#### JOINT LEGISLATIVE FISCAL COMMITTEE

(Live Streaming)
Legislative Office Building, Rooms 210-211
Concord, NH
Friday, September 17, 2021

## MEMBERS PRESENT:

Representative Kenneth Weyler, Chair
Representative Karen Umberger, Clerk
Representative Tracy Emerick
Representative Jess Edwards
Representative Mary Jane Wallner
Senator Gary Daniels, Vice-Chair
Senate President Chuck Morse
Senator Robert "Bob" Giuda
Senator Lou D'Allesandro
Senator Cindy Rosenwald

(The meeting convened.)

# (1) Acceptance of Minutes of the August 20, 2021 meeting

KENNETH WEYLER, State Representative, Rockingham County, District #13: Good morning. Apologize for the delay. We had a request to get set up for the last minute for streaming. So we're going out over the air on our microphones, not on the camera. So I'm Representative Ken Weyler. I'll call the Fiscal Committee to order on September 17, 2021, and we have a fairly full agenda.

First item I'm going to address is the minutes of the last meeting, the minutes from August  $21^{\rm st}$ .

\*\* LOU D'ALLESANDRO, State Senator, Senate District #20: I move approval.

CHAIRMAN WEYLER: Senator D'Allesandro moves to approve. Is
there a second?

TRACY EMERICK, State Representative, Rockingham County, District #21: Second.

CHAIRMAN WEYLER: Second by Representative Emerick. Any further corrections or deletions? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The minutes are adopted.

## \*\*\* {MOTION ADOPTED}

## (2) Old Business:

CHAIRMAN WEYLER: And under Tab 2 we have a tabled item from last time. We asked for additional information, and we've gotten 12 pages of that. Is there any -- anybody with further questions on --

KAREN UMBERGER, State Representative, Carroll County, District #02: Have to take it off the table.

CHAIRMAN WEYLER: First we'd have to see if anybody is willing to take it off the table.

\*\* SEN. D'ALLESANDRO: I move to take it off the table.

JESS EDWARDS, State Representative, Rockingham County,
District #04: I'll second that.

CHAIRMAN WEYLER: Senator D'Allesandro moves to take the item FIS 21-232 off the table, and it's seconded by Representative Edwards. All in favor of removing the item from the table say aye? Opposed no?

ROBERT "Bob" GIUDA, State Senator, Senate District #02: No.

CHAIRMAN WEYLER: One no. Wish to be recorded?

SEN. GIUDA: Yes.

CHAIRMAN WEYLER: Representative Giuda says no.

# \*\*\* {MOTION TO REMOVE THE ITEM OFF THE TABLE ADOPTED}

<u>CHAIRMAN WEYLER</u>: All right. Item is off the table. Do we wish to have consultation with the Commissioner or someone from Health and Human Services?

SEN. D'ALLESANDRO: I think Katja Fox is here and she is the person who supplied the additional information.

CHAIRMAN WEYLER: All right. We'll ask for Director Fox to come forward. Thank you, Director, for all the information you've given us. We still had some wonder about the success rate, and we won't know that till we get into the program, I'm afraid.

KATJA FOX, Director, Division for Behavioral Health, Department of Health and Human Services: So is this on?

CHAIRMAN WEYLER: Push the red button down and lock it down.

MS. FOX: Okay. There we go. Great. Thank you. So thank you, Mr. Chair, and Honorable Members of the Committee, for the opportunity to speak to you about this tabled item.

The success rate, yes, that is something that we hope with the funding with this and with the subsequent funding that's before you this morning that we're going to be able to better look at our data for New Hampshire's specific information. We had the information that we're able to provide to you from a national perspective that shows recidivism and relapse compared to other significant health conditions. So what we want to do, and I think we discussed this at the last meeting, is that we want to be able to get deeper into that data and really understand what's working and what's not.

So we have evidence-based programs and evidence-based programs are based on research that indicate that there has been

success and that these programs are effective. But we want to know in New Hampshire, are they working in New Hampshire. And so with this funding we're going to be able to take a closer look at that and really make changes as necessary.

CHAIRMAN WEYLER: Any further questions from the Members of the Committee? Senator Giuda.

SEN. GIUDA: Thank you, Mr. Chairman. With all due respect -- with all due respect, how many years has this program been in effect?

MS. FOX: So -- hum -- we've had a number of programs in effect. So I'm not quite sure which one you're referencing.

SEN. GIUDA: Pick one.

MS. FOX: Okay. So treatment services. And so -- one of the things that we have found increasingly is the need to be able to demonstrate, not only to the public and to our policy makers, but to ourselves and to the individuals who are entering treatment, that there is an efficacy to the treatment modality. We haven't had the tools to do that, and that's what we're asking for today.

CHAIRMAN WEYLER: Further question.

SEN. GIUDA: Yeah. I -- I -- I am appalled. Let me put it that way. How many millions or tens of millions of dollars have we spent and are we continuing to spend on a program for which the Department has developed zero metrics for the State of New Hampshire but relies on federal data for the nation to justify these programs? I'm interested in helping New Hampshire citizens. I don't care what happens in Wyoming or California and a department, that's the Department of Health and Human Services for this state, has been remiss in not accumulating that data for itself. I would think you'd want self-improvement, and to do that you need these metrics that have for years have been absent and are still absent in the data that you provided

today. I don't believe for a second you don't have the talent and skill sets within the Department, okay, to develop a metric system for all of these programs. I'm appalled that the Department hasn't done so as a matter of routine in every program. We just keep taking millions and millions of dollars and throwing them at programs that we have no idea whether or not they work. How much of the funds that you're asking for are going to be appropriated for developing metrics?

 $\underline{\text{MS. FOX}}$ : Hum -- I'd have to go back and look between the two that are appearing before you for substance use services. I will say that the emphasis has been on process outcomes and not -- I mean, on process measurements. So we count widgets. We count how many people were served. How many people got X service? And I agree with you, we haven't focused on the outcomes.

The State Opioid Response Grant requires us to collect 12 pages of data, 20 pages of data from individuals so that we can get more to what you're talking about and what we all want to see, which is outcome-based information and data that really tells the story of the -- how well the programs are working.

SEN. GIUDA: Follow-up.

CHAIRMAN WEYLER: Follow-up.

SEN. GIUDA: I'm all for that. The question is you already have the data that you need. You know how many people come back into these programs after having been through them. So the question is why is the Department not doing the responsible thing with millions of dollars of taxpayer funds for people who have problems that keep showing back up? The question is why is it not being done now? You don't need six and a half million more dollars to do that.

 $\underline{\text{MS. FOX}}$ : So one of the reasons it's not done now is that we don't track people. We don't give an identification number for each person and have a tracker on them and know where they are

at any given time. So we're not GPSing people as they go through a substance use system or a mental health system. We want to be able to have the information that you want, but we're also hamstrung by some of the barriers that exist to be able to identify people who are within state funded systems.

SEN. GIUDA: I am appalled, as I said. I don't believe for a second that you can't figure out who went through a program and if that person comes back in. To me, after decades of these programs and tens of millions of dollars being spent, the Department needs in this and every other program to start paying attention to their effectiveness and not to get millions of dollars of grants to say that you need that so that you can do it. This is basic high school mathematics. It's not rocket science. Thank you, Mr. Chairman.

<u>CHAIRMAN WEYLER</u>: Any other member of the Committee? Representative Edwards.

REP. EDWARDS: Thank you, Mr. Chair. The minutes reflected, as are part of our tabling motion, that the Committee requested the Department explain in better detail that this accept and expend request is one-time money and what money is to be spent on that is truly one-time investment. And that was triggered by the final two sentences of the explanation in July, which I'll paraphrase. One sentence said that it leveraged existing infrastructure. The next sentence said that you'd be filling gaps and those two statements seem to be in conflict and created some confusion, so at least in my mind. So if you could just be on the record and clear, is this -- do you see this as one-time money or is this money that the State will have to fill in once the federal money goes away?

MS. FOX: So thank you. And I'm sorry if that was not clear or addressed. This is one-time money. When we say to identify gaps, were gaps in the infrastructure so that investment that lays the groundwork for -- for the work that needs to be done, we're not going to be requesting before the Legislature for the next biennium funding to continue any of this. And that's very

clear in all of our efforts that this is to be infused into the system so that we can continue to provide the services. So the gaps are really the infrastructure.

REP. EDWARDS: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: So I appreciate what you've done, Miss Fox. I -- I think when we write these things and when the Fiscal Committee use them, from my perspective what we're doing is we're reading them on behalf of the public. And the -- and the issue of transparency, the better these are written so that kind of a layman can understand what we're doing with the money, I think that's the standard I'm looking for. And you've provided us with this additional information, you know, basically a nice set of responses, and I appreciate the work that you've put in on this.

MS. FOX: Thank you. And -- hum -- I hope that you saw in the two new items that were submitted and those we had a very quick turnaround time from the last meeting to get those that we are getting better at providing that information upfront, and we'll continue to evolve that.

REP. EDWARDS: Thank you, Mr. Chair.

CHAIRMAN WEYLER: Representative Umberger.

REP. UMBERGER: Yes. And this is kind of a general question in regards to the SAMHSA grant in that you've identified contractors and temporary people to do all this work. And my question is where are these people coming from?

Because -- hum -- you know, our labor force is quite well-employed and shortages exist all over the place. And so where are we going to find these skilled people to do this work?

 $\underline{\text{MS. FOX}}$ : So that is a very, very good question, and one that we ask ourselves every day, because we know of the

shortages that have been experienced, even pre-pandemic in the workforce, especially for these types of services. There is a little bit of money in here for workforce development, and I know the Commissioner is working on a statewide recruitment effort, and I'm sure she could speak to that specifically. But it is something that could potentially be a barrier to getting the services and getting the work that we want to get done in place.

We are finding that individuals who are in particular aspects of the health care system have made some decisions to use their skills in another way. And -- hum -- that could be a potential source. However, that's just taking someone from, you know, who may be on the front lines and bringing them into a different setting. So it's -- it's going to continue to be a struggle, and it will be something that we need to carefully monitor and adjust to.

REP. UMBERGER: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. UMBERGER: Yes. So what is the Department's plan at this point in time to get those people hired, both on the contractor side and the temporary side?

MS. FOX: So I can tell you that where you may be familiar with us standing, I think I talked about it numerous times, standing up the new statewide mobile crisis system. And so the Community Mental Health Centers are having to recruit staff and they're finding ways within which to do that. And so we work really close with the providers on helping to identify those sources and those -- those individuals.

One thing that we really want to think about is training up individuals who already have some of the skills. So they may need a certificate program. They may need -- good to go from an Associate's degree, to a Bachelor's degree. We want to grow people who are already have the potential and have a career

ladder. So that's another strategy that we've been looking at. But, again, there's no simple solution to something that is affecting every single aspect of the health care system, not only in New Hampshire, but nationally.

REP. UMBERGER: Thank you.

<u>CHAIRMAN WEYLER</u>: Senator Rosenwald and then Senator Daniels.

CINDY ROSENWALD, State Senator, Senate District #13: Thank you. Katja, given that the Department, wouldn't I assume, I know how dangerous that is, but wouldn't know who the individuals are that are receiving treatment services, how would you go about collecting outcomes data? Would you do random surveys anonymously or how -- how would you do without intrusion of privacy?

MS. FOX: So I think there are a number of ways, and it's too bad, I don't think Dave Wieters is here; but there are a number of ways we can use existing data. So we have data by consent I think he explained at the last meeting. So we have data by consent that we can then bring our systems together, which are some of our efforts to be able to take that 360-degree to see what other services they're receiving. So I think that there's more work to be done with that. And in here there are efforts and there's funding to specifically do that. Yeah, I quess I'll leave it at that.

CHAIRMAN WEYLER: Follow-up. Senator Daniels for a question.

GARY DANIELS, State Senator, Senate District #11: Thank you. Good morning. Uh -- in the documentation under the recommended funding priorities, it indicates that the grantees might focus their efforts on reducing overdose rates and that they might also be directed towards expanding SUD services workforce. This word "might" concerns me in that it -- there's nothing definite that says that this is what you're going to do. Going back to one of the previous comments -- uh -- so -- so in

addition to maybe explaining the might part of it, why that word is there, as I look at the information that you have given us, and how monetarily that is broken up, I can't see anything right off that -- that supports your statement that this money would be used for monitoring. So could you show me exactly where in there that money would be used to establishing some sort of a monitoring system or tracking?

MS. FOX: So the first one, which is on the first page, which is the \$1.5 million, which talks about integrating the WIC system, which is the system that we use for -- specifically for substance use services, into the enterprise business intelligence platform. So that's one area specifically that would address that. And that also includes the epidemiologist for Behavioral Health that would be able to do the data analytics, and I think we talked about that again. And Senator Giuda referenced you have all this data. Well, we have the data, but we don't have the analytics that we need to bring everything together and to interpret and to be able to present that data in a way that is understandable so that we do know what's going on.

SEN. DANIELS: Can you address the comments that say that they might do this or might do this?

 $\underline{\text{MS. FOX}}\colon \text{Could you}$  -- is that in the guidance or is that in something that we --

SEN. DANIELS: It's on the -- I'll say the third page under Recommended Funding Priorities. The second paragraph. It's right above where texturally you start talk about prevention, intervention.

MS. FOX: I'm sorry, I don't have my glasses.

SEN. DANIELS: We have a SAMHSA document.

MS. FOX: Yes, it's from SAMHSA.

SEN. DANIELS: Okay. So the second page of that.

 $\underline{\text{MS. FOX}}$ : Yep, yep, got it. Yep, recommended funding priorities.

SEN. DANIELS: Third and fourth line down.

MS. FOX: Yep. So -- so this is a guidance we receive from the Federal Government, and they say that you could do this and you might do this and prioritize it. We -- that's good and bad, because it's not as directive as we would want, but it also gives us broad leeway.

One of the things that we have the opportunity to do is based on further input from this Committee and from others is to be able to make adjustments in requests to SAMHSA to change our plan. So it does provide that opportunity.

SEN. DANIELS: So as you come before Fiscal, how do we know how the money is going to be used?

 $\underline{\text{MS. FOX}}\colon$  This is our plan as submitted to SAMHSA as of right now.

SEN. DANIELS: Thank you.

<u>CHAIRMAN WEYLER</u>: Further from the Committee? How does the Committee wish to dispose of the item?

\*\* SEN. D'ALLESANDRO: I wish to move the item.

CHAIRMAN WEYLER: Senator D'Allesandro moves approval of FIS
21-232. Is there a second?

SEN. ROSENWALD: Yes.

<u>CHAIRMAN WEYLER</u>: Senator Rosenwald seconds. Further discussion. Seeing none. Are you ready for the question? All in favor say aye? Opposed no?

SEN. DANIELS: No.

REP. UMBERGER: How many nos?

CHAIRMAN WEYLER: How many nos?

REP. UMBERGER: Two?

CHAIRMAN WEYLER: Two nos.

## \*\*\* {MOTION ADOPTED}

## CONSENT CALENDAR

## (3) RSA 9:16-a, II, Transfers Authorized:

CHAIRMAN WEYLER: All right. Moving on to Tab 3. There are two items on the Consent Calendar. We're taking the first item, 21-246 off. I believe that was Representative Umberger had a question on that one. So we need someone from the Department of Education. I see the Commissioner. Good morning, Commissioner.

