



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
NEW HAMPSHIRE HOSPITAL

18

Lori A. Weaver  
Interim Commissioner

Ellen M. Lapointe  
Chief Executive Officer

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May 23, 2023

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, New Hampshire Hospital to make a one-time **Retroactive** payment to the National Association of State Mental Health Program Directors Research Institute, Inc., Falls Church, Virginia 22042, (VC#177758) for continued participation in the Research Institute's Behavioral Healthcare Performance Measurement System in the amount of \$7,725, effective March 1, 2023 upon Governor and Council approval through February 29, 2024. Source of Funds: 85% General Funds and 15% Other.

Funds are available in the following account:

**05-95-94-940010-8400 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS,  
HHS: NEW HAMPSHIRE HOSPITAL, NEW HAMPSHIRE HOSPITAL, ADMINISTRATION**

Fiscal Year	Class/Object	Class Title	Job Number	Amount
SFY 2023	026-500251	Membership Fees	94012800	\$7,725

**EXPLANATION**

This request is **Retroactive** because the invoice for the membership was received after the expiration of the previous fiscal year membership. Approval of this request will enable New Hampshire Hospital to continue participation in the National Association of State Mental Health Program Directors Research Institute's Behavioral Healthcare Performance Measurement System for the period of March 1, 2023 through February 29, 2024, which also helps NHH comply with federal quality reporting requirements. The National Association of State Mental Health Program Directors is a not-for-profit organization representing the viewpoints and concerns of state mental health agencies to Congress, federal agencies and other national organizations by tracking legislation, leading collaborative efforts, initiating proposals to streamline and simplify federal mental health programs and regulations, and educating members of Congress about issues facing state mental health agencies.

In meeting requirements for accreditation, participation in the System uniquely provides New Hampshire Hospital the opportunity to compare its performance with other state-operated inpatient psychiatric facilities. By doing so, New Hampshire Hospital has the potential to identify more efficient methods, areas for cost savings, and ways to improve the quality of its services.

Listed below are answers to standard questions required for Governor and Council organization dues and membership approval submissions:

1. How long has this organization been in existence and how long has this agency been a member of this organization?

*NASMHPD was founded in 1959, in its early days they maintained a research division that was reconstituted in 1987 as the NASMHPD Research Institute, Inc (NRI). In 1987 the Behavioral Healthcare Performance Measurement System was developed. New Hampshire Hospital has been a member since 1999.*

2. Is there any other organization, which provides the same or similar benefits, which your agency belongs to?

*No*

3. How many other states' belonging to this organization and is your agency the sole New Hampshire state agency that is a member?

*New Hampshire Hospital is the sole NH state agency contracting with the System. Similarly involved are over 200 other hospitals and providers across 50 states and 4 territories.*

4. How is the dues structure established? (Standard fee for all states, based on population, based on other criteria, etc.)

*The Measurement System has a service fee that is standard for all participants.*

5. What benefit does the state receive from participating in this membership?

*The membership provides assistance in information management, access to nationally comparative data, education related to performance measures and an avenue for reporting measures as a requirement for Hospital accreditation which allows for Medicare/Medicaid billing.*

6. Are training or educational/ research materials included in the membership? If so, is the cost included? Explain in detail.

*Included in the fee are monthly educational calls, special reports, publications, and a suite of monthly measurement reports with Hospital specific and nationally comparative information.*

7. Is the membership required to receive any federal grants or required in order to receive or participate in licensing or certification exams? Explain.

*An approved vendor is required to report hospital measures to The Joint Commission, the national accrediting body. The Hospital's accreditation allows for Medicare/Medicaid certification and billing.*

8. Is there any travel included with this membership fee? Explain in detail any travel to include the number of employees involved, the number of trips, destination if known and purposes of membership-supported trips.

*No*

9. Which state agency employees are directly involved with this organization? (Indicate if they are members, voting members, committee members, and/or officers of the organization.)

*None*

10. Explain in detail any negative impact to the State if the Agency did not belong to this organization.

*Without this membership, New Hampshire would lose assistance in information management, access to nationally comparative data, education related to performance measures and an avenue for reporting Hospital performance measures as required for Hospital accreditation and related CMS certification.*

Should Governor and Council determine to deny this request, New Hampshire Hospital would be non-compliant with The Joint Commission's requirement for measurements, the Hospital may have less opportunity to identify, and implement cost saving methods.

Area served: statewide.

Source of funds: 85% general funds and 15% other funds from agency fees and inter-departmental transfers.

In the event that other funds become no longer available, additional general funds will not be requested to support this contract.

Respectfully Submitted,



Lori A. Weaver  
Interim Commissioner

After reading the following excerpt from the Dept. of Admin. Services Manual of Procedures, if you deem your expense fits into this category, please document the required information on page 2.

