



Contract Management Policies and Practices

Presentation to the Joint Legislative
Performance Audit Oversight Committee

March 6, 2026



Department of
**HEALTH &
HUMAN SERVICES**



Agenda

- Contract Management
- Fiscal Management
- Program-Specific Reviews



Contract Management

March 6, 2026



Contracts are Critical to DHHS's Ability to Serve Clients

Services to NH citizens

- Area Agencies
- Mental Health Centers
- Doorways
- Nutrition Services
- Transportation Services

Services to DHHS

- IT and data systems
- 24/7 facility maintenance
- Public health lab equipment maintenance



DHHS Aims to Always Focus on Fairness, Integrity, Quality, and Value

Maintain a fair and objective competitive process

- Score based on public evaluation criteria
- All solicitations are reviewed by a DHHS or DOJ procurement attorney.
- Promote solicitations on social media and notify prospective vendors.

Maintain confidentiality and “integrity of the bidding process” (RSA 21-G:37)

- Access to proposals is limited to scoring team and requires signed confidentiality and conflict of interest
- Process remains confidential until G&C approval.

Procure highest quality services at best value

- Multidisciplinary teams with programmatic, financial, and IT expertise.
- Utilize specific procurement tools to ensure highest quality service.



DHHS Works to Continuously Improve the Procurement Process



Contract Management – Contract Lifecycle Management Policy

The Contract Lifecycle Management Policy formally standardizes roles and responsibilities of contract oversight

- Key Component of HHS Roadmap (Commitment 3) - Improve Customer Service
- Clearly defines roles and responsibilities at 4 phases of contracting:



Contract Management – Contract Quality Management

Contracts Quality Management Unit

- Sits strategically in the Bureau of Program Quality for collaboration on determining appropriate performance measures and contract deliverables
- Created a suite of tools for implementation of “Active Contract Management” best practices as identified by Harvard Government Performance Labs
- Tools include:
 - Key Decision Design to align contract provisions with strategic goals
 - Deliverables tracking
 - Outcome metric design
 - Outcome reporting and trend analysis
 - Communications logs
 - Issues logs
 - Issues escalation process
 - Contract evaluations



There are Many Different Types of Agreements

Agreement Types

Service Contracts (includes Form P-37) – MOST COMMON

Amendments (Scope, Time, and/or Funding)

Grant Agreements (Form G-1)

Memoranda of Understanding (Interagency)

Cooperative Project Agreements

Project Agreements

Provider Agreements

State Loan Repayment Program Agreements

Equipment Service Agreements

Use of Premises Agreements

Asset Purchase Agreements

Lease Agreements

CONTRACTORS

- Signed agreement
- Negotiated with vendor
- Generally requires G&C approval
- Contractor may or may not be subject to Dept Admin Rules

VS

PROVIDERS

- May or may not include signed agreement
- No negotiation
- Subject to Admin Rules and/or licensing or certification requirement



Fiscal Management

March 6, 2026



Fiscal Management

Standard Contract Monitoring

- HHS staff actively monitor contracts to ensure outcomes, deliverables, outputs, reporting, allowability.
- Payments are not made without adequate and sufficient documentation/evidence of work performed/delivered.

Subrecipient Monitoring Policy (Attachment A)

- Establishes processes for assigning programmatic and financial risk for each contract
- Contracts provisions are modified based on risk
- Most cost-reimbursement contracts require complete invoice back-up documentation monthly

Financial Compliance Unit Contract Oversight

- Works with Grants Administrator to provide training on how to review invoices and back-up documentation
- Performs Desk or Field Audits of Sub-recipients as necessary
- Reviews contractor financial audits
- Coordinates the KPMG Single Audit and corrective actions



