Task Force Chair: Rebecca Ewing and Tricia Tilley

March 24, 2016

Minutes

Attendees:

Rebecca Ewing, Tricia Tilley, Rekha Sreedhara, Peg Clifford, Eileen Mullen, Abby Rogers, David Laflamme (phone), Vicki Flanagan (phone), Linda Parker (phone), Deb Pullen (Guest - Dartmouth) (phone), John Williams (Guest from Legislative Affairs for HHS), Byry Kennedy (Guest from DCYF Legal Affairs), Sara Riordan (Guest - PRAMS Coordinator)

Welcome & Introduction:

- December 2015 minutes were approved.
- Proposal to meet quarterly with additional meetings/conference calls as needed was approved.
- Draft mission statement was proposed. Feedback included updating current language to include policy and advocacy and substance-specific language. Due to a limited number of members present at this meeting, a follow-up meeting will be scheduled in April to discuss mission and membership. Below is the draft mission statement to date:
 - The mission of the Perinatal Substance Exposure Task Force is to identify, clarify, and inform The Governor's Commission on Alcohol and Drug Abuse, Prevention, Treatment, and Recovery about issues related to perinatal substance exposure including ways to lessen the barriers pregnant women face when seeking quality healthcare; aligning state policy and activities with best medical practices for perinatal women and their children; and increasing public awareness about the dangers of exposure to prescription and illicit drugs, alcohol and other substances during pregnancy.

Updates from Priority Areas:

Priority Area	Lead(s)	TF Tasks/Other	Status/ Accomplishments	Updates
Priority Area SB515	, , , , , , , , , , , , , , , , , , , ,	SB515 proposes to change the definition of "child abuse" which would result in mandated reporting of opioid-exposed newborns with symptoms of neonatal	John and Byry provided communication on status of SB515 indicating that the goal of the bill is to protect children. DPHS, BDAS, and Katja Fox	
			abstinence syndrome (NAS). If passed unamended, could lead to serious unintended consequences.	provided feedback. No opposition was received during first phase. The purpose statement was retooled to include the goal to intervene and provide treatment with a sunset provision in 2020 and reference to NAS

was removed. This bill does have a fiscal impact but it does not implicate criminal sanctions. Exact language is available at NH.gov. Task Force members discussed how to avoid overlooking important legislation and involving all stakeholders beyond Dartmouth during initiation of bill. John indicated that he would inform co-chairs in October of any bills needing attention. Cochairs will also engage formal associations such as New Futures and the NH Nurses Association to join task force. **Pregnancy Risk** Sara Riordan (PRAMS The Centers for Disease -972 out of 12,126 **Assessment** Coordinator) **Control and Prevention** women received surveys. **Monitoring System** (CDC) launched PRAMS in 639 (67.1%) responses (PRAMS) Data David Laflamme 1987, a survey that collects were received. state-specific, population--71.4% of women based data on maternal reported drinking alcohol attitudes, behaviors and in the three months prior experiences before, during to pregnancy. and after pregnancy. In -13% reported drinking 2013, New Hampshire alcohol during last joined forty other states and trimester New York City in the effort -74.4% of women to reduce infant mortality reported that their and low birth weight. healthcare provider discussed the effects of alcohol on the baby during prenatal visits. -63.7% reported that their healthcare provider discussed the effects of illegal drug use on the baby during prenatal visits. -62.2% reported having

> private insurance, 15.6% Medicaid, and 17.4%

		uninsured (at time of
		completing survey, 2-6
		months postpartum)
Chasing the Scream –	Becky Ewing	Becky recommended
The First and the	, 3	reading book which
Last Days of the War		discusses prominent
on Drugs		people in the drug war
		and how other countries
By Johann Hari		are dealing with
•		substance misuse issues.
Feasibility of Re-	Becky Ewing	Attempted to discuss this
establishing In-	5 7 8	topic, however; not the
hospital Methadone		right people in the room
Programs		to discuss in detail. Need
G		to follow-up.
DSRIP 1115 Waiver	Becky Ewing	The federal Centers for
	, -	Medicare & Medicaid
		Services (CMS) has
		approved a \$150 million
		waiver to transform New
		Hampshire's behavioral
		health delivery system.
		Thirty million dollars in
		federal funding will be
		provided each year
		through performance-
		based incentive
		payments to those who
		propose specific projects
		that will strengthen the
		capacity of the state's
		behavioral health system,
		integrate mental health
		and SUD care with
		primary care, and lower
		the long-term growth in
		health care costs for the
		state. Review
		[http://www.dhhs.nh.gov
		/section-1115-
		waiver/documents/nh-
		dsrip-waiver-overview-
		20160304.pdf], if you
		have recommendations,
		please e-mail
		1115waiver@dhhs.state.
		<u>nh.us</u> .

Conference Call – Wednesday, April 20 from 2PM-4PM

Call-In: 1-866-210-1669 Passcode: 9060313