

STATE OF NEW HAMPSHIRE THE ADJUTANT GENERAL'S DEPARTMENT

FIS 18-136 Additional Information

BUSINESS ADMINISTRATION STATE MILITARY RESERVATION 4 PEMBROKE ROAD CONCORD. NEW HAMPSHIRE 03301-5652

David J. Mikolaities, Brigadier General The Adjutant General

Warren M. Perry. Col (Ret) Deputy Adjutant General Phone: 603-225-1360 Fax: 603-225-1341

TDD Access: 1-800-735-2964

July 17, 2018

Members of the Fiscal Committee.

The following information is in response to the June 15, 2018 tabling of FIS 18-136 that would have allowed the Adjutant General's (TAG) Department, on behalf of the Office of Veterans Services (OVS), to accept and expend \$200,000.00 from the New Hampshire Department of Health and Human Services (HHS) in support of veteran services. This supplemental information is generally in response to questions raised by fiscal committee members in meetings with either the Adjutant General or Deputy Adjutant General after the June 15, 2018 fiscal meeting. It is provided in support of our request to have item FIS 18-136 be removed from the table and approved.

Clarifying Information:

- 1) <u>Funds:</u> The one time transfer of HHS funds to the TAG Department has no bearing or implications to lapsing HHS funds.
- 2) <u>Positions</u>: The two veteran service officer (VSO) positions through June 30, 2019 will be full-time / temporary Class 59 positions that are not permanent positions. They will not become permanent until codified by law through the legislature in the next legislative session.
- 3) <u>Legal Authorization / Budget Framework</u>: Paragraph 5b of Executive Order 2018-01 states that the Commissioner of Administrative Services shall assist the Adjutant General, the Director of OVS, and the Commissioner of HHS, to the extent permitted by lay with ... "(b) the transfer of personnel and the creation of new positions, as necessary to effectuate the purposes of this order". Once the staffing shortages were identified within the HHS and Adjutant General's Department MOU, our office proceeded to Governor & Executive Council for approval and then on to Fiscal Committee.
- 4) <u>Has a Similar Program Been Requested of the Legislature and denied</u>: No. HB 636 has been referred for interim study and is still pending before the legislature. As a result, the legislature has yet to deny any action concerning the structure of veterans support. Additionally, neither DHHS, OVS, nor the TAG Department had previously requested that funds be transferred from one department to another on the behalf of veterans.

OVS Organizational Structure: OVS currently consists of 8 members that include a Director, Office Manager and six Veteran Service Officers (VSO). That team averages approximately 1200 contacts with veterans each month including 1000 phone calls and emails and 200 face to face appointments. OVS bases its operations out of the Cotton Building in Manchester. The VSOs meet Veterans at seventeen geographically dispersed locations across the state (Employment Security Offices, ServiceLink Locations. Manchester VA. Vet Centers and NG Armories). Demand for

appointments varies regionally, with the highest demand in the seacoast, greater Manchester, Concord and Laconia. Appointments are booked 30 days out at the Hooksett Vet Center, Somersworth Employment Security office, and Stratham ServiceLink. Appointments are booked 60 days out at the Concord and Laconia Employment Security offices.

OVS Case Management System: OVS is currently using Microsoft Excel as its case management system. This limits the efficiency on how our veterans are served and how data is captured to evaluate the effectiveness of their work. The VSOs are unable to share information in a web-based application or in real-time.

Enclosures: Several fiscal committee members mentioned that they did not receive all pertinent handouts, to include both memorandums of understanding. The following are included for your reference:

- 1) Executive Order 2018-01, An order initiating creation of one coordinated State operation for the provisions of veterans services
- 2) Memorandum of Understanding between the New Hampshire State Veterans Council and Office of Veterans Services and The Adjutant General's Department
- 3) Memorandum of Understanding between the Department of Health and Human Services and The Adjutant General's Department
- 4) Concept paper for the operation of OVS in coordination with the Adjutant General's Department
- 5) Original Fiscal Committee memo. dated May 21. 2018

Summary: The passage of item FIS 18-136 is critical to ensuring both the efficient and effective support of veterans until the legislature takes final action on House Bill 636. It will also enable OVS, with the support of and coordination with TAG Department, to meet the statutory requirements of publishing a biennial resource guide (which has not been published in the previous 4 years), managing the Veterans Decal Program (an un-resourced requirement), preparing the list of GWOT and Gulf War Veterans to treasurer to certify for war time bonuses, and preparation of the agency budget.