FRANK EDELBLUT, Commissioner, Department of Education: For the record, Frank Edelblut, Commissioner of Education.

TAMMY VAILLANCOURT, Chief Financial Officer, Department of Education: Tammy Vaillancourt, CFO for the Department of Education.

CHAIRMAN WEYLER: Representative Umberger.

REP. UMBERGER: Thank you very much, Mr. Chairman. Uh -- I understand the problem. What I don't like is the money coming out of Career Tech and Robotics. Because, you know, these are areas that we -- especially Robotics, that we specifically funded. So for STEM work. And CTE State money is quite limited overall, you know, in relationship. So I -- I get the need for the work, but what I don't get is why you decided to remove it from these two particular programs. Thank you.

MR. EDELBLUT: Yeah. Thank you for the question. So I'll address each of them separately. So relative to the Robotics, so this is \$750,000 that was appropriated in the last biennium budget that had not been spent and by law carries forward automatically. It's non-lapsing.

What we were able to do last year is supplement the Robotics work with Federal funds, a combination of ESSER funds that we received, as well as an ARP grant that we received from GOFERR to be able to sustain those programs. Those funds, because the nature of those Federal funds, did not carry with them the issue of supplanting, so we were able to do that. So, essentially, what we did was we were preserving those Robotics funds through the supplementation of the Federal funds to be able to carry that forward. And so we do, in the current budget, have an appropriation. So we think that we will be able to keep our Robotics programs at full strength in terms of the work that we're doing because we're able to use these alternative funding sources for the Robotics.

The second issue is relative to the CTE funds. And, again, just parenthetically, I mean, essentially, we found ourselves in a circumstance of needing to do the asbestos remediation in the building, and we needed to come up with funds. And so we just hunted around to try and figure out how we might do that.

With respect to the CTE funds, we had been working on and we're able to negotiate a change in how that program was working. So while typically on our apprenticeship types of programs, the apprenticeship program fees are collected at the source of the apprenticeship program instruction. And then, historically, those are passed through to us and then we would pass them on to the actual programs. Excuse me. And so what we did is we had been trying to change this and we eventually were able to get it done. We, basically, took ourselves out as the middle man and so now the apprenticeship program students pay directly to the programs, and we're not there so we have this additional appropriation that we are using for these funds. And

so we didn't disrupt anything with regard to our CTE program. It was really just a procedural process that we were able to use to preserve the funds.

REP. UMBERGER: If I might, follow-up?

CHAIRMAN WEYLER: Follow-up.

REP. UMBERGER: Thank you. I thought that -- hum -- DAS was in charge of all of facilities work. And it -- it kind of surprises me that we are using Education money for facilities work. And -- hum -- was that because DAS told you if it was going to be done it had to come from your budget or just exactly how did all of that work?

MR. EDELBLUT: So my understanding, and I think DAS is here and if they want to comment they can, but that we, you know, it's our facility, and we needed to make sure that that facility was habitable. And so we had to come up with funds to be able to make sure that was the case, and so we worked towards that goal.

CHAIRMAN WEYLER: If the Commissioner of DAS wants to comment? Commissioner. Either hold the blue one or lock the red one.

CHARLES ARLINGHAUS, Commissioner, Department of
Administrative Services: There we go. I'm really good with
technology. Hum -- Charlie Arlinghaus. I'm the Commissioner of
Administrative Services. The way billings generally work is we
have a -- we have a budget, and I suppose probably this
Committee knows better than most. And we spend the money where
it's allocated and we have a certain amount of money. Part of
the -- part of the budget includes Class 48 money. It's
typically where most of the maintenance and stuff -- stuff like
this would come out of and there's a limited pot of money.

We actually had a very small bit of asbestos remediation that was being done. The Commissioner, quite rightly, thought

that as long as he's moving people around it would make sense while he was doing it to move a lot of people out, and how about we do more. And I said, great! I just don't have any money to do it. If you have money to do it, we can do it. It's not like -- it's not like Frank and Tammy are doing the work or me. It's actually people who -- who know what they're doing with asbestos. That's kind of who we hire.

It is typical with much facility work that an agency might supplement some of the work on their building with additional money they have. Maybe their current expenses were down for some reason in a year. They found money some other way. They're able to divert money from something else. And so it's typical that they — that they would then say to us, hey, we found the cash, can you do X, Y, or Z? We would actually look at X, Y, or Z and determine whether X, Y, or Z were appropriate to be done as opposed to you want to put on a new roof, but you don't need a new roof.

We wouldn't actually let you, be sort of a negotiated thing, right, but we wouldn't let you put on a new roof. But if you're doing work that needs to be done, means to be done, you're able to find the money, we would then work with you to do it. And, obviously, this is a project where Public Works is involved. Our head of the Bureau of General Services is, for lack of a better word, project manager. We have people there every day. It's not like any of the three of us are wandering around going I think that's asbestos. So it's not -- it's not unusual that this would happen. It's just that typically it happens in -- in amounts of, you know, 30, 40, 50 grand where, you know, you wouldn't notice it. This happens to be really big project, an asbestos remediation, you know, which is an issue in almost every state building. Obviously, maybe not -- maybe not this one anymore, but almost every other state building. to be a little bit pricey.

<u>CHAIRMAN WEYLER</u>: Further from the Committee Members? Seeing none. How do you wish to dispose of this?

\*\* REP. UMBERGER: I'll move approval.

SEN. DANIELS: Second.

CHAIRMAN WEYLER: All right. Representative Umberger moves approval, Senator Daniels seconds. Further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The motion is adopted.

## \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: And moving on to the second item under Tab 3 is 275.

REP. EDWARDS: I'd like to pull this off Consent Calendar.

CHAIRMAN WEYLER: Okay. And it's already standing by itself. So, again, we'll have somebody from HHS, the Commissioner and the Chief Financial Officer are here. Representative Edwards has questions on FIS 21-275.

REP. EDWARDS: Thank you, Mr. Chair. I -- I think I have two questions on this. I'll pause in-between to get permission to continue. But my first one is related to the idea that I think we've already accepted this federal money and what this is really meant to do is support an accounting transaction to move the money over into a line, the \$20 million over into a line where it can be encumbered and spent. Have we -- we've already accepted this federal money?

KERRIN ROUNDS, Chief Financial Officer, Department of Health and Human Services: That's correct.

REP. EDWARDS: Okay. So my real question about that then is when we did that, I -- I understand that there's a fairly standard clause when we receive federal money, particularly in the days of COVID, that says that we shall comply with existing and/or future directives and guidance from the Secretary. Do you know if we accepted that language and by accepting this

\$20 million we've already ensnared ourselves into any future directives that the Secretary may send down to New Hampshire?

MS. ROUNDS: I don't understand your question. Where is that directive? Who is it from and what are you implying?

REP. EDWARDS: So I spoke with Ms. Tilley before the meeting just to verify my understanding that it's fairly common when we accept federal money, and I think she thinks that it is fairly common, to accept the obligation as we accept the federal money to comply with existing and/or future directives and guidance from the Secretary.

 $\underline{\text{MS. ROUNDS}}$ : So which Secretary you referring to, because this is funding from FEMA?

REP. EDWARDS: This is all FEMA money.

MS. ROUNDS: Yes.

REP. EDWARDS: And not CDC money?

 $\underline{\text{MS. ROUNDS}}$ : Correct. This is all from FEMA. This accounting unit is only FEMA.

REP. EDWARDS: Okay. Then I'm ready for my second question,
if I could have a follow-up?

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Similar to the reason we tabled 232, I think there's just not any real explanation of how this \$20 million is intended to be spent. And I'm -- I'm kind of an advocate for writing with enough detail so that the lay people of New Hampshire can read this and know what we're doing with money. And so -- so I would just say that this doesn't describe at all how we're going to spend the 20 million, and do you have a comment on that?

LORI SHIBINETTE, Commissioner, Department of Health and Human Services: I do, yes. Hum -- part of the reason for this transfer is seeing the increasing cases of COVID across the state right now, we need to start to stand up infrastructure and things like statewide testing, which we did originally last year, and then stood down this summer when our cases went down.

So as our COVID cases continue to go up, we need to look at a statewide response again. We need to transfer this money before we can contract it out. We can't contract out this money until it's transferred. We're in the middle of contract negotiations with the providers now. Those contracts will go to Governor and Council, as all of our contracts do, but delaying this is going to delay our response to the COVID-19 Pandemic.

REP. EDWARDS: No, I understand. Oh, I'm sorry, follow-up.

CHAIRMAN WEYLER: Go ahead.

REP. EDWARDS: Okay. So I'm not -- I'm not really wanting to delay this. My observation is that, as written, 275 does not provide any detail of what your plan is for these 20 million in contracts.

MS. SHIBINETTE: So I can tell you to stand up state-wide testing through a contract with a provider, to stand up testing sites, between four and ten testing sites, depending on how our numbers go, it's to increase our mobile vaccination efforts. I've spoken a couple of times about the fact that we are targeting communities with vaccination levels less than 50% to increase vaccination levels. So mobile vaccine vans, mobile vaccine clinics. If boosters are approved, the ability to do mobile clinics to do the third shot for the elderly and the infirmed, the immuno-compromised, health care providers. That is what this \$20 million is for and I can't break it down yet because I don't have the contracts.

REP. EDWARDS: Right, right. No, I understand that.
Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Okay. So since my main point of concern is just transparency for New Hampshire citizens, what you said is adequate in my view. Could we get a commitment for you to help write that up so that we can put it into the minutes? Because if we put it into the minutes, I think -- I think that's adequate transparency and that's really my goal in asking this question.

MS. SHIBINETTE: Sure.

REP. EDWARDS: Thank you so much.

MS. ROUNDS: If I could just add from a procedural standpoint. One of the difficult things when we're responding to the Pandemic is that we often know that we need money, but we may not know exactly what we need it for in the moment we have to submit this item. You'll notice that numbering-wise it was one of the last items accepted by Fiscal Committee onto the Regular Agenda. And a week and a half ago it was hard to know exactly what we were going to need. We knew we needed funds, that things were starting to move along. So that's one of the difficulties. So I appreciate the ability to put it in the minutes when we're here, because we may not always know at the time we have to submit the letter.

REP. EDWARDS: I -- I think we're here to support you. There is a crisis and there is a lot of Rapid Response to what you're trying to do. I just want to be as transparent as we can be for people to know what we're doing with the money. That's all.

CHAIRMAN WEYLER: Senator Rosenwald for a question.

SEN. ROSENWALD: Thank you. I don't know if this is on. Okay. Good morning. The \$20 million from current expense represents 35% of your current expense for the biennium. Are you pretty sure you don't need to obligate the entire 57 million we

budgeted, or are you going to be back before Fiscal asking to transfer money back into current expense?

MS. ROUNDS: So you know that every answer I give comes with a caveat, right? So there's certainly one in this scenario, too, which is as of right now no. So Class 20 is primarily for purchasing PPE. And right now we -- we have a stockpile and a supply that we're okay with for now, but we don't know what's going to happen three weeks from now, a month from now. So is there a chance that I would be back accepting additional FEMA funds to then increase that line later? Yes. But with the information that I have right now, it didn't make sense to accept more funds into Class 103 knowing that right now we don't see using all the class -- all the funds in Class 20 --

SEN. ROSENWALD: Thank you.

MS. ROUNDS: -- this week.

CHAIRMAN WEYLER: So can we assume from what you said that this contract, 20 million, is likely to go to one provider?

MS. SHIBINETTE: No, no. We will have at least one provider providing statewide testing. We will have several providers providing mobile vaccine clinics. I think it will be spread across several providers.

CHAIRMAN WEYLER: Thank you. How does the Committee wish to proceed with item FIS 21-275?

\*\* REP. EDWARDS: So, Mr. Chair, I'd like to move the item.

SEN. GIUDA: Second.

REP. EDWARDS: Particularly with the Commissioner's proviso that we'll have additional information for the minutes.

CHAIRMAN WEYLER: Understand the motion and Senator Giuda seconds. Further discussion from the Committee? Seeing none.

SEN. D'ALLESANDRO: If I might? If I might, Mr. Chairman?

CHAIRMAN WEYLER: Senator D'Allesandro.

SEN. D'ALLESANDRO: Thank you. With reference to the discussion that --

REP. UMBERGER: We can't hear you.

SEN. D'ALLESANDRO: With reference to the discussion that -- can you hear me?

SEN. GIUDA: Push it in. Just push it in.

SEN. D'ALLESANDRO: Okay. It's good to go. Maybe this isn't working. I think the fundamental point that's been brought up here is communication, and the communication has been limited. That's not good government. That's not good public policy. That's not good for anything. When you get a one-page situation talking about \$20 million, there should be more information, better backup, and that's got to come, because the public listens to what we do here. The public pays attention to what we do here. And we, as legislators, deserve that courtesy. That hasn't been forthcoming, and I'm very concerned about that, very concerned about it.

I've been here a long time. I've been through a lot of Commissioners, a lot of financial people. The work that has been coming across has not been good from my perspective. And I have great respect for the people that are there. Great respect for you, Kerrin, and great respect for the Commissioner. But damn it, communication saves the nation. If you're not communicating, the results are going to be negative, negative for the people we're supposed to serve, and negative for the people sitting around this table.

MS. SHIBINETTE: If I could comment on that, Senator? The pace at which COVID moves across the state requires immediate

action. It always has. It has for -- it has for 18 months. One of the reasons why the State of New Hampshire has been so successful with COVID is that we have been able to move very quickly. If Fiscal Committee would like to be updated on -- on everything that we need to do, then I would suggest that you have meetings more often. I can't wait a month between our decisions at the Department to respond to a global pandemic.

CHAIRMAN WEYLER: Further discussions from the Committee? We have a motion. Are you ready for the question? All in favor say aye? Opposed no? And motion is adopted on 21-275.

## \*\*\* {MOTION ADOPTED}

REP. UMBERGER: (Inaudible) if something is urgent, Fiscal
Committee will call a meeting so that they know that.

CHAIRMAN WEYLER: And I will state for the record that we have called meetings on short notice - I have - and we will see them later. Five items that we've -- were submitted late, within the previous five, six days, I accepted them all rather than delay them because I know the urgency. And we have called special meetings when there was an urgency. But to get all these people together and fit it in the schedule we have to know a month in advance what's coming and the -- and the people at the Legislative Budget Assistant Office has to spend some time putting this all in a book and putting it all in order and getting all the details for us that, obviously, you can see we want a lot of detail. So they do their best to give us an item. So, yes, we do have more frequent meetings as needed, but normally we don't need that many. Senator Morse.

CHUCK MORSE, Senator and Senate President, Senate District #22: Mr. Chairman, the -- obviously, like the House, we had our meeting to review the Fiscal agenda. There's nothing -- nothing on this page that explains \$20 million.

CHAIRMAN WEYLER: Right.

SEN. PRESIDENT MORSE: So I don't know when you accepted it and when you put it in the book. I was prepared, and I told you when I got here, I had a solution for this. We come back the 1st of October and then we have our normal meeting if we were going to table some things. But I can tell you the Senator that spoke, spoke from the way we've always worked on this Committee. We deserve the detail, Commissioner. \$20 million is a lot of money. We should know what it's doing. I think to come before us and to basically say we have to meet better than a month, we're more than willing to do that, Commissioner. We don't have a problem doing that. I saw that there's going to be some items tabled and I certainly suggested to the Chairman that we come back sooner; but there's nothing on here.

