

MINUTES

New Hampshire State Commission on Aging
Monday, January 8, 2024, 10 am to noon
NH Hospital Association, 125 Airport Road, Concord, NH

Attendance:

Present in-person – Members: Susan Ruka, Chair (Carroll); Roxie Severance, Clerk (Coos); Wendi Aultman (DHHS); Susan Buxton (OLTCO); Rich Lavers DES; Thomas Kaempher, Dept. of Safety; Beverly Bjorklund (Sullivan); Polly Campion (Grafton); Suzanne Demers (Belknap/Merrimack); Carissa Elphick (Belknap); Daniel Marcek (Hillsborough); Beth Quarm Todgham (Hillsborough); Rep. Lucy McVitty Weber (Cheshire). **Staff:** Rebecca Sky, Executive Director, Karen Knowles, Project Director. **Guests:** Kristine Stoddard (Bi-State Primary Care Assoc.), Lindsey Courtney, JD (OPLC), Deborah Ritcey (GSIL), Dawn McKinney (NHLA), and Noah Hodgetts (BEA).

Online - Members (with reasons for remote participation in parenthesis): Margaret Fankhauser (travel concerns), Doug McNutt (illness), Tracy McGraw (DOL) (illness), Joanne Ward (Rockingham) (travel/weather), David Ross (Hillsborough) (COVID @ Workplace), Sunny Mulligan Shea (NH Attorney General) (injury), Laurie Duff (Strafford) (travel) **Guests:** Jessica Eskeland (Alzheimer's Association), Teri Palmer, Martha McLeod, Jennifer Rabalais, Melissa Lee, Shawn Jones, Nancy Dorner.

Absent - Members: Rep. James MacKay, Rep. Charles McMahon, Senator Bill Gannon, and Jack Ruderman, (NHHFA), Shelley Winters (Dept of Transportation).

I. Welcome-Susan Ruka, chair welcomed all to the meeting at 10:04 am. Susan Buxton made a motion to approve the November 2023 minutes; the motion was seconded by Rep. Lucy McVitty Weber. All voted in favor, there were no abstentions. At least one-third of the members were present and the clerk conducted a roll call vote of those present and those online. Lucy mentioned that while she was indeed a Representative, her role on the Commission was that of representing Cheshire County.

There was a discussion regarding revised RSA 91-A:2 Sections III and IV, which is about quorums of public bodies, remote participation, and voting. While a motion was put forward to adopt changes, discussion questioned whether a vote was necessary to comply with the new statute. Not vote was taken. Rebecca to follow up next meeting with information from a consultation with Attorney General's office.

II. Panel of Advocates - Discussion of Priority Bills:

Polly Campion, Chair of the Commission's State House Team, welcomed all to the Commission's first robust conversation about what we will face in the 2024 legislative session. Polly oriented attendees to the role and actions of the Commission relative to the state legislative session:

The Commission's primary role is to advise the Governor and Legislature on issues related to aging. The Commission does this in many ways including advising on proposed legislation. To that end, the Commission's State House Team meets prior to the start of legislative session to identify bills to track using the Commission's Annual report to guide choices. The Team is tracking bills in the following categories aligned with priorities named in the Commission's Annual Report: civic and social engagements, guardianship and exploitation prevention, housing, prescription drugs and telehealth, healthcare licensing concerns, system of care for healthy aging, and workforce development. The State House Team prioritizes bills based on significance of impact, the amount of community-based advocacy, and/or those where the Commission's presence would be missed if the Commission did not provide comment. This team organizes testimony for some bills, while others are just monitored. The Commission has a document outlining this process. All new Commission members are provided this document during orientation. Polly requested Rebecca Sky to resend this document as a reminder to members and include it in the minutes of this meeting.

The Commission's State House Team continues to meet every Friday during the legislative session to review bills with upcoming public hearings. The Team is still in the early process of reviewing and identifying bills. Some bills will have their hearings this week. Polly reminded all that while Commission members are encouraged to write letters, testify, and sign in at hearings, they need to do so as an individual not as a representative of the Commission if not authorized by the Chair of the Commission to speak on behalf of the Commission.

The panel speaking at this meeting were a selection of community advocates who work on issues effecting older adults. They were asked to highlight bills they feel are important this year in connection to the Commission's priorities listed in the Commission's annual report. More than 1,299 bills were filed this session.

