

**COMMISSIONER’S OFFICE  
9500-5000**

**PURPOSE:**

The Commissioner’s Office provides policy direction to all program units and administrative support services such as legal support, financial management, human resources, employee assistance programs and emergency response services that require department-wide uniformity.

**CLIENT PROFILE:**

The Commissioner supports all program and administrative units by providing policy direction.

**FINANCIAL SUMMARY 9500-5000**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$7,718	\$9,313	\$20,966	\$21,318	\$20,832	\$21,163
<b>GENERAL FUNDS</b>	\$2,230	\$2,342	\$1,285	\$1,319	\$1,369	\$1,396

**FUNDING SOURCE:**

Allocation of most of the expenses in this unit are a mix of most of the funding sources the Department receives. The total fund mix budgeted for FY26/27 is 66.44% federal funds, 6.13% general funds, 27.43% other funds.

**STATE MANDATES:**

RSA 126-A makes certain requirements of the Department of Health and Human Services at a policy and program level.

**FEDERAL MANDATES:**

All federal programs require financial reporting, management and oversight as outlined in Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).

**SERVICES PROVIDED:**

The Commissioner’s Office provides department-wide policy development and leadership for the programs and operations.

**SERVICE DELIVERY SYSTEM:**

Financial management services are provided to program units through statewide budget and accounting systems. Employee Assistance services are provided by licensed counselors for all state employees to assist those employees experiencing work and life challenges.

**OFFICE OF EMPLOYEE ASSISTANCE PROGRAM (EAP)  
9500-5025****PURPOSE:**

The State of New Hampshire Employee Assistance Program (SoNH EAP) is a confidential and voluntary internal EAP program providing direct services designed to support all State of New Hampshire Employees and their families across all three branches of state government to access resources and support for organizational or individual concerns impacting professional and/or personal health and well-being.

EAP Professionals provide short-term counseling, assessment and referral services to assist employees in developing problem resolution strategies by linking individuals to benefits provided by the organization within their benefits package as well as linkage to community resources. The EAP provides organizational consultation services to managers and supervisors for addressing group problems/concerns and facilitation of group-focused strategies for improvements. These services are intended to enhance communication, cooperation, productivity, and teamwork in the workplace. Robust crisis management services and strategies assist employees to develop coping mechanisms and resources for navigating through crisis situations. EAP staff employ strategies to address evolving needs aimed at enhancing engagement and retention while boosting organizational wellbeing by;

- Identifying issues and prioritizing concerns impacting personal or professional life
- Supporting individuals to gain access to resources and supports that assist in resolving professional and/or personal concerns
- Assist individuals and workgroups to resolve concerns at the earliest point possible in order to mitigate personal and professional costs
- Providing support in navigating personal and professional life challenges
- Develop skills and abilities that foster a culture of support and belonging

**CLIENT PROFILE:**

SoNH EAP serves all State of NH employees and their family members in all three branches of State Government. SoNH EAP is an internal EAP program that can help with a range of concerns from everyday issues and life-stage transitions to unanticipated traumatic events both in and outside of the workplace. Services are confidential and voluntary for employees and their family members to address and resolve personal concerns that may interfere with work or home life. Services are available to all NH state government employees and their family members. EAP provides services to individual family members of the employee who may be underinsured or uninsured. EAP provides programing to facilitate health and wellness throughout the organization guided by current trends, needs, policies and initiatives.

**FINANCIAL SUMMARY 9500-5025**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$931	\$1,026	\$1,020	\$1,047	\$1,018	\$1,045
<b>GENERAL FUNDS</b>	\$401	\$437	\$445	\$473	\$444	\$472

**FUNDING SOURCE:**

Allocation of most the expenses in this unit are funded by Interagency Payments. The total fund mix budgeted for FY26/27 is 9.81% federal funds, 43.64% general funds, 46.55% other funds.

**STATE MANDATES:**

All records maintained by the SoNH EAP are protected from being released under RSA 91-A:5 (exemptions from the New Hampshire Right-to-Know Law).

**FEDERAL MANDATES:**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA)

**OUTCOME**

Utilization of SoNH EAP services are defined to include direct services, interventions, training/education and referrals. For the prior calendar year, program utilization was conservatively estimated at around 10% which exceeds industry norms. There are many factors including catastrophic events that influence utilization. Additionally, the program provides a number of other services in the area of critical incident response, grief and loss support, stress management programing, resiliency training, personal and professional coaching, mediation services, satellite hours, stand-by services, orientations and specialized training for Leaders throughout the organization in service to all state departments.

**SERVICES PROVIDED:**

The SoNH EAP provides access to individual, group, work-site and departmnet wide services to SoNH employees experiencing challenges, which could adversely affect work performance or personal wellbeing. Specialized services are provided to support supervisors and management in dealing with difficult situations. Services are provided statewide regardless of work location or shift. Services provided inlcude, but are not limited to;

- Individual and group support
- Resiliency building skills through the 8 dimensions of wellness

- Trainings to enhance employee wellness and wellbeing
- Employee Workplace Educational Program
- “Reasonable Cause” training programs to comply with the Omnibus Transportation Act;
- Alcohol and substance use/misuse services
- Problem identification of issues, resource development and follow-up;
- Referral to internal and external resources
- Onsite crisis response;
- Trauma debriefings;
- Management and/or supervisory consultation/coaching;
- Fitness-for-Duty Evaluations referral
- Domestic violence initiative support and expertise
- Work culture assessment
- Return to work meetings
- Technical assistance (policy development)
- Constructive confrontation
- Mediation services for workplace conflicts;
- Conflict Resolution Continuum
- Facilitated discussion;
- Educational programs designed for supervisors and/or employees;
- Provide the program, “EAP an effective Management Tool” to supervisors with instruction and ongoing support
- Orientation programs for employees and management personnel
- EAP newsletter
- Posters and related informational materials
- Lending library access
- Onsite standby services
- Retirement readiness assessment and support
- Development and consultation in workplace peer support programs
- Development and support of Mental Health and wellness programming

Services provided at all levels of the organization are delivered with the goal of enhancing the necessary skills that contribute to a positive culture of support and belonging in the workplace.

**SERVICE DELIVERY SYSTEM:**

Services provided by SoNH EAP staff are delivered in person, telephonically, virtually, by walk-in or during on-site satellite hours in order to expedite access to services in emergent situations as well as a means of providing visibility and accessibility to services throughout the entire state. Services assist employees and their families to access EAP professionals in real-time in accordance with their preferences around location and time.

**QUALITY ASSURANCE & IMPROVEMENT:**

SoNH EAP serves all state agencies in all three branches of state government in accessing services both internally and externally that support individual, departmental and organizational wellness. Adherence to federal regulations around HIPPA and client confidentiality informs the service delivery and is and is assessed and supported in an ongoing way through supervision and case consultation.

**OFFICE OF BUSINESS OPERATIONS**

**9500-5676**

**PURPOSE:**

To promote fiscal responsibility, provide timely financial information, and contract processing to both internal and external stakeholders.

**CLIENT PROFILE:**

Budget processes allocate and analyze financial information for the Department. Additionally, the Departments centralized Contracts unit is included in this accounting unit. The Contracts Unit is responsible for working with internal and external stakeholders to produce RFIs, RFPs, Contracts, and related documentation.

**FINANCIAL SUMMARY 9500-5676**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$18,617	\$21,975	\$21,769	\$22,466	\$19,957	\$20,572
<b>GENERAL FUNDS</b>	\$9,854	\$12,733	\$9,359	\$9,723	\$8,631	\$8,961

**FUNDING SOURCE:**

Funds from Child Support Enforcement, Foods Stamps, Foster Care IV-E, Medicaid, and TANF make up the majority of federal funds that support this accounting unit. The total fund mix budgeted for FY26/27 is 55.45% federal funds, 42.99% general funds, 1.56% other funds.

