

A. Introduction

The Granite State Home Health Association (GSHHA) was formed as an affiliate of the Home Care Association of New Hampshire (HCANH), incorporated in 1994. GSHHA and HCANH both share the same corporate office and board of directors.

GSHHA is pleased to provide home health care professionals with this guide to the New Hampshire State Legislature. Much of the information in the guide is adapted from written materials developed by the New Hampshire School Boards Association, the New Hampshire Nurses Association, the League of Women Voters, the American Kennel Club, the New Hampshire Municipal Association, and the North Carolina Association for Home Care.

The purpose of the guide is to enhance home health providers' effectiveness in influencing legislative decisions affecting their operations and the welfare of their clients.

GSHHA legislative goals are as follows:

- To identify and monitor legislation which relates to home health care.
- To strengthen GSHHA's visibility in the Legislature as the voice for home health care.
- To educate legislators on the positive or negative consequences of proposed legislation affecting home care clients or providers.
- To promote legislation addressing specific home care issues.

B. Becoming Politically Active

One of GSHHA's primary missions is to be an effective advocate on issues of concern to home care agencies. GSHHA cannot achieve its advocacy goals through staff efforts alone. Its strength and impact comes largely from the agencies it represents.

By being active in the legislative process, home care advocates can help *focus the attention* of policy makers on the benefits of home care. This message must be conveyed not only in Concord, but in every community. Legislators are most responsive to constituents -- and their constituents include the people working in home care agencies, boards of directors, and home care clients.

Legal Basis for Lobbying

A non-profit organization can provide information and education to legislators and other policy makers by giving testimony, writing letters, or through informal meetings. Such activities, when an incidental part of a non-profit organization's overall work, do not jeopardize a non-profit's status. State and federal governments do place limits on the extent to which non-profit organizations can make *monetary* contributions to political campaigns and prohibit direct contributions to elected officials. GSHHA does not have a PAC (political action committee) and does not make contributions to state or federal politicians.

The State of New Hampshire requires any organization or individual making frequent contacts with legislators to register as a "legislative advocate" or "lobbyist" and requires the filing of reports about lobbying activities. A lobbyist is usually defined as a person who tries to persuade legislators to introduce legislation or vote a particular way on a matter of interest to the lobbyist.

GSHHA's executive director registers as a lobbyist. The Association also engages a lobbyist outside the organization to represent home care issues in the Legislature. Normally, it is not necessary for an agency representative to register.

Impact on Home Care Agencies

The Legislature can pass laws affecting home care providers at both administrative and service levels. The enactment of the *Patient Bill of Rights* is one example of how legislators can affect New Hampshire home care agencies. In this case, a well-intended bill updating the rights of institutional residents was inappropriately applied to home care clients resulting in confusion and unnecessary paperwork. GSHHA's response was to draft a new *Home Care Client*

Bill of Rights, locate sponsors to introduce the bill, promote it in the Legislature, and monitor its progress. This bill was passed in the 1993 legislative session.

The legislature also uses laws to set policy which form the basis of regulations. Laws can be used to alter or rescind rules established by the Executive Branch, such as the Home Health Care Rules drafted by the Department of Health and Human Services. Equally important is the role of the Legislature in determining budget allocations for health care.

Each session, GSHHA representatives work on your behalf to ensure that home care issues are addressed in any bills related to health care reform in New Hampshire. In 1995 the Association drafted a bill to allow home health nurses to carry certain prescription drugs, such as adrenalin and flu vaccine. This successful piece of legislation made legal a common practice for which agencies were being cited by JCAHO (Joint Commission on Accreditation of Healthcare Organizations). In 1995 and 1996 the focus moved to the delivery of personal care services by unlicensed personnel, a number of changes in statutes governing non-profit organizations, and the long term care policy shift from institutional care to community-based services.

On the issue of Medicaid reimbursement rates for home health services, Legislation establishing a committee to study this issue was passed in 1996. The Association worked with the committee to draft a substantive bill, which required DHHS to establish a rate-setting methodology reflecting average cost to deliver care and review rates annually. This bill passed in 1997. In 1998 the Association drafted a bill to protect the confidentiality of QA records in home health agencies. This Legislation also passed and became law.

Taking a Position on Legislation

GSHHA's Board of Directors, with input and advice from members, determines the proper response from the Association. Their decisions are based largely on the recommendations of the Legislative Committee.

The Association's Legislative Committee annually drafts a set of policy statements (copy included in Section 5) to guide the Board, staff, lobbyist and members on issues likely to be addressed through legislation. These statements are broad expressions of how the home care industry perceives issues, how providers and consumers may be affected, and what position the Association takes on specific issues. The Board then adopts these statements, usually in January of each year.

Next the Committee considers proposed legislation which impacts home health care, first reviewing the LSRs (bill titles) to identify potential pieces of legislation to follow, then the actual bills as they are printed. Bills are assigned one of the following priority rankings:

Priority 1 GSHHA takes a proactive position on the bill, testifies at all hearings, and actively seeks opportunities to communicate its position to legislators and executive branch officials.