Kristine Stoddard, Esq. Bi-State Primary Care Association provided background on the Workforce Coalition that worked with legislators this session to sponsor a workforce development bill, SB 403. Kristine said that in 2018 Bi-State and Mental Health Centers across the state convened to address workforce issues primary care providers and mental health centers were both experiencing. Since then, the Coalition has grown to over 60 members. In 2019, the group was able to get some bills passed and administrative rules changed. Their successful tracking of workforce data has helped support the continued funding of the State Loan repayment program. This is the number one recruitment tool that organizations have, especially those operating in medically underserved areas. The Coalition was also successful last session increasing Medicaid spending to support wage increases. Currently, the group is focusing on the healthcare workforce pipeline with SB 403. The bill includes funding for NH Needs Caregivers, which is in the Commission's annual report as well as other workforce solutions that help people age in their homes. Another pipeline investment in this bill is funding for Area Health Education Centers (AHECs) who provide training and mentorship programs to grow the healthcare workforce. One of their many activities is to work with middle schools offering health career camps. NH is one of a few states that have not funded their AHECs in addition to the limited federal funds they receive. In addition, SB 403 includes funding for a new residency program at Coos Family Services in the North Country that began as a CMS grant and will train family practice residents starting in 2025. The requested funding will support the program in its early years and will be used to leverage matching federal (which will only cover 65% of the costs) and philanthropic support. Community Health Worker (CHW) certification is in the bill as well. CHW's are an integral part of any system of care, and yet without certification which provides a means for third party reimbursement, employers must rely on intermittent grant funds to hire them. The Institute on Disability would receive support in this bill for their paraprofessionals and people with lived experience programs. Kristine said it is a big bill with even more elements than mentioned during the meeting. The Coalition is asking the State to reallocate ARPA funds to address the State's healthcare workforce shortages with these pipeline development programs.

Kristine asked for people to show support by signing the sign-on letter (letter to be sent to Commission members). If people were planning on testifying on Wednesday at 9:30 am, please let her know. To learn more about the bill:

<https://www.investinnhhealth.org/>

Some discussion arose regarding the section of the bill defining of Case Management. There are concerns that various federal and state programs define case management differently in the context of the individual programs. A universal definition in statute could result in funding and other programmatic challenges.

Deborah Ritcey, MPA/HA President & CEO of Granite State Independent Living (GSIL), said GSIL was a member of the Workforce Coalition, and they would be supporting SB403. Deborah said that GSIL was the only agency contracted to provide the State Medicaid Plan Personal Care Attendant program. The program serves those who spend 90% of their time in a wheelchair. They also provide services to older adults in the CFI waiver program. She said they have 600 consumers in NH and only cover about 65% of authorized hours because of workforce shortages. Deborah said they do not have a workforce to do more than 40,000 hours per year. She cited that 51% of the workers who provide these services are aged 50 and older, 40% are aged 60 and older and that they are becoming consumers as they age. Last year's Medicaid rates increase raised wages, however, there are still not enough people to do the job. Personal Care Attendants do not need a licensed to perform their duties. Other bills GSIL has prioritized this session include: HB1264 which would require towns to make sure people with disabilities have access to a private vote and HB 1461 which would

require livestreaming of meetings and hearings of elected and appointed municipal bodies. Deborah made the case for the importance of HB 1264 while recognizing that equipment needed to increase the accessibility is not inexpensive.

Dawn McKinney, Policy Director, NH Legal Assistance, NH Alliance for Healthy Aging shared support for both SB 403 and the bills named by the previous panelist and provided information on two food access bills and several housing bills related to landlord/tenant relations. Senate Bill 499 would simplify the Supplemental Nutrition Assistance Program (SNAP) application for older adults and HB 1191 would create a meals and room tax exemption for meals purchased via the Older Americans Act NH Restaurant Voucher program. While there are many bills this session focused on housing, NHLA focuses on landlord/tenant bills. They support the need for more housing units and also want to protect people's housing. SB 518 would provide incentives to landlords to accept Section 8 housing vouchers. Many older adults and people with disabilities have vouchers. New Hampshire is the only state in northern New England that allows landlords to discriminate based on source of income. SB 519 would increase the length of notice a landlord must give when they seek to evict a tenant when they intend to renovate a property from 30 days to 60 days. And HB1115 is a bill NHLA opposes as it seeks to make it easier to evict a tenant at the end of lease which would not serve older adults who have lived in a particular for long periods of time, especially with housing supply shortages and the difficulty in finding accessible apartments.

