Lori A. Weaver
Commissioner

Lisa M. Dekutoski
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF ECONOMIC STABILITY

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9474 1-800-852-3345 Ext. 9474
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October 19, 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, Division of Economic Stability, to pay the American Public Human Services Association (APHSA) (VC#168677-B001), Chantilly, VA in the amount of $42,000 for annual membership dues effective upon Governor and Council approval for the period of January 1, 2027 through December 31, 2027. Funding source: 56% Federal Funds, 44% General Funds.

05-95-045-450010-61250000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: DIV ECONOCMIC STABILITY, BUREAU OF FAMILY ASSISTANCE, DIRECTOR'S OFFICE

State Fiscal Year	Class / Account	Job Number	Class Title	Total Amount
2027	026-500251	45144001	Memberships	$42,000

EXPLANATION

Approval of this request will enable the State to continue its participation in the Association. APHSA is a bipartisan national membership association representing state and local health and human services agencies and the subject matter experts that help execute their mission to improve outcomes for people nationwide, build resilience, and bolster the well-being of people through access to food, health care, housing, employment, child care, community support, and other key building blocks. APHSA also provides support regarding performance measurement and data analysis, health and human services IT systems, workforce development and training, and the legal dimensions of the field.

Listed below are answers to standard questions required for Governor and Executive 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?

APHSA was founded in 1930 as the American Public Welfare Association (APWA) and later changed its name to APHSA in 1997. The New Hampshire Department of Health and Human Services has been a member since 1990, and the New Hampshire Department of Health and Welfare was a member in the years prior to 1990.

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

   No.

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

   Agencies from all 50 states are members as well as the District of Columbia and US territories. The Department is the sole New Hampshire agency belonging to the Association. All Divisions and Offices benefit from this membership.

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

   APHSA's dues are based on population from the most recent US Census and the standard Cost of Living Adjustments.

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

   The work of the Association supports the entire range of programs administered by the Department. Additionally, the Association represents the State before Congress and federal agencies on matters of concern to New Hampshire. With the many changes to federal programs being passed by Congress each year, it is increasingly important to have current information about changes, consequences of the changes, and the potential impact on each state, including the State of New Hampshire.

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

   Yes. Educational and research materials are included in the membership costs and are provided to the Department. Materials include but are not limited to; *This Week in Washington*, legislative summaries, policy papers, testimonies, e-mail alerts, and technical assistance.

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

   No.

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.)

   Ten DHHS employees are members: Lori Weaver, Commissioner; Morissa Henn, Deputy Commissioner; Ann Landry, Associate Commissioner; Christine Santaniello, Associate Commissioner; Patricia Tilley, Associate Commissioner, Lisa Dekutoski, Director, Division of Economic Stability; Marie Noonan, Director, Division for Children, Youth and Families; Tina Cabana, Deputy Director Division of Economic Stability, Melissa St. Cyr, Chief Legal Officer, and Nathan White, Chief Financial Officer.

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

    Should the Governor and Council not approve this request, the Department may not have the most timely and accurate information available regarding federal programs, federal funding, and interpretation of proposed laws and rules, which is necessary for the efficient administration of Department programs.

Source of Funds: 56% Federal Funds, 44% General Funds.

Respectfully Submitted,



For:

Lori A. Weaver
Commissioner

American Public Human Services Association

Invoice Date

8/19/2026

Bill To:

Ms. Lori A. Weaver
129 Pleasant St
State Office Park South
Concord, NH 03301-3852

Federal I.D: 36-2166948 /D.U.N.S: 07-480-9344

New Hampshire Department of Health and Human Services
Annual Membership Renewal Notice

Due on Receipt
Renewal Period January 1, 2027 - December 31, 2027

PLEASE INCLUDE A COPY OF THIS INVOICE WITH ALL PAYMENTS

If you have questions about your membership services/benefits or have changes in your agency, please contact Kim James, at kjames@aphsa.org.

Payments made in the last 30 days may not be reflected at the time of this mailing.

Invoice #	Customer #
INV-02262-H8L4Q2	26565

Description	Qty	Unit Price	Discount	Tax	Amount
State Membership 1/1/2027 - 12/31/2027	1.00	$42,000.00	$0.00		$42,000.00
			Total		**$42,000.00**
			Payments		**$0.00**
			Balance		**$42,000.00**

Make checks payable to American Public Human Services Association
and reference APHSA member ID on all payments.
Mail to: PO Box 221542, Chantilly, VA 20153-1542
or send wire transfer to: United Bank ABA: 056004445 Account: 1010214235

Pay Online at my.aphsa.org/My-Account/My-Companys-Invoices

THANK YOU FOR YOUR PAYMENT!

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