



Lori A. Weaver  
Interim Commissioner

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF THE COMMISSIONER

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9200 1-800-852-3345 Ext. 9200  
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March 1, 2023

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, Office of the Commissioner, Refugee Services, to accept and expend Federal funds in the amount of \$487,727 from the Administration for Children & Families, Office of Refugee Resettlement. These funds were awarded to provide services to support specific Ukrainian populations for the purpose of achieving refugee family self-sufficiency at the earliest date possible after arrival to the United States, effective upon Fiscal Committee and Governor and Council approvals through June 30, 2023, and further authorize the allocation of these funds in the accounts below. 100% Federal Funds.

**05-095-095-950010-72090000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS; HHS: COMMISSIONERS OFFICE; OFFICE OF THE COMMISSIONER; REFUGEE SERVICES**

Class/Object	Class Title	Adjusted Authorized Budget	Requested Change	Adjusted Budget
<b>Revenue</b>				
000-408181-16	Federal Funds	\$ 4,643,544	\$ 487,727	\$ 5,131,271
Total Revenue:		\$ 4,643,544	\$ 487,727	\$ 5,131,271
<b>Expense</b>				
010-500100	Regular Officers and Employees	\$ 225,279		\$ 225,279
020-500200	Current Expenses	\$ 400		\$ 400
030-500301	Equipment	\$ 960		\$ 960
039-500180	Telecommunications	\$ 1,000		\$ 1,000
040-500800	Indirect Costs	\$ 8,978		\$ 8,978
041-500801	Audit Set Aside	\$ 2,134	\$ 488	\$ 2,622
042-500620	Additional Fringe Benefits	\$ 18,763		\$ 18,763
059-500117	Temp Full Time	\$ 45,000		\$ 45,000
060-500601	Benefits	\$ 138,938		\$ 138,938
066-500544	Employee Training	\$ 1,960		\$ 1,960
070-500704	In State Travel	\$ 2,400		\$ 2,400
080-500714	Out of State Travel	\$ 3,100		\$ 3,100
085-588545	Interagency Transfer out of Fed Funds	\$ 853,329		\$ 853,329
102-500731	Program Contracts	\$ 3,341,303	\$ 487,239	\$ 3,828,542
Total Expense:		\$ 4,643,544	\$ 487,727	\$ 5,131,271

**EXPLANATION**

This request is being made to accept grant funds available for SFY 2023. The purpose of this request is to provide social services that lead to self-sufficiency for Ukrainian refugees. The funds will be used for case management, employment services, English for Speakers of other languages support, and housing assistance to support financial self-sufficiency and to assist Ukrainian refugees with integration into society.

Funding provided in the Refugee Programs is to achieve the Office of Refugee Resettlement goal of refugee family self-sufficiency at the earliest date possible after arrival to the United States. To that end, the Refugee Support Services funding provides: job development and placement, employment assessment, orientation to the American workplace, education, training and referral services, employer supports and job maintenance support for refugee clients, as well as transportation and interpretation when needed.

Funds are being budgeted as follows:

Class 041 (Audit Set-Aside) per state requirements.

Class 102 (Contracts for Program Services) will be used for case management, employment services, English for Speakers of other languages support, and housing assistance to support financial self-sufficiency and to assist Ukrainian refugees with integration into society.

Area Served: Statewide.

Source of Funds: 100% Federal from the Administration for Children & Families, Office of Refugee Resettlement

In the event that federal funds become no longer available, general funds will not be requested to support the program expenditures.