Title/Description	Performance Measures		Current Baseline	FY2024 GOAL	FY2025 GOAL
	Output	Outcome			
Efficiency Measure – Timely Processing of Procurement Requests	Contracts Approved on-time	Services Delivered to DHHS Clients	96 Days	94 Days	92 Days

**OUTCOME:**

Contracted services are procured in an efficient manner to ensure positive outcomes for individuals, families, and communities served by the Department.

**STATE MANDATES:**

RSA 126-A, RSA 9:16-a, RSA 14:30-a, RSA 9:16-c, RSA 14:30-a, RSA 124:15, RSA 21-G:36-38, RSA 21-I:22-a-d

**FEDERAL MANDATES:**

Uniform Guidance (2 C.F.R., Part 200)

**SERVICES PROVIDED:**

The Division of Finance and Procurement provide centralized financial and contracting services to the Department. The Financial services include management of the budget, actuals, and cost allocation (as required by federal regulation), rate setting, revenue projections, audit, and federal reporting. The centralized contracting functions include the facilitation of the competitive bidding process (e.g., Requests for Proposals, Requests for Applications, Requests for Bids, Requests for Grant Applications), and the creation of contracts, memoranda of understanding, and other types of legal agreement, as well as all amendments.

**SERVICE DELIVERY SYSTEM:**

The Chief Financial Officer oversees all activities. The Deputy Chief Financial Officers manages financial activities, and the Director of Contracts and Procurement manages the contracting functions.

**OFFICE OF HEALTH EQUITY (OHE)**

**9500-7208 (Director’s Office)**

**PURPOSE:**

The Office of Health Equity (OHE) works to identify and mitigate health disparities for all populations so that they can achieve optimal health and well-being given their circumstances. In particular, the Office assures equitable access to effective DHHS programs and services across all populations.

OHE also advises and facilitates DHHS cross-divisional compliance with all applicable federal civil rights laws, including those that require communication assistance, both through the Department’s own staff, programs and services, and for those services provided by contracted providers.

This account funds the OHE Director’s Office which includes DHHS communication access contract and activities for promoting communication access and education about communication access technology and resources, federal civil rights laws compliance; cultural and linguistic competence; minority health; DHHS community relations and engagement; technical assistance via training and advisory; and repatriation.

**CLIENT PROFILE:**

The office provides services potentially to any/all New Hampshire residents through community relations and engagement, communications access, technical assistance, and repatriation. The office is committed to developing program initiatives and partnerships in cooperation with local and statewide community officials and stakeholders to facilitate the state’s ability to improve health outcomes for the communities it serves. Through community relations and community engagement the office supports the needs of marginalized communities including access to education, employment, transportation, housing, social services, mental and physical health services and interpretation and translation services.

Individuals interacting with DHHS who require communication assistance may include individuals who are Deaf, Deafblind, have a hearing loss, are blind or have low vision, have a physical condition that impacts communication or are limited in English proficiency. These individuals are current and potential customers of the Department, people seeking employment with the Department; employees, to permit an employee to perform the essential functions of his/her job; the public attending DHHS-sponsored public forums; and the public receiving DHHS public broadcasts and emergency safety and public health communications. In fiscal year 2024, there were 15,757 encounters in which communication access services were utilized in DHHS, such as in-person, over-the-phone, and video-relay interpretation as well as translation of written materials.

**FINANCIAL SUMMARY 9500-7208**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$1,721	\$1,801	\$1,819	\$1,940	\$1,661	\$1,780
<b>GENERAL FUNDS</b>	\$1,149	\$1,160	\$1,120	\$1,197	\$1,027	\$1,102

ANNUAL COST PER CASE-TOTAL	\$109	\$104	\$105	\$112	\$96	\$103
CASELOAD	15,757	17,260	17,260	17,260	17,260	17,260

Caseload represents Communication Access encounters.

**FUNDING SOURCE:**

Allocation of most of the expenses in this unit are a mix of most of the funding sources the Department receives. The fund mix for FY 26/27 is 38.35% federal, 61.57% general funds, 0.8% other funds, cost-allocated across the Department.

**FEDERAL MANDATES:**

The federal Office of Minority Health at the U.S. Department of Health and Human Services was created in 1986. The federal civil rights laws that are applicable to DHHS and its sub-recipients may include the following.

- Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in the delivery of benefits.
- Section 504 of the Rehabilitation Act of 1973 prohibits discrimination based on disability both in the delivery of services or benefits, as well as in employment.
- Title II of the Americans with Disabilities Act of 1990 prohibits discrimination in both the delivery of services and in employment.
- The Age Discrimination Act of 1975 prohibits discrimination in the delivery of services or benefits.
- Title IX of the Education Amendments of 1972 prohibits discrimination on the basis of sex in educational programs; and
- Section 1557 of the Patient Protection and Affordable Care Act of 2010 affords new civil rights protections; most notably it prohibits discrimination on the basis of sex in certain health programs and activities and ensures the burden is on covered entities to ensure their patients are informed of their rights.
- Executive Order 13166 issued in 2000
- HHS Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting LEP Persons
- 28 CFR parts 35 (Title II) and 36 (Title III) are regulations for nondiscrimination on the basis of disability, including requirements of effective communication, under the Americans with Disabilities Act (ADA).
- National Enhanced CLAS (Culturally and Linguistically Appropriate Services) Standards, 2013

**STATE MANDATES:**

- DHHS created the Office of Minority Health in 1999 to help ensure that all New Hampshire residents have access to DHHS services and to improve the health of minorities.
- State laws (RSA 521-A and RSA 354-A) require an interpreter be provided, when necessary, to ensure effective communication for individuals who are deaf or have hearing loss.

- State Law RSA 135-F:3-I-e requires that services that are family-driven, youth-guided, community-based, trauma-informed, and culturally and linguistically competent.
- He-M 309 – Rights of Persons Receiving Mental Health Services in the Community
- He-M 311 – Rights of Persons in State Mental Health Facilities

**SERVICES PROVIDED:**

- **DHHS Communication Access:** Facilitates effective, quality communication access across all DHHS programs and services for individuals needing communication assistance including individuals who are deaf, have hearing loss, are blind or low vision, have limited speech, or have limited English proficiency. OHE is responsible for policy, systems and training of all DHHS staff, and oversight of the contracted vendor(s) for interpretation/ translation services for DHHS current and potential customers/clients, employees, and the public. Communication Access Specialists and Administrator manages DHHS' contracted language and communication access services, assistive technology solutions. The team provides policy, strategic guidance, training, coaching and technical assistance to support effective communication across DHHS' activities.
- **Federal Civil Rights Laws Compliance:** Monitors DHHS contractor compliance with federal civil rights laws requirements, including provision of communication access support as a part of culturally and linguistically appropriate services and provides technical assistance to contract managers and vendors
- **DHHS Community Relations and Engagement:** Serves as a liaison between DHHS, and community and service providers across NH. Engages community input to identify issues that affect their well-being and utilizes the community voice to help determine long-term and sustainable outcomes. Provides technical assistance to various DHHS programs, as well as outside organizations, to help provide services that are equitable and effective to all NH residents. Liaison to communities and service providers.
- **Health Equity:** Improves DHHS and statewide capacity to assure equitable access and provide high quality services to all individuals and populations, including racial, ethnic, language, gender and sexual minorities, and individuals with disabilities, through program planning and partnership building to address disparities and promote health equity.
- **Repatriation:** Serves US Citizens who experience unexpected and unavoidable problems abroad, through direct coordination of any NH cases (approximately one to two per year), to assist repatriates in resuming lives as quickly as possible.