*STAFF and PAYROLL*

MOP 1200 Memberships, Dues and Licenses

I. Memberships, Dues and Licenses

- A. An agency head may authorize payment of reasonable costs for participation fees or dues for membership in an organization, which are applied for and registered in the name of the State of New Hampshire, and/or the name of the state agency.
- B. An agency head may authorize payment of reasonable costs for participation fees or dues for membership in an organization which are applied for and registered in the name of a particular person:
  - 1. If the membership is:
    - a) Understood not to be individual to the person, but for the benefit of the State of New Hampshire;
    - b) An expense necessary to support the statutory mission of the agency; and
    - c) Not for membership, or any type of affiliation, in a lobbying organization;AND
  - 2. If:
    - a) The organization at issue does not issue a membership solely in the name of a state or a state agency; or
    - b) issuance in the name of the state or a state agency would not allow the State to meet its objectives in obtaining such a membership and no means other than issuance in the name of a particular individual would be feasible;AND
  - 3. The agency documents in writing, and retains in its files, the reasons for its conclusions under 1. and 2. above.
- C. RSA 9:8-a requires that individual and departmental dues to national and regional organizations be budgeted in a separate class. That class is 026. Memberships and dues may not be paid out of any other class.
- D. Membership fees or dues that exceed the limits established by the Governor and Council for such items under MOP 150 must be approved by the Governor and Executive Council.
- E. Requests for approval under paragraph I. D. above shall contain a detailed explanation of why the payment is an expense necessary under the standards set forth in paragraph I. B. above.
- F. The cost of any license required to engage in a specific occupation prior to or during employment is a personal expense and not chargeable to nor reimbursable by the State.

II. Other Sources and Information

- A. Statutes: RSA 9:8-a, I Program Appropriation Unit Format

Please complete the items below to comply with MOP 1200. Cut & paste this information into an e-mail and send to Financial Services for review and attachment to related invoices.

Vendor/Organization Name:

National Association of State Mental Health Program Directors Research Institute, Inc.

A. An agency head may authorize payment of reasonable costs for participation fees or dues for membership in an organization which are applied for and registered in the name of a particular person:

1. If the membership is:

a) Understood not to be individual to the person, but for the benefit of the State of New Hampshire;

This is understood, New Hampshire Hospital's membership to the National Association of State Mental Health Program Directors Research Institute, Inc. (NASMHPD) ensures requirements for accreditation, and participation in the System uniquely providing New Hampshire Hospital the opportunity to compare its performance with other state-operated inpatient psychiatric facilities. By doing so, New Hampshire Hospital has the potential to identify more efficient methods, areas for cost savings and ways to improve the quality of its services. Membership ensures our accreditation and certification standards are maintained.

b) An expense necessary to support the statutory mission of the agency; and

Yes, membership helps New Hampshire Hospital comply with federal quality reporting requirements.

c) Not for membership, or any type of affiliation, in a lobbying organization;

This is true. NASMHPD is not a lobbying organization.

AND

2. If:

a) The organization at issue does not issue a membership solely in the name of a state or a state agency; or

NASMHPD membership is for New Hampshire Hospital, not an individual.

b) Issuance in the name of the state or a state agency would not allow the State to meet its objectives in obtaining such a membership and no means other than issuance in the name of a particular individual would be feasible;

NASMHPD membership is for New Hampshire Hospital, not an individual.



**NASMHPD RESEARCH INSTITUTE**

Invoice Number: 6004.NH.2767

Invoice Date: 03/15/2023

Bill To:  
NEW HAMPSHIRE STATE HOSPITAL  
ATTN: ACCOUNTS PAYABLE  
36 CLINTON STREET  
CONCORD, NH 03301

Remit To:  
NASMHPD RESEARCH INSTITUTE, INC.  
3141 FAIRVIEW PARK DR, STE 650  
FALLS CHURCH, VA 22042

Customer Number: NHORYX  
Project Number: 106004.NH0.PUB  
Project Name: BHPMS.NEW HAMPSHIRE-PUBLI  
Terms: NET 30  
Due Date: 04/14/2023

Billing Period From:03/01/2023  
To:02/29/2024

Annual BHPMS Services

Current  
Amount  

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\$7,725.00

Invoice Total

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\$7,725.00

For question about this invoice, please contact Sahra Mohamud at 703-738-8173 or smohamud@nri-inc.org

PLEASE REFER TO INVOICE NUMBER ABOVE IN ANY FUTURE CORRESPONDENCE.

Anu Garg  
Controller  
NRI, Inc.  
703-738-8186  
agarg@nri-inc.org