Noah Hodgetts, Principal Planner, Office of Planning and Development, NH Department of Business & Economic Affairs (NHBEA). NH BEA does not take positions on bills. Noah reviewed a portion of the over 20 bills related to housing filed this session that may warrant following. HB1053, would allow by right the residential use of new or rehabilitated buildings in commercial zones. HB1059 updates the NH Building Code by referencing more recent national and international codes in the statute that lists those codes. HB1065, with the intent to lessen construction costs would remove sprinkler requirements in buildings of less than 4 units if a means of egress and rescue exist. This is supported by the State Fire Marshall. HB1168 asks for a study committee to assess the impact of the housing crisis upon people living with disabilities. HB 1281 prohibits the enactment and enforcement of any ordinances that require familial relationships by municipalities. HB 1291 that seeks to expand the opportunity for NH homeowners to add accessory dwelling units. HB 1361 expands the local land use planning and regulatory language to speak not just about the siting of manufactured housing but of their parks and subdivisions. The bill is problematic without "by right" language that is typical of New Hampshire land use statutes. Manufactured Housing is often lower cost age-ready housing - more should exist. HB1399 would enable more development of duplexes where single family is allowed. While potentially good for expanding housing options in concept, there are challenges with the way this bill. HB1567 would enable home-based childcare businesses to be allowed as an accessory use of a primary residence meaning the homeowner would not have to go through local zoning for approval if the program meets state requirements for home-based childcare. SB364 brings back historic renovation housing tax credits that was raised but not funded last session and adds \$15 million to the Invest NH housing fund. SB454 would increase affordable housing funds by \$5 to \$10 million with allocations from the real estate transfer tax. SB538 would allow tax relief for conversions of office buildings into housing units, creates alternative methods for adopting zoning ordinances, limits municipalities from having lot size ordinances that are larger than what is required by the department of environmental services for sewage disposal, addresses on-site parking requirements, and further defines elements of inclusionary zoning.

III. Discussion with NH Office of Professional Licensure (OPLC)- Update on Implementation of Adopted bills, Changes Ahead & LNA Certification vs. Licensure , Lindsey Courtney, JD Executive Director, OPLC.

The OPLC Office was created in 2015. OPLC currently oversees 57 occupational licensing boards and about 250 professional license types. The licensing of EMS operations is done by the Department of Safety, and health care facilities by the Department of Health and Human Services. What guides their purpose is protecting the public, by balancing safety and quality concerns with encouraging an adequate workforce. They seek to protect the public in the least restrictive manner possible, in an efficient and economic manner. In 2020 the office underwent significant restructuring, more than doubling the size of the staff. Much of the legislative work by the office in recent years is to eliminate conflicts in the law related to board authority vs. OPLC authority and increase efficiencies without decreasing public safety. More still needs to be done. As of changes enacted last year, the OPLC can now implement objective

criteria established by the boards to expedite non-contentious licensure applications. There is ongoing work to remove subjective requirements such as essays and oral exams. Also, investigative authority that previously was given to the boards is now done by OPLC while the boards still retain adjudicative powers. Some license types are a challenge to turnaround quickly due to Federal compliance considerations. The most time-consuming part of the process is the criminal background checks which still requires about 10 days. Lindsey noted that currently it can be more burdensome and time consuming to get a license through reciprocity compared to standard application. But as boards begin to respond to changes in statute made last year setting criteria for licensing from other states that is “substantially similar”, this should change.

Their goals for FY23 – 25 is to fulfill statutory requirements, enhance customer service, increase licensure portability, and promote public protection. Lindsey reviewed changes to licensing related statutes that occurred during the 2023 legislative session resulting from the following bills: HB2, HB409, and HB655. She also provided an overview of HB594 Universal Recognition of Licensure Law (codified at RSA 310:17). She explained the endorsement license application process and discussed criminal history checks and what is an encumbered license. Additional information about the portability of licenses can be found on the OPLC website.