**SERVICE DELIVERY SYSTEM:**

OHE staff provide most services. There is currently one contract for the provision of statewide communication access services to DHHS to assure meaningful access to all persons including:

- Providing spoken language Interpretation and written Translation Services (including Braille); and
- Providing communication access services including American Sign Language interpretation (ASL); Certified Deaf Interpretation (CDI); Oral Interpretation; Tactile Interpretation (for the Deafblind); and Communication Access Real Time (CART) Services.

**OFFICE OF HEALTH EQUITY (OHE)  
9500-7209 (Refugee Services)**

**PURPOSE:**

The Office of Health Equity (OHE) works to identify and mitigate health disparities for all populations so that they can achieve optimal health and well-being given their circumstances. In particular, the Office assures equitable access to effective DHHS programs and services across all populations.

OHE conducts programming to facilitate legal refugee resettlement and integration into NH society. The State Refugee Program serves individuals who are of special humanitarian concern to the United States as defined by federal law. All have been granted legal immigration status. The Program limits services to the first five years and mandates that individuals achieve self-sufficiency at the earliest date possible following their arrival to the United States. The Program is 100% federally funded. This account funds services specific to the State Refugee Program.

**CLIENT PROFILE:**

The Program serves individuals of special humanitarian concern who have been granted legal immigration status according to federal law, including refugees within five years of arrival to the United States; asylees; Cuban and Haitian Entrants; Amerasians; holders of Special Immigrant Visas, certain humanitarian parolees, and trafficking victims. Since 1980, the New Hampshire Refugee Program has resettled refugees from over 25 countries. Further information can be found on the DHHS website (<https://www.dhhs.nh.gov/programs-services/diversity-culture-inclusion/refugee-program>), including specific data on arrivals. (Note: will update with FFY24 data as soon as it becomes available).

**FINANCIAL SUMMARY 9500-7209**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
TOTAL FUNDS	\$4,032	\$2,899	\$4,632	\$4,653	\$4,481	\$4,499
GENERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0
ANNUAL COST PER CASE-TOTAL	\$7,331	\$5,271	\$8,421	\$8,459	\$8,147	\$8,180
CASELOAD	550	550	550	550	550	550

Caseload represents individuals served under the program.

**FUNDING SOURCE:**

100% Federal Funds, from the U.S. Department of Health and Human Services, Office of Refugee Resettlement (ORR)

**FEDERAL MANDATES:**

The federal Refugee Act of 1980, 8 U.S.C. § 1521 et seq., established the federal Refugee Resettlement Program and directed the federal Office of Refugee Resettlement to implement strategies and policies for the placement and resettlement of refugees throughout the United States in consultation with state and local governments.

**OUTCOME:**

Cultural adjustment is a life-long process, but the program uses measures to demonstrate progress toward self-sufficiency and well-being. State Refugee Program objectives for SFY 2026 and 2027 include:

- 80%-85%% job placement for all employable refugees; achieved 81% placement rate.
- 80% of refugees will maintain employment for 90 days.
- 10% will participate in On-the-Job Training or Registered Apprenticeship.
- 100% will achieve short- and long-term cultural orientation and adjustment goals met for all new arrivals.
- Improvement of at least one English level for all new arrivals and other participating refugees.
- Transportation and financial literacy training goals met for 100% of new arrivals.
- 100% will receive comprehensive health screening, to include health profile.
- 100% school children will experience sustained grade promotion and graduation rates.

**STATE MANDATES:**

RSA 161:2, XVIII

**SERVICES PROVIDED:**

Grants from the federal Office of Refugee Resettlement respond to the common adjustment challenges of new refugee groups statewide. New Hampshire currently administers the following grant programs:

- **Refugee Health Promotion** – Provides health case management and activities to increase health literacy. Approximately 500 individuals served annually.
- **Refugee School Impact**—Provide school-related supports and services to students and their families. Approximately 300 families served annually.
- **Refugee Social Services**—Provide services that lead to self-sufficiency, such as case management, English for Speakers of Other Languages and employment. Approximately 1,000 individuals served annually.

- **Services for Older Refugees** – Provides case management and support to individuals aged 60 and over within three years of arrival. Approximately 20 individuals served annually.
- **Refugee Youth Mentoring** – Provides case management, mentoring and leadership development to refugee youth ages 15-24 to support their successful integration into their communities. Over 80 youth served annually.
- **Wilson-Fish TANF Coordination** – Provides self-sufficiency coaching and services leading to integration and independence for refugee families with children under 18 years of age and includes Vocation English Language training. 40-60 families served.
- **Immigration-related legal assistance** – Provides immigration-related legal assistance to eligible Afghan populations.
- **Refugee Cash and Medical Assistance** – Provide cash consistent with TANF payments levels and medical support to individuals who are not categorically eligible for other support programs for the first twelve months after arrival. The Refugee Program administrative costs are budgeted to this funding stream.

#### **SERVICE DELIVERY SYSTEM:**

The Refugee Program funds contracted services to promote self-sufficiency and cultural adjustment. Most contracts are implemented by agencies that have extensive bi-lingual, bi-cultural staff and have experience working with New American populations. Bicultural, bilingual staff are often best suited to interpret mainstream culture to new arrivals. Service delivery is front-loaded and intensive, much of it happening within the first six months of arrival. However, individuals may receive services up to five years after arrival to the U.S. Services are delivered in agencies, homes and other private and public settings and generally consist of, but are not limited to:

- Cultural orientation
- English for Speakers of Other Languages
- Employment-related services
- Transportation
- Interpretation
- Case management
- Health case management
- Preventive health education
- Service for Older Refugees
- School-related intervention and support
- Immigration-related services
- Youth services

#### **COMMUNITY SERVICES BLOCK GRANT (CSBG)**

**9500-7716**

**PURPOSE:**

The federal CSBG assists local communities via the network of community action program (CAP) agencies, for the reduction of poverty, services to provide upward economic mobility for families, and the revitalization of low-income communities.

**CLIENT PROFILE:**

Individuals and families supported by the statewide network of the five (5) local Community Action Programs.

**FINANCIAL SUMMARY 9500-7716**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
TOTAL FUNDS	\$5,860	\$3,910	\$3,918	\$3,918	\$3,918	\$3,918
GENERAL FUNDS	\$58	\$0	\$0	\$0	\$0	\$0
ANNUAL COST PER CASE-TOTAL	\$55	\$36	\$37	\$37	\$37	\$37
CASELOAD	107,148	107,148	107,148	107,148	107,148	107,148

**FUNDING SOURCE:**

The funding for this appropriation is 100% federal Community Services Block Grant funds.

**OUTCOME:**

Individuals and families will have access to services, supports, and programs that support their economic mobility.

**STATE MANDATES:**

N/A

**FEDERAL MANDATES:**

CSBG Funds are administered by 45 CFR Part 75 (DHHS); However, beginning October 1,2026 they will adopt CFR 200 (OMB)

**SERVICES PROVIDED:**

Services include but are not limited to financial planning, emergency assistance, assistance for health, food, assistance with obtaining and maintaining housing, employment, and community involvement activities

**SERVICE DELIVERY SYSTEM:**

By federal statute, the community action agencies are the designated eligible entities in New Hampshire to receive CSBG federal block grant funds. There is one FTE for this program.

**QUALITY ASSURANCE & IMPROVEMENT  
9510-7935 (Improvement/Integrity/Info/Reimb)**

**PURPOSE:**

The Bureau of Program Integrity, within the Division of Program Quality and Integrity, serves two main functions for the Department: 1) the detection and prevention of errors or fraud, waste, and abuse within the assistance programs and services provided by the Department and 2) to ensure compliance with Federal regulations and State laws/rules through oversight, audits, and data analysis. Additionally, it is responsible for recoveries of overpayments and improper payments.

