

17
Mac



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301

603-271-4501 1-800-852-3345 Ext. 4501

Fax: 603-271-4827 TDD Access: 1-800-735-2964

www.dhhs.nh.gov

Lori Shabinette
Commissioner

Tricia M. Tilley
Director

July 22, 2021

The Honorable Ken Weyler, Chairman
Fiscal Committee of the General Court, and

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Pursuant to RSA 14:30-a; VI, authorize the Department of Health and Human Services, Division of Public Health Services to accept and expend federal funds in the amount of \$212,972 from the Health Resources and Services Administration's Maternal and Child Health Bureau (MCHB) to fund the Maternal Infant and Early Childhood Home Visiting (MIECHV) program effective upon date of approval by the Fiscal Committee and Governor and Council through June 30, 2023, and further authorize the funds to be allocated as follows. 100% Federal Funds.

05-95-90-902010-2451-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY & HEALTH SERVICES, ARP - MIEC HOME VISITING

SFY 22

Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-408114	Federal Funds	\$0	\$212,972	\$212,972
	General Funds	\$0	\$0	\$0
Total Revenue		\$0	\$212,972	\$212,972
041-500801	Audit Fund Set Aside	\$0	\$284	\$284
074-500589	Grants for Pub Asst and Relief	\$0	\$212,688	\$212,972
Total Expenses		\$0	\$212,972	\$212,972

EXPLANATION

The New Hampshire Division of Public Health Services (NH DPHS) Home Visiting Program recognizes the need to support families in New Hampshire. During the COVID-19 pandemic, home visitors not only continued to provide high-quality evidence based parenting support and child development education, they were a lifeline for many families, delivering supplies and providing support to families who were significantly impacted all while continuing to utilize an evidence-based curriculum and model to provide high quality services to families.

The Department of Health and Human Services' Mission is to join communities and families in providing opportunities for citizens to achieve health and independence.

The funds are to be budgeted as follows:

Class 041 – Audit Cost Set Aside per State requirement.

Class 074 – Grants for Pub Asst and Relief to contract out for evidence-based home visiting services provided through the Healthy Families America model. These services are provided statewide to eligible families and have demonstrated improvements in maternal and child health, reductions in child maltreatment, improvements in school readiness and achievement, family economic self-sufficiency, and coordination and referrals. Funding can be used to support service delivery, hazard pay or other staff costs, home visitor training, and technology. Funds are also allowable to support emergency supplies, coordination with diaper banks, and prepaid grocery cards for families.

In response to the anticipated two-part question, “Can these funds be used to offset General Funds?” and “What is the compelling reason for not offsetting General Funds?” the Division offers the following information: The funds are provided for a specified purpose by the HRSA as defined in the Notice of Grant Award and cannot be used to offset general funds.

Area Served: Statewide

Source of Funds: 100% Federal from the US Health Resources and Services Administration provided through one-time funding made available under section 9101 of the American Rescue Plan Act (ARP), P.L. 117-2.

Attached is the Notice of Grant Award. These funds were not added to the FY22-FY23 operating budget because they are new and were not anticipated at the time the budget was developed.

In the event that these Federal funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Lori Shibinette
Commissioner



Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# X1141935
Federal Award Date: 04/30/2021

Recipient Information

1. Recipient Name
HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF
129 PLEASANT ST
CONCORD, NH 03301-3852
2. Congressional District of Recipient
02
3. Payment System Identifier (ID)
102600061883
4. Employer Identification Number (EIN)
026000618
5. Data Universal Numbering System (DUNS)
011040545
6. Recipient's Unique Entity Identifier
7. Project Director or Principal Investigator
Aurelia Moran
Supervisor
aurelia.moran@dhhs.nh.gov
(603)491-8176
8. Authorized Official
Aurelia Moran
aurelia.moran@dhhs.nh.gov

Federal Agency Information

9. Awarding Agency Contact Information
LaToya Ferguson
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
lferguson@hrsa.gov
(301) 443-1440
10. Program Official Contact Information
Nicole Gaskin-Laniyan
Maternal and Child Health Bureau (MCHB)
NGaskin-Laniyan@hrsa.gov
(301) 443-8926

Federal Award Information

11. Award Number
1X11MC41935-01-00
12. Unique Federal Award Identification Number (FAIN)
X1141935
13. Statutory Authority
Social Security Act, Title V, § 511(c) (42 U.S.C. § 711(c)), as amended by the Bipartisan Budget Act of 2018 (P.L. 115-123), Title VI, Subtitle A.
American Rescue Plan Act (P.L. 117-2)
14. Federal Award Project Title
American Rescue Plan Act Funding for Home Visiting
15. Assistance Listing Number
93.870
16. Assistance Listing Program Title
Maternal, Infant and Early Childhood Homevisiting Grant Program
17. Award Action Type
New
18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 05/01/2021 - End Date 09/30/2023	
20. Total Amount of Federal Funds Obligated by this Action	\$283,582.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	\$0.00
21. Authorized Carryover	\$0.00
22. Offset	
23. Total Amount of Federal Funds Obligated this budget period	\$283,582.00
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
25. Total Federal and Non-Federal Approved this Budget Period	\$283,582.00
26. Project Period Start Date 05/01/2021 - End Date 09/30/2023	
27. Total Amount of the Federal Award Including Approved Cost Sharing or Matching this Project Period	\$283,582.00

28. Authorized Treatment of Program Income
Addition
29. Grants Management Officer - Signature
Kelly Long on 04/30/2021

30. Remarks



Notice of Award
Award Number: 1 X11MC41935-01-00
Federal Award Date: 04/30/2021

Maternal and Child Health Bureau (MCHB)

31. APPROVED BUDGET: (Excludes Direct Assistance)	
<input checked="" type="checkbox"/> Grant Funds Only	
<input type="checkbox"/> Total project costs including grant funds and all other financial participation	
a. Salaries and Wages:	\$0.00
b. Fringe Benefits:	\$0.00
c. Total Personnel Costs:	\$0.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$0.00
g. Travel:	\$0.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$283,582.00
j. Consortium/Contractual Costs:	\$0.00
k. Trainee Related Expenses:	\$0.00
l. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$283,582.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
q. TOTAL APPROVED BUDGET:	\$283,582.00
I. Less Non-Federal Share:	\$0.00
II. Federal Share:	\$283,582.00

33. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)	
YEAR	TOTAL COSTS
Not applicable	

34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)	
a. Amount of Direct Assistance	\$0.00
b. Less Unawarded Balance of Current Year's Funds	\$0.00
c. Less Cumulative Prior Award(s) This Budget Period	\$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00

35. FORMER GRANT NUMBER
36. OBJECT CLASS 41.51
37. BHCMI#

32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:	
a. Authorized Financial Assistance This Period	\$283,582.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$283,582.00

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:
a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES						
FY-CAN	CFDA	DOCUMENT NUMBER	AMT: FIN. ASST.	AMT: DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
21-389A100	93.870	21X11MC41935C6	\$283,582.00	\$0.00	N/A	21X11MC41935C6