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14

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Shibinette
Commissioner

Patricia M. Tilley
Director

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www.dhhs.nh.gov

October 25, 2022

The Honorable Karen Umberger, 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 from the Health Resources and Services Administration (HRSA) to fund expansion of the Pediatric Mental Health Care Access Program in the amount of $300,000 effective upon approval by the Fiscal Committee and Governor and Executive Council, through June 30, 2023, and further authorize the funds to be allocated as follows. 100% Federal Funds.

05-95-90-902010-70480000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, PEDIATRIC MENTAL HEALTH CARE

SFY 2023

Class-Account	Description	Current Adjusted Authorized	Requested Action	Revised Adjusted Authorized
000-400146-16	Federal Funds	$553,661	$300,000	$853,661
	Total Revenue	**$553,661**	**$300,000**	**$853,661**
020-500200	Current Expense	$1,000	$0	$1,000
037-500173	Technology-Hardware	$1,270	$0	$1,270
038-500175	Technology-Software	$300	$0	$300
041-500801	Audit Fund Set Aside	$491	$300	$791
042-500620	Additional Fringe Benefits	$5,202	$0	$5,202
059-500117	Temp Full Time	$58,846	$0	$58,846
060-500601	Benefits	$42,509	$0	$42,509
066-500543	Employee Training	$500	$0	$500
070-500707	In State Travel Reimbursement	$500	$0	$500
080-500717	Out-of-State Travel Reimbursement	$4,000	$0	$4,000
102-500731	Contracts for Program Services	$439,043	$299,700	$738,743
	Total Expenses	**$553,661**	**$300,000**	**$853,661**

EXPLANATION

The NH Pediatric Mental Health Care Access (PMHCA) Program is a federal-state-local partnership designed to improve New Hampshire children's access to mental health care services. The NH PMHCA Program works to increase pediatric primary care provider knowledge and confidence in identifying, screening, and treating pediatric patients with mental health concerns. Through a contract with the University of New Hampshire Institute for Health Policy and Practice (UNH IHPP) the New Hampshire Mental Health Care Access in Pediatrics (NH MCAP) Program was created to:

- Develop and facilitate four Pediatric Mental Health Project ECHO (Extension for Community Healthcare Outcomes) cohorts over the course of the five-year PMHCA grant period
- Offer individual provider-to-provider teleconsultations from the ECHO Pediatric Mental Health Team of subject matter experts
- Create a referral directory of NH pediatric mental health services and supports, which is to be updated and redistributed annually to enrolled participants

The NH MCAP Program is utilizing Project ECHO which is an evidenced-based all-teach all-learn method that uses teleconferencing technology to establish a learning community. The technology connects expert pediatric behavioral health teams at an academic 'hub' with pediatricians and family practice providers to enhance the care that is provided in general practices.

To address the growing need for increased access to mental health care for New Hampshire children, HRSA has awarded the NH PMHCA Program with additional funding for program expansion. With this additional funding, the program plans to expand its Project ECHO and teleconsulting services for school-based professionals including school nurses, guidance counselors, school psychologists, school social workers, and co-located therapists to support assessment, intervention, and referrals for students with behavioral health needs. In addition, the program plans to utilize a portion of this expansion funding to conduct a Current State Assessment to improve collaborative care between behavioral health providers and primary care. Since this funding is part of a project cohort and is serving as a training and tele mentoring model for school support professionals, consent forms are not necessary for this project.

Funds are to be budgeted as follows:

Class 041 The funds will be used to pay for audit fund set aside per State requirement.

Class 102 The funds will be used to expand Project ECHO and teleconsultation services into the school setting for school support professionals and to also conduct a Current State Assessment (CSA) to assess the feasibility of adoption of the Collaborative Care Model (CoCM) to increase primary care capacity to assess and treat pediatric patients across pediatric and family practice clinics in NH.

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: These funds may not be used to offset General Funds as they are specifically granted to the State for the purpose of providing the services described above. These funds will not change the program eligibility levels. No new program will be established with the acceptance of these funds.

