



Lori A. Shabinette
Commissioner

Nancy L. Rollins
Interim Director

10
MOC

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF LONG TERM SUPPORTS AND SERVICES

105 PLEASANT STREET, CONCORD, NH 03301: 20 RCVD
603-271-5034 1-800-852-3345 Ext. 5034
Fax: 603-271-5166 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

December 20, 2021

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Long Term Supports and Services to accept and expend Medicare Improvements for Patients and Providers (MIPPA) federal funds in the amount of \$72,687 from the Administration for Community Living effective upon approval by the Governor and Council through June 30, 2023 and further authorize the allocation of these funds in the accounts below. 100% Federal Funds.

05-095-048-481010-95650000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS; HHS: DLTSS-ELDERLY & ADULT SVCS; GRANTS FOR SOCIAL SVC PROG; SERVICELINK

| <u>Class/Object</u> | <u>Class Title</u> | <u>Current Adjusted Authorized Budget</u> | <u>Increase / (Decrease) Amount</u> | <u>Revised Budget</u> |
|-----------------------|--------------------------------|---|-------------------------------------|-----------------------|
| <u>Revenue</u> | | | | |
| 000-400146 | Federal Funds | \$2,478,076 | \$72,687 | \$2,550,763 |
| | General Funds | \$2,105,750 | \$0 | \$2,105,750 |
| | Total Revenue | \$4,583,826 | \$72,687 | \$4,656,513 |
| <u>Expense</u> | | | | |
| 020-500200 | Current Expense | \$3,500 | \$0 | \$3,500 |
| 039-500188 | Telecommunications | \$4,000 | \$0 | \$4,000 |
| 041-500801 | Audit Fund Set Aside | \$3,610 | \$73 | \$3,683 |
| 074-500585 | Grants for Pub Asst and Relief | \$2,955,880 | \$72,614 | \$3,028,494 |
| 102-500731 | Contracts for Program Services | \$853,846 | \$0 | \$853,846 |
| 545-500387 | I and R Contracts | \$213,813 | \$0 | \$213,813 |
| 570-500928 | Family Care Giver | \$549,177 | \$0 | \$549,177 |
| | Total Expense | \$4,583,826 | \$72,687 | \$4,656,513 |

EXPLANATION

The Department is requesting to accept and expend MIPPA funding for a state-wide media campaign to promote knowledge of the no cost vaccines under Medicare, specifically COVID-19, flu, and pneumococcal. The purpose

of the MIPPA program is to provide education and counseling to rural and low income Medicare beneficiaries about Medicare's no-cost screenings and vaccines, financial assistance for Medicare Parts A, B, and D, and provide Part D prescription drug cost comparisons options.

The current one-year MIPPA award from Administration for Community Living (ACL) is \$72,687 more than the previous year. The total funding amount federally increased, therefore, states received more money in their annual awards. Historically, the majority of this grant supports ServiceLink contractors to provide outreach and assistance to eligible Medicare beneficiaries to apply for benefit programs that help to lower the costs of their Medicare premiums and deductibles. Also, a portion of the grant funds are used at the state level for administrative oversight of the program, Director Salary, and travel expenses. In the State's application for this year's MIPPA grant, the State indicated that the additional funds received would be spent on a State-wide media campaign promoting the no-cost vaccines via two avenues; bus wrap and radio advertising in order to promote health equity with our aging population in NH.

Source of Funds: 100% Federal Funds from the Administration for Community Living.

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

Respectfully submitted,



Lori A. Shubinette
Commissioner

1. DATE ISSUED MM/DD/YYYY 08/28/2020

1a. SUPERSEDES AWARD NOTICE dated except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

2. CFDA NO. 93.071 - Medicare Enrollment Assistance Program

3. ASSISTANCE TYPE Formula grant

4. GRANT NO. 2001NHMAA-00 Formerly

5. TYPE OF AWARD Mandatory

4a. FAIN 2001NHMAA

5a. ACTION TYPE Mandatory

6. PROJECT PERIOD MM/DD/YYYY From 09/01/2020 Through 08/31/2021

7. BUDGET PERIOD MM/DD/YYYY From 09/01/2020 Through 08/31/2021

8. TITLE OF PROJECT (OR PROGRAM) FY2020 MIPPA: Priority 2 for AAAs

Department of Health and Human Services
Administration For Community Living
CIP - MIPPA Project Grants

