



Lori A. Weaver
Commissioner

Iain N. Watt
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH
29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

September 28, 2026

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

Her Excellency, Governor Kelly A. Ayotte
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Pursuant to the provisions of RSA 14:30-a, VI, authorize the Department of Health and Human Services, Division of Public Health, to accept and expend \$700,000 from the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Screening & Treatment for Maternal Mental Health and Substance Use Disorders grant to enhance mental health and substance use disorder support for pregnant and postpartum women, effective upon Fiscal Committee and Governor and Executive Council approval through June 30, 2027, and authorize the allocation of these funds in the accounts below. 100% Federal Funds.

05-95-90-902010- XXXXXXXX_ HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF FAMILY HEALTH AND NUTRITION, MAT MENTAL HLTH & SUD (MMHSUD)

SFY27

Class-Account	Class Title	Current Adjusted Authorized	Requested Action	Revised Adjusted Authorized
Revenue				
000-400146-16	Federal Funds	\$ 0	\$700,000.00	\$700,000.00
Expense				
020-500200	Current Expenses	\$ 0	\$ 5,000	\$ 5,000
037-500173	Technology - Hardware	\$ 0	\$ 5,000	\$ 5,000
041-500801	Audit Fund Set Aside	\$ 0	\$ 700	\$ 700
050-500109	Personal Service Temp Appoi	\$ 0	\$ 66,573	\$ 66,573
060-500601	Benefits	\$ 0	\$ 59,772	\$ 59,772
070-500704	In State Travel Reimbursement	\$ 0	\$ 363	\$ 363
080-500710	Out of State Travel Reimbursement	\$ 0	\$ 1,672	\$ 1,672
102-500731	Contracts for Program Servi	\$ 0	\$ 560,920	\$ 560,920
Total Expense:		\$ 0	\$ 700,000	\$ 700,000

EXPLANATION

The Department of Health and Human Services, Division of Public Health (DPH) requests to accept federal funds available from HRSA for the Screening & Treatment for Maternal Mental Health and Substance Use Disorders grant. The funding will strengthen New Hampshire's maternal health system by expanding providers' access to specialized expertise and supporting timely, coordinated care for women during pregnancy and postpartum. The funds will provide obstetric, primary care, and other maternal health providers with access to expert teleconsultation, targeted provider training, and care coordination support. These services will enhance the New Hampshire healthcare system's ability to routinely screen, assess, treat, and effectively refer women experiencing perinatal mental health conditions and substance use disorders (SUD) to appropriate care and supports. Strengthening the capacity of the maternal health system to identify and address these conditions is critical to facilitating earlier intervention, improving access to appropriate care, and advancing health outcomes for New Hampshire families.

The Department will use funds to achieve the following goals:

1. Increase the number of providers trained to use evidence-based tools to screen, treat, and refer pregnant and postpartum women with behavioral health conditions and substance use disorders.
2. Increase the number of providers using teleconsultation and resource hub navigation services for treatment and referral of pregnant and postpartum women with behavioral health conditions and substance use disorders.
3. Increase the number of pregnant and postpartum women who utilize the resource hub for referral and service navigation support.

The funds will be budgeted as follows:

- Class 020 - Current Expenses - Advertising for the training and teleconsultation services for healthcare providers.
- Class 037 - Technology-Hardware – Laptop for Maternal Mental Health Program Manager.
- Class 041 - Audit Fund Set Aside - Audit fund set aside per state requirement.
- Class 050 - Personal Service Temp Appointment- The Maternal Mental Health Program Manager in the DPH Maternal and Child Health (MCH) Section will be the Principal Investigator for the grant and will dedicate 1.0 FTE to the project. The position will report to the Quality Improvement and Clinical Services Administrator within the MCH Section and will direct the overall execution of the project, manage and oversee subcontractor(s), and serve as the grantee liaison with HRSA. This position will also be responsible for assuring that the project activities and the timelines outlined in the work plan are completed and continuation reports and project period performance reports are submitted timely.
- Class 060 - Benefits - Funds will be used to pay for benefits of the above position.
- Class 070 - In-State Travel - Costs for the Maternal Mental Health Program Manager (or designee) for in-state meetings, trainings, site visits, and technical assistance.
- Class 080 - Out of State Travel - Costs for Maternal Mental Health Program Manager (or designee) to attend the HRSA annual grantee meeting in Washington, D.C or other related conferences if there is no in-person meeting during this year.