Area served: Statewide

Source of funds: These funds are 100% Federal Funds from the Health Resources and Services Administration (HRSA) to fund the New Hampshire Pediatric Mental Health Care Access Program. Attached is the Notice of Grant Award. Notice of these funds was received on April 1st, 2022

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

Lori A. Shibinette
Commissioner

Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# U4J47112
Federal Award Date: 08/26/2022

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)
102600618B3

4. Employer Identification Number (EIN)
026000618

5. Data Universal Numbering System (DUNS)
011040545

6. Recipient's Unique Entity Identifier
LA2HR1U97VC6

7. Project Director or Principal Investigator
Erica Tenney
Program Director
erica.tenney@dhhs.nh.gov
(603)271-4536

8. Authorized Official
Rhonda Siegel
Administrator
rhonda.siegel@dhhs.nh.gov
(603)271-4516

Federal Agency Information

9. Awarding Agency Contact Information
Crystal Howard
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
choward@hrsa.gov
(301) 443-3844

10. Program Official Contact Information
Madhavi Reddy
Program Director
Maternal and Child Health Bureau (MCHB)
madhavi.reddy@hrsa.hhs.gov
(301) 443-0754

Federal Award Information

11. Award Number
1 U4JMC47112-01-00

12. Unique Federal Award Identification Number (FAIN)
U4J47112

13. Statutory Authority
42 U.S.C. § 254c-19
Bipartisan Safer Communities Act (BSCA) (P.L. 117-159)

14. Federal Award Project Title
Pediatric Mental Health Care Access Expansion

15. Assistance Listing Number
93.110

16. Assistance Listing Program Title
Maternal and Child Health Federal Consolidated Programs

17. Award Action Type
New

18. Is the Award R&D?
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2022 - End Date 09/29/2023	
20. Total Amount of Federal Funds Obligated by this Action	$300,000.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	
21. Authorized Carryover	$0.00
22. Offset	$0.00
23. Total Amount of Federal Funds Obligated this budget period	$300,000.00
24. Total Approved Cost Sharing or Matching, where applicable	$0.00
25. Total Federal and Non-Federal Approved this Budget Period	$300,000.00
26. Project Period Start Date 09/30/2022 - End Date 09/29/2023	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	$300,000.00

28. Authorized Treatment of Program Income
Addition

29. Grants Management Officer – Signature
William Davis on 08/26/2022

30. Remarks

HRSA
Health Resources & Services Administration

Notice of Award
Award Number: 1 U4JMC47112-01-00
Federal Award Date: 08/26/2022

Maternal and Child Health Bureau (MCHB)

31. APPROVED BUDGET: (Excludes Direct Assistance)

[X] Grant Funds Only

[ ] 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:	$0.00
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:	$300,000.00
p.	INDIRECT COSTS (Rate: % of S&W/TADC):	$0.00
q.	TOTAL APPROVED BUDGET:	$300,000.00
	i. Less Non-Federal Share:	$0.00
	ii. Federal Share:	$300,000.00

32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a.	Authorized Financial Assistance This Period	**$300,000.00**
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	**$300,000.00**

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
41.45

37. BHCMIS#

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 statue 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
22 - 389B470	93.110	22U4JMC47112	$300,000.00	$0.00	N/A	22U4JMC47112

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e.,created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.
2. As required by the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, recipients must report information for each subaward of $30,000 or more in Federal funds and executive total compensation, as outlined in Appendix A to 2 CFR Part 170. You are required to submit this information to the FFATA Subaward Reporting System (FSRS) at https://www.fsrs.gov/ by the end of the month following the month in which you awarded any subaward. The FFATA reporting requirements apply for the duration of the project period and so include all subsequent award actions to aforementioned HRSA grants and cooperative agreement awards (e.g., Type 2 (competing continuation), Type 5 (non-competing continuation), etc.). Subawards to individuals are exempt from these requirements. For more information, visit: https://www.hrsa.gov/grants/ffata.html.
3. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement: http://www.hrsa.gov/grants/hhsgrantspolicy.pdf
4. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. **Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.**
   You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: https://pmsapp.psc.gov/pms/app/userrequest. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at:
   http://pms.psc.gov/find-pms-liaison-accountant.html

Program Specific Term(s)