Priority 2 GSHHA closely monitors the bill, attends most hearings, and registers support or opposition. GSHHA participates in coalition action, if any, on the bill.

Priority 3 GSHHA monitors the bill but does not express an official position. GSHHA may or may not attend hearings on the bill.

Priority 4 GSHHA determines the status of the bill at crossover and end of session for general business purposes.

The priority is assigned based on the answers to the following questions:

- Would the passage of this initiative have an immediate effect of the operations of members' companies?
- Would passage of the bill have a meaningful impact on home health care in the long term, even if the immediate affect is minimal or uncertain?
- Considering GSHHA's limited resources, will GSHHA's involvement in this initiative make a significant difference?
- Is the campaign winnable?

The Committee works closely with GSHHA's contract lobbyist and the executive director to assess the likelihood of winning a campaign to pass or kill a bill, and to determine what coalitions may be needed during the session.

The executive director is responsible for taking specific positions on legislation in concert with principles and priorities established by the Board of Directors. When unforeseen issues arise or the appropriate position to be taken is questionable, the executive director consults with the GSHHA President and Legislative Committee Chair to determine the course of action.

C. Lobbying at the Local Level

You're probably already involved in advocating locally on behalf of your agency. You know that being an effective advocate for home care starts long before the legislative session begins in January. Chances are you've already been in contact with your elected representatives. It is important to remember that elected representatives serve constituents throughout the year and are interested in hearing from you. Here are some suggestions about how to keep your elected representatives informed on *your issues*:

- Make sure your elected representatives are on your mailing list to receive annual reports, newsletters and other materials to keep them informed about what's happening in your agency.
- Invite legislators to be a part of National Home Care and Hospice Month events and include them in other special occasions such as open houses celebrating new programs or office renovations.
- Invite legislators to a board meeting or an in-service program.
- Host a legislative breakfast.
- Arrange for elected representatives to accompany your nurses on a home visit or to spend the day at your agency. To make the most of a visit, have the time well planned and let the legislator know how the time will be spent. Prepare a short (one page), easy-to-read fact sheet to give to the legislator before the home visit. If possible, have someone from your local newspaper come along on the legislator's home visit to help reinforce the message to the community (and give the legislator some media exposure).
- If the legislator does not have time for an actual home visit, suggest a meeting, perhaps on a Monday or Friday when the Legislature is not in session. As you discuss issues, explain your position and support it with reasons and facts. Try to discuss only one issue at a time. Whenever possible, use your own experiences as reasons for your position. Case examples (without revealing client identities) are an excellent way to personalize an issue. Don't forget to ask *their* views and be a good listener. Try to ask questions that will lead to specific answers. Listen for real concerns the legislators might have and try to address them. Send a follow-up letter after your visit, thanking the legislator for seeing you. Restate your key points. A handwritten letter can be very effective.

Now here are some **DON'Ts** when communicating with your legislators:

- Don't be awed by your legislator, and don't be nervous. They are citizens just like you, trying to do their job. You are giving them information they need to be well informed on an important issue.
- Don't apologize for taking their time. You are helping them do their job.
- Don't be vague. Express your points clearly and concisely, supported with facts and, if possible, personal experiences.
- Don't be argumentative. Discuss your point with courtesy. A negative encounter will adversely affect all your future contacts and those of your organization.
- Don't expect your legislator to support your positions every time. Convey your understanding and continued support.

Remember, the purpose of all these actions is to build *a relationship* with your representatives. Then when you call on them later in the session for support or information, you are not a stranger to them. Additionally, the more familiar the legislators are with you and your services, the more likely they are to call on *you* for advice when a health care issue comes before them.

D. Background on the Legislative Process

Procedures for writing new laws, although cumbersome, are designed to allow for full evaluation of the merits of the current law and the benefits of change. Here is background on how a bill becomes a law in New Hampshire. (You can refer to the glossary for an explanation of legislative terminology.)

Step 1 - Ideas for new legislation come from business and industry, civic groups, constituents and government agencies, and legislators themselves.

Step 2 - A legislator agrees to the concept, becoming its sponsor, and submits the title and proposed language or a description of the idea to the Office of Legislative Services. There, the idea is assigned a "Legislative Services Request" (LSR) number. State employees, mostly attorneys, turn the idea into legal language and cross check the proposal against current laws. They then send the idea, now called "LSR," back to the legislator for final approval. Sponsors may seek feedback from others and change the language of the LSR. Finally, sponsors and co-sponsors sign off on the language indicating they are ready to have the bill printed.

Step 3 - The LSR goes to the House Clerk for printing. Once printed, the LSR is called a "bill" and is given a bill number. The number is preceded by an "HB" or "SB" depending on whether the primary sponsor is a representative in the House or a member of the Senate.