**CLIENT PROFILE:**

The Bureau serves the State and Federal government in ensuring that errors in eligibility and claims for all benefits are identified and reduced, that systems are in place to detect, review, and prevent fraud, waste, and abuse, that Medicaid is the payer of last resort, that appropriate recoveries of State or Federal funds are completed, and that the Department completes federally mandated audits and uses audit

**FINANCIAL SUMMARY 9510-7935**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$7,360	\$8,778	\$8,640	\$8,904	\$8,371	\$8,621
<b>GENERAL FUNDS</b>	\$3,459	\$4,303	\$4,301	\$4,433	\$4,167	\$4,292

ANNUAL COST PER CASE-TOTAL	\$1,420	\$1,693	\$1,667	\$1,718	\$1,615	\$1,663
CASELOAD	5,184	5,184	5,184	5,184	5,184	5,184

Case Numbers:

- Fraud, Waste, and Abuse Investigation: 1,261
- Quality Case Reviews: 1,193
- Audits & Financial Reviews Performed: 2,151
- Medicaid Provider Enrollments & Revalidations: 579
- Total: 5,184

**FUNDING SOURCE:**

BPI is supported by Medicaid, TANF, SNAP, and Title IV-E. The mix of funding is based on the types of reviews and the areas under review. The primary funding source is Medicaid, SNAP and TANF. Any budget reduction in general funds would result in backlog of audit and investigation, delays in enrolling Medicaid providers, reduced recoupment opportunities, and missed federal deadlines for reviews, which could in some cases, lead to Federal sanctions and loss of federal funds. The fund mix for SFY 26/275 is 49.72% federal, 49.78% general funds, 0.5% other funds.

Title/Description	Performance Measures		Current Baseline	FY2026 GOAL	FY2027 GOAL
	Output	Outcome			
Investigate Member Fraud, Waste, and Abuse referrals	1216 Cases closed	Timeliness of referral resolution and elimination of backlog	72 % Completion Rate	90%	90%
Complete provider enrollment and revalidation reviews	277 open enrollments	Timeliness of referral resolution	20 enrollments per month	228	228
Complete Financial Compliance reviews required by regulations	2151 Case Reviews	Timeliness of Case review	1700 Case Reviews	1700	1700
Complete Eligibility reviews required by regulation	1193 Case Reviews	Timeliness of case review	1106 (Federally Mandated based on NH Eligibility)	100%	100%

**OUTCOME:**

To reduce member, provider, and contractor fraudulent and/or abusive activity in the programs administered by Department of Health and Human Services, assess financial soundness of providers and sub-recipients to prevent loss of services for NH residences, and ensure program compliance with State and Federal regulations.

**STATE MANDATES:**

- RSA 167:4-b Health Carrier Disclosure
- RSA 167:14-a Recovery of Assistance
- RSA 161:2, XV Human Services
- RSA 167:17-b Prohibited Acts
- RSA 167:58-62 Medicaid Fraud & False Claims
- RSA 135-C10 Eligibility of Programs; Monitoring

**FEDERAL MANDATES:**

- 42 CFR Part 433 subpart D Medicaid Third Party Liability
- 42 CFR Part 455 Program Integrity - Medicaid
- 7 CFR 273.16 & 18 Disqualification Intentional Program Violation
- 7 CFR 275 Subpart C Quality Control (QC) Reviews
- 42 CFR 431.812 Quality Control Review Procedures
- Medicaid Eligibility Quality Control Fed Agencies & Pass-Through Circ.A133 Subpart D

**SERVICES PROVIDED:**

Federal and State law mandate these audits and investigation to ensure the integrity of the programs and services offered by Department of Health and Human Services. The Bureau of Program Integrity has several units to detect and monitor for fraud, waste, and abuse as follows:

- **Quality Assurance Unit** – This unit provides a federally required internal audit function to ensure that individuals and families who obtain SNAP benefits receive the appropriate benefits to which they are entitled. By performing comprehensive reviews of a statistically valid sample of SNAP active and terminated/denied benefits, Quality Assurance staff measure the accuracy of Department employees in determining eligibility and payment amounts.
- **Special Investigations Unit**- This unit is responsible for the investigating allegations of beneficiary fraud in the public assistance programs administered by the Department. As part of this responsibility, investigators in the Special Investigations Unit prepare fraud cases for prosecution by County Attorneys in NH Superior Courts. Staff also establish claims for recovery of overpaid benefits and pursues recovery of these funds.
- **Medicaid Third Party Liability** – This unit is responsible for ensuring that all third-party payers meet any legal obligations, establishing responsible party's ability to pay and sources of payment for services delivered by the Medicaid program, and collection of funds. This unit

is responsible for monitoring the Managed Care Organizations to ensure they are properly following all Third-Party Liability regulations and rules and reducing costs to the Medicaid program.

- **Medicaid Program Integrity Unit** - This unit is responsible for ensuring the efficient and economical administration of New Hampshire's Medicaid State Plan. The unit accomplishes this by performing utilization reviews of Medicaid claims to prevent, detect and control fraud and abuse among Medicaid providers. This unit is responsible for monitoring the Managed Care Organizations to ensure they have the proper claims edits, analytical tools, and investigative staff to ensue any Fraud, Waste, and Abuse is prevented, detected and recovered as required.
- **Medicaid Provider Enrollment Unit** – This unit, in accordance with federal regulations, ensures the proper screening and enrollment of new Medicaid providers. The unit performs provider site visits and criminal background checks to ensue providers are qualified and not under sanction. This monitoring and review ensure quality providers for NH Medicaid members.
- **Financial Compliance Unit**– This unit is responsible to perform audits as directed by Senior Management, Federal audit oversight of the Medicaid Payment Error Rate Measurement (PERM), and Federal A-133 State Single Audit. This unit also conducts Federally and State required reviews of Child Care and Development Fund (CCDF), Nursing Facilities, and site reviews of contractors/providers (including sub-recipient monitoring) to determine internal control of financial reporting. This unit monitors DHHS corrective action plans of audits and works with program areas to ensure corrective action plans are completed and any error are corrected.

#### **SERVICE DELIVERY SYSTEM:**

The Division does not provide direct services to DHHS clients, but rather is an employee-driven administrative support function, aimed at meeting federal and state requirements and safeguarding the financial integrity of public assistance programs against fraud, waste and abuse.

#### **CHILD CARE LICENSING 9520-5143**

##### **PURPOSE:**

Ensure that children are in safe and healthy environments provided with care, supervision, and developmentally appropriate activities that meet each child's physical and emotional needs, whether they are in licensed NH childcare programs or cared for by licensed-exempt providers receiving Child Care Development Funds.

##### **CLIENT PROFILE:**

Infants and children through 17 years of age in licensed day care facilities, licensed-exempt programs accepting Child Care Development Funds, youth recreation camps and children younger than 21 in short- or long-term residential care facilities and institutions.

#### **FINANCIAL SUMMARY 9520-5143**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$1,812	\$2,001	\$2,077	\$2,155	\$1,977	\$2,049
<b>GENERAL FUNDS</b>	\$816	\$946	\$910	\$945	\$866	\$898

**FUNDING SOURCE:**

Federal Funds from CCDF, Medicaid, and SSBG primarily support these services. The fund mix for FY 26/27 is 56.17% federal, 43.83% general funds.

**OUTCOME:**

Yearly inspection of all licensed facilities and licensed-exempt facilities receiving CCDF. Investigation of all complaints, which in SY 2024 was 363. Completing background record checks for approximately 5,500 individuals a year.