Passage of this item will immediately increase the capacity to serve the veteran community by 25% and fund case management software that will improve efficiency in accuracy of claims processing and data collection. This is a critical step in the provision of services until legislation is passed that will codify an organizational structure in support of New Hampshire's Veterans.

Please let me know if you have additional questions or need further clarification.

I respectfully request the committee pass item FIS 18-136.

Respectfully submitted,

Brigadier General, NH National Guard

AVID J. MIKOLAITIES

The Adjutant General

Executive Summary

- 1. Purpose to describe how the Adjutant General's Department will coordinate military and veterans services in New Hampshire in accordance with Executive Order 2018-01. Recognizing that service members, veterans and their families require dedicated, strategic, collaborative outreach, that the current service delivery model is not structured to provide coordinated, high quality services, and that the welfare of service members, veterans and their families can best be enhanced if a single entity is established to address system gaps and coordinate, consolidate and provide unified direction of policies, procedures and programs in conjunction with the United States Department of Veterans Affairs as well as other federal, state, local and private organizations. This model will:
 - a. Establish a well-defined, well-coordinated government leadership structure for coordinating, defining, and providing sustainable funding for effective programs and services for NH Service Members, Veterans and their Families (SMVF). Provides first class service delivery to Service Members, Veterans and their Families
 - b. Direct veterans to appropriate benefits and services offered by such organizations by modeling the "Service Member for Life" and "Fort New Hampshire" concepts. Those who are currently serving will support public education and awareness campaigns for those who have served.
 - c. Be flexible, responsible and accountable in order to maximize efficiency of existing service delivery while minimizing disruptive impact of change.
 - d. Coordinate benefits and service delivery offered by organizations within the State of New Hampshire.
 - e. Provide the appropriate authority to affect service delivery using State of NH resources.
 - Be cost effective.

Concept

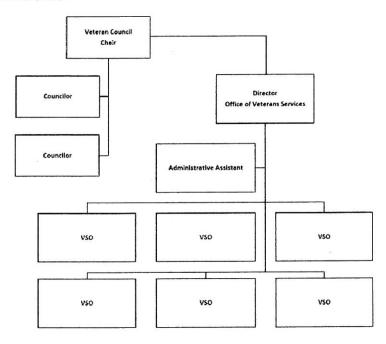
- The executive order directs the Adjutant General to coordinate the activities of the Office of Veterans' Services (OVS) and the Bureau of Community Based Military Programs (BCBMP) from the Department of Health and Human Services.
 - a. The OVS directorate will focus on accomplishing the current OVS mission of assisting veterans and family members in identifying eligibility for veterans' benefits, filing claims, coordinating benefits with other state and federal agencies, and reviewing claims decisions for appeals or waivers of unfavorable decisions.
 - b. The BCBMP will continue to coordinate community outreach and interagency coordination, develop legislative proposals to improve delivery of services, and coordinate agency programs in conjunction with the United States Department of Veterans Affairs as well as other federal, state, local, non-profit, and private organizations.

- c. The Veterans Council becomes an advisory body to the Adjutant General on matters of policy concerning veterans' services. The Council will advise the Adjutant General on the activities of the State Office of Veterans' Services and provide policy recommendations on ways to improve the delivery of programs.
- d. The State Veterans Advisory Committee (SVAC) continues its current role as a legislative committee. In this role it will continue to be a voice for the veterans of New Hampshire.
- 2. Additional costs of this proposal are associated with the addition of 2 Veteran service officers (VSO) (yellow boxes).
- 3. The additional cost in fiscal year 18 is estimated to be \$200,000.00. This figure includes the salary and benefits for the 2 additional employees and the initial purchase of equipment and a Case Management Software Package.

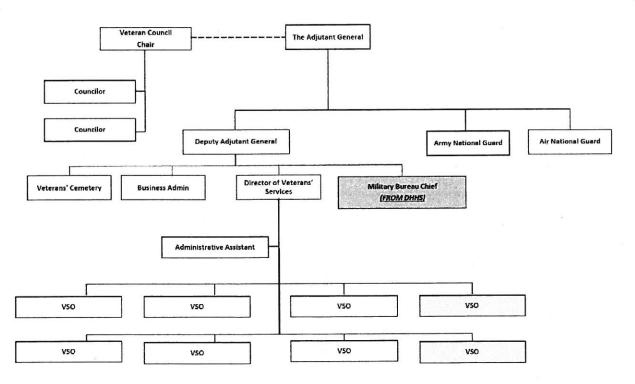
4. Advantages

- a. Facilitates the development and execution of a comprehensive and coordinated state plan. This establishes a clear link between services provided to currently serving members of the Armed Forces and the NHNG care coordination program to services provided by the State to veterans.
- b. Provides the appropriate authority to coordinate services and resources with external organizations (federal, private, philanthropic, advisory). Facilitates development of a plan focusing on interagency development. Provides the appropriate authority to affect service delivery using State of NH resources.
- c. This is not a flat organization. It places the authority and responsibility to act on the Adjutant General.
- d. Accountability will be fixed on the Adjutant General and it will result in a clear link between those serving and those who have served.
- e. There is little growth.

