

CHAPTER 135
SB 298 – FINAL VERSION

05/01/14 1633EBA

2014 SESSION

14-2832
01/04

SENATE BILL **298**

AN ACT establishing a permanent commission on post-traumatic stress disorder and traumatic brain injury.

SPONSORS: Sen. Carson, Dist 14; Sen. Cataldo, Dist 6; Sen. Stiles, Dist 24; Sen. Bradley, Dist 3; Sen. D'Allesandro, Dist 20; Sen. Boutin, Dist 16; Rep. Lauer, Graf 15; Rep. Ladd, Graf 4; Rep. Marston, Hills 19; Rep. Roberts, Ches 4; Rep. Baldasaro, Rock 5

COMMITTEE: Executive Departments and Administration

ANALYSIS

This bill permanently establishes the commission on post-traumatic stress disorder and traumatic brain injury.

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Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Fourteen

AN ACT establishing a permanent commission on post-traumatic stress disorder and traumatic brain injury.

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

1 135:1 Statement of Purpose.

2 I. The general court finds that:

3 (a) In 2011, the general court created a commission to study the effects of service-
4 connected post-traumatic stress disorder (PTSD) and traumatic brain injury (TBI) suffered by
5 members of the armed forces and veterans in the line of duty.

6 (b) Commission outreach, as well as survey results from the Survey Helping to Advance
7 Recovery Efforts (SHARE), the New Hampshire Psychological Association, the American Red Cross
8 and 80 military and civilian providers indicate that:

9 (1) There is high statistical evidence of PTSD and TBI in members of the armed
10 forces and veterans.

11 (2) Veterans indicate they do not receive the psychological, physical, and economic
12 assistance they need.

13 (3) Veterans identified a number of barriers to access health care both within the
14 United States Department of Veterans Affairs (VA) and in civilian and community organizations.

15 (4) Survey results indicate barriers to access health care include, but are not limited
16 to, a perception that all veterans are entitled to health care, stigma associated with PTSD and TBI,
17 lack of knowledge as to how to obtain health care, lack of education or understanding of military
18 culture/lifestyle, lack of partnership between the VA, veterans, state, and community and civilian
19 agencies for a continuum of care for veterans.

20 (c) Many civilian and community agencies are interested in learning how to better serve
21 veterans.

22 (d) There is recognition that VA Medical Centers, VA Veteran Centers, New Hampshire
23 National Guard and Reserve Centers cannot meet all the needs for veterans' health care; of the
24 approximately 115,000 veterans in New Hampshire, 42,747 are enrolled in the VA health care
25 system yet only 28,730 of those enrolled receive VA services.

26 (e) New Hampshire does not have an active duty installation which further limits access
27 to health care for veterans and service members.

28 (f) Simplifying access to care is essential to improving overall health care for veterans.

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1 (g) Partnerships between local community and civilian providers, VA, state, and other
2 social service agencies is essential to ensuring a continuum of care to veterans.

3 II. Therefore, this act establishes a permanent commission on post-traumatic stress disorder
4 and traumatic brain injury to develop, coordinate, and oversee the recommendations identified in the
5 report submitted by the study commission on the effects of post-traumatic stress disorder and
6 traumatic brain injury suffered in the line of duty by members of the armed forces and veterans.

7 135:2 Commission on Post-Traumatic Stress Disorder and Traumatic Brain Injury. RSA 115-D
8 is repealed and reenacted to read as follows:

9 CHAPTER 115-D

10 COMMISSION ON POST-TRAUMATIC STRESS DISORDER
11 AND TRAUMATIC BRAIN INJURY

12 115-D:1 Commission Established. There is established the New Hampshire commission on post-
13 traumatic stress disorder and traumatic brain injury to develop, coordinate, and oversee the
14 recommendations identified in the report submitted by the commission to study the effects of service-
15 connected post-traumatic stress disorder and traumatic brain injury suffered in the line of duty by
16 members of the armed forces and veterans.

17 115-D:2 Membership and Compensation.

18 I. The members of the commission shall be as follows:

19 (a) One member of the senate, who is a member of the health and human services
20 committee, appointed by the president of the senate.

21 (b) Two members of the house of representatives, one of whom is a member of the health,
22 human services and elderly affairs committee and one of whom is a member of the state-federal
23 relations and veterans affairs committee, with consideration that one of the appointed members may
24 represent the northern area of New Hampshire, appointed by the speaker of the house of
25 representatives.

26 (c) The commissioner of the department of health and human services, or designee.

27 (d) The commissioner of the department of employment security, or designee.

28 (e) The director of the state office of veterans services, or designee.