**STATE MANDATES:**

RSA 170-E Child Day Care, Residential Care, Recreation Camp Licensing, Admin Rules He-C 4001, 4002, 4003, and 4004 and He-C 6916-6917

**FEDERAL MANDATES:**

Child Care and Development Block Grant SEC 658

**SERVICES PROVIDED:**

The Child Care Licensing Unit (CCLU) conducts on-site inspections and investigations of youth recreation camps, childcare facilities including center based, family based, licensed-exempt providers receiving CCDF, and 24-hour residential based childcare. CCLU ensures compliance with applicable NH Statutes and Administrative Rules. CCLU approves and issues licenses and initiates appropriate disciplinary action when necessary for compliance and the protection of children. CCLU determines eligibility of employment for all individuals working for licensed programs and completes a background check for all individuals residing in licensed programs, which includes FBI fingerprints, National Crime Information Center sex offender registry file, State of NH criminal background check, abuse and neglect and sex offender registries check in NH and every state an individual has resided in the previous five years, which is repeated every five years.

As of July 2024, there are 736 licensed facilities, 159 youth recreation camps, and 19 licensed-exempt facilities receiving CCDF serving 46,700 youth statewide.

**SERVICE DELIVERY SYSTEM:**

Child Care Licensing is overseen by one Compliance Officer 6, two Compliance Officer 5, one Compliance Officer 3, four admin assists 4, 3 admin assist 3, one Compliance Officer 4, and ten Compliance officer 3.

**HEALTH FACILITIES ADMINISTRATION  
9520-5146**

**PURPOSE:**

Ensure that individuals receiving treatment within New Hampshire’s health care system are receiving safe and appropriate care that meet the individuals needs in accordance with RSA 151 by developing, establishing and enforcing basic standards for that care and treatment.

**CLIENT PROFILE:**

Individuals receiving care and treatment in hospitals, nursing homes, assisted living facilities, ambulatory surgical centers, non-emergency walk care centers, hospice homes, home health agencies, home health hospice agencies, renal dialysis centers, outpatient physical therapy centers, specimen collection stations, laboratories, birthing centers, educations health centers, adult day care, case management agencies, substance use disorder treatment facilities and psychiatric residential treatment facilities. Individuals living in residential care facilities, patients receiving health care in an acute care setting, and disabled individuals receiving care and treatment in their homes through a home health care provider

**FINANCIAL SUMMARY 9520-5146**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$3,697	\$4,653	\$4,519	\$4,657	\$3,944	\$4,056
<b>GENERAL FUNDS</b>	\$1,344	\$1,612	\$1,943	\$2,003	\$1,692	\$1,741

**FUNDING SOURCE:**

Federal funding from CMS Cert XIX, CMS, HLTH FAC CLIA, HLTH FAC XVIII, Medicare and Adult Licensing primarily support these services. Agency income is received from the facilities for licenses issued. The fund mix for FY 26/27 is 47.52% federal, 43% general, 9.48% other.

**OUTCOME:**

License and regulate all facilities according to state and federal requirements. Investigate all facility reported incidents and complaints (approximately 4,000/year). Collaborate with stakeholders to increase levels of compliance and overall care. Facilitate impactful progress through establishment and enforcement of the required standards for the care and treatment of NH citizens in health care settings.

**STATE MANDATES:**

Title XI: Hospitals and Sanitaria, Residential Care and Health Facilities Licensing, RSA 151

**FEDERAL MANDATES:**

Social Security Act Title XVIII Medicare, Title XIX Medicaid Section 1864, National Fire Protection Association [NFPA], Clinical Laboratories Improvement Act 1987 (CLIA).

**SERVICES PROVIDED:**

To provide initial and annual renewal licensing to all facilities required to be licensed per RSA 151. To verify compliance of federal and state law, administrative rules, and building and fire codes through inspections conducted annually or as indicated per RSA 151:6-a. To investigate in response to any complaints alleging violation of federal and/or state law, administrative rules, and building and fire codes. Health Facilities Administration is comprised of Health Facilities Licensing and Certification. Health Facilities Licensing licenses and inspects all health care facilities required to be licensed pursuant to RSA 151:2, except those with deemed status per RSA 151:5-b. Inspections are conducted annually or as indicated per RSA 151:6-a. to determine compliance with all provisions of state law and administrative rules for both clinical and life safety code. Conducts investigations in response to any complaints alleging violation of state law, administrative rules, and building and fire codes. Health facility Certification certifies health care facilities certified under Title XVIII or XIX of the Social Security Act for compliance with federal regulations aimed at keeping the clients, patients and residents of New Hampshire at their highest practicable level as well as investigating any complaints alleging violation of federal or state regulations. Health Facilities – Community Residences is responsible for initial and annual renewal licensing and certification for all facilities providing services to those in the Developmental Disabilities system.

**SERVICE DELIVERY SYSTEM:**

The Health Facilities Administration Licensing and Certification units are overseen by one Admin SVCS Fac MGRS 6, two Admin SVCS Fac MGRS 3, two Compliance Officer 5, two Compliance Officer 4, 25 Compliance Officer 3, two Comp-Info Analyst 2, three Building Inspector 2, and two Admin Assts 4.

**LEGAL SERVICES**

**9520-5680**

**PURPOSE:**

Provide legal support and services to the Department and all its program areas, to ensure that DHHS’ delivery of services adheres to and fairly applies the laws and regulations developed to implement legislative policy, federal and state law, and all judicial mandates.

**CLIENT PROFILE:**

Office of the Commissioner and associated Administrative Business Supports; Population Health, including Public Health and Medicaid Services; Human Services & Behavioral Health, including Economic & Housing Stability, Behavioral Health, including mental health and substance misuse, Long Term Supports & Services, including developmental disabilities and long term care, Children, Youth & Families; DHHS Operations, including Information Services, Human Resource Management, Facilities Maintenance & Office Services, Communications, Emergency Management, and Employee Assistance Program; and DHHS Facilities, including New Hampshire Hospital, Glencliff Home, and the Sununu Youth Services Center.

**FINANCIAL SUMMARY 9520-5680**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$11,145	\$12,666	\$14,411	\$14,829	\$12,596	\$12,930
<b>GENERAL FUNDS</b>	\$6,081	\$7,858	\$8,809	\$9,065	\$7,698	\$7,903
<b>ANNUAL COST PER CASE-TOTAL</b>						
<b>CASELOAD</b>	See below		See below		See below	

The Agency Request Includes a prioritized need in SFY 26 of \$646,980 (\$394,441 general funds, \$226,946 federal funds, \$25,591 other funds) and SFY 27 of \$671,975 (\$409,756 general funds, \$235,629 federal funds, \$26,590 other funds)

**CASELOAD:** DCYF: Approximately 8,326 hearing in SFY 2024, DCYF opened 9,992 investigations/assessments in SFY 2024. General Counsel: Right to Know Requests approximately 325 yearly; Estate Recoveries approximately \$7.0 million year; Client & Legal Services 55 complaints; Human Resources 40 matters; Court and AAU appearances approximately 1025; Child Support average monthly hearings 225; Client counseling matters approximately 148; Administrative Rules 85 rules opened.

**FUNDING SOURCE:**

Federal funds from Child Support Enforcement, Foster Care IV-E, Med Elig Det, Medicaid, and TANF support these services. This account receives funds for Estate Administration (Revolving Fund) and agency income from ERU County Fees and Admin Fees. The fund mix for FY 26/27 is 34.76% federal, 61.13% general, 4.11% other funds.

**OUTCOME:**

- Prompt representation on all legal issues and inquiries within DHHS.
- Funds recovered by Estate Recoveries from estates of individuals receiving various state financial assistance programs. (Approx. \$7.0m/year).
- Processing as required all right to know requests.
- Responding timely and appropriately to the increased need for children's legal services in DCYF & DCSS. All litigation deadlines including discovery needs are met and information distributed in lawful manner.
- Responding timely and appropriately to increased general counsel needs for services across the Department, including the Division of Behavioral Health regarding mental health and substance misuse, Division of Long Term Supports and Services, Division and Economic and Housing Stability, Medicaid, and more.