Lindsey reviewed a variety of legislation proposed in FY 24. HB1188 relative to qualifications for LNA, amends the requirement that LNA must have the ability to read/write in the English language. HB1190, relative to adopting the interstate social work licensure compact. HB 1271 is relative to the conversion, combination, and reorganization of boards and advisory boards. HB1331 is relative to dentists licensed in another country. HB 1408 is relative to the merger and reorganization of various occupational boards. HB 1410 is relative to certain professional licenses and makes changes to licensure for LNAs.

Discussion:

Concern was raised about staffing agencies and their impact on the system of care. Workforce shortages are exacerbated by staffing agency practices, yet employers must use them because of workforce shortages. The creation of a registry for staffing agencies to hold them accountable as required by legislation passed last session is seen as a good first step. Proposed rules for the registry were published January 1st, and a public hearing will be held January 30th. The new rules should be in place by April.

There was a discussion about the differences between certification and licensing of LNA’s. Lindsey proposed that because of NH’s definition of licensure, certification could be considered the same as licensure. The OPLC does not take a position on LNA certification vs. licensure but does see the license application fee and the criminal background check as workforce supply barriers. The fee is minimal (\$65) and does not cover OPLC expenses related to licensing (\$250). The state does get compensation for certified nursing assistants from CMS (federal government), but those funds currently go to DHHS, not OPLC. Lindsey feels that if the fee was eliminated, and licensure was dropped, there would be a case for the CMS compensation to come to OPLC which would better cover related expenses. Concern was raised that moving away from licensing nursing assistants to only certifying them may lower standards. The currently licensing process is the only instance requiring an FBI fingerprint check for these professionals. Licensing also requires continuing education of the individual. CMS requires nursing facilities to provide the opportunity for 12 hours of education a year, but with employees who move from employer to employer, or are employed by a staffing agency, there is no guarantee they would receive that education without the requirement that is in NH license statutes. Concern was also raised that moving from licensure to certification could dampen professional pride and potentially dampen the workforce supply too. There is a desire look a licensing data to determine how long on average people hold onto their license suggesting they continue to work in the field as an LNA. Lindsey recommended <https://www.hrri.org/workforce> for recommendations for a minimum healthcare workforce dataset.

IV. COA updates:

Beth Quarm Todgham spoke about the Older Adult Volunteer Awards Program. She said they are looking for nominations of volunteers in each county showing the depth and breadth of ways people are contributing to our

communities. The deadline for submissions is Friday, March 15, 2024. Individuals or couples over the age of 60 can be nominated. Commission members should encourage nominations from their counties by reaching out to their networks. And any Commission member interested in serving on the program committee should contact Karen or Beth. The program committee selects the volunteers to be honored and provides day-of-event help.

Due to time constraints the MPA Progress update will be discussed in February.

V. Public Input-There was no public online or present in the room for public comment.

VI. Adjournment: The meeting was adjourned at 12:10pm.



Commission
on Aging

Deb Ritcey
President & CEO

January 8, 2024

Granite State
Independent Living
gsil
Bringing Independence to Life

2024 Legislative Priority: HB1264

Directing cities and towns to enable access to voting for individuals with disabilities.
Prime Sponsor: Mark Paige

- Title II of the ADA requires cities and towns provide appropriate auxiliary aides and services.
- Currently, requirement for accessible technology is only available for state elections with a federal office on the ballot – local elections are exempt from this and therefore many do not provide this during local elections.
- People living with a disability are entitle to the same degree of privacy – right now that is not happening.
- Estimated cost per polling location: \$1,750+

2024 Legislative Priority: HB1461

Requiring meetings and hearings conducted by all elected and appointed municipal bodies to be live-streamed or recorded.
Prime Sponsor: Hope Damon

- Elders and people living with a disability have limited access to external resources such as accessible transportation.
- As we age, the ability to have the same level of independence has been compromised for many.
- Elders and people living with a disability, again, are missing out on the very fundamentals of being a US citizen, engaging in their civic duties.
- Estimated cost per polling location: TBD based on bill.

2024 Legislative Priority: SB403

Investing in NH's healthcare workforce.