330 C Street, SW
330 C Street, SW
Washington, DC 20201

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
The Medicare Improvements for Patients and Providers Act of 2008 - Section 119. Public Law (PL) 110-275 as amended by the Patient

9a. GRANTEE NAME AND ADDRESS
HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF
129 PLEASANT ST
NH Department of Health and Human Svcs
CONCORD, NH 03301-3852

9b. GRANTEE PROJECT DIRECTOR
Ms. Louise Simpson
105 Pleasant St
Concord, NH 03301-3852
Phone: 603-271-9080

10a. GRANTEE AUTHORIZING OFFICIAL
Ms. Jean Crouch
105 Pleasant St
Concord, NH 03301-3852
Phone: 603-271-0406

10b. FEDERAL PROJECT OFFICER
Marissa Whitehouse
Switzer Building
330 C Street, SW
Washington, DC 20201-1401
Phone: 202-795-7425

ALL AMOUNTS ARE SHOWN IN USD

| | | | |
|---|-----------|---|--------------------|
| 11. APPROVED BUDGET (Excludes Direct Assistance) | | 12. AWARD COMPUTATION | |
| I Financial Assistance from the Federal Awarding Agency Only <input type="checkbox"/> | | a. Amount of Federal Financial Assistance (from item 11m) 37,152.00 | |
| II Total project costs including grant funds and all other financial participation <input type="checkbox"/> | | b. Less Unobligated Balance From Prior Budget Periods 0.00 | |
| a. Salaries and Wages | 0.00 | c. Less Cumulative Prior Award(s) This Budget Period 0.00 | |
| b. Fringe Benefits | 0.00 | d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 37,152.00 | |
| c. Total Personnel Costs | 0.00 | 13. Total Federal Funds Awarded to Date for Project Period 37,152.00 | |
| d. Equipment | 0.00 | 14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project): | |
| e. Supplies | 0.00 | YEAR | TOTAL DIRECT COSTS |
| f. Travel | 0.00 | a. | d. |
| g. Construction | 0.00 | b. | e. |
| h. Other | 37,152.00 | c. | f. |
| i. Contractual | 0.00 | 15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: | |
| j. TOTAL DIRECT COSTS | 37,152.00 | a. DEDUCTION | |
| k. INDIRECT COSTS At of \$ () | 0.00 | b. ADDITIONAL COSTS | |
| l. TOTAL APPROVED BUDGET | 37,152.00 | c. MATCHING | |
| m. Federal Share | 37,152.00 | d. OTHER RESEARCH (Add / Deduct Option) | |
| n. Non-Federal Share | 0.00 | e. OTHER (See REMARKS) | |
| | | 16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: | |
| | | a. The grant program legislation | |
| | | b. The grant program regulations. | |
| | | c. This award notice including terms and conditions, if any, noted below under REMARKS. | |
| | | d. Federal administrative requirements, cost principles and audit requirements applicable to the grant. | |
| | | In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system. | |

REMARKS (Other Terms and Conditions Attached - Yes No)

Due to system limitations, box 11 "Approved Budget" shows the total dollar amount approved for this award. No line item budget breakout will be included in the NOA. The budget narrative submitted with the approved state plan is considered the Approved Budget for this award.

GRANTS MANAGEMENT OFFICIAL:
Tanielle Chandler, Grants Management Officer
Switzer Building
330 C Street, SW
Washington, DC 20201-0003
Phone: N/A

| | | | | |
|---------------------|-------------------------------|---------------------|---------------------|--------------------|
| 17. OBJ CLASS 41.15 | 18a. VENDOR CODE 1026000618B3 | 18b. EIN 026000618 | 19. DUNS 011040545 | 20. CONG. DIST. 02 |
| FY-ACCOUNT NO. | DOCUMENT NO. | ADMINISTRATIVE CODE | AMT ACTION FIN ASST | APPROPRIATION |
| 21. a. 0-299999C | b. 2001NHMAA | c. CIP | d. \$37,152.00 | e. 75-X-0142 |
| 22. a. | b. | c. | d. | e. |
| 23. a. | b. | c. | d. | e. |