**STATE MANDATES:**

Outlining all state mandates that the Bureau is responsible for counseling is impossible considering it counsels all areas of the Department on all applicable laws and judicial mandates. A very small partial list of the laws includes: RSA 171-A:19 Client and Legal Services; RSA 161:2 XIV and XVI Child Support Program – DCSS Duties defined; RSA 167:13 – 167:16-a Recovery for Assistance Furnished, Claims, Liens, Limitations of Recoveries; RSA 126-A (Dept. of Health & Human Services); RSA 161 (Human Service); RSA 167 (Public Assistance to the Blind, Aged, or Disabled Persons, and to Dependent Children); RSA 135-C (New Hampshire Mental Health Services System); RSA 141 (Communicable Diseases); RSA 151 (Residential Care and Health Facilities); RSA 151-E (Long Term Care); RSA 171-A (Services for the Developmentally Disabled)

**FEDERAL MANDATES:**

Outlining all federal mandates that the Bureau is responsible for counseling all areas of the Department is impossible considering the breadth of the federal laws applicable to all services provided by the Department. Those that are specifically overseen by the Bureau include 42 U.S.C 1396p (Liens, adjustments and recoveries, and transfers of assets) through Estate Recoveries Unit; Social Security Act IV-B, IV-D, IV-E through the Child Support Services Legal Unit; and IV-A Adoption and Safe Families Act; Health Insurance Portability and Accountability Act (HIPAA) through the Privacy Officer.

**SERVICES PROVIDED:**

Legal services across the Department – representing the Department in court and administrative forums on issues such as personnel matters, defending administrative decisions, commitments to New Hampshire Hospital, pursuing debt owed to the State, internal and external audits, responding to law suits against the Department, providing legal advice and general counsel on matters concerning the administration of Department programs including the development and implementation of policies, interpretation of laws, responding to right to know requests, contract and

procurement processes, HIPPA compliance, the promulgation of administrative rules, Division of Children, Youth & Families in matters of child protection (prosecuting abuse and neglect, guardianship and termination of parental rights cases), and Division of Child Support Services.

**SERVICE DELIVERY SYSTEM:**

Legal Services is overseen by the Chief and Deputy Legal Counsel, and includes attorneys providing general counsel (6 Lawyers-2, 1 Compliance Officer 4, 2 Paralegal/Legal Assistant 4, 1 Administrative Assistant 3); support in the Attorney General’s Office (1 Lawyers 3); Estate Recovery (1 Estate Recovery Counsel and 4 MISC Legal Support Worker II); New Hampshire Hospital (1 Lawyers 3 and 2 MISC Legal Support Worker II); Division of Children, Youth and Families (36 Lawyers 2, 4 Lawyers 3, one Paralegal/Legal Assistant 6, 15 Paralegal/Legal Assistant 4, 2 Paralegal/Legal Assistant 5); Medicaid Services (1 Service Specialist VI and 1 Paralegal Assistant V, 1 Paralegal Assistant IV); Client and Legal Services (1 Lawyers 3, 1 Layers II, one Compliance Officer 6 and one Management Analyst 3); Rules Unit (1 Operations Specialist 6 and 1Management Analyst 3); Child Support Enforcement (1 Lawyer III, 2 Lawyer II, 8 Lawyers I, 1 Paralegal/Legal Assistant 6, 3 Paralegal/Legal Assistant 3, 2 Compliance Officer 5, 1 Compliance Officer 4, Account Collector 3, 1 Administrative Assistant 3, 1 Correspondent Clerk 3, 1 Correspondent Clerk 1).

**OPERATIONS SUPPORT ADMINISTRATION- (ADMINISTRATIVE APPEALS UNIT)  
9520-5683**

**PURPOSE:**

Provide an opportunity for a fair hearing to give applicants and recipients of DHHS services an impartial, objective review of final actions taken in a program administered by the Department.

**CLIENT PROFILE:**

The Administrative Appeals Unit provides a process for clients and stakeholders who believe the department has incorrectly handled their issues to have their cases reviewed by an independent Hearings Examiner prior to pursuing a remedy through the court system.

**FINANCIAL SUMMARY 9520-5683**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	SFY24	SFY25	SFY26	SFY27	SFY26	SFY27
	Actual	Adj Auth	Agency Request	Agency Request	Governor's Budget	Governor's Budget
TOTAL FUNDS	\$1,184	\$1,521	\$1,386	\$1,423	\$1,383	\$1,419

GENERAL FUNDS	\$632	\$903	\$903	\$927	\$901	\$925
ANNUAL COST PER CASE-TOTAL	\$658	\$760	\$693	\$711	\$692	\$710
CASELOAD	1,800	2,000	2,000	2,000	2,000	2,000

Caseload represents appeal cases processed.

**FUNDING SOURCE:**

Federal funds from Child Support Enforcement, Food Stamps, and Medicaid support these services. This account receives funds from other agencies and agency income for Life Safety Inspection Fees. The fund mix for SFY 26/27 is 34.84% federal, 65.16% general.

**OUTCOME:**

Timely hearing of all appeals providing due process to all parties recognized, both inside and outside the Department, as fair, accurate, and supported by the law.

**STATE MANDATES:**

RSA 126-A:15 VIII Commissioner of Health and Human Services - Appeals Process; RSA 541-A:31-36 Administrative Procedure Act; New Hampshire Code of Administrative Rules He-C 200

**FEDERAL MANDATES:** Virtually every program reviewed has a federal mandate; the more common ones include, but are not limited to 42 C.F.R. Section 431, Subpart E (Medicaid); 42 C.F.R. Section 438, Subpart F (Managed Care); 7 C.F.R. Sections 271.2 et seq. (Food Stamps) etc.

**SERVICES PROVIDED:**

The AAU provides objective, impartial decision making by Administrative Law Judges through a state and federally mandated appeals process, and cooperate with Department program administrators to identify significant legal issues that emerge through the hearings process.

**SERVICE DELIVERY SYSTEM:** The Administrative Appeals Unit is staffed by one Administrative law judge 7, six administrative law judge 6, and three admin assists 4.

**ADMINISTRATION – HUMAN RESOURCES  
9530-5677**

**PURPOSE:**

The Bureau of Human Resources (BHR) provides leadership, strategy, and administrative support for the Department of Health and Human Services. The BHR drives excellence and innovation by deploying recruitment and retention strategies, and by investing in workforce development. The BHR develops and oversees the implementation of administrative policies and procedures, including State and federal law policies. The BHR is committed to improving the employee experience, cultivating a talented, high performing, and engaged workforce that is prepared to effectively support and serve the citizens of the State of New Hampshire.

**CLIENT PROFILE:**

The Bureau of Human Resources (BHR), under the leadership of the Human Resources Director, serves all the Department’s 2,782 full time staff and 227 filled part time employees. BHR services the organization’s workforce development needs through talent acquisition, comprehensive benefits plan management including leave of absences, administration of workers compensation claims, payroll services, organizational development and training services, agency-wide position management and employee and labor relations.

**FINANCIAL SUMMARY 9530-5677**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$3,279	\$3,870	\$4,204	\$4,337	\$3,432	\$3,543
<b>GENERAL FUNDS</b>	\$2,069	\$2,745	\$2,800	\$2,888	\$2,285	\$2,360

The Agency Request Includes a prioritized need in SFY 26 of \$102,994 (\$69,984 general funds, \$27,788 federal funds, \$5,222 other funds) and SFY 27 of \$102,994 (\$69,984 general funds, \$27,788 federal funds, \$5,222 other funds)

**FUNDING SOURCE:**

Funds from Child Support Enforcement, Foods Stamps, Foster Care IV-E, Med Elig Det, Medicaid, and TANF make up the majority of federal funds supporting this accounting unit. The fund mix for FY 26/27 is 27.9% federal, 66.6% general, 5.5%other funds.

