The next meeting will be held on June 21st at 10 AM. No meetings are anticipated in July or August.

Respectfully submitted,

Rep. Lucy Weber