If the drafting attorney in the Office of Legislative Services determines that the bill affects the finances of state, county or municipal governments, the draft bill is sent to the Legislative Budget Assistant for a "fiscal note." The fiscal note is an objective estimate of the fiscal impact of the proposal and is attached to the bill. A bad fiscal note can often mean death for the bill.

Step 4 - Next, the bill is forwarded to the Office of the Speaker or Senate President who has the authority to decide which legislative committees will hear testimony and vote on the bill. It is then delivered to the appropriate committee chair with copies to committee members and a public hearing is scheduled. Notices appear in the *House Calendar* four days in advance of hearings and in the *Senate Calendar* five days in advance. A public hearing is held, and after receiving testimony an executive session is scheduled for a vote. Committees make recommendations on a bill by voting in the following ways:

"ought to pass"

"ought to pass as amended"

"inexpedient to legislate" (ought not to pass)

"re-refer to committee" (only in first session)

"refer to interim study" (only in second session)

Step 5 - Once the committee votes on the bill in “executive session,” it is referred to the floor of the House or Senate. The bill may be placed on a “consent” calendar or “regular” calendar depending on how much opposition exists regarding the committee’s recommendation. Legislators may debate bills on the “regular” calendar (or removed from the “consent” calendar) on the House or Senate floor, amend bills or delay action. A vote is ultimately held by those present who wish to vote. Committee recommendations are rarely overturned by a floor vote, therefore, the advocate’s most important work takes place at the committee phase in the process.

If the bill passes both the Senate and the House in the same form, it is "enrolled" and examined for clerical error or formal imperfection. If any are found, the bill is returned to each body for non-substantive amendments to correct the problem. Bills are then signed by the House Speaker and Senate President.

If the House and Senate versions of a bill differ because of amendments and the originating body does not concur with the changes, the bill may be referred to a "committee of conference." This committee is appointed by the leadership of the House and Senate and works to resolve differences between these bodies. A committee report must be adopted unanimously by committee members for the bill to be returned for further floor action. If all members do not agree, the bill dies.

Frequently, legislation which is thought to be dead will reappear as an amendment to another bill. Careful scrutiny of all legislation is necessary throughout the entire session to ensure that damaging bills are not enacted. Alternately, the opportunity to resurrect bills can be a benefit when a favorable bill is defeated early in the process.

Step 6 - The Secretary of State delivers a successful bill to the Governor for action. If signed, the bill becomes a law. If a bill is not returned by the Governor within five days after it was presented, the bill becomes law as though the Governor had signed it, unless the legislature by its adjournment prevents its return, in which case the bill dies.

If the Governor vetoes a bill, it is returned with objections to the originating body which enters the objections in its Journal and proceeds to reconsider it. If two-thirds of both the House and Senate vote to pass the bill, the veto is overridden and the bill becomes law without the Governor’s signature.

Step 7 - This is the end of the legislative process, but if your bill becomes law, you must watch to make sure it is not changed or weakened at a later date in the course of the regulatory process.

E. How A Bill Becomes a Law

A Complicated Procedure

Prepared by New Hampshire Municipal Association

F. Lobbying at the State House

Now that you know more about how a bill becomes a law, below are some guidelines about becoming an active participant in the legislative process.

Contacting A Legislator

The legislature functions according to a schedule. To be a part of the process, it is vital to know the important dates and deadlines.

The Legislative Session begins in January each year and can run until June 30. If you want to meet with a member of the House in Concord, the best days are Tuesday, Wednesday and Thursday. Committee hearings are generally scheduled on these days.

Always call in advance for an appointment. Because House members do not have their own offices, they often use their respective committee rooms to receive messages and return phone calls.

It is not unusual for the Senate to be in session Monday through Friday. All senators have offices - some in the Legislative Office Building and others in the State House.

Occasionally, it may be appropriate to meet legislators at their homes or elsewhere in their district. Legislators rarely object to telephone calls at home, in fact most expect calls at home - but be sure to call before 9:00 p.m.

Testifying In Legislative Committee Hearings

Most work on legislation is done by committees made up of elected officials who may have a special interest in your issue. If you decide to testify before a committee, here are some important things to remember:

- **Study the bill and gather as much background information as possible.** Obtain the most recent version of the bill and study it before preparing your statement. Bring the bill to the hearing so you can refer to specific sections when answering questions. Know who the sponsor is and where the support and opposition lies. Above all, understand how the bill changes existing law and be able to articulate its impact on the people that you represent. Try to anticipate the points of the opposition and address those points in your presentation. If the bill is being monitored by GSHHA, the Association will provide much of this information.