AWARD ATTACHMENTS

New Hampshire Dept of Health and Human Services

2001NHMIAA-00

1. FY 20 Terms

Standard Administrative Terms

1. This award is paid by DHHS Payment Management System (PMS). Please go to <https://pms.psc.gov/> for payment and reporting information.
 2. Initial expenditure of funds by the grantee constitutes acceptance of this award. Any future support is subject to the availability of funds and programmatic priorities.
 3. **Matching Requirements** - Grantees must provide the match listed in section 11n of the NOA in accordance with the program requirements and what was listed within the application submitted for this award.
 4. This award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to you based on your recipient type and the purpose of this award. This includes requirements in Parts I and II of the HHS GPS (available as a pdf at this link <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>).
 5. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <https://acl.gov/grants/managing-grant>
 6. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS. Also, the general provisions from "**Consolidated Appropriations Act, 2020** (Public Law 116-94), signed into law on December 20, 2019,, apply to this award and can be found on the ACL Website: <https://acl.gov/grants/managing-grant>
- Salary Limitation:**
- The General Provisions in the **Consolidated Appropriations Act, 2020** (Public Law 116-94), signed into law on December 20, 2019, includes provisions for a salary rate limitation. The law limits the salary amount that may be awarded and charged to ACL grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary of the Federal Executive Pay scale is \$197,300. This amount reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to subawards/subcontracts under an ACL grant or cooperative agreement. Note that these or other salary limitations will apply in FY 2020, as required by law.
7. Grantees are hereby given notice that the 48 CFR section 3.908, implementing section 828, entitled "Pilot Program for Enhancement of Contractor Whistleblower Protections," of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2013 (Pub. L. 112-239, enacted January 2, 2013), applies to this award. The effective date is for all grants and contracts issued on or after July 1, 2013, through January 1, 2017.
 8. All grantees are expected to recognize any same-sex marriage legally entered into in a U.S. jurisdiction that recognizes their marriage, including one of the 50 states, the District of Columbia, or a U.S. territory, or in a foreign country so long as that marriage would also be recognized by a U.S. jurisdiction. This applies regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex

marriage. However, this does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage. Accordingly, recipients must review and revise, as needed, any policies and procedures which interpret or apply Federal statutory or regulatory references to such terms as "marriage," "spouse," family," "household member" or similar references to familial relationships to reflect inclusion of same-sex spouse and marriages. Any similar familial terminology references in HHS statutes, regulations, or policy transmittals will be interpreted to include same-sex spouses and marriages legally entered into as described herein.

9. Federal Awardee Performance and Integrity Information System (FAPIS):

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then you as the recipient during that period of time must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS) about civil, criminal, or administrative proceedings described in paragraph 2 of this award term and condition. This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available.

10. FFATA and FSRS Reporting -The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System located at <http://www.FSRS.gov> for all sub-awards and sub-contracts issued for \$25,000 or more as well as addressing executive compensation for both grantee and sub-award organizations. Additional guidance is located at: http://www.acl.gov/Funding_Opportunities/Grantee_Info/FFATA.aspx

11. Grants Management Module - ACL discretionary grantees are required to use the Grants Management Module (GMM) for their end to end grants management services (tracking and receiving various award actions, submitting financial and progress reports, general correspondence, requests etc.). The grantee authorizing official identified in box 10a., and grantee project director identified in box 9b., must ensure they are registered with GMM and have the appropriate role assigned to them by their organization. Please follow the GMM grantee account registration information located at the following URL: <https://www.grantsolutions.gov/support/registration.html>. If you are unable to register or have questions associated with registration, contact your Grants Management Specialist (GMS).

12. Closeout Requirements – A final Federal Financial Report (SF-425), a Property Inventory and Disposition Statement, and a final Project Report are due within ninety (90) days after the expiration of the project period in box 6 of the Notice of Award. Submit all reports as a "note" using an authorized Grants Management Module account.

Reporting Requirements

Programmatic data must be submitted via the SHIP Tracking and Referral System (STARS) monthly. Grantees must report data for all MIPPA program activities including any outreach conducted to the public as well as one-on-one assistance provided to beneficiaries, their families, and/or caregivers. All monthly data shall be submitted by the end of the month following the close of the reporting period. For example, all data from the month of October would be due November 30th. The recipient shall comply with data integrity guidelines and perform data validation to ensure the accuracy of their data on a quarterly basis.