MS. SHIBINETTE: I understand your frustration. Same frustration on this end. I don't have the luxury of waiting a month to make these decisions. Our COVID rates sometimes triple in two and three weeks. I cannot wait a month. So yes, if you would like more details, I'm happy to provide more details on that specific item. All I knew at the time that that item was submitted that we needed to stand up state-wide testing and mobile vaccine clinics. I don't know how much. I don't know what providers. All I know is I can't wait another month to get approval to spend that money. That is the pace the COVID Pandemic has moved for the last 18 months. So I would need weekly meetings to be able to give you what you need in the immediate time.

SEN. PRESIDENT MORSE: Commissioner, there's no way this Committee wouldn't meet for you in weekly meetings. What the Committee is saying this has become common practice on many items in this book. That's why I was suggesting to the Chair that in order to get the information we come back sooner, because we want more detail. You know, the Member in the House that had concerns on the item we voted for upfront came to me and said, did I handle myself responsibly? And I said no. I said you need to connect with the Department and get your answers before we get in these meetings.

We've always handled ourselves that way here. And to come in and suggest what we're doing something wrong, we just want to know. We are getting hit from the public every day on every issue of COVID. And we think you've done a great job and we think the Governor's done a great job, but we're the ones getting hit with questions about mandates and hospitals, mandates and nursing homes, things that the public wants us to answer to. We're trying to work through all these things and have meetings, too. But to suggest that we won't come here and appropriate for you, that's not the issue.

MS. SHIBINETTE: I did not suggest that. I said if you wanted that amount of details on a regular basis, you would have to meet more frequently 'cause I can't wait a month. That was my comment. I did not suggest you were doing anything wrong or that you wouldn't meet.

SEN. PRESIDENT MORSE: Well, we are suggesting something's wrong. To get a piece of paper like this, it is wrong.

MS. SHIBINETTE: Okay.

SEN. PRESIDENT MORSE: We need to have more details than that. And that Senator asked that question because he's been here longer than all of us on this Committee and we've always had those kind of things happen. And the reality of getting a piece of paper asking for 20 million with no details. You're going to have to go out and write those contracts anyways.

MS. SHIBINETTE: Yes.

 $\underline{\text{SEN. PRESIDENT MORSE}}\colon$  So you could have had them for us today.

 $\underline{\text{MS. SHIBINETTE}}$ : We're in the middle of contract negotiations with those vendors and those contracts go to Governor and Council. All of that information will be completely in the public forum when we bring those contracts to G & C.

SEN. PRESIDENT MORSE: And, Commissioner, I've noticed that Governor and Council is tabling things left and right, too.

MS. SHIBINETTE: Absolutely.

SEN. PRESIDENT MORSE: For the same reasons 'cause I've called and asked why they're doing it. And they're doing it because they want more information. I'm done, Mr. Chairman.

CHAIRMAN WEYLER: Senator Giuda.

SEN. GIUDA: Thank you, Mr. Chair. In reviewing --

REP. UMBERGER: You're not on.

CHAIRMAN WEYLER: Hold the red one down.

SEN. GIUDA: Thank you. So in reviewing FIS 21-275, I think the concern that's expressed is that under -- on Page 2 justification, COVID-19 response efforts is very general. If maybe we were to go more detailed and say we need to stand up mobile teams, we need to expand our PPE, whatever, little more specificity there probably will avoid all of this. Understand you have a lot things you're submitting, but maybe that would prevent this in the future. Just a suggestion.

MS. SHIBINETTE: Thank you for the suggestion.

CHAIRMAN WEYLER: And, Commissioner, on the House side there was talk about tabling this. But because you only have three months before this goes away, we decided against that and put up with the scant information because we expect to get it more in the future. Thank you. All right. We have dealt with the item. We have disposed of it in a vote. So we'll move on to Tab 4.

REP. EDWARDS: Did we vote?

REP. UMBERGER: Yes, we did.

CHAIRMAN WEYLER: We voted.

REP. UMBERGER: I wrote it down.

<u>CHAIRMAN WEYLER</u>: She has recorded a vote. Does everybody remember voting on this item?

UNIDENTIFIED SPEAKER: Yes.

REP. EDWARDS: Man, I don't.

# (4) RSA 9:16-a, II, Transfers Authorized and RSA 9:16-c, I, Transfer of Federal Grant Funds:

CHAIRMAN WEYLER: Okay. All right. Tab 4, one item. Again, Department of Health and Human Services, authorizations to transfer \$3,218,576 in General Funds and so on for training and overtime. Is there a motion?

\*\* SEN. GIUDA: I'll move.

CHAIRMAN WEYLER: All right. Senator Giuda moves to approve, second from Representative Wallner. Further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The motion -- item is adopted, 21-266.

## \*\*\* {MOTION ADOPTED}

## (5) RSA 9:16-c, I, Transfer of Federal Grant Funds:

CHAIRMAN WEYLER: Moving on to Tab 5, one item, 21-267.

\*\* SEN. D'ALLESANDRO: I would move the item.

<u>CHAIRMAN WEYLER</u>: Senator D'Allesandro moves to adopt Item 21-267. Is there a second?

REP. UMBERGER: I'll second it.

CHAIRMAN WEYLER: Representative Umberger seconds the motion. Further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The motion is adopted.

## \*\*\* {MOTION ADOPTED}

(6) RSA 14:30-a, VI Fiscal Committee Approval Required
For Acceptance and Expenditure of Funds Over \$100,000
From any Non-State Source:

CHAIRMAN WEYLER: Moving on to Tab 6. This is a Consent Calendar. There are several items on it. I don't -- does anyone wish to remove any of the items? All right. Then we could have a motion to adopt the Consent Calendar item under item -- under Tab Number 6. That's moved by Senator D'Allesandro. Is there a second?

SEN. ROSENWALD: Second.

CHAIRMAN WEYLER: Second by Senator Rosenwald to adopt the items under Tab 6. That's 21-247, 21-248, 21-253 and 21-269. You ready for the question? All in favor say aye? Opposed no? Tab 6 items are adopted.

## \*\*\* {MOTION ADOPTED}

# AMERICAN RESCUE PLAN 2021 CONSENT CALENDAR

(7) RSA 14:30-a, VI Fiscal Committee Approval Required for Acceptance and Expenditure of Funds Over \$100,000 from Any Non-State Source:

CHAIRMAN WEYLER: Moving on to Tab 7.

SEN. DANIELS: Mr. Chairman.

CHAIRMAN WEYLER: Senator Daniels.

## JOINT LEGISLATIVE FISCAL COMMITTEE

**September 17, 2021** 

SEN. DANIELS: Yes, I have a question for the Department regarding -- I guess a question regarding all of these items on the Consent Calendar that have to do with ARPA. And that question is whether these items before us are part of the billion dollars in ARPA funds that we have received or are they separate and above those billion?

<u>CHAIRMAN WEYLER</u>: All right. Commissioner, there's a few items there from your Department or Chief Financial Officer Rounds.

MS. ROUNDS: I assume you meant Health and Human Services. You didn't say which Department.

SEN. DANIELS: Well, I noticed there were multiple
Departments. So we'll start out with HHS.

MS. ROUNDS: For Health and Human Services, no, these are funds that were in the ARPA bill but are not being appropriated to us from GOFERR which is, I believe, where all of those funds that you're speaking of would be appropriated from.

SEN. DANIELS: So put that another way, they are above?

MS. ROUNDS: Correct, correct

SEN. DANIELS: Okay.

 ${\underline{\tt MS.}}$  ROUNDS: These are direct to the Department.

CHAIRMAN WEYLER: All right. Under Tab 7 before you move away, I have requests from Representative Edwards to remove item 21-249, from Representative Umberger to remove 21-251, and Representative Umberger to remove 21-268. Any of the other items that any member wishes to remove?

REP. EDWARDS: Mr. Chair.

CHAIRMAN WEYLER: Under Tab 7.

REP. EDWARDS: I think if I remember Representative Umberger's questions, technically 21-271 would fall into the same general line of questions.

CHAIRMAN WEYLER: Okay. We'll remove that one as well.

REP. UMBERGER: Senator Giuda had something.

CHAIRMAN WEYLER: Senator Giuda.

SEN. GIUDA: 21-255.

CHAIRMAN WEYLER: 21-255.

REP. EDWARDS: That's in paragraph eight. We haven't got to that.

CHAIRMAN WEYLER: We haven't got to that one yet.

SEN. GIUDA: Thank you.

CHAIRMAN WEYLER: All right. So the remaining items on Tab 7 under the Consent Calendar are at this time 21-250, 21-252, 21-254, 21-270 remaining on the Consent Calendar. You got all those?

REP. UMBERGER: I will.

\*\* REP. EMERICK: So move.

CHAIRMAN WEYLER: Okay. All right. Representative Emerick moves to approve the remaining items that I just listed. Is there a second? Second from Senator Rosenwald. Further discussion on any of the items? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The remaining items are adopted.

# \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: We'll move next to 21-249, Department of Health and Human Services. This is 346,000 in Federal American Rescue Plan money. Representative Edwards has a question.

REP. EDWARDS: Thank you, Mr. Chair. So I've read the explanation and it's probably sufficient, but I'm still just a little confused, and I'd like to understand it. Is -- is -- is it the intent of this \$346,000 to hire staff to connect families that aren't currently considered a sufficient risk, to connect them to services that they aren't currently eligible for, but to do that while we're building a portal. And once that portal gets built, then that connection of these low-risk people who may not be authorized under current structures, that at that point they'll access the portal at no cost to the State other than maintenance of the portal. Is that -- is that fair or would you just straighten me out?

JOSEPH RIBSAM, Director, Division of Children, Youth, and Families, Department of Health and Human Services: Yeah, it's working. Good morning, everyone. Joe Ribsam, Director of DCYF. Good to see everyone this morning.

Yeah, this is part of a project that we're working on to try to change operations at our Central Intake. So Central Intake, historically the way it worked, people would call up, make an allegation of abuse or neglect. Sometimes those allegations are not sufficient to warrant investigation but there's some concerns, perhaps poverty or something like that happening within the family, and there's a need to connect that family to other resources in order to prevent them from formally coming into the system and going through an unnecessary assessment process, which is important both from a state resource perspective; but, also, because if you unnecessarily assess families for child abuse and neglect, you could scare them away from getting the help that they need.

So what we intend to do with this funding is to connect it to this -- this web-based decision tool that you were talking about, the portal that you were talking about. First phase is going to be to have a contract, not state staff, a contract with an entity who will do this kind of connection when we have these families who come to our attention but don't quite reach that level, and try to connect them with, say, a Family Resource Center or Food Bank or whatever it is that's going to help meet their needs short of coming into the system.

The next phase of this is this decision tree that we're creating which is, I think, a pretty exciting opportunity. It's being funded by a foundation, not by the State to build this thing. And what that's going to do is it's going to let typical reporters, imagine a teacher go to a portal, and they don't have to enter any identifying information, they're just going through their scenario, and that portal will help drive that teacher or whomever the user is to what the right resource is to the family. They might say you definitely need to call this in or it might say, you know, this is a family that could benefit from their local Family Resource Center and here's the information for the local Family Resource Center.

The second piece of that though is that we don't anticipate that contract for those staff going away when the portal's built, because what we've seen so far is that when we get these calls to Central Intake and we refer a teacher, say, to a Family Resource Center, that most of those teachers need more help than simply being told this is where to go. They need to be kind of walked through that process of how to have that conversation with the family. And if they're not comfortable having that conversation with the family, that individual can actually reach out and have that conversation with the family. So we don't anticipate it going away, but we do anticipate that it'll be funded through the Federal CAPTA funds, just like it is here, and it'll be with an outside contractor.

REP. EDWARDS: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Thank you, Mr. Ribsam. That was very comprehensive. So -- so just to clarify, this 346 is not intended to actually pay any community providers for services. This is strictly to do the assessments and to provide assistance out to people seeking help.

MR. RIBSAM: Correct. Yeah, it's to assess the needs, understand the needs and connect the referral or the family with the right resources in the community.

REP. EDWARDS: Okay. I understand. And -- and --

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Follow-up, please. And then why -- because this seems to be supplemental federal money, why do you have confidence that this particular allocation of federal money is going to continue in the future? And 'cause I'm getting back to the idea of when -- when are you going to come back and ask for General Funds?

MR. RIBSAM: I don't anticipate that we'll need to do that. The reason is that this was the ARPA expansion of the Child Abuse Prevention and Treatment Act funds. So it's a formula grant. It was bumped up a little bit through ARPA. The Child Abuse Prevention and Treatment Act is currently in consideration in Congress as a whole with a pretty large increase. So what I anticipate is that the ARPA funds when they dry up, the new CAPTA reauthorization funds will be more than sufficient to cover it.

REP. EDWARDS: Thank you, Mr. Ribsam. Thank you, Mr. Chair.

<u>CHAIRMAN WEYLER</u>: Further discussion from the Committee? Seeing none. I'll entertain a motion.

\*\* REP. EDWARDS: I move the item.

MARY JANE WALLNER, State Representative, Merrimack County,
District # 10: Second.

CHAIRMAN WEYLER: All right. Representative Edwards moves to accept the item and Representative Wallner seconds it. Further discussion? Seeing none. Are you ready for the question? All in favor of adopting 21-249 say aye? Opposed no? And that is adopted.

## \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: Moving on next to Item 21-251, Department of Health and Human Services. Representative Umberger's recognized for a question.

REP. UMBERGER: Thank you. I don't think I'm on. Okay. Thank you, Mr. Chairman. Uh -- my question on this is, is the money associated with 251 additive to what we saw in the item that we tabled or is this a different program?

MS. FOX: So, once again, good morning. And I neglected to introduce myself earlier. So I'm Katja Fox. I am the Director of the Division for Behavioral Health for the Department of Health and Human Services, and this is additional funding. So these two items that you have -- are asking about, 251 and 271, are specifically from ARPA. They are four-year grant periods, and you are being asked to accept them for this biennium. And then they would be sought in the next legislative budget for years three and four. So this is in addition to what you previously voted on this morning.

CHAIRMAN WEYLER: Further question.

REP. UMBERGER: No, thank you.

CHAIRMAN WEYLER: Senator Giuda for a question.

SEN. GIUDA: Thank you, Mr. Chairman. Would it be appropriate to require a report metrics on the success of these programs as a condition of accepting these funds, requiring the Department to do so?

CHAIRMAN WEYLER: It is appropriate.

\*\* SEN. GIUDA: Then I would so move.

CHAIRMAN WEYLER: Okay. So the question is a motion to adopt 21-251 with a report forthcoming on the metrics of the success of the program.

REP. EDWARDS: Mr. Chair. Because 250 -- or excuse me, 271 is similar, I'm just wondering if the Senator wants to extend what his motion is to 271 or if we should wait for that?

SEN. GIUDA: Certainly.

CHAIRMAN WEYLER: All right. So the motion involves 251 and 271.

REP. UMBERGER: We haven't talked about 271 yet.

CHAIRMAN WEYLER: Did you have questions on 271? It's a similar one and I believe the Director addressed both or the Commissioner did. 271 is, again, mental health, public assistance and relief. I removed that at your request. Do you want to --

REP. UMBERGER: No, it's okay.

<u>CHAIRMAN WEYLER:</u> You want to combine them both in one motion? Is that acceptable to the maker of the motion?