- Class 102 - Contracts for Program Services - Funds will be used for establishing a vendor contract to provide perinatal psychiatry, develop and deliver trainings to providers and practices, and develop a referral database of New Hampshire mental health and SUD referral resources.

The Department anticipates addressing the State Fiscal Year 2028 funding needs for this award through the biennium budget process, to be included in either the Governor's Phase budget or the House Phase budget.

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

Area served: Statewide

Source of Funds: These funds are 100% Federal from the United States Department of Health and Human Services, Health Resources and Services Administration.

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

Respectfully Submitted,



For:

Lori A. Weaver
Commissioner



Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# UK355831
Federal Award Date: 08/31/2026

Recipient Information

1. **Recipient Name**
NEW HAMPSHIRE DEPARTMENT OF HEALTH & HUMAN SERVICES
129 Pleasant St
Concord, NH 03301-3857
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**
LA2HR1U97VC6
7. **Project Director or Principal Investigator**
Erica Tenney
MCH Section Administrator/NH Title V Director
Erica.Tenney@dhhs.nh.gov
(603)271-4536
8. **Authorized Official**
Erica Tenney
MCH Section Administrator/NH Title V Director
Erica.Tenney@dhhs.nh.gov
(603)271-4536

Federal Agency Information

9. **Awarding Agency Contact Information**
Travis J Wright
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
twright@hrsa.gov
(301) 443-0676
10. **Program Official Contact Information**
Kimberly Sarvis
Maternal and Child Health Bureau (MCHB)
ksarvis@hrsa.gov
(240) 290-2186

Federal Award Information

11. **Award Number**
1 UK3MC55831-01-00
12. **Unique Federal Award Identification Number (FAIN)**
UK355831
13. **Statutory Authority**
42 U.S.C. § 247b-13a
14. **Federal Award Project Title**
Screening and Treatment for Maternal Depression and Related Behavioral Disorders Program
15. **Assistance Listing Number**
93.110
16. **Assistance Listing Program Title**
Special Projects of Regional and National Significance
17. **Award Action Type**
New
18. **Is the Award R&D?**
No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2026 - End Date 09/29/2027	
20. Total Amount of Federal Funds Obligated by this Action	\$700,000.00
20a. Direct Cost Amount	
20b. Indirect Cost Amount	\$91,304.00
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$700,000.00
24. Total Approved Cost Sharing or Matching, where applicable	\$70,000.00
25. Total Federal and Non-Federal Approved this Budget Period	\$770,000.00
26. Project Period Start Date 09/30/2026 - End Date 09/29/2028	
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$770,000.00

28. **Authorized Treatment of Program Income**
Addition
29. **Grants Management Officer – Signature**
Hazel N. Booker on 08/31/2026

30. Remarks



Notice of Award
Award Number: 1 UK3MC55831-01-00
Federal Award Date: 08/31/2026

Maternal and Child Health Bureau (MCHB)