- **Prepare your presentation in advance.** Prepare a written copy of your statement to distribute at the hearing and *summarize* it in your testimony. Be concise, but include any relevant documentation and proposed amendments to the language of the bill. Your written comments should be on your agency's letterhead and clearly state your name, address, title, the number and title of the bill, and your position on the bill. When testifying, keep it short (five minutes is best) and simple. Don't use jargon or professional "agency" language. Bring about twenty-five copies of your statement to the hearing to ensure that all committee members receive one. (House committees are much larger than Senate committees, so ten copies will usually suffice for Senate hearings.)
- **Verify the location, date and time of the hearing.** With the exception of the Senate Finance Committee, hearings are held in the Legislative Office Building (LOB) located on North State Street behind the State House. Before you set out for Concord, call GSHHA to verify the time and date of the hearing. Normally, you'll be accompanied by the GSHHA executive director or the Association's lobbyist. Plan time to find parking since spaces are limited and parking tickets are common. Public parking garages allow parking for more than one hour: one is on the first block of School Street off Main Street and another is on State Street next to the YMCA. Street metered parking is available (dimes: 24 minutes; quarters: 1 hour) and most meters are limited to one hour. The on-street meters (about 20 spaces) on either side of the Legislative Office Building allow up to four hours. When the Legislature is in session, most of the metered spaces bordering the State House and LOB are reserved for legislators. Parking at GSHHA's office just three blocks from the LOB is very limited, but may be available if no other meetings are scheduled. Call the GSHHA office to find out if you can park in the office lot the day of your hearing.
- **Arrive promptly and be prepared to wait.** The hearing rooms fill up early and seats are limited. Often, there are public hearings on other bills scheduled before yours that may be running late. When you get to the hearing room, you will notice that legislators sit at a horseshoe-shaped table. A small table is provided for witnesses. You should fill out a 3" x 5" card on the table if you plan to testify. Hand the card to a committee member who will pass it to the chairman. If you want to register your position on a bill without testifying, sign the 8 ½" x 11 sheet on the table. Senate committees may have sign-in sheets rather than cards for those who wish to testify. Note that the first half of the sheet is usually for supporters and the second half for opposition.

- **Legislative protocol.** The committee chairman conducts the meeting. First, the chairman calls upon the bill's primary sponsor to testify, then upon other legislators who wish to speak. Next, members of the public who have signed up are called upon to speak, alternating between those who support and those who oppose the bill. In most cases, the chairman will call on people in the order the cards were submitted.

- **Listen to those who testify before you on your bill.** To be effective, your presentation must be flexible. If someone has made a point you planned to state, note briefly your support of the previous speaker and add any additional information, but do not simply repeat an argument already made. Your statement to the committee should not be read verbatim. Be conversational. Use this opportunity to make eye contact with members of the committee on your important points.

- **When you are called.** Take a seat at the small table facing the committee. Legislative protocol calls for you to greet the committee as follows:

Mr. (or Madam) Chairman, Members of the Committee,
Good Morning.

My name is _____ speaking on behalf of the Granite State Home
Health Association (or your agency, as determined in advance).

I am here to support (or in opposition to) Bill # ____.
(See sample testimony below)

- After you have completed your statement, the chairperson will ask if committee members have any questions. Note that spectators (sponsors, other legislators, lobbyists and interested parties) may not ask questions of a witness. Most committee members treat witnesses with respect and appreciate their participation in the legislative process. However, if you are asked a nit-picking or hostile question do not lose your composure. *Do not become angry or argumentative - it never helps your cause. Also, never attempt to answer questions for which you do not have the facts.* Preserve your credibility by offering to obtain the information and forward it to the committee. Never misrepresent a fact or offer an opinion for which you do not have back-up information and do not base your testimony on anecdotal “evidence” from others.

- Finally, do not ask questions of a committee member during your testimony unless it is to clarify a question, which was posed to you. Conclude your testimony by thanking the chair for the opportunity to speak.

Sample Testimony

Senate Finance Committee - May 14, 1996

Testimony on HB 1442, relative to children's services

My name is Susan Young and I am the Executive Director of the Home Care Association of New Hampshire, a membership organization of 38 licensed home health care providers.

HB 1442 includes a number of measures intended to result in budget savings for the state in the near term and in the years to come. My comments will focus on the plans affecting the delivery of long-term care services.

Certainly home care providers welcome policies that recognize community-based care as the preferred alternative for the delivery of care. However, such policies must be made in the context of a comprehensive long-term care plan that considers the current and projected population and its needs, the cost to deliver services at the various sites, and the readiness of the providers and communities to offer the needed services. We do not believe that these foundation steps have been taken.

While home care is generally more cost-effective, it will not be so in every case, depending on the needs of the individual. The House and Senate has created a study committee during this session to examine the actual cost of home health services, compare that cost against state reimbursement levels, and determine the effects of the state's current and historical practice of reimbursing at lower than cost. Non-profit agencies have been subsidizing the delivery of home health care using local and charitable donations which are not keeping pace with the growing demand. Before the state makes this dramatic move to cut the availability of nursing home care, these reimbursement issues related to community care must be recognized and addressed.