Prime Sponsor: Cindy Rosenwald

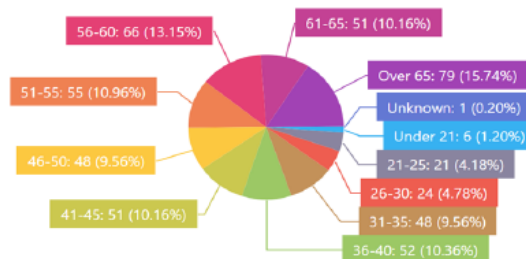
- Allowing for elders and those living with a disability to remain safely in their homes.
- While this bill focuses on many licensed services, the need to increase the workforce for non-licensed services will aid in slowing down the timeline for those needing long term care.
- GSIL is filling roughly 65% of the authorized hours under state plan PCA and the CFI waiver program. Hours not staffed accounts for roughly 350 employees working 40 hours/week.
- This is bigger than increasing rates, it is looking at the perverse incentive for people to not work.

GSIL's current PCA age demographic

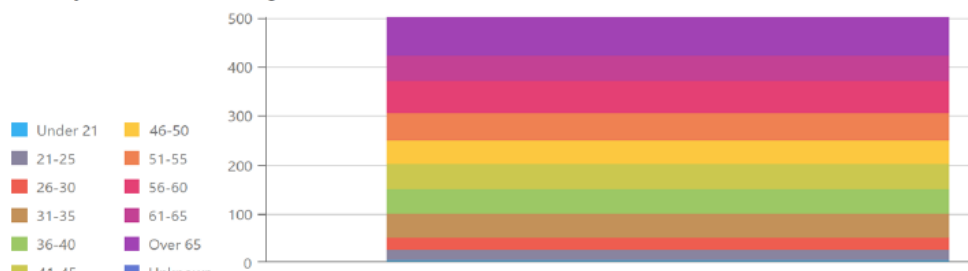
Current Statistics (as of today)

➤ 51% of GSIL's workforce is older than 51.

➤ 40% is older than 60.



Monthly Statistics for Date Range



THANK
YOU!



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- dritcey@gsil.org
- [603-228-9680](tel:603-228-9680)

New Hampshire Office of Professional Licensure & Certification



NH State Commission on Aging
January 8, 2024

Office of Professional Licensure and Certification Agency Overview



50+ occupational licensing boards 7 advisory



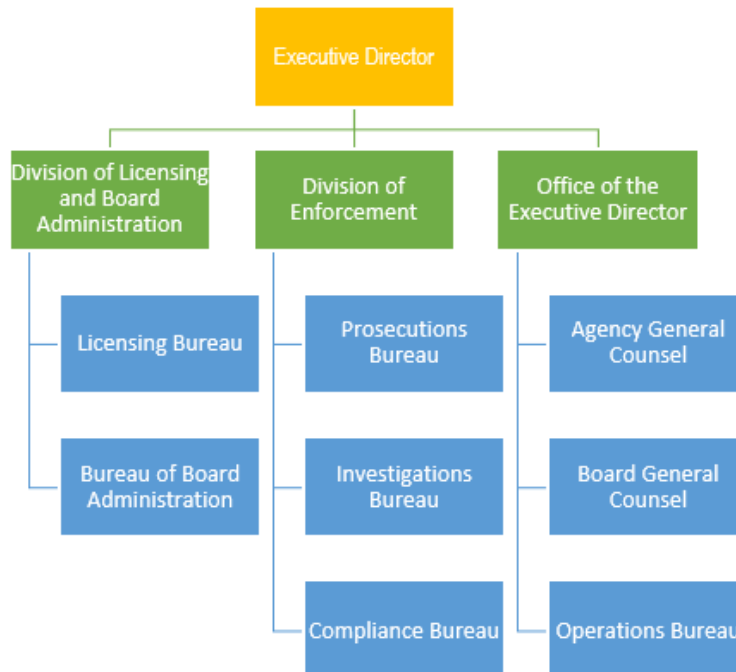
250+ License types



Two Primary OPLC Functions:

Support with Licensing
Support with Enforcement

Agency Structure



Guiding Principles

Vision: To transform and modernize support for New Hampshire's professional licensing boards to achieve regulatory excellence.

Mission: To create a regulatory environment favorable to workforce opportunities while protecting the public through efficient and economic support to New Hampshire's professional licensing boards.