Programmatic data will be used to track progress against the MIPPA Performance Measures (PM):

- **PM1: Overall MIPPA Contacts** - Percentage of total beneficiary contact forms per Medicare beneficiaries under 150% FPL in the state
- **PM2: Overall Persons Reached through Outreach** - Total number of people reached as reported on group outreach and education forms
- **PM3: MIPPA Target Populations** - Total number of beneficiary contact forms by target beneficiary groups (Under 65, Rural, Native American, English as a Secondary Language)
- **PM4: Contacts with Applications Submitted** - Percentage of forms with applications submitted compared to overall MIPPA contacts reported in PM1

Narrative progress reports must be submitted semi-annually. This report must be submitted as a "note" using an authorized GrantSolutions account. The semi-annual narrative progress report covers the following period:

- September 1st through February 28th – due March 31st

A final narrative report will be due at the end of the grant period. This final report will replace the last semi-annual narrative and must cover the entire life of the grant. The final narrative report is due 90 days after the end of the award (November 30, 2021).

Financial Reporting

All grantees must use the Federal Financial Report (SF-425) form at:

<https://www.grants.gov/forms/post-award-reporting-forms.html>. The SF-425 form is downloadable as a PDF. Complete all lines as appropriate, sign and date and upload to GrantSolutions as a "grant note". Grantees are required to submit semi-annual Federal Financial Report (SF-425), which are due 30 days following each six month reporting period. Semi-annual reporting periods are as follows:

- September 1st through February 28th – due March 31st

Final financial reports must be submitted within 90 calendar days from the end of the project period.

Additional Terms

At any phase of the project period, the recipient shall deliver to the Administration for Community Living (ACL) upon request, any materials, systems or other items developed, refined, or enhanced under the grant award. The recipient agrees that ACL shall have royalty-free, non-exclusive, and irrevocable rights to reproduce, publish, or otherwise use and authorize others to use the items for Federal Government purposes.

On all publications funded solely or in part by MIPPA funds, the recipient shall include the express acknowledgement, "This project was supported, in part by grant number XXXXXX####, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking project with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy."

The recipient shall participate, as appropriate, in ACL's MIPPA Evaluation Project.

The recipient shall work with assigned ACL project officer to address any project concerns, if applicable, identified in the application review process.

Staff Contacts

| State Code | State | PO | Email Address |
|------------|-------------|------------------|--|
| AK | Alaska | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| AL | Alabama | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| AR | Arkansas | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| AZ | Arizona | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| CA | California | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| CO | Colorado | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| CT | Connecticut | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| DC | DC | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| DE | Delaware | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| FL | Florida | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| GA | Georgia | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| GU | Guam | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| HI | Hawaii | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| IA | Iowa | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| ID | Idaho | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| IL | Illinois | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| IN | Indiana | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |

| | | | |
|----|-------------------|--------------------|--|
| KS | Kansas | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| KY | Kentucky | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| LA | Louisiana | Maggie Flowers | Margaret.Flowers@acl.hhs.gov |
| MA | Massachusetts | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| MD | Maryland | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| ME | Maine | Marissa Whitehouse | Marissa.Whitehouse@acl.hhs.gov |
| MI | Michigan | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| MN | Minnesota | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| MO | Missouri | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| MS | Mississippi | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| MT | Montana | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| NC | North Carolina | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| ND | North Dakota | Maggie Flowers | Margaret.Flowers@acl.hhs.gov |
| NE | Nebraska | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| NH | New Hampshire | Marissa Whitehouse | Marissa.Whitehouse@acl.hhs.gov |
| NJ | New Jersey | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| NM | New Mexico | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| NV | Nevada | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| NY | New York | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| OH | Ohio | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| OK | Oklahoma | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| OR | Oregon | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| PA | Pennsylvania | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| PR | Puerto Rico | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| RI | Rhode Island | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| SC | South Carolina | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| SD | South Dakota | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| TN | Tennessee | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| TX | Texas | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| UT | Utah | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| VA | Virginia | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| VI | US Virgin Islands | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |

| | | | |
|----|---------------|------------------|--|
| VT | Vermont | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| WA | Washington | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| WI | Wisconsin | Maggie Flowers | Margaret.Flowers@acl.hhs.gov |
| WV | West Virginia | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| WY | Wyoming | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |

1. DATE ISSUED *MM/DD/YYYY*
08/28/2020

1a. SUPERSEDES AWARD NOTICE dated
except that any additions or restrictions previously imposed
remain in effect unless specifically rescinded