31. APPROVED BUDGET: (Excludes Direct Assistance) ☐ Grant Funds Only ☒ Total project costs including grant funds and all other financial participation <table><tr><td>a. Salaries and Wages:</td><td>\$66,573.00</td></tr><tr><td>b. Fringe Benefits:</td><td>\$59,772.00</td></tr><tr><td>c. Total Personnel Costs:</td><td>\$126,345.00</td></tr><tr><td>d. Consultant Costs:</td><td>\$0.00</td></tr><tr><td>e. Equipment:</td><td>\$5,000.00</td></tr><tr><td>f. Supplies:</td><td>\$5,000.00</td></tr><tr><td>g. Travel:</td><td>\$2,035.00</td></tr><tr><td>h. Construction/Alteration and Renovation:</td><td>\$0.00</td></tr><tr><td>i. Other:</td><td>\$70,700.00</td></tr><tr><td>j. Consortium/Contractual Costs:</td><td>\$469,616.00</td></tr><tr><td>k. Trainee Related Expenses:</td><td>\$0.00</td></tr><tr><td>l. Trainee Stipends:</td><td>\$0.00</td></tr><tr><td>m. Trainee Tuition and Fees:</td><td>\$0.00</td></tr><tr><td>n. Trainee Travel:</td><td>\$0.00</td></tr><tr><td>o. TOTAL DIRECT COSTS:</td><td>\$678,696.00</td></tr><tr><td>p. INDIRECT COSTS (Rate: % of S&W/TADC):</td><td>\$91,304.00</td></tr><tr><td> i. Indirect Cost Federal Share:</td><td>\$91,304.00</td></tr><tr><td> ii. Indirect Cost Non-Federal Share:</td><td>\$0.00</td></tr><tr><td>q. TOTAL APPROVED BUDGET:</td><td>\$770,000.00</td></tr><tr><td> i. Less Non-Federal Share:</td><td>\$70,000.00</td></tr><tr><td> ii. Federal Share:</td><td>\$700,000.00</td></tr></table>	a. Salaries and Wages:	\$66,573.00	b. Fringe Benefits:	\$59,772.00	c. Total Personnel Costs:	\$126,345.00	d. Consultant Costs:	\$0.00	e. Equipment:	\$5,000.00	f. Supplies:	\$5,000.00	g. Travel:	\$2,035.00	h. Construction/Alteration and Renovation:	\$0.00	i. Other:	\$70,700.00	j. Consortium/Contractual Costs:	\$469,616.00	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:	\$678,696.00	p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$91,304.00	i. Indirect Cost Federal Share:	\$91,304.00	ii. Indirect Cost Non-Federal Share:	\$0.00	q. TOTAL APPROVED BUDGET:	\$770,000.00	i. Less Non-Federal Share:	\$70,000.00	ii. Federal Share:	\$700,000.00	33. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project) <table><tr><th>YEAR</th><th>TOTAL COSTS</th></tr><tr><td>02</td><td>\$700,000.00</td></tr></table> 34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash) <table><tr><td>a. Amount of Direct Assistance</td><td>\$0.00</td></tr><tr><td>b. Less Unawarded Balance of Current Year's Funds</td><td>\$0.00</td></tr><tr><td>c. Less Cumulative Prior Award(s) This Budget Period</td><td>\$0.00</td></tr><tr><td>d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION</td><td>\$0.00</td></tr></table> 35. FORMER GRANT NUMBER 36. OBJECT CLASS 41.45 37. BHCNIS#	YEAR	TOTAL COSTS	02	\$700,000.00	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
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38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES						
FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
26 - 3893600	93.110	26UK3MC55831	\$700,000.00	\$0.00	N/A	26UK3MC55831

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. By applying for or accepting federal funds from HHS, recipients certify compliance with all federal anti-discrimination laws and these requirements and that complying with those laws is a material condition of receiving federal funding streams. Recipients are responsible for ensuring sub-recipients, contractors, and partners also comply.
2. Applicable Regulations – Prior to October 1, 2025, this award is subject to 45 CFR 75 except for eight flexibilities from 2 CFR 200 adopted by HHS on October 1, 2024, in Federal Register Notice 89 FR 80055. After October 1, 2025, this award will be subject to any applicable provisions of 2 CFR 200 and 2 CFR 300.
3. The Recipient hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964, as amended (codified at 42 U.S.C. 2000d *et seq.*), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80); Section 504 of the Rehabilitation Act of 1973, as amended (codified at 29 U.S.C. 794), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 84); Title IX of the Education Amendments of 1972, as amended (codified at 20 U.S.C. § 1681 *et seq.*), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 86); The Age Discrimination Act of 1975, as amended (codified at 42 U.S.C. § 6101 *et seq.*), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91); and Section 1557 of the Patient Protection and Affordable Care Act, as amended (codified at 42 U.S.C. § 18116), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 CFR Part 92).
4. Any term or condition in this NOA, including those incorporated by reference, that HHS is enjoined by court order from imposing or enforcing shall not apply or be enforced as to any recipient or subrecipient to which that court order applies and while that court order is in effect.
5. Funding beyond this budget period is contingent upon the availability of appropriated funds for this program, recipient satisfactory performance, program authority, compliance with the Terms and Conditions of the award, and a decision that continued funding is in the best interest of the Federal government.
This award action is based on HRSA's approval of the recipient's application and any modifications at the time of this award. Continued support for this award may be subject to other programmatic considerations to the extent permitted by law, including, but not limited to, Administration priorities and court orders.
Should additional federal funds not be available and/or shifting priorities affect the programmatic objectives of this award, the recipient will work with HRSA to revise any workplan tasks and budget in accordance with CFR 200 (Revision of budget and program plans).
6. Prior to October 1, 2025, this award is subject to the termination provisions at 45 CFR 75.372. Starting on October 1, 2025, this award is subject to the termination provisions at 2 CFR 200.340. Pursuant to 2 CFR 200.340, the recipient agrees by accepting this award that continued funding for the award is contingent upon the availability of appropriated funds, recipient satisfactory performance, compliance with the Terms and Conditions of the award, and to the extent authorized by law, a decision by the agency that the award continues to effectuate program goals or agency priorities.
7. By accepting this award, including the obligation, expenditure, or drawdown of award funds, recipients, whose programs are covered by Title IX, certify as follows:
 - Recipient is compliant with Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. §§ 1681 *et seq.*, including the requirements set forth in Presidential Executive Order 14168 titled Defending Women From Gender Ideology Extremism and Restoring Biological Truth to the Federal Government, and Title VI of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000d *et seq.*, and Recipient will remain compliant for the duration of the Agreement.
 - The above requirements are conditions of payment that go the essence of the Agreement and are therefore material terms of the Agreement.
 - Payments under the Agreement are predicated on compliance with the above requirements, and therefore Recipient is not eligible for