CFDA: 93.566 CAN: G99UKRS

Respectfully submitted,



Lori A. Weaver  
Interim Commissioner



**Recipient Information**

**1. Recipient Name**  
 HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF  
 129 Pleasant St  
 Office of Minority Health and Refugee Affairs  
 Concord, NH 03301-3852  
 [NO DATA]

**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 (UEI)**  
 LA2HRIU97VC6

**7. Project Director or Principal Investigator**  
 Financial Manager  
 FM@GSDEVNH.org  
 999-999-9999

**8. Authorized Official**  
 Ms. Barbara Seebart  
 State Refugee Coordinator  
 barbara.seebart@dhhs.nh.gov  
 603-271-6361

**Federal Agency Information**  
 ACF/ORR Office of Mandatory Grants

**9. Awarding Agency Contact Information**  
 Ms. Merrill A Burckart  
 Financial Operation Specialist  
 merrill.burckart@acf.hhs.gov  
 617-565-1116

**10. Program Official Contact Information**  
 Kenneth T Tota  
 Deputy Director, ORR  
 kenneth.tota@acf.hhs.gov

**Federal Award Information**

**11. Award Number**  
 2301NHRSSS-02

**12. Unique Federal Award Identification Number (FAIN)**  
 2301NHRSSS

**13. Statutory Authority**  
 Section 412(e)(5) of P.L. 82-414, the Immigration and Nationality Act (8 USC 1522)

**14. Federal Award Project Title**  
 GY2023 Refugee Support Services and Set Asides

**15. Assistance Listing Number**  
 93.566

**16. Assistance Listing Program Title**  
 Refugee and Entrant Assistance State Administered Programs

**17. Award Action Type**  
 Supplement/Change for Expansion

**18. Is the Award R&D?**  
 No

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date</b>	10/01/2022	- End Date	09/30/2024
<b>20. Total Amount of Federal Funds Obligated by this Action</b>			\$915,749.00
20a. Direct Cost Amount			
20b. Indirect Cost Amount			
<b>21. Authorized Carryover</b>			
<b>22. Offset</b>			
<b>23. Total Amount of Federal Funds Obligated this budget period</b>			\$940,094.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>			\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>			\$1,855,843.00
<b>26. Period of Performance Start Date</b>	10/01/2022	- End Date	09/30/2025
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>			\$1,855,843.00

**28. Authorized Treatment of Program Income**  
 ADDITIONAL COSTS

**29. Grants Management Officer - Signature**  
 Mrs. Amy Menefee-Longs  
 Grants Management Officer

**30. Remarks**

\*\*\*\*\* Batch Remarks\*\*\*\*\*This grant awards Afghan Supplemental Appropriation (ASA) Base (G992218), ASA Refugee Health Promotion Set-aside (G992210), Additional Ukraine Supplemental Appropriations Act (AUSAA) Base (G99UKRS).



Department of Health and Human Services  
Administration for Children and Families

Notice of Award

Award# 2301NHRSSS-02  
FAIN# 2301NHRSSS  
Federal Award Date: 11/30/2022

<b>Recipient Information</b>	
<b>Recipient Name</b> HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF 129 Pleasant St Office of Minority Health and Refugee Affairs Concord, NH 03301-3852	
[NO DATA] <b>Congressional District of Recipient</b> 02	
<b>Payment Account Number and Type</b> 102600061883	
<b>Employer Identification Number (EIN) Data</b> 026000618	
<b>Universal Numbering System (DUNS)</b> 011040545	
<b>Recipient's Unique Entity Identifier (UEI)</b> LA2HRIU97VC6	
<b>31. Assistance Type</b> Formula grant	
<b>32. Type of Award</b> Mandatory	

<b>33. Approved Budget (Excludes Direct Assistance)</b>	
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	\$1,855,843.00
i. Contractual	\$0.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$1,855,843.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$0.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$1,855,843.00</b>
m. Federal Share	\$1,855,843.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-992218	2301NHRSSS	VC FORR	41 15	93 566	\$485,429.00	75-2223-1503
3-992210	2301NHRSSS	VC FORR	41 15	93 566	\$94,477.00	75-2223-1503
3-992218	2301NHRSSS	VC FORR	41 15	93 566	\$335,843.00	75-2223-1503

3-992218 2301NHRSSS 41.15 93.566 \$335,843 75-2223-1503  
UKRAINE

~~Refugee Support Services/AMR 50000 (11/03/2022)~~

~~Refugee Support Services/AMR 50000 (11/03/2022)~~



Department of Health and Human Services

Administration for Children and Families

Notice of Award

11/23/22  
Am

Award# 2301NHRSSS-00

FAIN# 2301NHRSSS

Federal Award Date: 11/03/2022

**Recipient Information**

**1. Recipient Name**  
HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF  
129 Pleasant St  
Office of Minority Health and Refugee Affairs  
Concord, NH 03301-3852  
[NO DATA]