SEN. GIUDA: Yes, Mr. Chair, with an additional comment, if I may? That the metrics must include, okay, the rates of recidivism for people in these programs that are funded by these funds. We have to get a handle on not only that we're spending

but the effectiveness of our spending. I appreciate the Department's efforts to help us with that. Thank you.

CHAIRMAN WEYLER: Thank you. Do you understand the motion?

MS. FOX: I just have a clarification. So there is relapse in individuals with a Substance Use Disorder, and then there's the mental health issue. So I'm not quite sure what that looks like. Perhaps it could be around hospitalizations. So readmission to an acute setting or the utilization of emergency departments as a metric that could demonstrate the -- what you've referred to as recidivism for mental health.

SEN. GIUDA: Thank you for the question. I am not concerned about mental health. I'm much more concerned about the effectiveness of our drug programs. If someone else would like to add mental health, that's fine; but I'm not interested in that. I think that's far too much of a science to be able to evaluate recidivism or whatever it may be called. I think that the drug issue is more what I'm concerned with.

MS. FOX: Okay. And, Mr. Chair, also when that report would be due. So that's the other question I have.

CHAIRMAN WEYLER: Can you have it ready in four weeks?

MS. FOX: (Laughing).

CHAIRMAN WEYLER: Six months.

MS. FOX: So we can report out on our progress in six months. I'm not sure that we'll have quite what the Senator is requesting, but we'll certainly be able to provide an update as to the status of these programs funded by these sources.

CHAIRMAN WEYLER: Members will decide whether it needs to go further out than that; but heretofore I haven't heard much answers on the recidivism in the drug treatment program. I've heard it's more like 90% more is recidivism and only may be 10%

or less recovery, which doesn't speak well for the program. You know, normally you'd abandon something in the real world if it were that unsuccessful. But, anyway, we'd hope can do better.

SEN. GIUDA: Just for clarification, Mr. Chair. So we're saying six months we would like to see the recidivism rates?

CHAIRMAN WEYLER: Yeah.

SEN. GIUDA: In the drug treatment programs.

<u>REP. EDWARDS</u>: Is the proper term relapse in this context versus recidivism?

MS. FOX: It is. It is.

CHAIRMAN WEYLER: All right, relapse rate then. Please put that down. All right. Does everybody understand the motion? Are you ready for the question?

REP. EDWARDS: Did it get seconded? I'll second it if it
didn't.

CHAIRMAN WEYLER: Okay. Representative Edwards seconds it. Any further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The motion is adopted for both Item 21-251 and 21-271.

## \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: So the remaining item now is 21-268. Representative Umberger had a question on that one --

REP. UMBERGER: So --

<u>CHAIRMAN WEYLER</u>: -- from the Department of Education. We have the Commissioner and the financial officer.

MR. EDELBLUT: For the record, Frank Edelblut, Commissioner of Education.

MS. VAILLANCOURT: Tammy Vaillancourt.

CHAIRMAN WEYLER: All right, 21-268.

\*\* <u>SEN. GIUDA</u>: Mr. Chairman, I'll move the item if that's appropriate.

CHAIRMAN WEYLER: Okay. Representative Giuda moves the item.

REP. UMBERGER: I just need to find --

CHAIRMAN WEYLER: Senator Daniels seconds it.

REP. UMBERGER: Can you hang on just a second?

CHAIRMAN WEYLER: All right.

MR. EDELBLUT: This is the homeless grant if that helps.

REP. UMBERGER: Yes, thank you.

REP. EDWARDS: How do you find them?

REP. UMBERGER: My question is how do we find these homeless children to provide services to them? I recognize that, you know, some of the children are in school, some of them are not, and some of the ones that won't tell you that they're — that they're couch surfing or they're living in the woods because they don't want people to know. So worthy program, I'm just not sure how we go about identifying the children that are out there.

MR. EDELBLUT: So, actually, I think that that's a great question and I'm not sure that I actually have the best answer, truthfully. I do know that we contract with some non-profit agencies who find these students. My understanding is that they

basically work in coordination with some of the Health and Human Services programs, some of the other support programs for students. I'm happy to bring back to this Committee a very specific answer in terms of how that's done; but I apologize, I don't know the actual answer to them.

CHAIRMAN WEYLER: Okay. We can anticipate getting an answer to that question. We've had a motion and a second. Senator Morse has a question.

SEN. PRESIDENT MORSE: Commissioner, the -- the question was asked earlier and it was most -- it was all HHS that answered on the federal ARPA funds that came in about a billion. Is this separate from that?

 $\underline{\text{MR. EDELBLUT}}$ : This is. This is directly from the ESSER funds from the Department of Education. So a separate grant, not part of that.

SEN. PRESIDENT MORSE: Okay. And when we were doing the budget, I think we had communication with your office about some number like 350 million in Federal funds coming into the state. Is this part of that 350 million?

MR. EDELBLUT: It is not part of that 350 million. That's a separate item that is coming up on the agenda later. This is a separate grant. In addition to the 350 million, we received two additional allocations, one for homeless and one for IDEA.

SEN. PRESIDENT MORSE: Thank you.

CHAIRMAN WEYLER: Further questions from the Committee? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The item is adopted.

# \*\*\* {MOTION ADOPTED}

(8) RSA 14:30-a, VI Fiscal Committee Approval Required for Acceptance and Expenditure of Funds Over \$100,000 from

## Any Non-State Source and RSA 124:15 Positions Authorized:

CHAIRMAN WEYLER: Thank you. On Tab 8 I choose to treat each
item separately. I believe --

REP. EDWARDS: So, Mr. Chair, do you need a motion to remove from Consent 255, 256, and 257 or is that effectively off of Consent?

CHAIRMAN WEYLER: I've taken everything off Consent to be treated separately or however the Committee decides. Questions on 255 for the Commissioner and Chief Financial Officer and a Director. I believe it's Director Tilley.

REP. EDWARDS: Mr. Chair, I have questions.

CHAIRMAN WEYLER: Go ahead.

REP. EDWARDS: Miss Tilley and I have communicated a little bit prior to this meeting. So, hopefully, she's not going to be blindsided by any of these. But I — the first thing is sort of the newest thing, Miss Tilley. I want to come back to the idea that if we accept the federal money in 255, 256 will be the same thing, I think. Do we when we accept that money, are we accepting a provision that says to the effect to accept COVID funds states that the recipient, us, we would agree as applicable to the award to, one, comply with the existing and/or future directives and guidance from the Secretary? And in this case I think Secretary either means HHS, it probably doesn't mean CDC, but.

PATRICIA TILLEY, Director, Division of Public Health,

Department of Health and Human Services: Thank you. Is this on?

Yes, thank you so much. Thank you again. For the record,

Patricia Tilley, Director of Public Health. Thank you,

Representative Edwards.

So I've been trying to do a little reconnaissance since the time that we had a conversation in the hall. I have not found

that exact provision, but I can tell you that generally that is the type of provision we sign off on, basically as we would do with our own contractors saying you can have this money but you need to do what we say. It's the same level from the Feds. You can have this money, but you need to do what we say, with the caveat that we have had opportunities to waive certain requirements.

So, for example, the Federal Government would prefer that we have a registry that does not have an opt-out component. We are compelled by State Law to do that. So they have waived that component. So while their directive is one thing, our State Law says something else.

REP. EDWARDS: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: And there's several of these, sir. Okay. So on this waiver process, though, if we ask for a waiver from a future requirement that we don't know today, but if we ask for a waiver in the future, that waiver decision is dependent upon the decision of the federal HHS. Is that the case?

 $\underline{\text{MS. TILLEY}}$ : I have not gone through that process. So I don't know the exact process that we go through. But we would have to negotiate with them. If this is in reference to a broader federal requirement that we are anticipating, I think there are also other remedies for that.

REP. EDWARDS: All right. Thank you. And follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: If -- if for any reason items 255 and 256 were not accepted, either now or in the future, would that in any way jeopardize the State's access to the biologics that have been made available otherwise?

MS. TILLEY: We -- at this time we don't know that that would impact the actual access to the immunizations to COVID vaccine. What it would do is really cut us off at the knees in our ability to deliver them.

 $\underline{\text{REP. EDWARDS}}\colon$  Okay. But there would not -- I -- I -- follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: But I take your answer to mean that the Federal Government would not refuse to provide the State with the COVID-19 injections.

MS. TILLEY: That's not our understanding right now.

REP. EDWARDS: All right. Thank you. Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Okay. You mentioned an issue on the Vacs Registry that I wanted to touch on. The State Law, the RSA on this, does direct that the Vacs Registry be done as an opt-out. Now, in the privacy world, an opt-in is a higher standard of privacy protection. And so I'm curious, if you believe that despite RSA 141-C:20-f, Section III, that the Department could choose to go to a higher standard of privacy which is to convert to an opt-in on the Vaccine Registry?

MS. TILLEY: Thank you for that question. So I don't think that -- we must, first of all, follow the law as it's written. And as it is written right now, we have an Opt-Out Registry. However, in practice the way that it works right now it says that everyone must be offered the opportunity to opt-out, which essentially is almost an opt-in.

Now, I understand that there is very strong concerns in the community. We have heard that. I don't want to belittle that in any way. I think we're going to have an opportunity in the next

legislative session to further dig down on the meanings of things like opt-out and opt-in. But what I can tell you right now is that our practice today is to ensure that everyone who get -- receives a vaccine has the opportunity to opt-out of the Registry.

REP. EDWARDS: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: So I -- I receive a lot of anecdotal stories talking about how they've gone to get a COVID-19 - I prefer injection to vaccine - but, in any case, I'm told that they're not being informed about their opt-out opportunity. And so, in effect, there isn't even an opt-out. So we're still not complying with the law if we're not telling actual people that they can opt-out. So do you think there's merit to those anecdotal stories I'm being told or do you have evidence to suggest otherwise?

MS. TILLEY: So, I certainly believe that someone tells you something I understand that to be true. I have no reason to think that someone would tell you something that is untrue. However, I think one of the things we can think about is the way in which the big roll-out happened of vaccine. That happened under the emergency order and so many of us received our vaccines then and we were not offered that opportunity because, quite frankly, we did not have the Registry even built yet. So that happened in those big, you know, last March, April, May.

We now have the Registry built. We now have the opportunity to continue to inform people and they can opt-out. And, in fact, this money right here is the mechanism we have to provide the kind of education to all of our health care providers to do that -- ensure that those opt-out activities, the opt-out forms are made available. This is what will help us get there.

REP. EDWARDS: Follow-up. Changing subjects on metrics now. What metrics are you going to have in place to evaluate the

success of this program? And when we talk about metrics, it really be nice to know what the goal is. Is the goal 100%, 90%? When do we know we've won?

MS. TILLEY: You know what, that's a great question. And one of the things -- so, first of all, the primary metrics we are looking at in the entire response are severe illness, hospitalization, and death from COVID. We have a softer indicator is really the structure and the stability of our health care system. That's much harder to measure. But we look at it in things of beds that are open, beds that are staffed, and whether or not we are meeting the needs of everyone who needs to go into the hospital. So done at a very high level is what all of this is aiming towards.

Each of the individual potential contracts would have their own performance measures. So if it's an IT contract, we're going to have process measures that they are delivering on time and, you know, up to our specs. If it is a contract with our regional public health networks, we also have expectations about the way that they deliver vaccine. But at the end of the day, this is really about reducing severe illness, hospitalization, and death from COVID-19.

REP. EDWARDS: Follow up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Thank you for that answer. And then I'd like to have you address the accountability issue. If the -- if the Fiscal Committee were to approve this funding, because we -- we think the program goals are good, but then we find an execution that we have real heartburn with the way the program is being executed, what sort of accountability, what kind of recourse do you think we would have if this went orthogonal to our intent?

MS. TILLEY: I am not clear exactly the role of Fiscal Committee. I mean, I welcome the input from other folks. What we do -- what we do do with all of our programs, whether it's

this or something else, is we do have accountability measures. We have performance measures that we meet. We do reports back to whether it's this Committee, HHS Oversight. There are a number of opportunities for us to provide public accounting of the work that we do.

REP. EDWARDS: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: And then -- and then sort of my last question. And that's on we seem -- we seem to have adopted in our public briefings that the Governor and Dr. Chan do together and the Commissioner, you're quite the star, we seem to have adopted talking about vaccinated and unvaccinated. And I think there's a tremendous amount of frustration in the -- in the -- amongst my constituents that we're not even having the dialogue around natural immunity. And I -- and because natural immunity is a real thing, I'm just curious if what your thoughts are, maybe the Commissioner, this is for the Commissioner, when are we going to engage the public in the discussion of what is the problem we're trying to solve? What is the research out there on the effectiveness of natural immunity? What do we internally believe is the abstraction from that research; and, therefore, what is our policy?

I think those four things want to lineup, and I'm just curious when we're going to put natural immunity into a queue where we explain the science and then we follow it.

MS. SHIBINETTE: I think it would be difficult to report out data and statistics on natural immunity based on what we report out at our press briefings, such as hospitalizations and death. That would involve taking antibody levels from patients and trying to ascertain when they may or may not have contacted COVID-19. What we do know, you know, when we look at our hospitalizations that 90 plus percent of people that are hospitalized with serious illness are unvaccinated. That's a fact. That's -- it is what it is.

CHAIRMAN WEYLER: It's in doubt.

MS. SHIBINETTE: Excuse me?

CHAIRMAN WEYLER: That is in doubt.

 $\underline{\text{MS. SHIBINETTE}}$ : Well, it's not in doubt by the health care community.

CHAIRMAN WEYLER: Well, people I'm hearing from that are working in emergency rooms saying that 90% of those admitted have had the shot.

MS. SHIBINETTE: That is incorrect and that's misinformation.

CHAIRMAN WEYLER: Why would someone say that?

 $\underline{\text{MS. SHIBINETTE}}$ : I have no idea why someone would say that but that is incorrect.

CHAIRMAN WEYLER: I believe it's true.

MS. SHIBINETTE: And that is -- that is the problem that we are having increasing our vaccination rate is spreading misinformation about the COVID vaccine. We went to Kentucky, the Governor and I and several other health care leaders. The State of Kentucky told us the same thing. Ninety-five percent of people in the hospital were unvaccinated. A hundred percent of those intubated were unvaccinated. I don't know why anybody would want to inflate those numbers in the health care community.

CHAIRMAN WEYLER: Even in the public mainstream media I have heard many of the people that had the shots six months ago are now being hospitalized.

 $\underline{\text{MS. SHIBINETTE}}$ : There is a small portion of people that have breakthrough infection that need hospitalization? We don't -- we don't deny that.

CHAIRMAN WEYLER: You're trying to deny it right here.

MS. SHIBINETTE: No, I'm not. I said 90% of people in the hospital are unvaccinated. That leaves ten, 10% of people in the hospital have breakthrough infections.

CHAIRMAN WEYLER: I believe it's greater than that.

MS. SHIBINETTE: Okay.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Thank you, Mr. Chair. And that basically addresses the issues that I had identified with Miss Tilley in advance, and I appreciate your 45 minutes of patient interaction yesterday. And I -- I'm looking forward to more discussion on -- on one -- on 255 and 256. But at the right time, I'd like to make a motion to table the two items.

<u>CHAIRMAN WEYLER</u>: Thank you. Senator Rosenwald, then Senator Giuda.