FY 23–25 Strategic Goals

1. Fulfill statutory and regulatory requirements
2. Enhance customer service
3. Increase licensure portability
4. Promote public protection

Office of Professional Licensure and Certification FY 23 Changes

- HB 2/HB 409/HB 655
 - Transferred licensing authority from the boards to the Office
 - Current challenges:
 - Criminal history records checks
 - Subjective requirements
 - Culture shift
 - Conflicts in the law
 - Transferred investigative authority from the boards to the Office
 - Current challenges:
 - Culture shift
 - Conflicts in the law
- HB 2/409/655
 - Eliminated lapse

Office of Professional Licensure and Certification FY 23 Changes

- HB 594: “Universal Recognition of Licensure” Law (codified at RSA 310:17)
 - OPLC must adopt rules to implement the statute.
 - OPLC rules supersede (replace) any board statutes and rules regarding endorsement, except for compacts.
 - OPLC is required to issue the licenses to individuals who satisfy the requirements (no discretion).
 - The individual must have a license in good standing in another *jurisdiction*.
 - The jurisdiction must have substantially similar requirements to New Hampshire's requirements.
 - OPLC must consult with boards in making the determination; consultation does not mean agreement.
 - If required for the license type, must undergo criminal history check.

Plc 313: Rulemaking to Implement HB 594

- Interim Rules effective October 15, 2023
- Applies to following license types in mental health fields:
 - Board of Medicine (**CBC required**)
 - Physician
 - Physician Assistant
 - Board of Mental Health Practice (**CBC required**)
 - Clinical Mental Health Counselor
 - Clinical Social Worker
 - Marriage and Family Therapist
 - Board of Nursing (**CBC required**)
 - Advanced Practice Registered Nurse
 - Licensed Nursing Assistant
 - Licensed Practical Nurse
 - Registered Nurse
 - Board of Psychology (**CBC required**)
 - Psychologist
 - Board of Licensing for Alcohol and Other Drug Use Professionals (**CBC required**)
 - Master Licensed Alcohol and Other Drug Use Professionals
 - Licensed Alcohol and Other Drug Use Professionals
 - Certified Recovery Support Worker
- Permanent rulemaking is underway—Fiscal Impact Statement filed at end of December.

Endorsement License Application Process

- Internal Process: Licensing staff must query the NPDB to capture all jurisdictions of licensure/verify license is in good standing.
- For those license types requiring the criminal history check, if the applicant satisfies all requirements for licensure but OPLC has not yet received the results of the criminal history check, licensing staff may issue a provisional license.
- What is good standing?
 - A license is in good standing if it is not **currently** encumbered, i.e., it is active and has not been suspended, revoked, surrendered, conditioned, or restricted in any way. See, e.g., Plc 304.02(c).
- HUGE Impact on Portability:
 - For example. ALL states qualify for endorsement for physicians.
 - Additional information may be found on OPLC website: [New Changes for Reciprocity in New Hampshire | NH Office of Professional Licensure and Certification](#)

Endorsement License Application Process

- To obtain a license by endorsement under Plc 313, an applicant must:
 - Complete “Universal Application for Endorsement.”
 - Proof of licensure in another state
 - Must be primary source verification.
 - LSR can verify through that state’s licensing portal OR licensee may upload copy of letter of good standing/other proof of licensure.
 - Pay Fee established in Plc 1002
 - Complete FBI/Criminal History Check for licenses issued under the following boards:
 - Alcohol & Other Drug Use Professionals
 - Medicine
 - Mental Health
 - Nursing
 - Psychology

Office of Professional Licensure and Certification FY 24 Proposed Legislation

- HB 1188, relative to qualifications for licensed nursing assistants
 - Amends requirements that LNA must have the ability to read/write in the English language.
- HB 1190, relative to adopting the interstate social work licensure compact
- HB 1271, relative to the conversion, combination, and reorganization of boards and advisory boards
- HB 1331, relative to dentists licensed in another country
- HB 1408, relative to the merger of and reorganization of various occupational boards
- HB 1410, relative to certain professional licenses
 - Makes changes to licensure for LNAs
 - Difference between licensure and certification? No difference.
 - RSA 541-A:1, VIII: "License" means "the whole or party of any agency permit, certificate, approval, registration, charter, or similar form of permission required by law."

Office of Professional Licensure and Certification Current Priorities

- Internal Controls
- Upgrade data system
- Portability! (Pursue compacts)
- Leverage technology
 - Artificial intelligence
 - Case management system
 - Rules tracking
- Streamline licensure requirements (Plc 300s, use of AI, Minimum Data Set)
 - Healthcare Regulatory Research Institute: [Workforce | Healthcare Regulator \(hrri.org\)](https://www.hrri.org).