**2. Congressional District of Recipient**  
02

**3. Payment System Identifier (ID)**  
1026000618U3

**4. Employer Identification Number (EIN)**  
026000618

**5. Data Universal Numbering System (DUNS)**  
011040545

**6. Recipient's Unique Entity Identifier (UEI)**  
LA2HR1U97VCA

**7. Project Director or Principal Investigator**  
  
Financial Manager  
FNA@GSDEVNH.org  
993-999-9999

**8. Authorized Official**

Ms. Barbara Seebarr  
State Refugee Coordinator  
barbara.seebarr@dhs.nh.gov  
603-271-6361

**Federal Agency Information**

ACF/ORR Office of Mandatory Grants

**9. Awarding Agency Contact Information**

Ms. Merrill A Burckart  
Financial Operation Specialist  
merrill.burckart@acf.hhs.gov  
617-565-1116

**10. Program Official Contact Information**

Kenneth T Tota  
Deputy Director, ORR  
kenneth.tota@acf.hhs.gov

**Federal Award Information**

**11. Award Number**  
2301NHRSSS-00

**12. Unique Federal Award Identification Number (FAIN)**  
2301NHRSSS

**13. Statutory Authority**  
Section 412(c)(5) of P.L. 82-414, the Immigration and Nationality Act (8 USC 1522)

**14. Federal Award Project Title**  
GY2023 Refugee Support Services and Set Asides

**15. Assistance Listing Number**  
93.566

**16. Assistance Listing Program Title**  
Refugee and Entrant Assistance State Administered Programs

**17. Award Action Type**  
New

**18. Is the Award R&D?**  
No

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date</b>	10/01/2022	- End Date	09/30/2024
<b>20. Total Amount of Federal Funds Obligated by this Action</b>			\$151,584.00
20a. Direct Cost Amount			
20b. Indirect Cost Amount			
<b>21. Authorized Carryover</b>			
<b>22. Offset</b>			
<b>23. Total Amount of Federal Funds Obligated this budget period</b>			\$0.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>			\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>			\$151,584.00
<b>26. Period of Performance Start Date</b>	10/01/2022	- End Date	09/30/2025
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance</b>			\$151,584.00

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Mrs. Amy Mercedes-Longo  
Grants Management Officer

**30. Remarks**

\*\*\*\*\* Batch Remarks \*\*\*\*\* This grant awards Ukrainian Refugee School Impact (URSI) and Ukrainian Refugee Health Promotion (URHP) based on program allocation.

URSI: 50128; URHP: 55600



Department of Health and Human Services  
Administration for Children and Families

Notice of Award

Award# 2301NHRSSS-00  
FAIN# 2301NHRSSS  
Federal Award Date: 11/03/2022

<b>Recipient Information</b>
<b>Recipient Name</b> HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF 129 Pleasant St Office of Minority Health and Refugee Affairs Concord, NH 03301-3852 [NO DATA] Congressional District of Recipient 02 <b>Payment Account Number and Type</b> 1026000618B3 <b>Employer Identification Number (EIN) Data</b> 026000618 <b>Universal Numbering System (DUNS)</b> 011040543 <b>Recipient's Unique Entity Identifier (UEI)</b> LA2HR1U97VC6
<b>31. Assistance Type</b> Formula grant
<b>32. Type of Award</b> Mandatory

<b>33. Approved Budget</b> (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	\$151,884.00
i. Contractual	\$0.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$151,884.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$0.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$151,884.00</b>
m. Federal Share	\$151,884.00
n. Non-Federal Share	\$0.00

<b>34. Accounting Classification Codes</b>							
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION	
3-699UKRS	2301NHRSSS	ACTORR	41.15	93.566	\$151,884.00	75-2223-1503	

3-699UKRS 2301NHRSSS 41.15 93.566

\$151,884. 75-2223-1503

UKRAINE