SEN. ROSENWALD: Thank you, Mr. Chairman. And I've been speaking with Miss Tilley a little bit about this. I think I was still on the Health Committee when the Vaccine Registry legislation was enacted because I remember working with former Representative Kurk on it, and I was trying to think about the other kinds of public health data that the State collects. And I've come up with the Cancer Registry, there's Newborn Screening, and there's the Birth Conditions Program. And I think some of them are opt-out and some there's no opportunity to get out of. And I'm just wondering what -- or what is the context? And for those that are opt-out, what percentage of people opt-out and if you have any national information?

MS. TILLEY: Thank you, Senator. Thank you. So you're right. We have a several other registries where we have very sensitive health data within public health. That's our job is to manage and understand population's health. You're correct. We have three other registries, sort of off the top of our head. There is the Newborn Screening Registry. Again, many in this group know about that. That's when a baby is born. You do a little blood draw on their heel, some people call it the heel stick, and we see if they have conditions, specific conditions that are not always evident clinically, but if you don't treat them right away will lead to significant developmental delays.

That is an opt-out Registry as well. Families are given information similar to the way our vaccine -- our Vaccine Registry is designed. Families are given information right away and given the opportunity to opt-out. We find that very, very few, far less than 2% of our population, opt-out of the newborn -- Newborn Screening Registry.

We also have the Cancer Registry and that Cancer Registry was developed in the 1980's. It is similar to cancer registries across the country. It actually does not have an opt-out component. All residents that have cancer are included within that Cancer Registry. We work closely with the health care provider community. And then, finally, talked about birth conditions which are birth defects, otherwise known as. And that Registry is actually on hiatus at this moment. We don't have enough federal funding to maintain it at the level that we would like to. But we are authorized to collect that information. So when we have in the past, it also was an opt-out process that required education to families before their information was placed into the system.

What we know around the country, if we talk about registries for vaccine, in particular, at this count we think that there are about two states that have an opt-in Registry. And, similarly, as I mentioned about New Hampshire's because our opt-out process has been developed to be such a way that at every encounter you're afforded the opportunity to opt-out, it

is similar in many ways to opt-in. Because we're having that engagement right away and people can choose in or out. I did not get a hard number; but I, again, had some folks back at the office look this up. And we know that in Texas about 90% of the people opt-in. That's an opt-in. Ninety percent of the people opt-in. That's a rough number. Again, through text message. And what we know and what the Texas folks has told us is that that becomes a more expensive process for them. I don't have the details on why exactly that's more expensive, but that's the information that was related to us.

CHAIRMAN WEYLER: Senator Giuda.

SEN. GIUDA: Thank you, Mr. Chairman.

REP. UMBERGER: No, you're not on.

SEN. GIUDA: Thank you, Mr. Chairman. With respect to -- and this is for anyone of HHS -- with respect to the 90%/10% vaccinated/unvaccinated in hospitals, what's the source of that data? Is that New Hampshire data or is that CDC data?

MS. SHIBINETTE: That's New Hampshire data and that's approximate. So it could be 95%, 85%. Everyday changes, because the hospital -- people who are hospitalized change every day. But it's approximate in New Hampshire and that's been consistent across the country.

SEN. GIUDA: Thank you.

CHAIRMAN WEYLER: Representative Umberger.

REP. UMBERGER: Thank you very much, Mr. Chairman. If I understood correctly, you said that the data system was operational at this point. And we're looking for -- you're looking for \$22 million and five people to work on the data system, plus a systems analyst or whatever. Sorry, it's over here. So I guess I'm -- I'm confused about what we're -- what

we -- what you need to do with this \$22 million, or does it have nothing to do with the actual maintaining the Registry?

MS. TILLEY: Thank you, Representative. That's a great question. So this money is going -- it's a lot of money and it's going to do a lot of things that we're proposing in this item. So one of the things, I'll go through -- if you'd like I can go through a list of the contracts in particular that we're proposing or anticipating to use for the money. Would that be acceptable?

REP. UMBERGER: You don't have to go through them all, but just pick out three and four would be helpful.

MS. TILLEY: Sure. So a number of -- a lot of this money or some of this money is going to be used for provider education. Much like I just mentioned before, we know that there are probably times that a provider does not fully comply with our statute around informing patients. So the way we get there is by education to our providers. And we're looking to work with the Medical Society, with Bi-State Primary Care so they can work with their FQHC's. We're working with the hospitals themselves directly. And we want to give them money to ensure that we have the appropriate training, not only on the opt-in/opt-out. That's a component we know that people are really concerned about. That's what's prioritized for us. But also just about the vaccine itself.

When Representative Edwards and I were on the phone we had a conversation about things like vaccines and pregnancy. We know that people have very strong concerns about that. So we want to be able to ensure that we can have experts come and provide information to physicians. So physicians can decide what they counsel to their patients. So that's part of the funds are going to be used for that.

Part of the funds are going to be used to supplement some other activities that we're doing with some other federal money with ensuring that we have community health workers in the

communities, and those are trusted members of the community who can take the time and talk with individuals in their own language, in their own neighborhood about a myriad of health concerns. So, primarily, is this funding is about immunization, they would be able to talk about vaccine, but they might also even be able to talk about things like chronic disease or other health conditions that might make them more at-risk from the worse effects of COVID. So that's part of the money that we're going to be using.

Some of the money is going to be going to our health departments in Manchester and Nashua so that they can continue infectious disease work. We're going to have, and I'm just flipping through my list here, and then there is some work that is going to assist the health care providers in making sure that they can connect to our Registry. So there's something called HL-7, which is really, and I am not the technical expert, but that allows their medical records to talk with our medical records system.

So it is true, we spent about \$5.8 million setting up the Vaccine Registry. There -- these funds are really going to help us advance its utility and really help advance the education out in the community in this particular item. The positions, many of them are IT, so that when there are questions we can answer them and we can fix problems.

Some of those programs -- some of those positions are what we call support for providers so that we can help walk them through not the technical end but at least the human end of working with our Vaccine Registry.

REP. UMBERGER: Okay. So if I might?

CHAIRMAN WEYLER: Follow-up.

REP. UMBERGER: If I understand correctly, most of this money is not going toward system development.

MS. TILLEY: It is not developing the Registry itself.

REP. UMBERGER: All right. Can I have one follow-up,
please?

CHAIRMAN WEYLER: Follow-up.

REP. UMBERGER: Thank you. Who has access to this database?

MS. TILLEY: To the Vaccine Registry? Health care providers primarily have access to the Registry for their patients. There is also access for schools and child care that can look up their individual students within their -- in their facility. That had been long requested because this way a school nurse who needs to comply with 141-c, which are childhood vaccines, can look in and make sure that they can see who is missing vaccines so that they can work with that family to get them to the care that they need or ensure that they have opted out.

REP. UMBERGER: So follow-up. Yeah. So this is a pretty
wide-open database.

MS. TILLEY: I would not characterize it as wide-open at all. I characterize it as a very private, very secure database which health care providers use to direct medical care, and it is used by folks like schools so that they can manage the health of the students in their population. That is -- I would not characterize that as wide open.

REP. UMBERGER: Thank you.

<u>CHAIRMAN WEYLER</u>: Senator Giuda and then Representative Emerick.

SEN. GIUDA: Thank you, Mr. Chairman. Hum -- is this Vaccine Registry in any way being tied into the proposed closed loop system?

MS. TILLEY: No.

SEN. GIUDA: Thank you.

CHAIRMAN WEYLER: Representative Emerick.

REP. EMERICK: Thank you, Mr. Chair. Am I not on? Am I on now?

CHAIRMAN WEYLER: Yes.

REP. EMERICK: Okay. I'll just hold the button. I'm going to go in a different lane. This summer I was giving blood to the Red Cross, and they called me and they said do you know what Babesiosis is? I didn't know what the Babesiosis is. I said I don't even know what you just said. This is a tick-borne disease, like Lyme disease, and you have it. And, oh, that's great. And they suggested I go to my physician and get my own test for it. I went to my own caregiver, got the blood test, came back. Well, I got Babesiosis. About, I don't know, four, five days later I got a call from HHS, and interviewed me about did I walk in the woods. Or, you know, where did this tick hang out that you got? I was very impressed. You know, it was like boom-bang. And, whoa, somebody's -- somebody's keeping track of these little devils. My question is, am I now part of a database of Babesiosis patients for the state? I mean, does this exist at that level?

MS. TILLEY: Thank you for that question and we have Dr. Beth Daly in the audience here who can talk a lot more in-depth about this. But that -- we have several diseases that are notifiable to the Department of Health and Human Services. These are infectious diseases. You could consider something like tuberculosis is a great example. I think we all know from our history books and we actually still have tuberculosis in the world right now. Lyme and other tick-borne illnesses are also considered notifiable. So that's what we use our disease investigators to do.

So you got a call from one of our great disease investigators because they need to understand the epidemiology of the transmission of those — of those diseases. I can't speak off the top of my head exactly of how that data is stored other than I know it is stored very securely and what it's connected to. But I do know that we track a set number of communicable disease with the goal of mitigating any further transmission or with the goal of understanding the epidemiology.

REP. EMERICK: Follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EMERICK: I appreciate that, believe me. My question is am I by name now in a database or am I a Patient A that has Babesiosis?

 $\underline{\text{MS. TILLEY}}\colon$  I'm going to let Dr. Beth Daly answer that question.

BETH DALY, Bureau Chief, Infectious Disease Control,
Division of Public Health, Department of Health and Human
Services: Morning, everyone. I'm Beth Daly. I'm the Bureau
Chief for Infectious Disease Control at the Health Department.
As Director Tilley mentioned, there is a reporting process
that's mandatory by law. Health care providers and laboratories
have to report these infectious diseases to us so that we can
take appropriate public health action, including things like
meningitis and pertussis and the others that Tricia mentioned.

So in terms of your Babesiosis infection, that is required to be reported to our Health Department because it is less common and we're still trying to understand how it is occurring in New Hampshire and what ways we can mitigate it in our tick populations. So, yes, your name is in our infectious disease system.

It's a secure system that's HIPAA compliant under the same security measures that an electronic medical record is held

under in your doctor's office like the IIS as well. And there's no ability to opt-out of that system. This is mandatory reporting for public health purposes.

REP. EMERICK: Okay. Thank you. Just curiosity. Thank you.

MS. DALY: Thank you, and I hope you've recovered well.

CHAIRMAN WEYLER: We as Legislatures -- legislators represent the people of New Hampshire who are very resistant to federal mandates. This is seen as a further federal mandate, which we all heard the President is pushing. We've also discovered in the last year we've had plenty of opportunity for anybody that wanted to get this shot, it's widely available. We've also had a lot of changes in what we've been told from the people like Dr. Fauci and the CDC. They keep changing things. They keep lying to us. That's obvious. I mean, they have been caught in a lie. Fauci's been caught in a lie to the Senate.

We also are very leery because just lately we are hearing about this VAERS. That's Vaccine Reporting on Adverse Effects. Suddenly it's shooting up high.

At the same token, they're saying many breakthrough cases because of people that had this -- this shot up to six months ago. All these things are coming out just recently that have been suppressed, I say, by the CDC and by many of the medical people. They kind of overlooked them. I've had friends who had adverse effects, serious ones, from this shot. Very little of this gets reported. It's always suppressed, suppressed. all the people in this state many of them realize this is going on. Just lately we are hearing about how many breakthrough cases are very serious. So we also didn't have warning until recently about the effects on fertility, both in men and women, and even in women that are pregnant from these. Why haven't these warnings gone out way before when we started pushing this? Why didn't we know about this? There's lots of cautions that occur to me that have just come out lately. Should we table this? would give us another month to wait and see what other effects

have been covered up and what might be coming forward as more and more people who have had this shot discover that it has had bad effects. So I'm not -- I'm not willing to move this forward. Senator Rosenwald has a comment.

SEN. ROSENWALD: Thank you, Mr. Chair. I have a question for Dr. Daly. If she could come back to the table. Thank you for getting your steps in. Hum -- I want to -- my understanding of reporting of side effects from vaccines is that any -- if I were walking down the street after leaving the pharmacy having a vaccination, and I fell, that could get reported but it's -- doesn't suggest that there's a causal relationship. And at some point through ongoing research side effects are studied and either confirmed or not confirmed. I guess my question is everything that's gets reported as having happened to someone who's had a vaccination isn't just the reporting doesn't make it a side effect, does it?

MS. DALY: So thank you for that question and that's absolutely correct. They want to have a very robust reporting process in place for any potential side effects from any of the vaccines. And our health care providers are encouraged to report any potential events that happened after vaccination into this — into their vaccine reporting system. So some of the reports, many of the reports that are made in there actually have no causal link and the CDC is then charged at looking at whether any of these events is actually associated with the vaccines. Sometimes they determine that they are, in fact, and we've seen, for example, myocarditis associated with Pfizer and Moderna, very rare, and another blood clotting syndrome that was associated with Johnson & Johnson. We're able to detect those and be able to provide that information to the public.

There are no consequences for someone's fertility and this has been very clearly stated in our literature and from all of our medical professional associations, like the American College for Obstetrics and Gynecology who now very strongly recommend the vaccine for pregnant women, people considering pregnancy.

And there aren't any effects in that way. So these systems help us identify those.

CHAIRMAN WEYLER: Representative Edwards.

- REP. EDWARDS: Thank you, Mr. Chair. I thought I was done, but the testimony has triggered a few other questions. And maybe this is for the physician. I don't know. It may not be for anyone from DHHS. But I read, I think, a legitimate reporting that the federal OSHA had directed employers that they did not need to report any sort of adverse effects of the injection through the OSHA reporting standard. And to those people who are a little cynical about all of this, the shutting down negative reporting is -- is a cause of concern. Can you verify if OSHA has, in fact, asked employers or told employers that they do not need to report any adverse results from mandatory shots?
- MS. TILLEY: I have no knowledge of that. That's not to say it doesn't exist, but I'm doing a quick look of our head nods and none of us have knowledge of that directive.
- REP. EDWARDS: Thank you. I didn't mean to blindside you on that. I just hadn't thought of asking you until the testimony. And may I have a follow-up?

CHAIRMAN WEYLER: Follow-up.

- REP. EDWARDS: Okay. So I think -- I think we've accepted that the Vaccine Registry does a lot more than Vaccine Registry. It does the cancer screening and there's more in that database than just vaccines.
- MS. TILLEY: That is incorrect. We have separate vaccine -- we have a Vaccine Registry. It is a separate and distinct Registry. We have other -- other Registry systems in the state. They are not connected.

REP. EDWARDS: All right. I misunderstood. So how long is the Vaccine Registry? When did that go live? When did we start trying to use that? Do you know?

MS. TILLEY: It went live this spring. Again, maybe we should just have Beth Daly pull a chair up to follow some of those answers, but it went live this spring.

REP. EDWARDS: Okay. And one more follow-up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: As I remember the Division III budget for DHHS, we funded, I believe, ten positions to support translation into the communities that don't speak English as a primary language. I believe that we fully funded the Governor's Budget. And the reason I want to verify that is because in your testimony it's -- it sounded like unless we accepted this federal money, we weren't going to be able to support translation services. And I just want to make sure that I understand that we've already fully funded the budget request for translation services.

MS. ROUNDS: So I don't know that we have the right people here to confirm that. But I just wanted to say that you didn't fully support the Governor's Budget. You reduced our budget by more than 230 positions or so. So if any of those positions were vacant, they are probably not filled at this point.

