

Rep. Byron, Hills. 20
Rep. Wallner, Merr. 10
April 23, 2018
2018-1704h
05/04

Amendment to SB 592-FN-A

1 Amend the bill by replacing all after the enacting clause with the following:

2
3 1 New Section; Department of Health and Human Services; Account Established. Amend RSA
4 126-A by inserting after section 74 the following new section:

5 126-A:75 Excess Appropriation Allocation Account. There is hereby established under the
6 department of health and human services an excess appropriation allocation account. For the
7 biennium ending June 30, 2019, immediately upon acceptance by the fiscal committee of any federal
8 funds attributable to the 38 percentage point enhanced federal match for the children's health
9 insurance program, the commissioner of administrative services shall transfer general funds of an
10 equal amount from account 05-95-47-470010-7948, Medicaid Care Management, into the excess
11 appropriation allocation account. Any funds remaining unspent in the excess appropriation
12 allocation account at the end of each fiscal year shall lapse to the state general fund.

13 2 Department of Health and Human Services; Division for Children Youth and Families;
14 Classified Positions Established. The following classified positions are hereby established in the
15 department of health and human services, division for children, youth and families:

16 I. Seventeen child protection social worker I positions, at labor grade 18.

17 II. Two supervisor IV positions, at labor grade 25.

18 III. Two clerical (executive secretary II) positions, at labor grade 11.

19 3 Department of Health and Human Services; Positions; Funding Source. The department of
20 health and human services may use up to \$1,333,000 in the fiscal year ending June 30, 2019 for the
21 purpose of funding the positions established in section 2 of this act. Of this amount, \$826,460 shall
22 be a charge against the department of health and human services excess appropriation allocation
23 account established in RSA 126-A:75, and \$506,540 shall be federal funds. Fiscal committee
24 approval shall not be required for the acceptance and expenditure of federal funds authorized under
25 this section.

26 4 Department of Health and Human Services; Positions Added; Funding Source.

27 I. The department of health and human services may use up to \$718,000 in the fiscal year
28 ending June 30, 2019 for the purpose of funding the following positions:

29 (a) Eight child protective services workers, who shall be designated resource workers
30 and shall be employees of the department.

31 (b) Two licensed alcohol and drug counselors, who shall contract with the department.

32 II. Of the amount authorized, \$445,160 shall be a charge against the department of health

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1 and human services excess appropriation allocation account established in RSA 126-A:75, and
2 \$272,840 shall be federal funds. Fiscal committee approval shall not be required for the acceptance
3 and expenditure of federal funds authorized under this section.

4 5 Department of Health and Human Services; Foster Care Rates and Foster Care and Adoption
5 Programs. The department of health and human services may use up to \$500,000 in the fiscal year
6 ending June 30, 2019 for the purpose of funding foster care rates and foster care and adoption
7 programs. Of this amount, \$310,000 shall be a charge against the department of health and human
8 services excess appropriation allocation account established in RSA 126-A:75, and \$190,000 shall be
9 federal funds. Fiscal committee approval shall not be required for the acceptance and expenditure
10 of federal funds authorized under this section.

11 6 Child Protection Act; Duties of the Department of Health and Human Services. Amend RSA
12 169-C:34, II-a to read as follows:

13 II-a. The department may issue a confidential letter of concern to a person or persons
14 responsible for the safety and welfare of the child that although there is insufficient evidence to
15 substantiate a finding of abuse or neglect or of unfounded but with reasonable concern, the
16 department encourages the person or persons responsible for the safety and welfare of the child to
17 seek family support services and provide contact information to obtain such services. ***Upon***
18 ***initiating an assessment, the department may offer the family ameliorative services to***
19 ***reduce risk and address child safety concerns.***

20 7 Child Protection Act; Duties of the Department of Health and Human Services. Amend RSA
21 169-C:34, V and V-a to read as follows:

22 V. Notwithstanding any other provision of law to the contrary, the department may~~;~~
23 ~~pursuant to a voluntary service plan that is developed and provided for a minor and the minor's~~
24 ~~family by the department,~~ offer voluntary services to families without making a determination of
25 the person or persons ~~[apparently]~~ responsible for the abuse or neglect. The department shall adopt
26 rules, pursuant to RSA 541-A, relative to the provision of voluntary services under this paragraph.
27 ***The rules shall include provisions relative to the development of metrics to measure the***
28 ***effectiveness of voluntary services. The costs of voluntary services provided by the***
29 ***department under this paragraph shall not be eligible for reimbursement under RSA 169-***
30 ***C:27.***