2. CFDA NO.
93.071 - Medicare Enrollment Assistance Program

3. ASSISTANCE TYPE *Formula grant*

4. GRANT NO. 2001NHMIDR-00
Formerly

5. TYPE OF AWARD
Mandatory

4a. FAIN 2001NHMIDR

5a. ACTION TYPE *Mandatory*

6. PROJECT PERIOD *MM/DD/YYYY*
From 08/01/2020 Through 08/31/2021

7. BUDGET PERIOD *MM/DD/YYYY*
From 09/01/2020 Through 08/31/2021

8. TITLE OF PROJECT (OR PROGRAM)
FY2020 MIPPA: Priority 3 for ADRCs

Department of Health and Human Services
Administration For Community Living
CIP - MIPPA Project Grants

330 C Street, SW
330 C Street, SW
Washington, DC 20201

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
The Medicare Improvements for Patients and Providers Act of 2008 -
Section 119. Public Law (PL) 110-275 as amended by the Patient

9a. GRANTEE NAME AND ADDRESS
HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF
129 PLEASANT ST
NH Department of Health and Human Svcs
CONCORD, NH 03301-3852

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10b. FEDERAL PROJECT OFFICER
Marissa Whitehouse
Switzer Building
330 C Street, SW
Washington, DC 20201-1401
Phone: 202-795-7425

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)

I Financial Assistance from the Federal Awarding Agency Only

II 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. Equipment | 0.00 |
| e. Supplies | 0.00 |
| f. Travel | 0.00 |
| g. Construction | 0.00 |
| h. Other | 25,226.00 |
| i. Contractual | 0.00 |
| j. TOTAL DIRECT COSTS | 25,226.00 |
| k. INDIRECT COSTS At of \$ () | 0.00 |
| l. TOTAL APPROVED BUDGET | 25,226.00 |
| m. Federal Share | 25,226.00 |
| n. Non-Federal Share | 0.00 |

12. AWARD COMPUTATION

| | |
|--|-----------|
| a. Amount of Federal Financial Assistance (from item 11m) | 25,226.00 |
| b. Less Unobligated Balance From Prior Budget Periods | 0.00 |
| c. Less Cumulative Prior Award(s) This Budget Period | 0.00 |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION | 25,226.00 |
| 13. Total Federal Funds Awarded to Date for Project Period | 25,226.00 |

14. RECOMMENDED FUTURE SUPPORT
(Subject to the availability of funds and satisfactory progress of the project):

| YEAR | TOTAL DIRECT COSTS | YEAR | TOTAL DIRECT COSTS |
|------|--------------------|------|--------------------|
| a. | | d. | |
| b. | | e. | |
| c. | | f. | |

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

| | |
|---|----------|
| a. DEDUCTION | b |
| b. ADDITIONAL COSTS | |
| c. MATCHING | |
| d. OTHER RESEARCH (Add / Deduct Option) | |
| e. OTHER (See REMARKS) | |

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

| |
|---|
| a. The grant program legislation. |
| b. The grant program regulations. |
| c. This award notice including terms and conditions, if any, noted below under REMARKS. |
| d. Federal administrative requirements, cost principles and audit requirements applicable to the grant. |

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached - Yes No)

Due to system limitations, box 11 "Approved Budget" shows the total dollar amount approved for this award. No line item budget breakout will be included in the NOA. The budget narrative submitted with the approved state plan is considered the Approved Budget for this award.

GRANTS MANAGEMENT OFFICIAL:
Tanielle Chandler, Grants Management Officer
Switzer Building
330 C Street, SW
Washington, DC 20201-0003
Phone: N/A

| | | | | | | | | | |
|----------------|-----------|------------------|--------------|---------------------|-----------|---------------------|-------------|-----------------|-----------|
| 17. OBJ CLASS | 41.15 | 18a. VENDOR CODE | 102600061883 | 18b. EIN | 026000618 | 19. DUNS | 011040545 | 20. CONG. DIST. | 02 |
| FY-ACCOUNT NO. | | DOCUMENT NO. | | ADMINISTRATIVE CODE | | AMT ACTION FIN ASST | | APPROPRIATION | |
| 21. a. | 0-299999B | b. | 2001NHMIDR | c. | CIP | d. | \$25,226.00 | e. | 75-X-0142 |
| 22. a. | | b. | | c. | | d. | | e. | |
| 23. a. | | b. | | c. | | d. | | e. | |