Last fall the Legislature considered proposals made by Health & Human Services to shift care to the community by restricting access to nursing home care. After much debate, legislators concluded that the state should formulate a long-term care policy before proceeding with such major changes in the health care system. Further, HB 32 stipulated that this policy be developed in consultation with the providers of long-term care services. To my knowledge, work on this policy has not yet begun; in fact, Department staff have stated they intend to start work on this plan in June. We feel it would be irresponsible to take the rather drastic step of reducing the number of nursing home beds before evaluation and discussion of the state's needs and capacity to deliver appropriate, quality care in other settings has even begun.

Thank you for the opportunity to share our comments.

Writing to a Legislator

A thoughtful, well-written letter can be an effective way to convince a legislator of your concerns. *Form letters, on the other hand, are often discounted.* On top priority bills, GSHHA will often provide members with points you may want to cover in your letter and back-up information or statistics. You should incorporate some or all of these points in your letter, but *in your own words.* You will be most effective if you follow some simple guidelines when writing to an elected representative.

- Keep your letter brief (one page is best), easy to read and to the point. Use your agency stationery unless you've been asked to write on behalf of GSHHA. If that's the case, mail or fax your comments to GSHHA and they will be forwarded on GSHHA letterhead to the appropriate address. Usually, GSHHA staff write the letter that conveys the Association's position, reflecting statewide impact, for you to approve and sign.
- Identify yourself and, if you are a constituent of the legislator to whom you are writing, say so. Refer to the bill number and topic, state your position up front, and explain why you hold that position. Tell how the bill or the action will affect you, your clients, relatives, friends or neighbors. *Be sure to be clear on what specific action you want them to take.*
- Be as positive as you can. It is always appropriate to make a proposal or to suggest ways to amend the bill to make it more acceptable.
- Volunteer to be a resource person or to provide more information if necessary. Make sure to include your telephone number, title and address.
- When writing to a legislator, it is best to send your letter to his or her home address, which can be found in Section 4 of this guide. If you send your letter to the State House, use the following format. If you are writing to the chairperson of a committee, address your letter as such and send it to the committee. Committee addresses are included in this guide. In either case, you must address your letter to "The Honorable..." for members of either the House or Senate.

For a House Member

*The Honorable Jane Doe
House of Representatives
State House
Concord, NH 03301*

For a Senate Member

*The Honorable Jane Doe
House of Representatives
State House
Concord, NH 03301*

Dear Representative _____:

Dear Senator _____:

Always address a legislator in writing or in person using his or her title, e.g. 'Representative Doe.'

Call the GSHHA office to check a spelling or to get an address. Always be sure to spell a legislator's name correctly.

Sample Letter To A House Member

Date

The Honorable _____
House of Representatives
(insert home address)

Dear Representative _____:

I am writing on behalf of Sunnyside Home Health Agency to ask for your support of HB 582-FN relative to Medicaid rate setting. Medicaid rates for home health services to the elderly and chronically ill have not been adjusted since 1989 and they are currently 24-38% below cost in most agencies. These reimbursement rates were 30% below cost in our agency in 1995, and we were forced to shift the loss onto the backs of our lowest-paid employees by freezing pay scales and eliminating health insurance and other benefits. This decision hurt everyone involved. The employees had to purchase costly individual insurance, let their families go without health insurance, or seek employment elsewhere. The agency had to increase recruitment and training expenditures due to increased employee turnover. And patients, who develop positive relationships with their home care providers, have had those relationships terminated. In addition, patients now receive certain services from less-experienced workers.

The Department of Health and Human Services has made it clear that it would like to expand the use of home health care as a low cost alternative to nursing home care in the future. We believe that home health care is more economical than nursing home care for many patients, and we support this change. However, we find it disturbing that the Department is not willing to pay fair rates for the services it demands, nor to adequately fund the HCBC-ECI waiver program which makes up about 80% of the total Medicaid expenditures for home health services in New Hampshire. Indeed, the Department has budgeted \$2 million less for the HCBC-ECI program in 1997, despite its knowledge of losses currently suffered by home health providers and its own estimate that HCBC-ECI caseloads will continue to grow by about 9% annually.

HB 582-FN simply requires the Department to increase reimbursement rates to a fair and appropriate level beginning this year, and to adjust the rates annually to prevent this problem from recurring. It does not require reimbursement of the full cost to deliver services, so there will still be an incentive for home health agencies to operate efficiently.

Since Medicaid reimbursement is shared 50-50 by state and federal governments, only \$1.5 million in state revenues are required to resolve this very serious problem. This is only one-quarter of one percent of the 1996 Division of Human Services Budget.

Please help us, our employees, and our Medicaid patients by supporting HB 582-FN. If you have any questions or would like additional information, please call me during business hours at (insert phone number). Thank you.