31 V-a. Notwithstanding any other provision of law to the contrary, the department may~~;~~
32 ~~pursuant to a voluntary service plan that is developed and provided for the child by the~~
33 ~~department,~~ offer voluntary services to any child who prior to his or her eighteenth birthday was
34 found to be neglected or abused, who was in legal custody of the department as of his or her
35 eighteenth birthday, and who is less than 21 years of age. ***The costs of voluntary services***
36 ***provided by the department under this paragraph shall not be eligible for reimbursement***
37 ***under RSA 169-C:27.***

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1 8 Child Protection Act; Liability for Expenses; Voluntary Services Excluded. Amend RSA 169-
2 C:27, I(a) and (b) to read as follows:

3 (a) Whenever an order creating liability for expenses is issued by the court under this
4 chapter ~~[or whenever a voluntary service plan is developed and provided for a minor and the~~
5 ~~minor's family by the department]~~, any expenses incurred for services, placements, and programs
6 the providers of which are certified pursuant to RSA 170-G:4, XVIII, shall be payable by the
7 department of health and human services.

8 (b) Subparagraph (a) shall not apply to:

9 (1) Expenses incurred for special education and related services~~[-or to];~~

10 (2) Expenses incurred for evaluation, care, and treatment of the child at the New
11 Hampshire hospital; ~~[or to]~~

12 (3) Expenses incurred for the cost of accompanied transportation; **or**

13 (4) ***Expenses incurred for voluntary services provided to a minor or the***
14 ***minor's family pursuant to RSA 169-C:34, II-a, RSA 169-C:34, V, or RSA 169-C:34, V-a.***

15 9 Department of Health and Human Services; Voluntary Services; Funding Source. The
16 department of health and human services may use up to \$1,500,000 in the fiscal year ending June
17 30, 2019 for the purpose of funding voluntary services to children, youth, and families under RSA
18 169-C. Wherever possible, the department shall use federal TANF funds to fund services under this
19 section, unless the TANF reserve falls below \$40,000,000, at which point TANF funds shall not be
20 used. Any non-TANF share of costs shall be a charge against the department of health and human
21 services, excess appropriation allocation account established in RSA 126-A:75.

22 10 New Section; Guardianship of Minors and Estates of Minors; Guardianship of Minors in
23 Foster Care and Consent for Medical Treatment. Amend RSA 463 by inserting after section 12 the
24 following new section:

25 463:12-a Guardianship of Minors in Foster Care and Consent for Medical Treatment. For any
26 guardianship granted to the department of health and human services for a minor in foster care, or
27 for any minor in the legal custody of the department receiving foster care services, the department's
28 authority to consent to medical treatment for the minor may be established by, but not limited to,
29 any of the following:

30 I. A duly executed "Authorization for Medical Treatment" signed by the minor's parent or
31 guardian;

32 II. For the provision of ordinary medical care, including behavioral, mental health, or
33 developmental health services, a copy of that portion of the court order transferring legal custody of
34 the minor to the department under RSA 169-C; or

35 III. A copy of the letter of guardianship issued to the department that authorizes the
36 department to consent to medical or other treatment of the minor.

37 11 TANF Funded Initiative; Home Visiting Services. The department of health and human

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1 services shall use \$250,000 of available Temporary Assistance to Needy Families (TANF) funds to
2 expand home visiting services through family resource centers. A priority shall be placed on
3 providing home visiting services to families to whom the department has issued a letter of concern
4 pursuant to RSA 169-C:34, II-a, cases reported by the department of health and human services as
5 unfounded but with reasonable concern, as defined in RSA 169-C:3, XXIX, and TANF recipients
6 who, as parents of children under 12 months old, are exempt from TANF work requirements. For
7 purposes of this section, TANF funds shall be considered available, and may be used by the
8 department to fund home visiting services through family resource centers, unless the TANF
9 reserve falls below \$40,000,000, at which point the program shall not be funded.

10 12 TANF Funded Initiative; Child Care Services. The department of health and human
11 services shall use up to \$250,000 of allowable TANF funds to expand child care services to eligible
12 recipients. Priority shall be given to foster families, families with voluntary service plans through
13 the department of health and human services, and families with individual service plans through
14 family resource centers. For purposes of this section, TANF funds shall be considered available,
15 and may be used by the department to fund child care services, unless the TANF reserve falls below
16 \$40,000,000, at which point the program shall not be funded.