**OUTCOME:**

The DHHS Roadmap outlines strategic initiatives to optimize recruitment of candidate applications by developing a mechanism to share candidate’s applications; and reduce time to fill. The Bureau strives to produce paychecks with 100% accuracy in employee pay and leave balances. Invest in

DHHS staff by an increasing employee training and development opportunities and attendance by 5% each year of the biennium. Decrease the vacancy rate by 3% and create and support retention strategies to reduce agency turnover up to 3%.

**STATE MANDATES:**

Administrative Rules of the Division of Personnel  
 Collective Bargaining Agreement

**SERVICES PROVIDED:**

The Bureau of Human Resources (BHR) is building, developing, and supporting a high performing and healthy workforce. This is achieved by taking a holistic approach to innovative strategies, recruitment, employee and labor relations, benefits and compensation management, and organizational development and employee training.

**MANAGEMENT SUPPORT  
 9530-5685**

**PURPOSE:**

The Bureau of Facilities Management provides and manages safe, accessible, and cost-efficient facilities and maintenance services.

**CLIENT PROFILE:**

The Bureau of Facilities Management, through the Facilities Director, services all full and part time DHHS staff that have designated workspace and actively interfaces with the Department of Administrative Services, Bureau of Facilities & Assets Management, the Bureau of Public Works, and contractor/lessor staff to complete its work.

**FINANCIAL SUMMARY 9530-5685**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$15,179	\$22,172	\$22,447	\$19,554	\$19,375	\$17,865
<b>GENERAL FUNDS</b>	\$11,529	\$14,833	\$15,772	\$13,240	\$13,280	\$11,860

The Agency Request Includes a prioritized need in SFY 26 of \$364,982 (\$237,712 general funds, \$114,970 federal funds, \$12,300 other funds) and SFY 27 of \$184,711 (\$120,302 general funds, \$58,184 federal funds, \$6,225 other funds)

**FUNDING SOURCE:**

Funds from Adoption IV-E, Child Support Enforcement, CCDF, Foods Stamps, Foster Care IV-E, Med Elig Det, Medicaid, and TANF make up the majority of federal funds supporting this accounting unit. The fund mix for FY 26/27 is 28.18% federal, 70.26% funds, 1.56% other.

**STATE MANDATES:**

RSA 126-A

**FEDERAL MANDATES:**

N/A

**SERVICES PROVIDED:**

The DHHS Facilities Director works through direct staff reports, facility staff located in each of the DHHS managed facilities, and contractor/lessor staff. The Facilities Director is responsible for ensuring DHHS has sufficient and adequate space for staff to conduct all of the respective business functions of the DHHS managed facilities, including Sununu Youth Services Center, New Hampshire Hospital, Hampstead Hospital and Psychiatric Residential Treatment Facility, Glencliff Home, district and itinerant offices located throughout the state, and state-owned facilities managed by the Department of Administrative Services, Bureau of Facilities & Assets Management. Additional services provided include the administration of Office Services (mail services, purchasing, inventory management and control services, Telecommunications, , transportation garage and Fleet management, logistics, and archiving services).

**OFFICE OF INFORMATION SERVICES**

**9540-5952**

**PURPOSE:**

The Bureau of Information Services (BIS) provides strategic planning, policy direction, project management, standards and operational oversight for electronic information systems supporting all DHHS program units and administrative support services to ensure consistency and uniformity.

**CLIENT PROFILE:**

BIS, under the leadership of the Director, serves all DHHS program and administrative units. In addition, BIS services New Hampshire citizens by administering and maintaining, either internally or through competitive contract process, more than 120 electronic information systems to protect and ensure public health and wellness, and the provision of human services.

**FINANCIAL SUMMARY 9540-5952**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$52,161	\$58,612	\$65,327	\$68,915	\$58,406	\$62,031
<b>GENERAL FUNDS</b>	\$26,330	\$29,044	\$35,558	\$37,446	\$31,548	\$33,453

The Agency Request Includes prioritized needs requests in SFY 26 of \$5,592,060 (\$3,211,804 general funds, \$2,271,490 federal funds, \$108,766 other funds) and SFY 27 of \$5,582,090 (\$3,205,310 general funds, \$2,268,349 federal funds, \$108,431 other funds) for operational efficiencies solutions, laptop replacements, device deployment, and a Salesforce data management system.

**FUNDING SOURCE:**

The Bureau of Information Services receives funding from programs across the Department of Health and Human Services. Federal funds are from Child Support Enforcement, ELC Enhance DET, Med Elig DET, Medicaid, Title IV-E/Foster Care, Food Stamps, and other federal programs.

The fund mix for FY 26/27 is 43.58% federal, 54.43% general, 1.99% other funds. In addition, certain software systems administered by OIS receive as much as 75% to 90% federal funding depending on whether the initiative is in the implementation or operational/support and maintenance phases.

**OUTCOME:**

High quality data, consistent standards, successfully delivered business and technology projects, reduced total cost of ownership for software solutions, federal and state regulatory compliance, reduced waste and continuous process improvement.

**FEDERAL AND STATE MANDATES:**

The electronic business systems administered by the Bureau of Information Systems are implemented to meet the federal and state mandates for the respective program units served by those systems, including state and federal security.

**SERVICES PROVIDED:**

Department-Wide Services

- **Project Management** - providing tools, staff and services that equip and enable staff to consistently deliver successful business and technology initiatives
- **Information Security** – establishes and enforces policies and standards to satisfy state and federal regulations and Department requirements for data privacy, protection and security

- **Information and Systems Architecture and Enterprise Business Intelligence** – Strategically evaluates and proposes solutions to reduce the use of redundant systems and data and provides an information rich environment to support information analysis, data analytics and informed decisions-making

Key Business Systems Serving NH Populations, Providers and Communities

- **Enterprise Business Intelligence** – system of record for all data integration and reporting across all divisions of DHHS. Currently serving dashboards for informed decision making in Public Health, Economic and Housing Stability, Long Term Supports and Services, Children, Youth and Families, New Hampshire Hospital and Behavioral Health.
- **New HEIGHTS** – System of record for eligibility, enrollment and service delivery for Medicaid, Medicare Savings Program, Supplemental Nutrition Assistance Program (SNAP) aka Food Stamps, Temporary Assistance for Needy Families (TANF), Developmental Disability, Child Care Scholarships and State Supplemental Programs, serving 275,000 clients annually
- **NH Bridges** – System of record for the Division for Children, Youth and Families used to assist families in the protection, development, permanency, and well-being of their children
- **NECSES** – System of record for Child Support Services for the well-being of children assuring financial and medical support is available through location of parents, establishment of paternity and support obligations, and enforcement of those obligations
- **Elderly and Adult OPTIONS** - supports Adult Protection, Long Term Care Ombudsman, Medicaid Home and Community Based Care - Choices for Independence (CFI) Waiver, ServiceLink Resource Center, and Social Services Programs for individuals aged 60 and older and adults ages 18 and over with disabilities or chronic conditions
- **NH Health Enterprise Medicaid Management Information System (MMIS)** – system of record for NH Medicaid Program used to adjudicate, calculate, and issue payments to Medicaid providers, managed care organizations, and qualified health plans for monthly benefit coverage and/or services provided to Medicaid eligible clients.
- **Business-Critical Software Systems** - more than 120+ business-critical software systems supporting the mission and requirements for all areas of the Division of Public Health, New Hampshire Hospital and all other service and support divisions across the Department

**SERVICE DELIVERY SYSTEM:**

Services are delivered through strategic planning, policy setting, standards development, project management, information architecture and data management, and through the administration of mission-critical software solutions.