Sincerely, Jane Doe

Timing Your Communication

Timing is everything. There may be more than 1000 bills to be voted on each session. Ensure that your issue gets the attention it deserves by timing your legislative intervention carefully. Letters and telephone calls to committee members are effective a week or two prior to hearings. Phone calls and letters to *your* particular senator or representative should occur around the time your issue is coming to the floor of the Senate or the House for a vote. GSHHA has set up a FAX alert system to keep members informed of important votes on critical issues. Call GSHHA if you need more information about the timing and content of your communication.

Tracking the Progress of a Bill

An excellent source of information about a bill's status is the State Library's Government Information Service. You can reach them at (603) 271-2239 Monday through Friday from 8:00 a.m. to 4:30 p.m. Although they can usually locate the status by subject or title, it helps if you know the bill number before you call. If the bill is being monitored by GSHHA you can also call the office for an update.

If you have access to the Internet, the following instructions will enable you to check current status on House and Senate bills, as well as to review calendars, and journals.

1. Activate your Internet Browser.
2. Type in **<http://www.generalcourt.state.nh.us/ns/>**
3. This is the webpage of the General Court. To check calendars (find out about scheduled hearings, for example), click on **House** for the House calendar, and click on **Senate** for their schedule.
4. Click on **Legislation** to find a specific bill. The NH Legislation page will be displayed.
5. Select **Quick Bill Search**. Follow the on-screen instructions to get to the specific bill you're seeking.
 - a. To view the actual bill, click once on "bill text."
 - b. To print a copy of the bill, select the following options: **File, Print, All pages, OK**.
 - c. To save a copy of the bill, select the following options: **File, Save As** and name your document in your operating system directory.

Knowing Your Supporters and Opponents

Legislators who are bill sponsors generally know whom among their colleagues' support or oppose a measure. Organizations like GSHHA may also obtain this information through contacts with other lobbyists and by attending committee hearings.

In most cases, the committee secretary or clerk takes minutes of committee hearings and compiles information about the positions of people who testify from the pink cards submitted at the hearing. This information is a matter of public record and is maintained at the committee office for review there. Roll call votes taken on the floor of the House are available on a computer print out or in the *House Record*. Roll call votes in the Senate are printed in the *Senate Journal*.

Building Coalitions

By working with other groups or individuals, even with those with whom you do not always agree, you have an opportunity to build coalitions that will help you in the legislature. Coalitions are an effective way to garner support for your measure or to defeat a proposal that several groups find mutually detrimental.

The benefits of forming coalitions early in the legislative process are: 1) getting your message across -- different organizations have relationships with different legislators; 2) communication -- talking to each other makes it easier to facilitate a compromise on difficult issues; and 3) presenting a united front to the Legislature -- this smoothes the way for passage of your bill.

Monitoring Legislative Committees

Nineteen committees operate within the House of Representatives. The Senate has seventeen committees. Legislation related to health care issues will often be assigned to the *Health and Human Services and Elderly Affairs Committee* in the House and in the Senate to the *Public Institutions/Health and Human Services Committee*.

During this period of health care reform, bills also are sent to the House *Commerce and Business Committee* and its counterpart, the Senate *Insurance Committee*.

All bills involving money are assigned to fiscal committees - House and Senate Finance Committees. Within the House Finance Committee are several subcommittees, one of which deals with health and human services expenditures. This subcommittee influences budget decisions and, therefore, is an important

committee to monitor. Information about the composition of key committees is provided in Part H of this guide.

Attending Hearings

GSHHA receives information about hearings through the *House Record* and the *Senate Calendar*. If you're at the State House, you can get a free copy of these publications from the Sergeant-at-Arms. If not, they are also available on "Webster," the NH Home Page on the Internet. For hearing information, contact the GSHHA office at 1-800-639-1949 or the State Library's Government Information Service at (603) 271-2239.

Obtaining Copies of Legislation

The GSHHA office can order a copy of a bill for you, or may have it available if it is health-related. Or, you may call the House Sergeant-at-Arms directly at (603) 271-3315 to request a copy of a House or Senate bill. As a service to New Hampshire citizens, the State Library's Government Information Service also will mail copies of a bill upon request by calling (603) 271-2239 Monday through Friday from 8:00 a.m. to 4:30 p.m. The State Library gets a limited number of copies. Once the Library's supply is exhausted they send photocopies and will charge you by the page. If you have access to the Internet, use the "copy" instruction in the "Tracking the Progress of a Bill" section of this handbook.

Sample Bill

AS INTRODUCED (Internet Version)

1998 SESSION SENATE BILL 373 protecting quality assurance information of home health care providers from discovery.

SPONSORS: Sen. Squires, Dist 12

REFERRED TO: Public Institutions, Health and Human Services

ANALYSIS: This bill protects quality assurance information maintained by home health care providers from discovery, except in certain limited circumstances.

1 New Section; Quality Assurance Records Maintained by Home Health Care Providers. Amend RSA 151 by inserting after section 13-a the following new section:

151:13-b Proceedings of Home Health Care Provider Quality Assurance Program; Confidentiality.

