



Lori A. Weaver
Commissioner

Ellen M. Lapointe
Chief Executive Officer

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

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September 30, 2026

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, New Hampshire Hospital, to make a payment to The Joint Commission (VC#258505), Oakbrook Terrace, Illinois, in an amount not to exceed \$35,000 for reaccreditation services, effective upon Governor and Executive Council approval through June 30, 2027. 85.7% General Funds and 14.3% Other Funds (intergovernmental revenues).

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 2027	102-500731	Contracts for Program Svcs	94012800	\$35,000

EXPLANATION

The purpose of this request is to make payment to The Joint Commission for New Hampshire Hospital's (NHH) triennial reaccreditation survey, which is required for NHH to maintain its existing accreditation. NHH has been continuously accredited by The Joint Commission since 2018 with participating beginning in 2016. Accreditation demonstrates that NHH meets nationally recognized standards for patient safety and quality of care.

The reaccreditation process takes place every three years and is scheduled to begin in the spring of 2027. Due to the surprise nature of the reaccreditation inspections, the exact date is unknown, and an invoice will not be submitted until after the survey is complete. The requested amount of up to \$35,000 is an estimate based on prior years. The actual amount paid will be in accordance with the invoiced amount; if the invoiced amount is greater than \$35,000, an additional request will be submitted to Governor and Council.

To participate in the Medicare and Medicaid programs, a psychiatric hospital must demonstrate compliance with the federal Conditions of Participation established by the Centers for Medicare & Medicaid Services (CMS). Accreditation by a CMS-approved accrediting organization with “deeming authority” for psychiatric hospitals is a recognized means of demonstrating that compliance. The Joint Commission is one of these organizations and is the pathway through which NHH has demonstrated its compliance. Beyond federal certification, accreditation provides independent, external validation that NHH meets national standards for patient safety and quality of care that go beyond the federal minimum requirements.

The cost of maintaining accreditation is modest relative to the revenue and programs it protects. The estimated survey fee of \$35,000 occurs once every three years, or approximately \$11,700 per year. Accreditation supports a significant share of NHH’s revenue. New Hampshire’s Section 1115 Medicaid demonstration, which allows Medicaid reimbursement for inpatient psychiatric care provided at NHH, requires participating psychiatric hospitals to be accredited by a nationally recognized accrediting organization. Many commercial payers also rely on accreditation in their credentialing and contracting decisions. In addition, accreditation supports NHH’s role as a clinical training site for psychiatry residents and health professions students and is a factor in the terms and cost of the hospital’s liability insurance coverage. A lapse in accreditation would put this revenue and these programs at risk, weaken NHH’s standing with patients and partners, and increase regulatory scrutiny. Regaining accredited status would likely require unbudgeted spending on consultants, corrective action, and staff time, far exceeding the survey fee.

While a small number of other accrediting organizations also hold CMS deeming authority for psychiatric hospitals, the Department is requesting to continue with The Joint Commission because this payment represents the continuation of NHH’s established accreditation relationship, not the purchase of a new service. Accreditation is an ongoing status, and the triennial survey fee is the cost of maintaining it. NHH’s policies, clinical documentation, staff training, quality improvement, and survey readiness processes are built around The Joint Commission’s standards and survey methodology. Changing accrediting organizations would be a significant undertaking, requiring NHH to realign these systems to a different set of standards, undergo a full initial accreditation survey by the new organization with its associated fees, and coordinate the transition of its deemed status with CMS. This would divert clinical and administrative resources from patient care and create a risk of a gap in accredited status, without a clear corresponding benefit to patients or the State. In addition, The Joint Commission’s fees are set by its standard pricing structure rather than negotiated individually, so competition would not be expected to reduce the cost of this survey. The Department will continue to assess whether accreditation through The Joint Commission remains the most appropriate approach for NHH.

Area served: Statewide

Source of Funds: Source of funds is 14.3% Other Funds from fees and intra-department transfers and 85.7% General Funds.

Respectfully Submitted,

 For:

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