AWARD ATTACHMENTS

New Hampshire Dept of Health and Human Services

2001NHMIDR-00

1. FY 20 Terms

Standard Administrative Terms

1. This award is paid by DHHS Payment Management System (PMS). Please go to <https://pms.psc.gov/> for payment and reporting information.
 2. Initial expenditure of funds by the grantee constitutes acceptance of this award. Any future support is subject to the availability of funds and programmatic priorities.
 3. **Matching Requirements** - Grantees must provide the match listed in section 11n of the NOA in accordance with the program requirements and what was listed within the application submitted for this award.
 4. This award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to you based on your recipient type and the purpose of this award. This includes requirements in Parts I and II of the HHS GPS (available as a pdf at this link <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>).
 5. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <https://acl.gov/grants/managing-grant>
 6. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS. Also, the general provisions from "**Consolidated Appropriations Act, 2020** (Public Law 116-94), signed into law on December 20, 2019,, apply to this award and can be found on the ACL Website: <https://acl.gov/grants/managing-grant>
- Salary Limitation:**
The General Provisions in the **Consolidated Appropriations Act, 2020** (Public Law 116-94), signed into law on December 20, 2019, includes provisions for a salary rate limitation. The law limits the salary amount that may be awarded and charged to ACL grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary of the Federal Executive Pay scale is \$197,300. This amount reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to subawards/subcontracts under an ACL grant or cooperative agreement. Note that these or other salary limitations will apply in FY 2020, as required by law.
7. Grantees are hereby given notice that the 48 CFR section 3.908, implementing section 828, entitled "Pilot Program for Enhancement of Contractor Whistleblower Protections," of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2013 (Pub. L. 112-239, enacted January 2, 2013), applies to this award. The effective date is for all grants and contracts issued on or after July 1, 2013, through January 1, 2017.
 8. All grantees are expected to recognize any same-sex marriage legally entered into in a U.S. jurisdiction that recognizes their marriage, including one of the 50 states, the District of Columbia, or a U.S. territory, or in a foreign country so long as that marriage would also be recognized by a U.S. jurisdiction. This applies regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex

marriage. However, this does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage. Accordingly, recipients must review and revise, as needed, any policies and procedures which interpret or apply Federal statutory or regulatory references to such terms as "marriage," "spouse," family," "household member" or similar references to familial relationships to reflect inclusion of same-sex spouse and marriages. Any similar familial terminology references in HHS statutes, regulations, or policy transmittals will be interpreted to include same-sex spouses and marriages legally entered into as described herein.

9. Federal Awardee Performance and Integrity Information System (FAPIS):

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then you as the recipient during that period of time must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS)) about civil, criminal, or administrative proceedings described in paragraph 2 of this award term and condition. This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available.

10. FFATA and FSRS Reporting -The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System located at <http://www.FSRS.gov> for all sub-awards and sub-contracts issued for \$25,000 or more as well as addressing executive compensation for both grantee and sub-award organizations. Additional guidance is located at: http://www.acl.gov/Funding_Opportunities/Grantee_Info/FFATA.aspx

11. Grants Management Module - ACL discretionary grantees are required to use the Grants Management Module (GMM) for their end to end grants management services (tracking and receiving various award actions, submitting financial and progress reports, general correspondence, requests etc.). The grantee authorizing official identified in box 10a., and grantee project director identified in box 9b., must ensure they are registered with GMM and have the appropriate role assigned to them by their organization. Please follow the GMM grantee account registration information located at the following URL: <https://www.grantsolutions.gov/support/registration.html>. If you are unable to register or have questions associated with registration, contact your Grants Management Specialist (GMS).

12. Closeout Requirements – A final Federal Financial Report (SF-425), a Property Inventory and Disposition Statement, and a final Project Report are due within ninety (90) days after the expiration of the project period in box 6 of the Notice of Award. Submit all reports as a "note" using an authorized Grants Management Module account.

Reporting Requirements

Programmatic data must be submitted via the SHIP Tracking and Referral System (STARS) monthly. Grantees must report data for all MIPPA program activities including any outreach conducted to the public as well as one-on-one assistance provided to beneficiaries, their families, and/or caregivers. All monthly data shall be submitted by the end of the month following the close of the reporting period. For example, all data from the month of October would be due November 30th. The recipient shall comply with data integrity guidelines and perform data validation to ensure the accuracy of their data on a quarterly basis.