REP. EDWARDS: So follow-up to that.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: I think what we did was we authorized 350 additional positions above what was hired at the time, which represented about a 12% growth in the manpower at the Department. And we did it in a way in which the Commissioner could prioritize where those additional 350 new hires could be placed. So I think -- I just think that's a correction of the

record. We allowed 350 more positions than what was hired in the April report. So -- and so I do believe it is true, because I was very sensitive to this particular item that we fully funded the translation services that was in the Governor's Budget.

MS. TILLEY: I can address some of that. Again, I have no knowledge of what those exact translation services are. I do know that we have translation services available to us within the Department that we use throughout our human services. In addition to that, some of our health care providers can call into and get translation on the spot.

When I was speaking of folks being in the community speaking their same language, I was talking about a community health worker. And this is someone who lives and works in the community that can have a long conversation with someone, not a discrete medical event where you might have to have discrete translation for a particular procedure. This is about having someone who is known and trusted to you to be able to talk around a number of health conditions, and then they can help navigate you or that individual to the system that works for them.

<u>CHAIRMAN WEYLER</u>: Recognize Representative Edwards for a motion.

REP. UMBERGER: Senator Giuda.

CHAIRMAN WEYLER: Hold off. Senator Giuda.

SEN. GIUDA: Thank you, Mr. Chairman. Hum -- I think there's a much bigger issue looming that's facing all of us, and that is the collision between public benefit medical care and individual privacy and the right of an individual's information to be kept private, the right of an individual to take the stick or not, and I see this as moving that whole process forward, supporting what I consider to be an unconstitutional presidential mandate for vaccines, okay, that leaves our citizens no option. And because of that -- that concern, I will be voting to table this

if that motion is made. If it has been made, I'll be happy to second it. Thank you, Mr. Chairman.

CHAIRMAN WEYLER: Representative Edwards for a motion.

\*\* REP. EDWARDS: Thank you, Mr. Chair. I would like to motion that we table item 21-256.

CHAIRMAN WEYLER: 255 is also before us now.

REP. EDWARDS: Yes, sir. I was trying to understand and
respect your request to take these items on individually. If
it's an appropriate motion I would --

CHAIRMAN WEYLER: The first one is 255.

REP. UMBERGER: We are on 255.

REP. EDWARDS: Well, okay. I want to table them both, 255 and 256.

CHAIRMAN WEYLER: The motion is to table both 255 and 256. Senator Giuda seconds. We'll do a roll call vote on this. Motion is to table items FIS 21-255 and 21-256. I believe further information will be coming forward that this was a good decision. It will also backup what the Executive Council did when they looked at this item. I believe new information will come forward that this was the right decision. The Clerk will call the roll.

REP. UMBERGER: Representative -- Representative Edwards.

REP. EDWARDS: Yes.

REP. UMBERGER: Representative Emerick.

REP. EMERICK: Yes.

REP. UMBERGER: Representative Umberger. Yes. Representative
Wallner.

REP. WALLNER: No.

REP. UMBERGER: Senator Daniels.

SEN. DANIELS: Yes.

REP. UMBERGER: Senator Morse.

SEN. PRESIDENT MORSE: Yes.

REP. UMBERGER: Senator Giuda.

SEN. GIUDA: Yes.

REP. UMBERGER: Senator Rosenwald.

SEN. ROSENWALD: No.

REP. UMBERGER: Senator D'Allesandro.

SEN. D'ALLESANDRO: No.

REP. UMBERGER: Representative Weyler.

CHAIRMAN WEYLER: Yes.

 $\underline{\text{REP. UMBERGER}}$ : The vote is seven in favor and three opposed.

# \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: We have tabled items 255 and 256 for further discussion.

Moving on to the next item on the list. It's item number 21-257 dealing with sexually transmitted diseases. Representative Edwards was down for questions on this item.

REP. EDWARDS: Thank you, Mr. Chair. I think we all endorse the idea of making sure that we have strong STD prevention and control. However, when I read the explanation, it sounds like this is -- I don't want to use bait and switch, although it's descriptive. I don't mean it as a pejorative or an insult, but it's under the label of STD, and then when you read the explanation it's more COVID-19 money. And so I -- I for all of the reasons that I wanted to table 255 and 256, at the appropriate moment I would request that we table this for all the same reasons.

CHAIRMAN WEYLER: All right. Is there any further discussion
before I accept that motion?

REP. UMBERGER: {Inaudible}.

CHAIRMAN WEYLER: Want to ask that?

REP. UMBERGER: I'm not sure what I want.

CHAIRMAN WEYLER: Senator Giuda, did you have something? (Inaudible). I haven't taken that motion yet because that will cut off debate. I want to see first if anybody has any questions on this item. Representative Umberger.

REP. UMBERGER: Yes. Perhaps you could explain quickly about this convergence of STD and COVID. I didn't think they were related, but.

MS. TILLEY: I would love to explain this convergence. Many of our disease investigators have been supported by the STD portion of CDC. These are our folks that also called you up about your tick-borne disease. These are our disease investigator, public health nurses, and they are trained to do investigation of all our communicable diseases. So the funding

source has come through STD. We have, in fact, actually seen an increase in STD. It is related certainly to the pandemic much like other health care things where folks have put off treatment, and so we're seeing increase now. But the reason why you see these two things coming together is that that's where our funding comes for public health nurse investigators. This item will fund those public health nurse investigators, both at the state and also in our communities in Manchester and Nashua.

CHAIRMAN WEYLER: Further question.

REP. UMBERGER: How about North Conway?

MS. TILLEY: They would -- our state covers North Conway. We just simply don't have a health department in North Conway. I would love it if North Conway developed their own health department.

REP. UMBERGER: That was -- I'm sorry. Okay. So if I'm understanding -- oh, follow-up. If I'm understanding what you just said, this -- these five new positions are going to be in the public health arena to deal with all public health issues and not just STD?

MS. TILLEY: Correct. It is for infectious disease. We have the highest prevalence of infectious diseases. Things like chlamydia. We have a very high prevalence of chlamydia so many of these do a lot of STD work, but it is for infectious disease in general.

<u>CHAIRMAN WEYLER</u>: Senator Giuda for a question, and then Senator Rosenwald.

SEN. GIUDA: Thank you, Mr. Chairman. Do we have any data on the effectiveness of this STD programs?

MS. TILLEY: So, I'm thinking through your question right now on what the data that you would like to see. So these particular nurses just do the investigation and do contact

tracing and ensure so if you have syphilis they can tell your contacts, much like we've all learned about with COVID-19. We know that there are standards and competencies that they must follow to do that. And, ultimately, the data always is -- is the prevalence, and whether or not we are seeing a spike in any particular area. So we follow that data very closely.

If you're talking about individual programs to treat those -- those conditions, that's a whole other set of -- of data that we would have either within our primary care system. As you may know, we've actually reduced funding over the years for our sexually transmitted infection clinics. So that funding's off the table. And, in fact, the Council yesterday removed several items or on Wednesday removed several and rejected several contracts that also would have addressed STI. But, in general, so I'm dancing around your question because I want to know what specific things you are. For these types of positions, we measure that by seeing is there spread.

# CHAIRMAN WEYLER: Further.

SEN. GIUDA: Thank you, Mr. Chairman. So see if I can better define the question. What I'm driving to is the amount of dollars spent and the rate of infectious disease spread --

MS. TILLEY: Yeah.

SEN. GIUDA: -- statewide.

MS. TILLEY: Yep.

SEN. GIUDA: And so are these programs being effective?

 $\underline{\text{MS. TILLEY}}$ : We know historically that when we can do effective contact tracing we've reduced the spread.

SEN. GIUDA: How about prevention?

MS. TILLEY: Yes. These particular dollars don't do prevention, but we have other opportunities, like through our primary care agencies, through our family planning agencies, they are the ones who also do prevention work.

SEN. GIUDA: Thank you.

REP. EDWARDS: Mr. Chair.

CHAIRMAN WEYLER: Representative Edwards.

REP. EDWARDS: Thank you. This is for the Department. I'd like to understand these five positions just a little bit better. We have two Infectious Disease Care Coordinators, a Compliance Specialist, a Public Health Detailing Specialist, a Public Health Education Specialist. The top two at least sound like leadership positions that for which we would have had a long-term need for those positions anyways, and so -- and then the Compliance Specialist, we probably always needed a Compliance Specialist.

So what I'm asking is, is this -- is this detail of these five positions for personnel that already exist and we're going to basically be shifting sources of money or are these truly five new hires that we have to go out and maybe have redundancy in the Department as a result?

MS. TILLEY: That's a great question. Thank you. So these are for new positions. Given the volume of COVID, again, we talked about that they do all infectious disease. COVID has just created an incredible increase in volume of our work.

We in the early part of the pandemic had lots of support from places like the National Guard. We were pulling nurses from every part of the Department of Health and Human Services. That has all subsided right now. And so these funds would enable us to get through the next two and a half, three years, where we anticipate we're still going to have a high volume of all infectious disease cases. Everyone has their fingers crossed, me

primarily, that at some point these numbers start to go down or level out in a way that we can manage this business.

These are temporary positions as you know. They are tied to these dollars. When these dollars go away, the positions go away. We have used in some of these cases temporary staffing contracts. So we have -- we have a large temporary staffing contract. Again, the items that you just previously tabled helped with that temporary staffing contract where we could almost get just in time staffing as things have gone up and down. But we know that these five positions we are going to have need for for the next two and a half years.

REP. EDWARDS: Follow up.

CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: All right. I'm just going to restate sort of what my concern is about the provision in the funding where it says that if we accept the funds we need to accept any current and future guidance from the Secretary. And I -- I believe we have cause to not believe that we know what the Federal Government is going to be demanding of the states in the next week, next couple of weeks, and so I'm -- I'm a little paranoid about causing us to accept money that causes us to comply with requirements we don't yet know. And then we would have to trust that they'll do the right thing in the future. So could you just tell me why my concern is not really legitimate in your view? I mean, not legitimate, but why -- why am I overreacting to this idea that we're going to contract ourselves out to do whatever the Secretary tells us in the future if we accept this money.

 $\underline{\text{MS. TILLEY}}$ : I would never characterize your concerns as illegitimate. So I just want to say that straight up in the front.

So these are terms, and again, I haven't been able in the time that I've been here today to find that exact word within the context of the contract. So I'm talking, I want to just be clear, that I'm talking with what I understand to be there and

what I generally understand to be within our contracts. That language has been there, you know, yesterday, last month, last year, and it likely with money that we have today. So by withholding these funds you're doing nothing different to our ability to follow or not follow a federal mandate. These funds will not impact whether New Hampshire follows a federal mandate. That — that policy is set at another level, and I think that there is recourse at other levels. These are not the funds that are going to stop that.

REP. EDWARDS: Thank you, Miss Tilley, and thank you, Mr.
Chair.

CHAIRMAN WEYLER: Further discussion? Senator Daniels.

SEN. DANIELS: Thank you. I have a couple questions. I guess the first question is, as we look at the requested action or the description of the — the item before us, there's no mention whatsoever of COVID in there. It talks about federal funds to strengthen STD prevention and control program as mandated. There's nothing about COVID. And, yet, I believe that I heard you say that you're taking money from a COVID program to put into this and that raises my second question is if that money is coming from a COVID program, are there restrictions that are going to require that that COVID money be spent on COVID investigation or whatever as opposed to STD?

MS. TILLEY: Thank you for that question. Again, I mean, I would draw your attention to the explanation that talks about that CDC is awarding a million dollars to New Hampshire to hire and support disease intervention specialists to strengthen the capacity of State, tribal, local, territorial public health departments to mitigate the spread of COVID-19 and other infections.

SEN. DANIELS: Yes.

MS. TILLEY: Much like I was just saying, these are our core staff that investigate all communicable disease. We don't have

them separated by one person does chlamydia and one person does COVID. They are cross-trained to address all infectious disease.

SEN. DANIELS: Okay. Thank you. And just to clarify, my first comment was not regard to the detail in the following pages but in the requested action.

MS. TILLEY: Okay.

SEN. DANIELS: Or the item here which only talks about STD.

MS. TILLEY: Thank you.

SEN. DANIELS: Thank you.

<u>CHAIRMAN WEYLER:</u> Further discussion? Representative Edwards for a motion.

\*\* REP. EDWARDS: Mr. Chair, I'd like to move that we table 21-257.

CHAIRMAN WEYLER: Senator Giuda seconds. Before us is a table 21-257. This will be a roll call vote. The Clerk will call the roll now on the motion to table FIS 21-257.

REP. UMBERGER: Representative Edwards.

REP. EDWARDS: Yes.

REP. UMBERGER: Representative Emerick.

REP. EMERICK: Yes.

REP. UMBERGER: Representative Umberger. No. Representative Wallner.

REP. WALLNER: No.

REP. UMBERGER: Senator Daniels.

SEN. DANIELS: Yes.

REP. UMBERGER: Representative Morse.

SEN. PRESIDENT MORSE: No.

REP. UMBERGER: Senator Giuda.

SEN. GIUDA: Yes.

REP. UMBERGER: Senator Rosenwald.

SEN. ROSENWALD: No.

REP. UMBERGER: Senator D'Allesandro.

SEN. D'ALLESANDRO: No.

REP. UMBERGER: Representative Weyler.

CHAIRMAN WEYLER: Yes.

REP. UMBERGER: The vote is five in favor and five opposed.

CHAIRMAN WEYLER: With a tie vote the motion dies.

### \*\*\* {MOTION TO TABLE FAILED}

CHAIRMAN WEYLER: Is there a further motion?

\*\* SEN. DANIELS: Move to approve.

CHAIRMAN WEYLER: Senator Daniels moves to approve.

SEN. ROSENWALD: Second.

CHAIRMAN WEYLER: Senator Rosenwald seconds.

REP. UMBERGER: Just a minute, please.

REP. EDWARDS: May I ask a question, Mr. Chair?

CHAIRMAN WEYLER: While we're in the discussion mode, yes.

 $\underline{\text{REP. EDWARDS}}$ : If this happens to also be a 5/5 vote, what happens at that point?

CHAIRMAN WEYLER: We need to have another motion.

REP. UMBERGER: Okay.

 $\underline{\text{CHAIRMAN WEYLER}}\colon$  Let me know when you're ready for a motion.

REP. UMBERGER: I'm ready.

CHAIRMAN WEYLER: We'll do another roll call. The motion is ought to pass on 21-257. Clerk will call the roll.

REP. UMBERGER: Am I on? Yeah. Representative Edwards.

REP. EDWARDS: Uh -- yes to pass.

REP. UMBERGER: Representative Emerick.

REP. EMERICK: Yes.

 $\underline{\text{REP. UMBERGER}}\colon$  Representative Umberger. Yes. Representative Wallner.

REP. WALLNER: Yes.

REP. UMBERGER: Senator Daniels.

SEN. DANIELS: Yes.

REP. UMBERGER: Senator Morse.

SEN. PRESIDENT MORSE: Yes.

REP. UMBERGER: Senator Giuda.

SEN. GIUDA: Yes.

REP. UMBERGER: Senator Rosenwald.

SEN. ROSENWALD: Yes.

REP. UMBERGER: Senator D'Allesandro.

SEN. D'ALLESANDRO: Yes.

REP. UMBERGER: Representative Weyler.

CHAIRMAN WEYLER: No.

REP. UMBERGER: The vote is nine in favor and one opposed.