1. HRSA program involvement will include:
   • Providing the services of experienced HRSA personnel to participate in the planning and development of all phases of this cooperative agreement;
   • Participating in appropriate meetings, committees, conference calls, and working groups related to the cooperative agreement and its projects;
   • Conducting ongoing review of the establishment and implementation of activities, procedures, measures, and tools for accomplishing the goals and objectives of the cooperative agreement;
   • Providing assistance establishing effective collaborative relationships and technical assistance opportunities with federal and state contacts, HRSA-funded programs, and other entities that may be relevant for the successful completion of tasks and activities identified in the approved scope of work;
   • Reviewing and providing advisory input on written documents, including information and materials, training materials, screening/assessment/treatment protocols and activities conducted under the auspices of the cooperative agreement;
   • Participating with award recipients in peer-to-peer information exchange and the dissemination of project findings, best practices, and

lessons learned from the project; and participating in the planning of all-recipient annual meeting and quarterly webinars;
• Conducting a site visit with each recipient during the performance period;
• Disseminating information on the program through conference presentations, journal articles; and
• Facilitating recipient consultation with HRSA evaluation contractor and American Rescue Plan - PMHCA Innovation Center contractor.
The cooperative agreement recipient's responsibilities will include:
• Meeting with the federal project officer at the time of the award to review the current strategies and to ensure the project and goals align with HRSA priorities for this activity;
• Providing ongoing, timely communication and collaboration with the federal project officer, including holding regular check-ins with the federal project officer;
• Providing ongoing, timely communication and collaboration with the HRSA Grants Management Specialist;
• Collaborating with HRSA on ongoing review of activities, procedures and budget items, information/publications prior to dissemination, contracts and interagency agreements;
• Collaborating with HRSA and HRSA evaluation contractor on HRSA's Pediatric Mental Health Care Access Program evaluation, capacity-building and support activities. Award recipient participation may include responding to surveys, which are typically administered in the fall during Years 2, 3, and 4, participating in interviews, providing other reports upon request from HRSA, and participating in ongoing capacity-building webinars. HRSA encourages award recipients to consult with the evaluation contractor carefully on the timeline for HRSA survey administration before administering award recipient-sponsored surveys to reduce burden on enrolled providers;
• Collaborating with HRSA and PMHCA Innovation Center contractor to enhance program capacity to effectively implement models that promote behavioral health integration into pediatric primary care using telehealth. Award recipients will participate in a national network of PMHCA programs and engage with the PMHCA Innovation Center contractor which will provide technical assistance, resources, peer-to-peer learning and support; identify effective and innovative models of training and care; implement program and policy options to strengthen and sustain PMHCA programs. Award recipients will participate in state data collection and analysis efforts; and demonstrate program impact.
• Establishing contacts relevant to the project's mission such as federal and non-federal partners, and other HRSA programs that may be relevant to the project's mission (see list on p. 4);
• Assuring that all recipient administrative data and performance measure reports, as designated by HRSA, will be completed and submitted on time; and
• Providing technical support for the initiation and sustainment of telehealth activities in PMHCA programs to advance tele-consultation, training, technical assistance, and care coordination to enrolled and participating providers.

Standard Term(s)

1. Your organization is required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding, per HRSA Standard Terms (unless otherwise specified on your Notice of Award), and Legislative Mandates. The effectiveness of these policies, procedures, and controls is subject to audit.

Reporting Requirement(s)

1. **Due Date: Within 30 Days of Project End Date**
   Within 30 days after the project period end date, submit a final report.
2. **Due Date: Within 30 Days of Budget Start Date**
   Within 30 days after the project period start date, you must submit the following in the HRSA Electronic Hand Books: (1) Brief BSCA Expansion Award Activity Overview and Project Work Plan, (2) SF424-A Budget Form, and (3) Budget Narrative.
3. **Due Date: Quarter End Date after 90 Days of Budget End Date**
   The grantee must submit a Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period. **Effective October 1, 2020, all FFRs will be submitted through the Payment Management System (PMS).** Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal (**PMS Self-Service Web Portal**), or calling 877-614-5533.
   The FFR due dates have been aligned with the Payment Management System quarterly report due dates, and will be due 90, 120, or 150 days after the grant project period ends. Please refer to the chart below for the specific due date for your FFR:

   Budget Period ends August – October: FFR due January 30
   Budget Period ends November – January: FFR due April 30
   Budget Period ends February – April: FFR due July 30
   Budget Period ends May – July: FFR due October 30

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts

NoA Email Address(es):

Name	Role	Email
Rhonda Siegel	Authorizing Official	rhonda.siegel@dhhs.nh.gov
Anne Marie Mercuri	Point of Contact, Business Official	ann.marie.mercuri@dhhs.nh.gov, anne.marie.mercuri@dhhs.nh.gov
Erica Tenney	Program Director	erica.tenney@dhhs.nh.gov

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (https://pms.psc.gov/).