I. In this section:

(a) "Records" means records of interviews, internal review and investigations, and all reports, statements, minutes, memoranda, charts, statistics, and other documentation generated during the activities of a quality assurance program. "Records" shall not mean original medical records or other records kept relative to any patient in the course of business of operating as a home health care provider.

(b) "Quality assurance program" means a comprehensive, ongoing and organization-wide system of mechanisms established by a home health care provider, as defined in RSA 151:2-b, for monitoring and evaluating the quality and appropriateness of the care provided to patients, so that important problems and trends in the delivery of care are identified and steps are taken to correct problems and to take advantage of opportunities to improve care.

II. Records of a quality assurance program, including those of its functional components and committees, as defined by the home health care provider's quality assurance plans, and testimony by persons participating in or appearing before the quality assurance program or its functional components or committees, relating to the activities of the quality assurance program shall be confidential and privileged and shall be protected from direct or indirect means of discovery, subpoena, or admission into evidence in any judicial or administrative proceeding. However, a program's records shall be discoverable in either of the following cases:

(a) A legal action brought by a home health care provider to revoke or restrict a staff member's license or certification; or

(b) A proceeding alleging repetitive malicious action and personal injury brought against a staff member.

III. The board of directors or trustees of a home health care provider may waive privileges under this section and release information or present records of the quality assurance program by discovery, subpoena, or admission into evidence in any judicial or administrative proceeding.

IV. No person or entity shall be held liable in any action for damages or other relief arising from their good faith participation in a quality assurance program, or from the providing of information to a quality assurance program or in any judicial or administrative proceeding.

2 Effective Date. This act shall take effect 60 days after its passage.

G. Understanding the Budget Process

Home Care agencies and their clients are much affected by enactment of the state's biennial Operating Budget, which contains the spending authorizations necessary for state agencies to operate. In order to promote funding for areas of interest to home care agencies, it is important to understand and follow the budget development process in the Legislature. Here is an overview of the process taken from the "Survival Guide to New Hampshire's Budget," a program produced by the University of New Hampshire.

Budget Time Line

August: Governor develops *Budget Manual Guidelines* which includes an assessment of agency needs and available revenues.

October: Agencies develop budgets in response to Governor's guidelines and outline what they will need to accomplish their missions.

November: Governor reviews agency budget requests and prepares tentative budget.

December: Governor holds Budget Hearings, providing a forum for agencies to demonstrate the needs outlined in their proposals.

By February 15: Governor addresses a joint session of the legislature recommending appropriations for each agency and methods of funding them. The *Governor's Budget Recommendations* include financial statements showing current and projected revenues as well as the state's financial obligations.

February 15 to March: *The Governor's Budget Recommendations* go to the House Finance Committee, which begins the process of drafting a bill to be introduced in the House.

The House Finance Committee holds hearings with affected agencies to understand the differences between the *Governor's Budget Recommendations* and the Agency Budget Requests. Divisions (subcommittees) work with agencies on specific areas, such as health and human services.

The entire Finance Committee meets to draft the *Operating Budget Bill*. At the same time, pressure is increasing on the Ways and Means Committee to find revenue sources to pay for anticipated expenditures.

Mid-March: The House Finance Committee holds official public hearings on the bill. These hearings are a forum for comments from agencies, legislators and members of the public.

April – May: The House Finance' *Committee Report*, amending the Operating Budget Bill, is presented in the House. The Finance Committee holds formal briefings about the budget during a House session.

May – June: After passage in the House, the amended Operating Budget Bill is introduced in the Senate where the Senate Finance Committee hears it. The Senate repeats the process of hearings, briefings and amendments and comes up with its own version of the Operating Budget Bill.

After the Senate Finance Committee makes its report, the bill is voted on by the full Senate, and when it passes, the bill is sent back to the House.

The House then can concur, non-concur or request a Committee of Conference to reconcile the differences. If the House concurs, the bill is sent to the Governor to sign or veto. If the House does not concur, the bill is killed and the entire process must be repeated. If the House does not concur, and requests a Committee of Conference, this committee meets to reconcile the differences between the House and Senate versions of the bill.

Members of the Committee of Conference are appointed by the Speaker of the House and the Senate President.

May – June: The differences in the two versions must be reconciled and all members of the committee must approve the Conference Report. The Committee of Conference does not hear public testimony, but may invite testimony from agency heads and others who can provide needed information. The Committee of Conference lasts until a report is finalized.

The bill agreed upon by the Committee of Conference goes back to the House and Senate. If both bodies accept the Committee of Conference Report, it is passed on to the Governor. If it is not accepted by both bodies, the bill either dies or is sent back to a second Committee of Conference if requested by both the House and Senate.

Once passed by both houses, the bill goes to the Governor for action. At this point the Governor may sign, veto or permit the bill to become law without his or her signature.