29 (f) A representative of the National Alliance on Mental Illness, appointed by the alliance.

30 (g) The chairperson of the governor's commission on alcohol and drug abuse prevention,
31 intervention, and treatment, or designee.

32 (h) A representative of the governor's commission on disabilities, appointed by the
33 governor.

34 (i) A hospital administrator, appointed by the governor.

35 (j) The director of the White River Junction VA Medical Center, or designee.

36 (k) The director of the Manchester VA Medical Center, or designee.

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1 (l) A representative of the New Hampshire Medical Society, appointed by the society.

2 (m) One representative of the New Hampshire Psychological Association, appointed by
3 the executive director of the association.

4 (n) One representative of the Brain Injury Association of New Hampshire, appointed by
5 such association.

6 (o) One representative of the Disabilities Rights Center, appointed by the executive
7 director of the center.

8 (p) Two representatives of veterans organizations who serve on the state veterans'
9 advisory committee, appointed by the chairman of the state veterans' advisory committee.

10 (q) A representative of Disabled American Veterans, appointed by the adjutant general
11 of the office of Disabled American Veterans.

12 (r) The commandant of the New Hampshire veterans' home, or designee.

13 (s) The adjutant general of the New Hampshire national guard, or 2 designees
14 representing the air and army branches of the New Hampshire National Guard, appointed by the
15 adjutant general.

16 (t) A representative of the Community Behavioral Health Association, appointed by the
17 association.

18 (u) A representative of the New Hampshire Deployment Cycle Support Program,
19 appointed by the governor.

20 (v) A VA veterans center team leader, appointed by the governor.

21 (w) A member of the peer support unit of the New Hampshire state police, appointed by
22 the governor.

23 (x) A representative of the university system of New Hampshire, appointed by the
24 chancellor of the university system.

25 II. Except for the members in subparagraphs (a)-(e), the term of office for members shall be
26 2 years or until a successor is appointed and qualified. The members in subparagraphs (a)-(e) shall
27 serve terms coterminous with their terms of office.

28 III. In appointing members to the commission, the appointing authorities shall give priority
29 to persons who served on the commission to study the effects of service-connected post-traumatic
30 stress disorder (PTSD) and traumatic brain injury (TBI).

31 IV. Legislative members of the commission shall receive mileage at the legislative rate when
32 attending to the duties of the commission.

33 115-D:3 Duties.

34 I. The commission shall ensure the continued effectiveness of the report issued by the
35 commission to study the effects of post-traumatic stress disorders (PTSD) and traumatic brain injury
36 (TBI) by evaluating its implementation, producing progress reports, and recommending program

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1 changes, initiatives, funding opportunities, and new priorities to update the report. The commission
2 shall be a proponent for improving the access to care and quality of care for veterans and service
3 members who suffer with PTSD and TBI.

4 II. To assist the commission in the performance of its duties, the chairperson shall create
5 committees. The chairperson shall initially create committees to address the following issues:

- 6 (a) Stigma reduction.
- 7 (b) Community education and training.
- 8 (c) Continuum of care development.
- 9 (d) Other special projects or areas of concern.

10 III. The chairperson shall appoint at least 2 commission members to serve on each
11 committee and shall designate a chairperson or co-chairpersons for each.

12 IV. Based upon recommendations from each committee, the commission chairperson may
13 appoint as many individuals as necessary to serve as adjunct members of each for a term of one year.

14 V. Each committee shall:

- 15 (a) Develop its goals and objectives based on the report.
- 16 (b) Identify program areas where improved military and civilian coordination is needed.
- 17 (c) Focus on improving access to care and quality of care for veterans and service
18 members.

19 115-D:4 Chairperson; Quorum. The members of the commission shall elect a chairperson from
20 among the members. The first meeting of the commission shall be called by the senate member. The
21 first meeting of the commission shall be held within 45 days of the effective date of this section.
22 Fourteen members of the commission shall constitute a quorum.

23 115-D:5 Report. Beginning on November 1, 2014, and every November 1, thereafter, the
24 commission shall submit an annual report of its activities and any proposed legislation to the
25 president of the senate, the speaker of the house of representatives, the chairpersons of the senate
26 and house committees having jurisdiction over health and human services issues, the senate and
27 house committees having jurisdiction over veterans affairs, the chairperson of the oversight
28 committee on health and human services, the chairperson of the fiscal committee of the general
29 court, the senate clerk, the house clerk, the governor, the members of the New Hampshire
30 congressional delegation, and the state library.

31 135:3 Effective Date. This act shall take effect upon its passage.

32 Approved: June 16, 2014

33 Effective Date: June 16, 2014