**QUALITY ASSURANCE & IMPROVEMENT**

9550-6637

**PURPOSE:**

The Bureau of Program Quality (BPQ) provides data driven support and evaluation for program development, quality and performance improvement, including cross-Departmental data integration, visualization and dashboarding.

**CLIENT PROFILE:**

The Bureau of Program Quality supports all divisions and bureaus across the Department, as well as responds to public inquiries and provides data for research purposes and mandated federal and state reporting.

**FINANCIAL SUMMARY 9550-6637**

<b><u>FINANCIAL HISTORY</u></b>						
Rounded to \$000 except cost per case	<b>SFY24</b>	<b>SFY25</b>	<b>SFY26</b>	<b>SFY27</b>	<b>SFY26</b>	<b>SFY27</b>
	<b>Actual</b>	<b>Adj Auth</b>	<b>Agency Request</b>	<b>Agency Request</b>	<b>Governor's Budget</b>	<b>Governor's Budget</b>
<b>TOTAL FUNDS</b>	\$4,277	\$4,730	\$4,854	\$4,981	\$4,558	\$4,670
<b>GENERAL FUNDS</b>	\$2,380	\$2,676	\$2,801	\$2,875	\$2,632	\$2,697

**FUNDING SOURCE:**

The Bureau of Program Quality is funded from a number of programs across the Department of Health and Human Services (DHHS). Federal funds are earned from Medicaid and the Building Capacity for Transformation Demonstration 1115 waiver. The fund mix for FY 26/27 is 42.29% federal, 57.71% general funds.

<b>Title/Description</b>	<b>Performance Measures</b>		<b>Current Baseline</b>	<b>FY2026 GOAL</b>	<b>FY2027 GOAL</b>
	<b>Output</b>	<b>Outcome</b>			
Provide access to Medicaid managed care health services data, statistics, and quantitative analysis to support evidence informed decision and policy making	# of monitored Medicaid managed care health measures, tables, and plans	# of validated Medicaid managed care health measures, tables, and plans available for data reporting and analysis	Approx 1103 annual deliverables across 3 Managed Care Organizations	Approx 1103 deliverables, across 3 Managed Care Organizations	Approx 1103 deliverables, across 3 Managed Care Organizations
Monitor the Medicaid Dental Organization’s performance to the Medicaid Care Management dental Services contract standards and quality strategy performance goals	# of monitored Medicaid managed care dental measures, tables, and plans	# of validated Medicaid managed care dental measures, tables, and plans available for data reporting and analysis	NA	Approx 371 deliverables	Approx 371 deliverables

Assist DHHS program areas in developing and implementing provider/service delivery reviews to monitor compliance and performance	# of service provider reviews	# of completed provider reviews with data collection, analysis, reporting, and quality improvement recommendations	23	24	24
Review sentinel events for to promote integration between the various roles of the Department and identify systemic recommendations	# of sentinel events reports received	# of cross system sentinel event reviews with systemic recommendations	8	8	8

**OUTCOME:**

Formal program evaluations are rigorously designed to evaluate the extent to which each project achieves its intended goals and objectives. High quality data is synthesized and disseminated to leadership, policy makers and stakeholders to ensure each have an optimal understanding about the value, performance, quality and effectiveness of services administered by DHHS. Partners and stakeholders have access and use of quality Medicaid data for analytics within the Enterprise Business Intelligence platform.

**STATE MANDATES:**

- RSA 126-A:4, IV Establishment of a Quality Assurance Program
- RSA 126-A-XIX(a) Employ a managed care model for administering the Medicaid program consistent with 42U.S.C. 1396u-2
- RSA 126-A-XIX(g)(3) Monitor and report requirements for managed care organization’s prior authorizations for drugs associated with mental illness
- RSA 126-A:5-XIX(a)(1) Medicaid Managed Care Program; Dental Benefits
- RSA 126-AA:5 Evaluation report of NH Granite Advantage Health Care Program
- RSA 126-R: New Hampshire Council on Suicide Prevention
- RSA 126:U: Limiting the Use of Child Restraint Practices in Schools and Treatment Facilities
- RSA 135-C:5.II NH Mental Health Services System regulation of State services; conduct site visits, auditing and monitoring
- RSA 420-G:11-a Development of a Comprehensive Health Care Information System
- RSA 622:46: Secure Psychiatric Unit Treatment Standards

**FEDERAL MANDATES:**

- Amanda D. et al. v. Margaret W. Hassan, Governor, et. al.; United States v. New Hampshire, No. 1:12-cv-53-SM Community Mental Health Settlement Agreement
- Public Law 102-321 (U.S. Code) Federal Block Grants for prevention and treatment of Substance Abuse

- 42 CFR Part 438 Managed Care sets the parameters that states must follow for quality assurance, monitoring, improvement, patient encounter data collection and external quality reviews of its contracted managed care organizations (MCOs)
- Section 1115 of the Social Security Act Development and implementation of a CMS approved monitoring and evaluation plan for demonstration projects

### **SERVICES PROVIDED:**

Through quality measures, data validation, aggregation and analytics, evaluation of health services delivery systems and program quality, the Bureau of Program Quality (BPQ) assists DHHS in determining and monitoring performance, improvement and compliance with regulatory and contractual requirements that inform the health and wellbeing of NH citizens.

BPQ has five units that direct quality monitoring, quality improvement, and data analysis through data driven, DHHS-wide collaborative activities:

- **Data Analytics and Reporting**- Provides data analysis with a focus on Medicaid and Behavioral Health system data and cross Departmental data integration, visualization and dash-boarding. This unit also provides the leadership and business analysis for the Department's Enterprise Business Intelligence efforts that in partnership with the Bureau of Information Systems and Division of Public Health Services are modernizing how Departmental data is stored, linked, visualized, analyzed, dash boarded and publicly reported.
- **Substance Misuse Systems Planning and Evaluation** - Provides data driven support that assesses substance misuse initiatives, activities, and outputs of the Department in its effort to assist individuals and families in achieving health and independence. This includes assisting DHHS program areas in developing methodologies and reporting on aggregating data to demonstrate the relationship between provider performance and client outcomes.
- **Medicaid Quality Program**- Leads data driven quality assurance and improvement activities for the Division of Medicaid Services and Medicaid Care Management, including establishment of Managed Care Organization incentive programs based on Department priorities. This unit provides oversight of the External Quality Review Organization contract and operationalizing federally required Medicaid 1115 Waiver Demonstration evaluations and monitoring plans.
- **Health Services Assessment**- Develops and implements methods for evaluating the appropriateness and effectiveness of DHHS community service providers with data analysis and reports to inform public policy, resource allocation, and gaps in quality service delivery. This unit also provides oversight of Sentinel Event reporting, data collection and analysis, coordination of cross-system reviews, including recommendations to address identified system issues and opportunities for operational improvements.
- **Contracts Quality Management**- Leads change management strategies to support the understanding of managing contracts for performance and quality management and provides an applied framework of process and systems to support DHHS program areas in creating evidence-informed and performance-based contracting that can be monitored from the strategic development stage through the contract deployment lifecycle. Financial and programmatic risk assessments are used to determine level of monitoring commensurate with the probability of risk through the contract lifecycle.

**SERVICE DELIVERY SYSTEM:**

The Bureau of Program Quality is overseen by a director and an employee driven bureau that provides formal ongoing assistance with quality oversight, improvement, evaluation, and quantitative reporting to Department programs and the public through its teams of expert reviewers, quality improvement specialists, evaluators, and analysts. These functions assist the Department's objective of improving the design, quality and effectiveness of services.