17 13 New Paragraph; Services for Children, Youth and Families; Parental Assistance Programs.
18 Amend RSA 170-G:4 by inserting after paragraph XIX the following new paragraph:

19 XX. The department shall develop and administer an array of community-based, evidence-
20 based, parental assistance programs that are designed to reduce child maltreatment, improve
21 parent-child interactions, improve skills for regulating behavior and coping adaptively, and
22 facilitate improved coordination of services and referrals, using such funds as are appropriated by
23 the general court for this purpose. The department shall prioritize the development of these
24 programs in public health regions with the highest need as determined by the rates of poverty, child
25 maltreatment, and other appropriate measures of social vulnerability. The department shall
26 develop outcome measures for the programs implemented and funded pursuant to this paragraph.
27 On or before June 30, 2019, and each year thereafter, the department shall submit a report to the
28 wellness and prevention council on the use of these funds and the outcomes they have produced.
29 The commissioner of the department of health and human services shall adopt rules pursuant to
30 RSA 541-A as necessary to implement this paragraph.

31 14 Department of Health and Human Services; Parental Assistance Programs; Funding Source.
32 The department of health and human services may use up to \$500,000 in the fiscal year ending
33 June 30, 2019, for the purpose of funding parental assistance programs under RSA 170-G:4 XX.
34 This amount shall be a charged against the department of health and human services excess
35 appropriation allocation account established in RSA 126-A:75.

36 15 Child Protective Services; Agency Budget Request to Include Staff and Caseload Projections.
37 Each biennium, the commissioner shall develop projections of the number of child abuse and neglect

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1 cases and shall include in the department's budget request a specific appropriation for the funds
2 and positions necessary to provide an adequate number of child protective service workers to meet
3 nationally accepted caseload and workload standards. When determining adequate caseload and
4 workload standards, the department shall utilize other resources in determining appropriate
5 caseloads, including but not limited to, the standards established by the Child Welfare League of
6 America.

7 16 Department of Health and Human Services; Division for Children, Youth, and Families;
8 Attorneys; Funding Source. The department of health and human services may use up to \$190,000
9 in the fiscal year ending June 30, 2019 for the purpose of hiring 2 staff attorneys for the division for
10 children, youth, and families. Of this amount, \$117,800 shall be a charge against the department of
11 health and human services excess appropriation allocation account established in RSA 126-A:75,
12 and \$72,200 shall be federal funds. Fiscal committee approval shall not be required for the
13 acceptance and expenditure of federal funds authorized under this section.

14 17 Family Drug Court; Study Committee Established. There is established a committee to
15 study the development of a family drug court in New Hampshire.

16 I. The members of the committee shall be as follows:

17 (a) One member of the senate, appointed by the president of the senate.

18 (b) Three members of the house of representatives, appointed by the speaker of the
19 house of representatives.

20 II. Members of the committee shall receive mileage at the legislative rate when attending to
21 the duties of the committee.

22 III. The committee shall study family drug court models and the feasibility of establishing a
23 family drug court in New Hampshire. The specialized court, with jurisdiction over child protection
24 cases that involve substance use by the child's parents or guardians, would provide a coordinated
25 and collaborative approach to reducing child maltreatment by treating parents' underlying
26 substance use disorders. The committee shall solicit information and testimony from any individual
27 or agency the committee deems relevant to its study, including licensed alcohol and drug
28 counselors, family law attorneys, representatives of the department of health and human services,
29 and representatives of the district court family division.

30 IV. The members of the study committee shall elect a chairperson from among the
31 members. The first meeting of the committee shall be called by the senate member. The first
32 meeting of the committee shall be held within 45 days of the effective date of this section. Three
33 members of the committee shall constitute a quorum.

34 V. The committee shall report its findings and any recommendations for proposed
35 legislation to the president of the senate, the speaker of the house of representatives, the senate
36 clerk, the house clerk, the governor, and the state library on or before November 1, 2018.

37 18 Repeal. RSA 126-A:75, relative to the excess appropriation allocation account, is repealed.

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- 1 19 Effective Date.
- 2 I. Section 18 of this act shall take effect July 1, 2019.
- 3 II. Section 17 of this act shall take effect upon its passage.
- 4 III. The remainder of this act shall take effect July 1, 2018.

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AMENDED ANALYSIS

This bill:

I. Establishes an excess appropriation allocation account in the department of health and human services for the biennium ending June 30, 2019 and authorizes the department to fund certain positions through a combination of federal funds and funds from the account.

II. Authorizes the department to fund foster care rate increases and foster care and adoption programs with a combination of federal funds and funds from the excess appropriation allocation account.

III. Waives reimbursement for voluntary services under the child protection act.

IV. Clarifies consent for medical treatment of children under guardianship or in foster care.

V. Establishes a home visiting services initiative, child care services initiative, and parental assistance programs.

VI. Establishes a committee to study family drug court models.