## \*\*\* {MOTION ADOPTED}

 $\underline{\text{CHAIRMAN WEYLER}}\colon$  And the item is adopted. We are moving on to 21-272. This is the Department of Natural and Cultural Resources.

\*\* REP. EMERICK: I move the item.

SEN. DANIELS: Second.

<u>CHAIRMAN WEYLER</u>: Representative Emerick moves the item. Senator Daniels seconds. Did you get these?

REP. UMBERGER: Yes.

CHAIRMAN WEYLER: Further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The item is adopted.

## \*\*\* {MOTION ADOPTED}

### (9) Miscellaneous:

# (10) Informational Materials:

CHAIRMAN WEYLER: Moving on to five late items, starting with three from the Department of Education. The first one is 21-276. This is a acceptance IDEA funds. Are there any questions for the Commissioner or the Chief Financial Officer? Seeing none.

\*\* SEN. DANIELS: Move to approve.

<u>CHAIRMAN WEYLER</u>: Senator Daniels moves to approve. Senator Morse seconds. You ready?

REP. UMBERGER: Yep, I'm ready.

CHAIRMAN WEYLER: Daniels and Morse.

REP. UMBERGER: Okay.

CHAIRMAN WEYLER: Is there any further discussion on item 21-276? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The motion is -- the item is adopted.

## \*\*\* {MOTION ADOPTED}

<u>CHAIRMAN WEYLER</u>: Next item is 21-277. Again, Department of Education.

\*\* SEN. GIUDA: Move the item.

SEN. D'ALLESANDRO: Second.

CHAIRMAN WEYLER: Senator Giuda moves to adopt, and Senator D'Allesandro seconds. Is there any further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? The item is adopted.

# \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: Again, 21-278 from Department of Education. Any discussion?

SEN. D'ALLESANDRO: 278?

<u>CHAIRMAN WEYLER</u>: 278. Representative Umberger has a question.

REP. UMBERGER: Uh -- thank you. Is -- I know that we have had dollars out there for school emergency and relief and all of those things. Is this new money, old money? Is it -- and what's it supposed to do that the money that we have out there that hasn't been spent going to do?

MR. EDELBLUT: So this is part of what's referred to as ESSER III which you might recognize it under that vernacular. So we had ESSER I which is about \$37 million that we received in May of 2020. We had ESSER II was about \$156 million that we received in January of 2021, and then in March we were allocated these funds. It was a total of \$350 million under ESSER III. The way that the Department of Education flowed that money down to the states is they allowed us to have two-thirds of the funds which we have received and we've made available to the schools. And they held back one-third until we filed a plan with the Department of Education in terms of how those funds would be used. And then the Districts also filed plans that took place on August 23rd, the final school plans were filed, and then we've gone through and verified that those have all been put in place. So as we receive these funds, it will be the additional flow through to the schools.

REP. UMBERGER: All right. Thank you.

\*\* SEN. DANIELS: Move to approve.

CHAIRMAN WEYLER: Senator Daniels moves to approve item 21-278, and Senator D'Allesandro seconds. Further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? That item is adopted.

### \*\*\* {MOTION ADOPTED}

CHAIRMAN WEYLER: Moving on to item 21 --

SEN. PRESIDENT MORSE: Mr. Chairman.

CHAIRMAN WEYLER: Senator Morse.

SEN. PRESIDENT MORSE: Sorry, Mr. Chairman. I have to excuse myself. I'm late for a 12 o'clock meeting. But I'd just like to propose something that if you can take it up today, it be great. I think we could come back on October 1st for any items that have been tabled today. I believe we could look at the draft CAFR by then because I think there's significant things we should know about lapses. We already know the revenues. And then I think the item you're going to bring up next is one part of a FEMA request. I was looking forward to seeing the ones that are -- that aren't done yet.

So I think the -- those are three things. I'm sure you have other things that come across your desk in-between, but I just think we might have to be here one more time. I do think what will happen later in the month is ARPA money will be presented to the Committee which is going to take a little bit longer to present. So that was the intent, anyway, so.

 $\underline{\text{CHAIRMAN WEYLER}}\colon$  How many others seem to have the date open and are ready to come back October 1st? All right.

REP. UMBERGER: We'll just make it happen.

SEN. PRESIDENT MORSE: Mr. Chairman, you can take it up any time. I'm just proposing it.

CHAIRMAN WEYLER: Well, I want you to know before you go whether it's likely to be so you can put it in your busy calendar.

SEN. PRESIDENT MORSE: Shannon will take care of it.

CHAIRMAN WEYLER: Very good.

SEN. PRESIDENT MORSE: All right. Thanks.

CHAIRMAN WEYLER: All right. Thank you.

SEN. D'ALLESANDRO: Mr. Chairman, while Commissioner Edelblut is here, there's a couple of questions I'd like to address to him (Inaudible).

CHAIRMAN WEYLER: No, he's waiting right there until the last minute in case we needed to know something. Commissioner Edelblut, Senator D'Allesandro has a question.

SEN. D'ALLESANDRO: Thank you. Commissioner, we are talking about (Inaudible) the voucher program, and the estimates of the people who are going to take advantage of that program. Now, in your -- in your testimony we -- I think we budgeted for like 29 -- 28 or 29 students. What's -- what's the action that's taken place up to this point in time?

MR. EDELBLUT: So based upon the initial legislation that was proposed, I forget at this point if it was through the Senate or the House, there was a -- a modeling done in terms of how we thought this program would be taken up. What we did in terms of estimating the number of students is that we went to a similar program in Arizona and we saw the percentage of eligible students who were participating in that program. And we used that as the basis for how this program would also be taken up.

We do not have the final numbers at this point in time, but we anticipate that there will be an increase in terms of the numbers of students who take up this program, compared to that initial estimate. And so we are curious as to why so many additional students in New Hampshire are choosing this program compared to similar programs in other states. And so we do anticipate that there will be additional students that take the program up over that initial estimate.

SEN. D'ALLESANDRO: Further question.

CHAIRMAN WEYLER: Follow-up.

SEN. D'ALLESANDRO: So when we come back on the 1st of October, you'll have a better number for me and a better -- and how that will affect the budget?

MR. EDELBLUT: I certainly will.

SEN. D'ALLESANDRO: That will be perfect. Thank you very much. Thank you, Mr. Chairman.

<u>CHAIRMAN WEYLER</u>: Thank you, Commissioner. Another question appears.

REP. EDWARDS: With the subject broached, I'm just curious, Commissioner, if -- if we estimated 29 as a collective in our legislation, therefore, nobody's accountable, but we end up with a thousand. That's a big amount of money. So what are your thoughts on what kind of financial impact and where that money will come from?

MR. EDELBLUT: Thank you. So the first question I think that we need to ask ourselves if we go from 29 to a thousand is what are the circumstance that -- circumstances that are causing so many students to take up this program over other similar programs in other states? That may be a result of the COVID Pandemic that families are unsatisfied with the educational choices that are before them and so they are adopting that

program and looking for some other thing. And I think that we can go ahead and we can take a look at that. I think what we will find is, and the analysis that Senator D'Allesandro refers to, is that the more students that participate in this program would result in a movement of funding to the state, but a net benefit to the taxpayers. 'Cause what you find is that for an Education Freedom Account it costs us about \$20,000 per student to participate in a New Hampshire public school. And when a student takes an Education Freedom Account, 5,000 of that dollars follows them and the 15,000 remains in the actual district itself. So the more students that participate, the more there is net savings to our taxpayers in the State of New Hampshire.

### CHAIRMAN WEYLER: Follow-up.

REP. EDWARDS: Thank you for that. That all makes sense. It's not quite -- I must not have asked the question right. What I'm curious about is if -- if the State is writing checks for \$5,000 per student, and we've got roughly a thousand more students, that's a big number, you know, 5,000 times a thousand, what is that, 5 million, I think? Maybe I need to go back to school. So where would that 5 million come from?

MR. EDELBLUT: So it would come from two different places depending, again, once we get the data. What you'll find is that those students were formerly in a public school, we were sending \$5,000 to that public school for that student. And so now this \$5,000 would be following that student as part of the Education Freedom Account. And then the only other complexity associated with that is in the legislation. You put in what is I refer to as protection for our public schools. So the Legislature said in addition to paying for the student, you know, letting that money follow that student, that there is a protection fee that is paid to the public school for it's really -- they get one -- in the first year after the program they get the 5,000, and the next year they get 50% of that, and then the third year they get 25% of that.

REP. UMBERGER: Commissioner, I think that what he was really asking is that money will come out of the Education Trust Fund.

MR. EDELBLUT: Oh, that's correct, because it remains Adequacy funds. Correct. These are Adequacy funds that are paid for students.

REP. EDWARDS: (Inaudible).

REP. UMBERGER: That's correct.

CHAIRMAN WEYLER: Not new money.

MR. EDELBLUT: Thank you, Representative Umberger.

CHAIRMAN WEYLER: Senator Rosenwald.

SEN. ROSENWALD: Thank you. Thank you. Commissioner, I have a two-part question. The first is when you come back on October 1st will you be able to tell us where those students that have chosen to participate in the voucher program are coming from, whether they were previously in or out of public schools? That's Part A. And Part B is -- hum -- I think I heard you say that the balance of the cost of a student education would remain with the district. Does that assume that for every student who leaves the public school the district saves 100% of the cost, none of it is attributed to general overhead? How could you get to a hundred percent marginal cost for every student?

MR. EDELBLUT: So it's really a revenue question, not a cost question. So, essentially, a school right now is receiving \$20,000 per student. When a student leaves, \$5,000 of that goes with the particular student and 15,000 of that would remain in the district. The way that our funding formula works is it pays when you're in arrears. So we know with certainty that that full 15,000 would remain in there because that would be paid in arrears in addition to the protection funds that we talked about.

SEN. ROSENWALD: Thank you.

CHAIRMAN WEYLER: Further questions? Senator Daniels.

SEN. DANIELS: Thank you. Commissioner, since you're being asked to bring back it seems like an increasingly amount of information as to why this transition is happening, might you also put down the School Districts and whether those School Districts have -- what their status is. Are they running hybrids? Are they running mask mandates? I sat and listened to one of my School Board meetings for an hour and heard at least six families say that if the District instituted mandatory mask mandates they were moving their children.

MR. EDELBLUT: So we will try and correlate that information. And when I come back on the  $1^{\rm st}$ , the actual cutoff date for the first tranche of enrollment is on October  $2^{\rm nd}$ . So I'll bring you information up to that point in time.

CHAIRMAN WEYLER: Okay. Anything further for the Commissioner? Seeing none. Thank you, Commissioner.

We'll move on to the Department of Safety, FIS 21-279. This deals with flood control monies from earlier disasters.

SEN. DANIELS: Move to approve.

CHAIRMAN WEYLER: Motion to approve the item by Senator Daniels.

MICHAEL KANE, Legislative Budget Assistant, Office of Legislative Budget Assistant: (Inaudible).

 $\underline{\text{CHAIRMAN WEYLER}}\colon$  Oh, this was an informational item, as is the second one, 21-280.

REP. UMBERGER: I have a question.

<u>CHAIRMAN WEYLER</u>: But Representative Umberger has a question for Safety.

STEVEN LAVOIE, Director of Administration, Department of Safety: Good afternoon, Mr. Chair, Members of the Committee. Steven Lavoie, Director of Administration and with me is the Director of Homeland Security, Jenn Harper.

REP. UMBERGER: Thank you very much. My question really doesn't have to do with this money. My question has to do with the flood that occurred later on in the month. And I'm not sure that I am as familiar with this process as maybe I should be, but I think that anyone that lives in the western part of the state is aware that there are several communities there that are hurting financially. They're small. They don't have a lot of money. And so if we -- if I could just a quick how do they get the money from FEMA?

MR. LAVOIE: Sure. And also to address Senator Morse's comment earlier, we did have two flood events in July. We heard the request from the last meeting and this was the best information we had at the time in order to submit to the Committee. And so, obviously, today we have some additional information and Director Harper can explain what the process is and explain why there is -- it is a process to say the least.

JENN HARPER, Director, Division of Homeland Security and Emergency Management, Department of Safety: Thank you. Sorry. So the short version, because this is a complex program, the short version is that much like Director Lavoie pointed out for the July 17-19 flooding, we will go through the same process.

FEMA has been in the State of New Hampshire, has looked at some of the damages out in Cheshire and Sullivan Counties. They do not need to look at all of the damages. They are right now validating those damages based on the information that was provided to them from the communities. That's both the visual sites that they looked at, as well as documentation that the communities provided them. The information that I had as of

4 o'clock last night was that we're up to \$3.2 million worth of damages that they've assessed out in those two counties. That also includes Department of Transportation and DNCR damages.

We are writing up the impact statement that goes along with that damage number. So there's two pieces. We need to meet a state threshold of \$2,040,000. We need to meet each individual county threshold for Cheshire and Sullivan County. And we need to provide the Federal Government with an impact statement outlining how catastrophic it was to the State of New Hampshire that we should receive the Presidential Declaration, meaning FEMA funds that can come back to the State to help those communities and State Agencies recover from those damages.

This process is, as I said, complex and extremely lengthy. The request goes from the State of New Hampshire to FEMA to get to the President. That process historically has taken 30, 45, 60, 90 days. That means that our construction time frame is this short. There is nothing that I can personally do to make that process go faster.

As with the 17-19 flooding, we have already spoken to the Congressional delegation. They will write a letter of support. Once your letter goes to D.C., it's really a matter of them looking at the letter, looking at the documentation, and making a determination. If and when we get that disaster declaration, that will set off a -- another process where FEMA will work with my team and the communities and State Agencies that were impacted and go out and write-up what we call Project Worksheets for every damage site that has been identified by a community. That will take a long time.

We still have disasters in this state from -- open disasters from 2017 that we're actively working with FEMA, with the communities, to get roads, bridges, culverts, et cetera repaired. That's a very short -- that's a very short version. I'm sure you have a million questions. Okay.

CHAIRMAN WEYLER: Senator Giuda for a question.

#### JOINT LEGISLATIVE FISCAL COMMITTEE

**September 17, 2021** 

SEN. GIUDA: Thank you, Mr. Chairman. Thank you, Jenn, for the excellent work you do and Safety's doing for us. I'd authored a bill a couple years ago I think is called Extraordinary Disaster Relief bill.

MS. HARPER: Yep.

SEN. GIUDA: That bill is triggered by a FEMA declaration. And the problem that we have is while well-intended, nevertheless, the federal process is exhaustingly long, and we have communities that are in desperate need of immediate help for infrastructure. Do you foresee any possibility -- I'm thinking of bringing in legislation try and take the FEMA piece out of that and enable the Governor and Council to go directly without the FEMA declaration, as long as the Governor declares an emergency or disaster and enable those funds -- those communities to access those funds. Would that be in any way problematic, understanding that if FEMA doesn't make a declaration we don't get the Federal funds; but still, we've got communities out there. Acworth is claiming \$26 million worth of damage on a \$1.2 million a year town budget. I mean, they're dead in the water.

MS. HARPER: Right.

SEN. GIUDA: So is there any way we can think about addressing that particular program to make it immediate without hazarding the State's Treasury?

MS. HARPER: Thank you, Senator. I know you and I have worked closely together since 2019. I don't know the answer to that question. Like you noted, if we don't get a FEMA declaration, the State will be on the hook, so to say, for those loans that are provided to a community. I guess that would be up to the Legislature and Governor to make those determinations whether we want to put something like that into -- into law.