- 5. Organizational changes are indicated below and represent the pre and post executive order:
 - a. Pre-Executive Order



b. Post Executive Order



Substance Abuse and Mental Health Services Administration

STATE OPIOID RESPONSE (SOR) GRANT

DHHS PUBLIC INPUT SESSION
JUNE 23, 2018



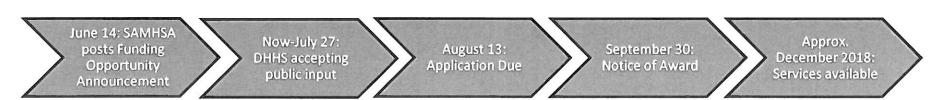
Agenda

- **▶** Grant opportunity overview and timeline
- **▶** Grant parameters
- **▶** Key data requirements
- **▶** Stakeholder comment
- **▶** Next Steps



Grant opportunity overview and timeline

- NH eligible for up to \$22,897,347 for Federal Fiscal Year 18
- Two years to spend funds
 - State FY19:\$11,448,673
 - State FY20:\$11,448,673
- Funding specific to opioid use disorder (OUD)
- Funding goals:
 - increase access to medication-assisted treatment
 - reduce unmet treatment need
 - reduce opioid overdose related deaths





Grant overview cont.

- Require use of evidence based treatment for OUD (MAT), alignment with State Targeted Response grant strategic plan, services delivered by the third month after grant award
- Key populations include: Veterans/service members, Ryan White HIV AIDS program, justice involved/re-entering the community
- Of the \$22,897,347
 - Up to 2% may be spent on data collection
 - Up to 5% may be spent on administration of the grant
- Key staff required:
 - Must include Project Director
 - Must include full-time State Opioid Coordinator position: responsible for coordinating opioid-related federal funding across the State



Funding Parameters

ALLOWANCES



- MAT financing and support if FDA approved product
- Recovery support services, including recovery housing.
- Purchase/distribute/train on naloxone
- Provide assistance to patients with treatment costs.
- Provide treatment transition and coverage for patients reentering communities from criminal justice settings or other rehabilitative settings.
- Address barriers to receiving treatment
- Telehealth
- Tobacco cessation programs
- Can fund nonprofit or for-profit entities

RESTRICTIONS



- Financial support for recovery housing is limited to "legitimate and appropriate" facilities
- Telehealth limited to rural/underserved areas
- Cannot support non-evidence based approaches
- Cannot pay for programs that deny service due to MAT status
- Cannot fund bricks and mortar
- Cannot pay for meals
- Funds must be payer of last resort (exhaust insurance and other financing options first)



Data requirements

Minimum required data elements: (client-level)

- Diagnoses
- Demographics
- Substance use
- Services received

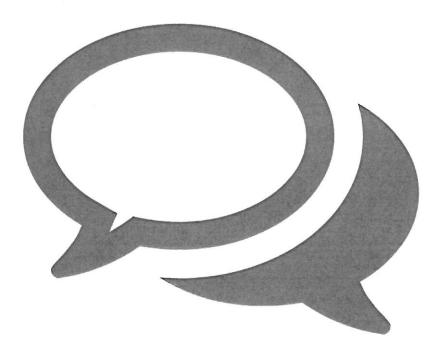
- Criminal justice involvement
- Housing status
- Employment status

Specific Data Collection Tools	Mandatory performance measures
Results (GPRA) tool required: 1) Fact to Face interview 2) Four data collection points 1) Intake 2) 3 months post-intake 3) 6 months post-intake 4) Discharge	Recipients must achieve 80% follow-up rate at: • 3 months • 6 months

SAMHSA will announce additional required data elements following award



Questions and Comments





Next Steps

- DHHS will continue accepting input until July 27, 2018
 - July 23 session
 - Submit to SOR@dhhs.nh.gov
- DHHS will vet input through funding allowances/restrictions
 - Will seek clarification on use of funds from SAMHSA if necessary
- Submit final application to SAMHSA on/by August 13, 2018