Programmatic data will be used to track progress against the MIPPA Performance Measures (PM):

- **PM1: Overall MIPPA Contacts** - Percentage of total beneficiary contact forms per Medicare beneficiaries under 150% FPL in the state
- **PM2: Overall Persons Reached through Outreach** - Total number of people reached as reported on group outreach and education forms
- **PM3: MIPPA Target Populations** - Total number of beneficiary contact forms by target beneficiary groups (Under 65, Rural, Native American, English as a Secondary Language)
- **PM4: Contacts with Applications Submitted** - Percentage of forms with applications submitted compared to overall MIPPA contacts reported in PM1

Narrative progress reports must be submitted semi-annually. This report must be submitted as a "note" using an authorized GrantSolutions account. The semi-annual narrative progress report covers the following period:

- September 1st through February 28th – due March 31st

A final narrative report will be due at the end of the grant period. This final report will replace the last semi-annual narrative and must cover the entire life of the grant. The final narrative report is due 90 days after the end of the award (November 30, 2021).

Financial Reporting

All grantees must use the Federal Financial Report (SF-425) form at:

<https://www.grants.gov/forms/post-award-reporting-forms.html>. The SF-425 form is downloadable as a PDF. Complete all lines as appropriate, sign and date and upload to GrantSolutions as a "grant note". Grantees are required to submit semi-annual Federal Financial Report (SF-425), which are due 30 days following each six month reporting period. Semi-annual reporting periods are as follows:

- September 1st through February 28th – due March 31st

Final financial reports must be submitted within 90 calendar days from the end of the project period.

Additional Terms

At any phase of the project period, the recipient shall deliver to the Administration for Community Living (ACL) upon request, any materials, systems or other items developed, refined, or enhanced under the grant award. The recipient agrees that ACL shall have royalty-free, non-exclusive, and irrevocable rights to reproduce, publish, or otherwise use and authorize others to use the items for Federal Government purposes.

On all publications funded solely or in part by MIPPA funds, the recipient shall include the express acknowledgement, "This project was supported, in part by grant number XXXXXX####, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking project with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy."

The recipient shall participate, as appropriate, in ACL's MIPPA Evaluation Project.

The recipient shall work with assigned ACL project officer to address any project concerns, if applicable, identified in the application review process.

Staff Contacts

| State Code | State | PO | Email Address |
|------------|-------------|------------------|--|
| AK | Alaska | Shefy Simon | Shefy.Simon@acl.hhs.gov |
| AL | Alabama | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| AR | Arkansas | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
| AZ | Arizona | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
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| DC | DC | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| DE | Delaware | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| FL | Florida | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
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| KS | Kansas | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
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| LA | Louisiana | Maggie Flowers | Margaret.Flowers@acl.hhs.gov |
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| ME | Maine | Marissa Whitehouse | Marissa.Whitehouse@acl.hhs.gov |
| MI | Michigan | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
| MN | Minnesota | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| MO | Missouri | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| MS | Mississippi | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| MT | Montana | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |
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| NJ | New Jersey | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
| NM | New Mexico | Wayne Abramovich | Wayne.Abramovich@acl.hhs.gov |
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| TN | Tennessee | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |
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| VA | Virginia | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| VI | US Virgin Islands | Akia Dieuseul | Akia.Dieuseul@acl.hhs.gov |

| | | | |
|----|---------------|------------------|--|
| VT | Vermont | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| WA | Washington | Ade Adenariwo | Ade.Adenariwo@acl.hhs.gov |
| WI | Wisconsin | Maggie Flowers | Margaret.Flowers@acl.hhs.gov |
| WV | West Virginia | Katie Glendening | Katherine.Glendening@acl.hhs.gov |
| WY | Wyoming | Emberly Zellars | Emberly.Zellars@acl.hhs.gov |



Priority 1
SHIPs

Recipient Information

1. Recipient Name

New Hampshire DHHS
139 PLASBANT ST
NH Department of Health and Human Services
CONCORD, NH 03301-3852
603-271-4986