NH State Commission on Aging

Framework for Advising the Legislature and Governor

Per the State Commission on Aging Charge outlined in [RSA Chapter 19-P: State Commission on Aging](#):

19-P:1 There is established a state commission on aging to advise the governor and the general court on policy and planning related to aging.

Methods for Commission on Aging to fulfill charge:

- Create and distribute annual report as required in RSA
- Provide testimony and other public statements, delivered orally or in writing, to any legislative committee, or to any other local, state or other public forum in order to:
 - Take a position for or against a proposal
 - Not take position but share impact of issue upon older adultsThis includes news releases, social media posts, and any other channel of communication.
- Educate Commission members on an issue in order for them to act on their own accord
- Work with legislators to craft bills to address COA studied issues
- Provide guidance on state budget
- Informal pathways via relationships developed with policy makers & Governor's office

Role of COA Task Forces:

- To investigate proposals and issues per their work plans as aligned with the COA 3 Year Strategic Map.
- To provide public input on behalf of the Commission as subject matter experts regarding the impact on older adults. Task Forces shall not take a position for or against a policy proposal.
- To recommend a position on a proposal or issue for consideration by the full COA or Operational Infrastructure Task Force.

Role of COA Operational Infrastructure Task Force:

- To enable nimble response, this task force is authorized to take positions and represent the Commission on policy proposals in accordance with the framework below:

INPUTS - The following inputs are to be used to determine policy proposals and potential positions:

- Existing State of NH policy & operations
- Bills before NH State Legislature
- Budget Proposals – Agency, Governor, Legislature
- COA Annual Report
- COA Task Force study and analysis
- Feedback from legislators appointed to the COA
- Analysis by other knowledgeable people and organizations in the field

ANALYSIS - Evaluation of these considerations are to be used to guide prioritizing a policy proposal:

- Urgency of a need for a determination in advance of a COA meeting (anything that can wait should)
- Significance of impact upon older adults
- Value of COA's unique contribution
- Amount and quality of existing education/advocacy
- COA position documented in COA Annual Report or in Previous Meeting Minutes
- Recommendation from a COA Task Force
- Alignment with COA mission, vision, values
- Alignment with National Council on Aging priorities
- Bandwidth of COA resources to address issue

DETERMINATION of PRIORITY LEVEL

Prioritization will define action

Priority	Action
Priority One: large impact upon older adults, limited community-based advocacy, COA would be seen as absent if not contributing.	COA Chair, Other designated COA Member, or Executive Director to communicate a position on a policy proposal as the COA's position or provide general information on impact of proposal upon older adults: <ul style="list-style-type: none">o Sign in support or in opposition of a bill before the legislatureo Communicate verbally or in writing to policy stakeholders including testifying before the legislature
Priority Two: large impact upon older adults but community voice is sufficient.	Develop and/or provide resources for Commission members to engage in individual advocacy if they so desire.
Monitoring: Policy proposal has impact upon older adults.	Assigned to a Task Force to track and monitor for changes that may result in a change in priority level.

This framework recognizes that policy prioritization is a fluid process and proposals and/or bills may move from one priority to another and new proposals and/or bills may come into the mix.

Role of COA Member:

- Commission members may provide general updates to members of the public and community groups with the goal of creating awareness of Commission activity. Community outreach is a role of Commission members.
- Regarding statements relative to Commission positions on issues, Commission members should only do so when authorized by the Chair of the Commission.
- When speaking publicly or providing written statements on behalf of the Commission on Aging, members shall identify themselves as representing the Commission and the Commission's interests, and not their own.
- If speaking publicly as a private citizen, Commission members shall identify themselves as such and specify that they are speaking on their own behalf, and not representing the Commission.

Procedure

1. Individual Commission members and staff may be asked by the Chair of the Commission to present oral and/or written testimony or to make another form of public statement. In such cases, the position of the Council will be made clear to the individual by the Chairperson and/or Executive Director, and the testimony shall be reviewed and approved by the Chairperson and/or Executive Director or their designee prior to presentation.
2. Individual Commission members and staff who wish to present testimony or make public statements on behalf of the Commission, shall obtain from the Chairperson or his/her designee review and approval of the testimony prior to presentation.
3. In any case where testimony and/or information includes: the name of the Commission, a copy of the written material shall be given to the Chairperson and to the Executive Director to be placed on file at the Commission office.