As you know, it takes a long time for us to work through the FEMA process for bridges, culverts, et cetera. And I know sometimes, most times, smaller communities can't absorb those costs and sit waiting for those funds to be allocated for those various projects. I think it's something worth discussing, for sure.

SEN. GIUDA: Thank you.

<u>CHAIRMAN WEYLER</u>: Further questions? Representative Edwards.

REP. EDWARDS: Thank you, Mr. Chair. I think this is similar to what the Senator just asked, but I'm just trying to imagine a worst-case scenario where a community disaster occurs and let's say they're totally cutoff from their emergency room and there's not another emergency room for 40 miles, 50 miles. In that kind of a worst-case scenario, what is the fastest? Is there some sort of work around to address a truly recognizable state of emergency? I mean, I understand the whole process. I get why it's there. But I'm just curious, is it -- is that the only pipeline to go through?

MS. HARPER: To get FEMA monies?

REP. EDWARDS: Yes.

MS. HARPER: To get a federally declared disaster to get monies back into this that's the only process, yes. There's no other pot of money. I mean, you see disasters across the country and FEMA declaring disasters for tornadoes and hurricanes. Those are the only pots of monies that -- that are allocated through the Stafford Act for disaster recovery.

CHAIRMAN WEYLER: Senator Giuda.

SEN. GIUDA: Thank you, Mr. Chairman. My understanding that we have a disaster relief fund that is currently unfunded. It's got nothing in it. And so, to me, this is a Fiscal and maybe a

Finance Committee thing we ought to think about is starting to put money into that disaster relief fund at the discretion of the Governor and Council so we don't have to wait and be held at bay by FEMA when we've got communities that are desperate to get the money that they need. And I would be willing to trust the Governor and Council in their judgment, perhaps Fiscal as well, for the disbursement of those funds; but we have an account that's empty. Perhaps, it's something as a community -- as a Legislature ought to think about putting some of our funds to. Thank you, Mr. Chairman.

CHAIRMAN WEYLER: Anything further? Thank you very much.

MR. LAVOIE: Thank you.

MS. HARPER: Thank you.

CHAIRMAN WEYLER: We have adopted the item, have we not?

REP. UMBERGER: It's informational.

CHAIRMAN WEYLER: Oh, it's an informational item. Okay. So we move on to the Audit.

SEN. DANIELS: We have the Dashboard.

CHAIRMAN WEYLER: The last informational item is the Dashboard, 280, and Senator Rosenwald has questions.

SEN. ROSENWALD: I do. Thank you. I have two questions, if I could, Mr. Chairman. The first concerns homeless shelter funding. As you know, the budget actually reduced the amount of money going to shelter reimbursement. And I think it was back in June at the Fiscal meeting we asked the Department if they would be coming forward with ARPA fund items to fill that gap. And we were told yes, by August or September. And so I'm asking again when will the Department be back?

MS. ROUNDS: So that is being worked on right now. We were hoping to have it for this meeting, I believe, and we were not able to finish in time. We're working with GOFERR on it and looking at a couple of different funding sources that we can use. I think there was some research being done on one of the funding options that they wanted to try to use first. So I hope that you will see that in the next few weeks.

SEN. ROSENWALD: Maybe October 1st.

MS. ROUNDS: Yes.

SEN. ROSENWALD: And my second question, if I could?

CHAIRMAN WEYLER: Follow-up.

SEN. ROSENWALD: Thank you. Looking at the Medicaid caseload, I see it's currently 225,000. It's usually like 180,000. When -- when the public health emergency ends and you're allowed to do redeterminations again, are we going to see for your 45,000 people over -- over the next few months then get redetermined? And I'm wondering -- I guess my question is what is the Department doing to help transition people to other sources of health insurance? Thank you.

HENRY LIPMAN, Director, Office of Medicaid and Business

Policy, Department of Health and Human Services: Good

afternoon. Thank you for the question, Senator. Henry Lipman,
the Medicaid Director for the record.

So we actually are continuing to do redeterminations where people voluntarily do them and we're trying to encourage that so we don't have a big bolus of individuals all needing help at the same time. We want to make sure we provide good service to the beneficiaries. We do expect -- today we have about 43 -- 43, 44,000 individuals whose redeterminations would otherwise be overdue. We have been working with stakeholder outreach. We have Lucy Hodder and UNH is helping us reach out to those various

groups to talk to federally-qualified health centers, other types of agencies that might be able to help individuals.

We're also just this morning the Insurance Department and the Department of Health and Human Services scheduled a meeting to see how we can plug into the Navigator to help those people who aren't going to be eligible for Medicaid who might be able to go on that. We're very -- I would characterize New Hampshire's out in front on trying to make sure that those who should continue to qualify remain on the program, and those who can't, to try to find other options for them.

SEN. ROSENWALD: Thank you. That's great to hear.

CHAIRMAN WEYLER: Anything further? Senator Giuda.

SEN. GIUDA: Thank you, Mr. Chairman. In speaking about homelessness, I think it's appropriate, I'm aware the State has additional resources through the ERAP Program that could be used for homeless funding, 10% according to the ARP could be used for housing stability services. And I think given the increasing number of homeless that we're seeing and the onset of winter, obviously, the solution is more housing, but that's not going to get built. So we need to bulwark our resources for the homeless. So I'm asking this Committee, HHS, Housing, GOFERR, the Governor's Office, whomever, to bring a \$9 million agenda item to this Committee, perhaps October 1st, but it may be a little short; but definitely the normal October meeting so we can get this taken care of. Thank you.

CHAIRMAN WEYLER: Miss Rounds, any comment?

 $\underline{\text{MS. ROUNDS}}$ : No. We will work to do that. And I will ensure that there's detail in the letter, Senator D'Allesandro.

SEN. D'ALLESANDRO: Thank you so much.

MS. ROUNDS: You're very welcome.

SEN. D'ALLESANDRO: (Inaudible.)

 $\underline{\text{MS. ROUNDS}}$ : I would also just mention, Senator, that you had asked me before the meeting the lapse information was included with the Dashboard this month.

CHAIRMAN WEYLER: Representative Edwards.

REP. EDWARDS: Thank you, Mr. Chair. This isn't on an agenda item, but one thing that I think that may have happened in the budget was that we made a provision that any position that was vacant since July 1, 2018, could not be filled. That that position essentially expired. I understand that that may have had an unintended impact on preventing us from hiring the IT project managers necessary to run our IT projects of which we funded hundreds of millions of dollars in IT projects. So I'm just curious what the Department is going to do in terms of asking for some relief so that you can get IT project managers on board?

MS. ROUNDS: Sure. So that -- that provision in HB 2 required that any position that was vacant before a certain date be unfunded and then subsequently abolished. There was an exception in that language for Health and Human Services. If we used that position for reaching our requirement to unfund positions under a different provision which I believe was part of HB 1. There was also a provision in that language in HB 2 to allow any Department to make a request of the Governor for an exception. So we did make a request to the Governor for, I believe, three exceptions. And I believe that may have been more than three, but it was a couple of exceptions and at least two of those were related to the MMIS System and were approved by the Governor. So those are being moved forward to fill those positions to be able to support the, as you mentioned, millions of dollars of IT projects that were approved.

REP. EDWARDS: Thank you.

MS. ROUNDS: You're welcome.

CHAIRMAN WEYLER: Anything further for HHS? Seeing none. Are we ready to move on to the audits? Thank you.

## (11) Audit Informational Materials:

# Audits:

CHAIRMAN WEYLER: There's Steve. I didn't see him at first.

STEPHEN SMITH, Director, Audit Division, Office of
Legislative Budget Assistant: Good afternoon, Mr. Chair, Members
of the Committee. For the record, Steve Smith, Director of
Audits for the LBA. Joining me this morning from our office is
Kim Bisson. She was the Manager on this Insurance Department
audit for the nine months ended March 31st, and joining us from
the Commission is Commissioner Nicolopoulos.

CHRISTOPHER NICOLOPOULOS, Commissioner, Insurance Department: Close enough.

 $\underline{\text{MR. SMITH}}$ : And Deputy Commissioner DJ Bettencourt, as well as the Christine Rice, the Assistant Commissioner. So that I'll turn over to Kim and she can present a report.

CHAIRMAN WEYLER: Thank you.

KIMBERLY BISSON, Audit Manager, Audit Division, Office of Legislative Budget Assistant: Thank you. Good morning, Mr. Chairman, and Members of the Committee. My name is Kimberly Bisson, and I will be presenting the report on our audit of the Insurance Department's financial statement for the nine months ended March 31st, 2021. The report is presented in two sections. The first section is the Management Letter section prepared by auditors and contains a report on internal control and compliance, including six audit observations, and is followed by the current status of prior audit findings.

The second section is the financial section and contains our independent auditor's report, followed by the Department prepared financial statements and notes.

The focus of my presentation will be on the Observations and Recommendations. However, we would be happy to address any questions you may have regarding any part of this report.

If you turn to the Table of Contents, you will see that the report contains five internal control comments, none of which are considered to be material weaknesses, and one State Compliance statement which suggests legislative action may be required. The Department concurs with five of the Observations and concurs, in part, with one.

The discussion of the Observations and Recommendations begins on Page 3.

Observation Number 1 on Page 3 recommends that the Insurance Department complete an in-depth review of the SOC reports covering its third-party systems to ensure that all required complimentary user entity controls noted in the report are in place and operating effectively to allow the Department to ensure that the State Aid Control Objectives described in the reports are met.

Turning to Page 4, Observation Number 2, recommends the Department strengthens controls over its financial database, including ensuring monthly reconciliations between the database and State accounting system, as well as to the bank are completed consistently and timely and have document evidence of appropriate management review.

Additionally, the Department should implement controls to mitigate the risk created by the ability to back date transactions within the database, such as periodic management review of back dated transactions.

Observation Number 3 on Page 6 recommends that the Department continue its development of a formal risk assessment plan, which is currently in its beginning stages. The next step should include identifying specific risks within the five main areas noted by the Department, and evaluating and crafting appropriate responses to those risks.

Moving on to Observation Number 4 on Page 7, we recommend that controls over the Department's expenditure review and reconciliation processes be strengthened. The Department seek to review all available supporting documentation to ensure amounts invoiced are accurate prior to processing inter-agency payments. Additionally, the Department should complete and formally document expenditures reconciliations as required by the *Manual of Procedures*.

In Observation Number 5 on Page 8, we recommend that the Department complete transfers to the New Hampshire Granite Advantage Health Care Trust Fund in accordance with its established Department policy. If the Department believes that its policy does not accurately reflect how the transfer amount should be calculated and performed, the Department should revise its policy to agree with current practice. Provisions should be fully vetted and formally approved.

Finally, Observation Number 6 on Page 11 recommends that the Department adopt administrative rules covering treatment of pervasive developmental disorder or autism as required by statute or seek a statutory revision.

The Index located behind the tab on Page 14 reports the current status. As of September  $3^{\rm rd}$ , 2021, of Observations identified in our previous audit of the Insurance Department for the nine months ending March  $31^{\rm st}$ , 2010, it's noted at the bottom of Page 15 eight comments were fully resolved and two were in the process of remediation.

The final section of the report follows with our auditor's opinion which was modified as a complete set of financial statements was not presented.

The Statement of Revenues and Expenditures is on Page 7, followed by the notes to the financial statement.

This concludes my presentation. I would like to thank the Commissioner and all the Insurance Department's staff, as well as the Department of Administrative Services for their cooperation and assistance throughout the audit. Thank you.

CHAIRMAN WEYLER: Thank you. Your comments, Commissioner.

MR. NICOLOPOULOS: First off, I want to thank Kimberly and the LBA staff. The Department was in a unique position where all of our executive team was going through an audit for the first time. Not only was it informative for us, but helped direct our next ten years. I think given the results from the last audit, and the near 90% completion rate, you can be assured that the Department has already started undertaking other Observations for this year and will quickly adopt all of the audit recommendations. Thank you.

CHAIRMAN WEYLER: Thank you. Any questions from the Committee Members? Representative Umberger for a motion.

\*\* REP. UMBERGER: Yes. I'd like to move we accept -- accept the report, place on file, and release in the usual manner.

SEN. DANIELS: Second.

CHAIRMAN WEYLER: Second by Senator Daniels. Further discussion? Seeing none. Are you ready for the question? All in favor say aye? Opposed no? Thank you very much. And congratulations on your first audit.

### \*\*\* {MOTION ADOPTED}

MS. BISSON: Thank you.

# (12) Date of Next Meeting and Adjournment

CHAIRMAN WEYLER: All right. So we've already discussed having our next meeting on October  $1^{\rm st}$ , and we will set that for 10 o'clock. And if there are other items, we normally would have had it somewhere later in October, like the  $22^{\rm nd}$ .

MR. KANE: I think if we stuck with the -- if you're on the normal schedule it take you about the 15th. But since you're having it on the 1st, the mailing will be delayed just because we have to wait for the items from the Committee. So you're not going to receive it a week and day before. We'll do our best to get it to you probably three or four days prior to the actual meeting. As you heard, Commissioner Edelblut has to wait for some counts. We know that Steve Lavoie and his group needs to work on the flood counts, but you'll have the tabled items and then any other item comes in prior to that date we'll put on that agenda.

CHAIRMAN WEYLER: You will be ready for a meeting on the 1st?

MR. KANE: Yes.

CHAIRMAN WEYLER: Okay. Should we plan for one later in the month?

 $\underline{\text{MR. KANE}}$ : If you'd like, yes. If it's easier for planning purposes and then we can communicate that with the agencies, so.

CHAIRMAN WEYLER: So, should we go for three weeks from then or two weeks or three?

MR. KANE: Since you're having a meeting on the  $1^{st}$ , I think if you went with the -- I think is it the  $22^{nd}$  the fourth?

CHAIRMAN WEYLER: That's three weeks. The 29th is four weeks.

 $\underline{\text{MR. KANE}}$ : Yeah, I know Senator Rosenwald might not be around on the 29th. It's up to you, 'cause there will be another meeting in November. Because of the holiday, we tend to hold that earlier in November. So if you did the 22nd or the 15th would work.

CHAIRMAN WEYLER: Any objection to the 22<sup>nd</sup> Members here now? (Inaudible). All right. You have a conflict. Any other Senators have a conflict? Senator Giuda. Okay.

For October  $1^{\text{st}}$  and October  $22^{\text{nd}}$ . And maybe because we'll have two days they won't be as long meetings. Maybe, maybe.

All right. Thank you. Thank you very much for the help of the members of the LBA team, and for the short timelines we gave you on some of these items. We'll see what happens. So we'll be a little busier in October, maybe, so.

\*\* SEN. D'ALLESANDRO: Move to adjourn.

CHAIRMAN WEYLER: Motion to adjourn.

UNIDENTIFIED SPEAKER: (Inaudible).

CHAIRMAN WEYLER: All in favor say aye? We are adjourned.

(Meeting adjourned.)

### CERTIFICATION

I, Cecelia A. Trask, a Licensed Shorthand Court Reporter in the State of New Hampshire, do hereby certify that the foregoing transcript was transcribed by me from a digital recording. I was not physically present at this meeting, and I have transcribed the recording to the best of my ability, skill, knowledge, and judgment.

Cecelia A. Trask, RMR, CSR NH Licensed Shorthand Reporter #00047