2. Congressional District of Recipient
02

3. Payment System Identifier (ID)
1026000618B3

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

Ms. Jean Crouch
Jean.Crouch@dhhs.nh.gov
603-271-0406

8. Authorized Official

Ms. Jean Crouch
Jean.Crouch@dhhs.nh.gov
603-271-0406

Federal Agency Information

CIP - MIPPA Project Grants

9. Awarding Agency Contact Information

Yi-Hsin Yan
Program & Management Analyst
yi-hsin.yan@acl.hhs.gov
202-795-7474

10. Program Official Contact Information

Ms. Marissa Whitehouse
Senior Medicare Patrol (SMP) Program Manager
marissa.whitehouse@acl.hhs.gov
202-795-7425

Federal Award Information

11. Award Number

2101NHMISH-00

12. Unique Federal Award Identification Number (FAIN)

2101NHMISH1

13. Statutory Authority

The Medicare Improvements for Patients and Providers Act of 2008 – Section 119, Public Law (PL) 110-275 as amended by the Patient Protection and Affordable Care Act of 2010 (Affordable Care Act), reauthorized

14. Federal Award Project Title

PY2021 MIPPA: Priority 1 for SHIPs

15. Assistance Listing Number

93.071

16. Assistance Listing Program Title

Medicare Enrollment Assistance Program

17. Award Action Type

New

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/01/2021 - **End Date** 08/31/2022

20. Total Amount of Federal Funds Obligated by this Action \$90,527.00

20a. Direct Cost Amount

20b. Indirect Cost Amount

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period \$0.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$90,527.00

26. Project Period Start Date 09/01/2021 - **End Date:** 08/31/2022

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period Not Available

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Emmanuel Ekwo
Deputy Administrator

30. Remarks

See Remarks (continuation)



Department of Health and Human Services
Administration For Community Living

Notice of Award

Award# 2101NHMISH-00
FAIN# 2101NHMISH
Federal Award Date: 08/30/2021

| | |
|---|--|
| Recipient Information | |
| Recipient Name | |
| New Hampshire DHHS 129 PLEASANT ST NH Department of Health and Human Svcs CONCORD, NH 03301-3852 603-271-4586 | |
| Congressional District of Recipient | |
| 02 | |
| Payment Account Number and Type | |
| 1026000618B3 | |
| Employer Identification Number (EIN) Data | |
| 026000618 | |
| Universal Numbering System (DUNS) | |
| 011040545 | |
| Recipient's Unique Entity Identifier | |
| Not Available | |
| 31. Assistance Type | |
| Formula grant | |
| 32. Type of Award | |
| Mandatory | |

| | |
|---|--------------------|
| 33. Approved Budget (Excludes Direct Assistance) | |
| i. Financial Assistance from the Federal Awarding Agency Only | |
| ii. 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. Equipment | \$0.00 |
| e. Supplies | \$0.00 |
| f. Travel | \$0.00 |
| g. Construction | \$0.00 |
| h. Other | \$90,527.00 |
| i. Contractual | \$0.00 |
| j. TOTAL DIRECT COSTS | \$90,527.00 |
| k. INDIRECT COSTS | \$0.00 |
| l. TOTAL APPROVED BUDGET | \$90,527.00 |
| m. Federal Share | \$90,527.00 |
| n. Non-Federal Share | \$0.00 |

| 34. Accounting Classification Codes | | | | | |
|--|--------------|---------------------|--------------|---------------------------------|---------------|
| FY-ACCOUNT NO. | DOCUMENT NO. | ADMINISTRATIVE CODE | OBJECT CLASS | AMT ACTION FINANCIAL ASSISTANCE | APPROPRIATION |
| 1-29999911 | 2101NHMISH | CIP | 41.15 | \$90,527.00 | 75-X-0311 |

Division of Long Term Supports and Services
Bureau of Elderly and Adult Services

MIPPA Grant

Fiscal Situation

010-095-048-481010-95650000

GY2021 Grant

| | | |
|--------------|-----------------|-----------|
| • MIPPA SHIP | \$90,527 | |
| • MIPPA AAA | \$87,879 | |
| • MIPPA ADRC | <u>\$24,052</u> | |
| Total Award | | \$202,458 |

Budgeted in FY2022

| | | |
|----------------|-----------------|-------------|
| • MIPPA SHIP | \$67,393 | |
| • MIPPA AAA | \$37,152 | |
| • MIPPA ADRC | <u>\$25,226</u> | |
| Total Budgeted | | (\$129,771) |

Available to accept \$ 72,687