funding under the Agreement or to retain any funding under the Agreement absent compliance with the above requirements.

- Recipient acknowledges that this certification reflects a change in the government's position regarding the materiality of the foregoing requirements and therefore any prior payment of similar claims does not reflect the materiality of the foregoing requirements to this Agreement.
- Recipient acknowledges that a knowing false statement relating to Recipient's compliance with the above requirements and/or eligibility for the Agreement may subject Recipient to liability under the False Claims Act, 31 U.S.C. § 3729, and/or criminal liability, including under 18 U.S.C. §§ 287 and 1001.

- Applicable Regulations – Prior to October 1, 2025, this award is subject to 45 CFR 75 except for eight flexibilities from 2 CFR 200 adopted by HHS on October 1, 2024, in Federal Register Notice 89 FR 80055. After October 1, 2025, this award will be subject to any applicable provisions of 2 CFR 200 and 2 CFR 300.
- 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 System for Award Management (Sam.gov) at <https://sam.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>.
- 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: <https://www.hhs.gov/sites/default/files/hhs-grants-policy-statement-october-2024.pdf>.
- 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>
- HRSA will provide funding in the form of a cooperative agreement. A cooperative agreement is a financial assistance mechanism where substantial involvement is anticipated between HRSA and the recipient during performance of the contemplated project.
HRSA's roles:

- Providing oversight and subject matter expertise 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.
- Reviewing the establishment and implementation of activities, procedures, measures, and tools for accomplishing the goals of the cooperative agreement on an ongoing basis.
- Assisting in the establishment and facilitation of effective collaborative relationships with federal and state contacts, HRSA-funded recipients, and other entities that may be relevant for the successful completion of tasks and activities identified in the approved scope of work.
- Participating with the award recipient in the dissemination of project findings, best practices, and lessons learned from the project.

In addition to adhering to all applicable federal regulations and public policy requirements, the cooperative agreement recipient's responsibilities will include:

- Completing activities proposed in response to this NOFO.
- Meeting with the federal project officer 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.
- Collaborating with HRSA on ongoing review of activities; procedures and budget items; information/publications prior to dissemination; contracts; and Interagency agreements.
- Establishing contacts relevant to the project's mission, such as with federal and non-federal partners and other HRSA projects.
- Assuring that all recipient administrative data and performance measure reports, as designated by HRSA, will be completed, and

- submitted on time.
- Participating in HRSA’s TA activities for the MMHSUD program; to include data monitoring, evaluation, and capacity building assistance.
 - Willingness to adapt as necessary to meet the required goals and objectives of the program.

Standard Term(s)

1. Your organization must have policies, procedures, and financial controls to follow all the [General Terms and Conditions](#). HRSA awards are based on the application submitted and approved by HRSA. All awards are subject to the General Terms and Conditions, in addition to those included in the Notice of Award or referenced in documents and attachments.

Reporting Requirement(s)

1. **Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.**
The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. **All FFRs must 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.
2. **Due Date: Within 90 Days of Budget End Date**
The recipient must submit a performance report within 90 days after the end of each budget period. The performance report must be submitted using the HRSA Electronic Handbooks (EHB).
3. **Due Date: Within 90 Days of Budget End Date**
An annual progress report is due within 90 days of the end of each budget period throughout the project period and must describe the following:
- a. the degree to which the non-federal entity is progressing towards achieving the mission, goals and strategies outlined in the project;
 - b. barriers encountered and the activities undertaken to resolve the barriers;
 - c. progress toward grantee-led evaluation; and
 - d. any significant changes to the approved funded program.
- The progress report should also provide status of the budget expenditures according to the approved plan.

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
Erica Tenney	Business Official, Authorizing Official, Point of Contact	erica.tenney@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/>).