The best opportunity to influence budget decisions is when the budget is in the House Finance Committee. Because the budget bill is so large, the Finance Committee is divided into three smaller divisions, each responsible for two budget

categories. These divisions are: Division I -- General Government, and Justice and Public Protection; Division II -- Resources and Economic Development, and Transportation; and Division III -- Health and Human Services, and Education.

Members of Division III, who make recommendations on the "Health and Human Services" portion of the budget, are the focuses of groups like GSHHA, which have an interest in health-related issues.

To obtain details on "line items" -- recommended budget allocations for state agencies -- do the following:

- Attend key hearings and briefings as listed in the *House* and *Senate Calendar*.
- Seek information from the liaisons from the House Finance Committee to the policy committees.
- Seek information from the Legislative Budget Assistant.
- Seek information from the staff of an agency.
- Refer to the *Governor's Budget Recommendations*.

H. Executive Council

The New Hampshire Constitution establishes a five member Executive Council, elected to two-year terms, which correspond with the terms of the Governor, to work with the Governor in “ordering and directing the affairs of the state, according to the laws of the land.” *Constitution of New Hampshire, Articles 60 & 62.*

The Executive Council has two primary functions: (1) to confirm nominations made by the Governor, including nominations of department heads and judges, and (2) to approve the receipt and expenditure of state and federal funds, budget transfers within departments, and all state contracts with a value of \$5,000 or more. In addition to these official functions, councilors serve as effective liaisons between their constituents and other parts of the executive branch of government.

In order for a nomination to be confirmed or a contract to be approved, the support of the Governor *plus* a majority of the Executive Council is needed. When the Governor and a majority of the councilors are of different parties, achieving the necessary votes for politically charged appointments or contracts can be difficult.

Governor and Council (or “G&C”) meetings are held every other week. Most meetings take place in the Council Chambers, a conference room adjacent to the Governor’s office in the State House. Occasionally, meetings are held in other parts of the state so that more members of the public will have an opportunity to attend and watch the government at work. Agendas are available prior to the meetings, either on the Internet or from the Governor’s receptionist, although late items are frequently added after the agendas are printed. Minutes of G&C meetings are posted on the internet as well. A typical agenda may include contract approvals, Business Finance Authority recommendations for loans or guarantees, appointments, resolutions of problems involving public waters, purchase and sale of land including eminent domain proceedings, out-of-state travel requests by department personnel, and line item budget transfers.

The Governor chairs the Governor and Council meetings. She announces each agenda item, asks if there is any need for discussion, and then requests that a motion be made, seconded, and voted on by the councilors. On more complex or controversial agenda items, interested parties are available to respond to questions and provide clarification as needed. In most cases, however, by the time an item is on the agenda for a meeting the questions have already been answered and the discussion has already occurred. Therefore, it is important to participate in the process early if you have an interest in a potential agenda item.

Among the appointees nominated by the Governor and confirmed by the Executive Council is the Commissioner of Health and Human Services. Advocates frequently contact Executive Councilors to express their views and influence public policy, just as they contact legislators and the Governor. Occasionally, it may be necessary for Granite State Home Health Association members to lobby Executive Councilors, as well as the legislature and the Governor's office.

Councilors may be contacted at the State House or personally, as follows:

State of New Hampshire
Executive Council Office
Room 207
107 North Main Street
Concord, NH 03301-4951
271-3632

For more information about the Executive Council:
Logon to www.state.nh.us/council/index.html

I. Fiscal Committee

The joint legislative Fiscal Committee was established by the legislature to “consult with, assist, advise, and supervise the work of the legislative budget assistant, and may at its discretion investigate and consider any matter relative to the appropriations, expenditures, finances, revenues or any of the fiscal matters of the state.” *NH Revised Statutes Annotated 14:30-a.*

The committee consists of ten members, as follows:

- the chairperson of the House Finance Committee
- 2 other members of the House Finance Committee, appointed by the chairperson
- 2 other members of the House appointed by the Speaker
- The chairperson of the Senate Finance Committee
- 2 other members of the Senate Finance Committee, appointed by the chairperson
- 2 other members of the Senate appointed by the Senate President

Although the Fiscal Committee is comprised of legislators, its duties are administrative and interaction between this committee and advocacy groups is minimal. However, in the past the Association and the Fiscal Committee persuaded the Commissioner of Health and Human Services to implement Medicaid rate increases for home care providers after being educated about a rate freeze by the Association.

The duties of the Fiscal Committee include approving reports of financial, compliance and performance audits of state agencies, departments and programs conducted by the Legislative Budget Assistant; approving topics for performance audits which are recommended by the joint legislative Performance Audit and Oversight Committee; approving re-classification of personnel positions; approving transfer of departmental funds and reduction of departmental expenditures; approving transfer of funds from the highway surplus account; approving expenditures to deal with civil emergencies; and approving transfer of funds from the Revenue Stabilization Reserve Account when there is an operating budget deficit and certain other statutory conditions are met. The Committee meets monthly and its meetings are open to the public.