**Granite State PNHP**

**Agenda, November 30, 2016**

1. Introductions
2. Minutes from October 26
3. HB1310 – next steps – Ahmed and Dick
	1. ?changes to the bill?
	2. Patients to testify
	3. Doctors to testify
	4. Promoting the Bill
	5. Study Commission structure/logistics
4. National and state politics and implications for Medicare-for-all

 (discussion strictly limited to 15minutes!!)

1. NH Med Society Letter - Gary
2. Discussion on how our Chapter is organized. Should we have more designated duties (e.g. Ahmed picking up some of the Treasurer’s duties)? Should we substitute Conference Calls, especially in winter?

 (discussion limited to 15 minutes; will continue at later meetings)

1. Upcoming presentations
	1. Dec. 6, Tuesday, Temple Beth Jacob, Concord
	2. Finding other opportunities
2. Recent presentations
	1. Cottage Hospital Medical Staff – Don
	2. Plymouth Secular Association and Plymouth Area Democrats – Cosy and David
3. Annual PNHP meeting (Tom Clairmont, John Daley, Ed Helm, Don Kollisch, Ahmed Kutty)
4. Vermont PNHP meeting – Don and John
5. ?Change the name of our Interest Group from “Single-Payer” to “Medicare for All”
6. New business
7. Next meeting: ?December 28

Attending:

Ken Dolkart

Camilla Jones (by phone)

Dick McNamara (by phone)

Don Kollisch

Ahmed Kutty

Gary Sobelson

John Daley

Rob Kiefner

Susan Zlotnick-Hale

Travis Harker

1. Minutes discussed
2. Susan: FIXIT will be shown at Temple Beth Jacob, 67 Broadway, on Dec. 6 at 7pm, followed by a panel (including Susan, Rob, and – just now nominated - Ahmed). It has been well-advertised.
3. Ahmed: I spoke with Peter Leishman, and he is quite willing to have Dick McNamara as the lead sponsor for HB1310 in the 2017 session
	1. Dick: the Health and Human Services Committee, in Executive Session, voted (by his count) 12-3 in favor that this bill should be submitted in 2017
	2. Dick: I verified that “HB1310-as amended” was submitted and will be written up
		1. Gary: Please submit, as written.
		2. Travis: It is important to have all view-points on the Commission.
		3. Dick: the Committee can – and likely will – change the membership of the Commission. Then a sub-committee can suggest an Amendment
		4. Dick: I asked Dr. John Fothergill to consider being a co-sponsor.
	3. Dick: I think it would be good to get a Senator as a sponsor
		1. Dick: I will let you know if we are on a tight timeline for getting co-sponsors
		2. Travis: How about Senator Martha Fuller-Clarke (wife of a gastroenterologist)?
			1. Dick: That would be great, and I will ask her.
			2. Gary: we should be careful to not have too many Democrats
		3. Ahmed: it is a great loss to not have Tom Sherman
	4. Dick: selection of the Chair of the Commission is crucial
		1. Dick: the Chair of the Commission is usually selected by the Governor from one of the Committee
	5. Ken: Could this Commission “cross-over” into broader discussion of Medicare?
		1. Dick: Sure, and the next six months will certainly create new challenges
	6. Ahmed: I have three potential patient stories: Former Gubernatorial candidate Steve Marchand has a story and at least one other
		1. Ken: I could offer stories about what health care is like in a country where health insurance is not available, e.g. Guatemala
		2. John: I have a patient who waited until reaching Medicare age to have his fecal soiling worked-up (and has been dx with colon ca)
		3. Ken: I have some patients
		4. Travis: How about underinsurance
			1. Travis: I have a pt with Medicare A, not B, who avoids doctor care
				1. Gary: that might be problematic because it highlights holes in Medicare
			2. John: a patient declined an ambulance ride during bee-sting anaphylaxis
		5. Rob: I will post something on the AAFP list-serv
		6. Ken: I will ask ER doctors at DHMC for stories of bad outcomes due to delayed care
		7. Don: I will ask the Exec Dir of our local Free Clinic for stories of bad outcomes due to un/under insurance
	7. Dick: have Tom Sherman testify
		1. Camilla: Dr. Sherman expressed a desire to work towards Single-Payer
		2. Ahmed: I will reach out to him
	8. Ahmed: both Minnesota and Colorado had Study Commissions that found significant savings
		1. Minnesota and Oregon had funding to run their Study Commissions. Will we need funding?
		2. Gary/Travis: if we need a financial consultation, we would need funding, e.g. the Endowment for Health
	9. Ahmed: I will be the “wrangler” for people to testify, if Rob agrees to assist
	10. Gary: If the Committee has hearings in January and sends it to Sub-Committee, we perhaps need to prepare for a big show in February
	11. Gary: since NHMS no longer has a lobbyist, we may need help in coordinating
		1. Travis: Katrina can likely keep on top of the calendar
		2. Travis: our lobbyist might be able to help
		3. Gary: Dick McNamara may be able to do it
4. Gary: the NH Medical Society will have the insert in the next Newsletter. There will be a $200 invoice for us to pay.
	1. Don: because we need to go to the NHMS Council to change out interest group name from Single Payer to “Medicare-for-All”, I propose that the idea is Inexpedient-To-Legislate. The vote passed.
	2. The new NHMS President is sympathetic to SP, but is not likely to provide leadership
5. Don: I gave a talk to the Cottage Hospital Medical Staff
	1. Gary: how about giving talks to specialty societies?
6. John: the Vermont PNHP meeting was pleasant and low-key, attended by about 20. It included a presentation about Microeconomics of Healthcare
	1. Vermont would like to collaborate
		1. John: each state is different, so it is hard to have a common project
		2. Ahmed: Ed Helm’s project of video-taping hearings and getting CATV engaged is useful
	2. Don/Ahmed: Another group in Vermont (led by Deb Richter) is considering a Universal Primary Care plan. The expectation is that – after a few years – other sectors will join.
7. Gary: consider having the April 2017 meeting at the NHAFP meeting
8. Ken: is there a link between PNHP and the Bernie Sanders “Revolution”
	1. Ahmed: YES, there can be, and I will ask the local organizations if they’d like a PNHP presentation
	2. Ahmed: we could have legally “Supported” Bernie without “Endorsing” Bernie. What a lost opportunity!
9. NATIONAL MEETING report
	1. Ahmed: Steffie and David were advisors to Bernie Sanders’ campaign
	2. Rob: what was the National PNHP meeting like?
		1. Ahmed: the meeting was muted and somewhat dispirited
		2. John: There are no major changes planned for the organization
10. Don: I would like us to begin to think about whether our organization is working optimally
	1. Camilla: could Don make a list of the activities you do? YES, I can
11. Don: I will ask PNHP for money
12. NEXT MEETING is December 28