

2025 Upper Valley Legislative Breakfast

Acknowledgements

The Public Health Council of the Upper Valley (PHC) would like to thank the legislators, presenters, and community partners who participated in the 2025 Upper Valley Legislative Breakfast and contributed to a thoughtful and substantive discussion on the state of public health systems in our region. This event was made possible through the guidance, expertise, and engagement of state-level policymakers from New Hampshire and Vermont, local public health leaders, healthcare providers, housing and social service organizations, and PHC staff.

PHC is especially grateful to the speakers who shared their time and insights on complex and timely policy issues, as well as to the legislators who engaged actively in discussion and reflection. We also thank those who assisted with event planning, coordination, and logistics. Their collective efforts helped ensure that the Legislative Breakfast served as a meaningful form for learning, dialogue, and relationship-building across state lines. PHC extends its sincere appreciation to Ledyard Bank, the New Hampshire Charitable Foundation, and All Together for their generous financial support, which made this event possible. Their collective efforts helped ensure the Legislative Breakfast served as a meaningful forum for learning, dialogue, and relationship-building across state lines.

Background

The mission of the Public Health Council of the Upper Valley is to improve the health and wellbeing of Upper Valley residents through shared public health initiatives, collaboration, and education within a strong network of community stakeholders. These stakeholders include health and social service providers, community members and advocates, municipal leaders, and state-level policymakers from both New Hampshire and Vermont.

Since 2019, PHC has worked intentionally to build relationships with legislators serving the Upper Valley in order to elevate regional health priorities, foster cross-state dialogue, and share on-the-ground perspectives from those working directly with communities. PHC's legislative events and breakfasts are designed to support informed policymaking by providing nonpartisan education, local data, and real-world examples of how policy decisions affect residents' access to health, housing, and social supports.

The 2025 Legislative Breakfast continued this work by focusing on the structure, capacity, and coordination of public health systems in the Upper Valley, as well as the downstream impacts of housing policy and proposed changes to Medicaid and healthcare financing. The discussion emphasized the interconnected nature of public health, healthcare, housing, and social services in a rural, bi-state region.

Legislative Breakfast Discussion Highlights

Public Health Systems and Core Functions

The Legislative Breakfast opened with a discussion of core public health functions and the ways in which legislatures shape public health capacity through governance, funding, and statutory authority. Speakers emphasized that public health operates across multiple levels, including state, regional, municipal, and federal systems, and relies on coordination among these entities to function effectively.

Participants noted public health systems are often forced to operate in a reactive mode, responding to crises rather than investing in prevention and long-term planning. While an ideal or fully resourced public health system may not be immediately achievable, it can serve as a guiding framework for policy decisions and incremental improvements.

Public Health Governance and Cross-State Coordination

Discussion highlighted key differences and similarities between Vermont's and New Hampshire's public health governance structures. Vermont's Public Health Caucus was described as a mechanism for education, engagement, and legislative action on public health issues, helping to integrate public health considerations across committees and policy areas.

Learn More: Vermont Public Health Caucus

To learn more about Vermont's Public Health Caucus and its role in advancing public health policy, contact Rep. Esme Cole at ecole@leg.state.vt.us

In contrast, New Hampshire's public health infrastructure relies heavily on regional public health networks that operate with limited and often unstable funding. Participants described how the absence of consistent general fund appropriations for public health networks in New Hampshire constrains their ability to plan, retain staff, and fully meet community needs, despite their expanding responsibilities beyond emergency preparedness.

Learn More: New Hampshire/Upper Valley

To learn more about the regional public health network serving New Hampshire's Upper Valley, contact Barbara Farnsworth, Dartmouth Health (Barbara.G.Farnsworth@hitchcock.org) or Alice Ely, Public Health Council of the Upper Valley (Alice.Ely@uvpublichealth.org).

Legislators and speakers emphasized that the Upper Valley's porous state border makes cross-state coordination essential, as residents routinely live, work, and seek services across New Hampshire and Vermont.

Town Health Officers and Local Public Health Capacity

A dedicated portion of the discussion focused on the role of Town Health Officers (THOs) and the challenges they face in fulfilling public health responsibilities. Sophia Johnson, NH's Town Health Officer Liaison, shared her perspective on the strengths and challenges of NH's Town Health Officer system. Participants noted 1) there are differences between the NH and VT approaches to Town Health Officer roles and supports and 2) that while THOs are statutorily required in every town, many serve in a part-time capacity, often balancing public health duties with other roles.

THO roles are not consistently integrated across the full scope of public health functions, meaning that public health work at the municipal level is often fragmented across topic areas and responsible individuals rather than coordinated through a cohesive local public health framework. Limited time, staffing, and authority constrain THOs' ability to focus on prevention, education, and community engagement. Several alternative models were discussed, including shared or regional health officers housed within public health networks and mutual-aid style agreements that would allow towns to pool resources while maintaining statutory authority.

The discussion also acknowledged political and legislative realities that shape the scope of local public health authority, underscoring the need for solutions that are both practical and responsive to current constraints.

Housing Policy, Accessibility, and Homelessness

Housing emerged as a central public health issue throughout the Legislative Breakfast. Speakers emphasized that homelessness is fundamentally a housing problem driven by affordability, supply shortages, and structural barriers, rather than individual failings.

Presentations highlighted the Housing First model as an evidence-based approach that prioritizes stable housing as a foundation for addressing health, employment, and substance use needs. Data shared during the event demonstrated that Housing First approaches improve quality of life, reduce emergency department use, and cost less per person than crisis-driven systems relying on shelters, hospitals, and incarceration.

Accessibility and universal design were also discussed as critical components of housing policy in a region with an aging population and a high prevalence of disability. Participants noted the significant gap between the number of residents who need accessible housing and the limited supply currently available.

Potential Impacts of Medicaid and Healthcare Policy Changes

The final major discussion area addressed proposed and potential changes to Medicaid and healthcare financing and their implications for Upper Valley communities. Speakers outlined how changes such as work requirements, increased eligibility reviews, and limits on provider funding could lead to coverage losses, delayed care, and increased reliance on emergency services.

Rural healthcare providers, including hospitals, long-term care facilities, and community mental health organizations, were identified as particularly vulnerable to funding disruptions. Participants emphasized that reductions in Medicaid funding would have cascading effects across the healthcare system, increasing costs for patients and communities while straining already limited provider capacity.

Legislator Reflections and Discussion

During the closing discussion, legislators reflected on the value of hearing directly from public health practitioners, service providers, and community leaders. Participants emphasized the importance of continued information-sharing, relationship-building, and constituent engagement to support effective policymaking.

Several legislators noted that repeated exposure to public health data and community perspectives helps build understanding over time and supports incremental progress on complex issues.

Next Steps

PHC will share this report with state-level policymakers serving Upper Valley communities to provide a summary of the topics discussed and the perspectives shared during the 2025 Legislative Breakfast. Over the coming months, PHC will continue to provide educational resources, connect legislators with local experts, and support informed dialogue on priority public health issues.

PHC will also begin planning future legislative events and looks forward to continuing this collaborative work with policymakers, partners, and community members across the Upper Valley.

Additional Resources Included

- Summary of Public Health Functions
- Speaker Presentations:
 - Core Public Health Functions – Alice Ely
 - Understanding New Hampshire’s Town Health Officer Program – Sophia Johnson, Program Manager, Town Health Officer Liaison Program, NH DHHS
 - Policy Solutions for Accessible Housing – Kendra LaRoche, PhD, Executive Director & Carmen Lachle, Director of Community Outreach, Special Needs Support Center
 - What is the Housing First Model & Why Does it Work? – Roscoe Putnam, Health Clinic Coordinator, Dartmouth Center for Advancing Rural Health Equity & Al Carbonneau, Hotline Manager, Headrest
 - How Medicaid Changes May Impact Our Communities – Matthew Houde, V.P. Government Relations, Dartmouth Health
- Attendee List with Contact Information