Enhanced Subrecipient Risk Management



Program Oversight

March 6, 2026



Special Investigations Unit, Bureau of Program Integrity

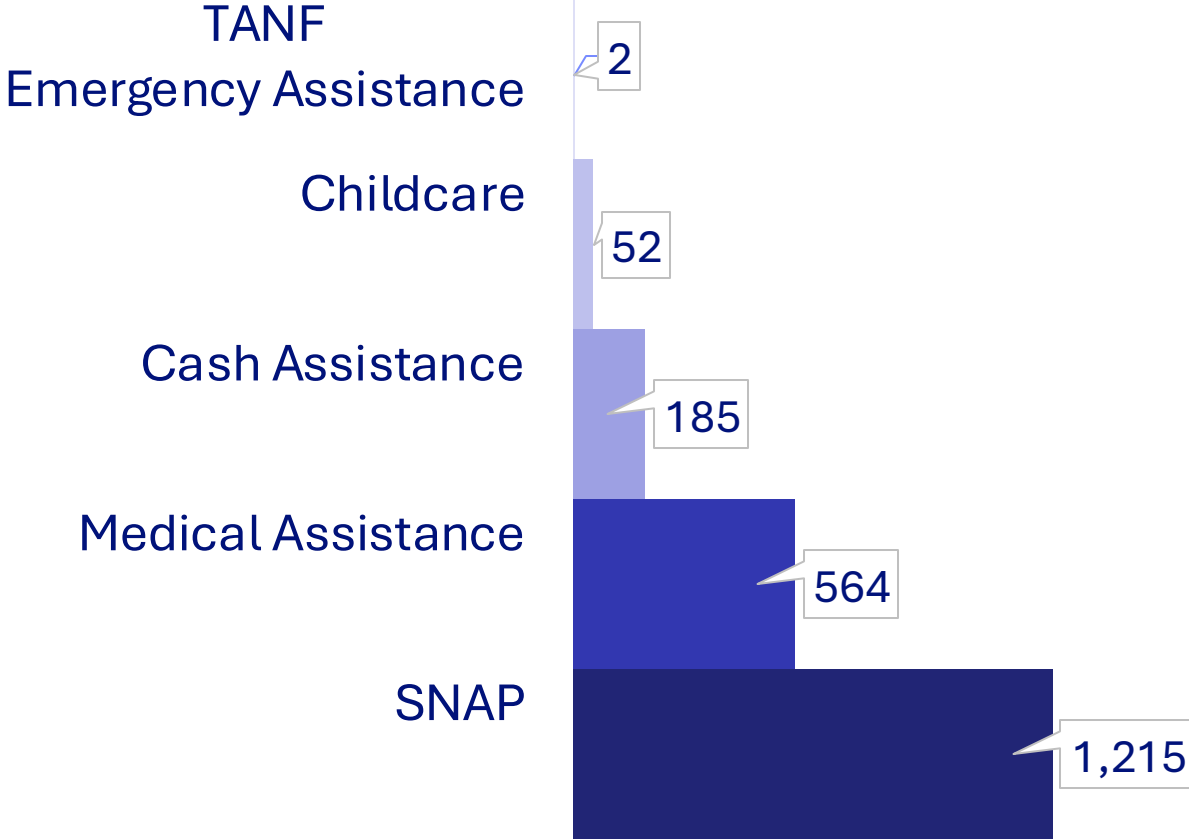
Investigates potential beneficiary fraud, waste, and abuse

Federally-required to investigate any referrals for SNAP fraud

Also investigate TANF, childcare, Medicaid, and other program fraud

In SFY 2025 the unit had 364 SNAP fraud investigations resulting in:

- 92 Intentional Program Violations at administrative and court level
- 111 household members were disqualified
- \$611,146 claims established

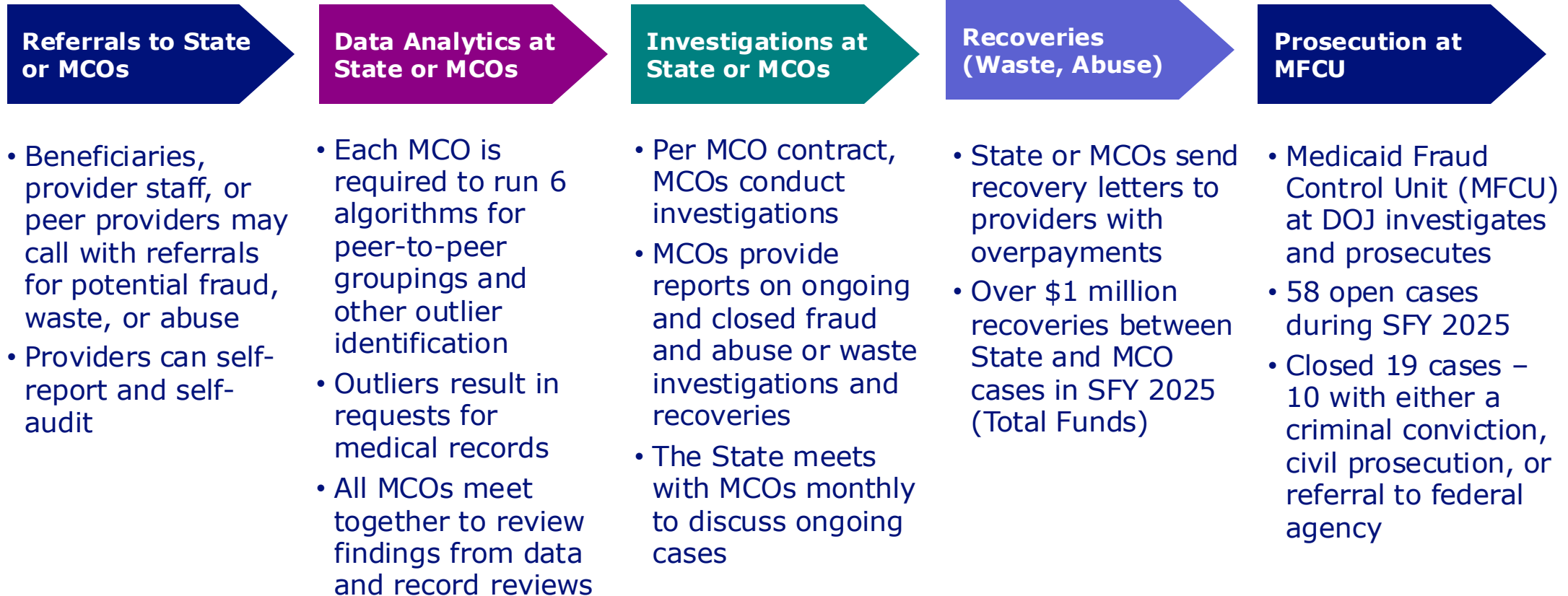


Total referrals: 1, 434

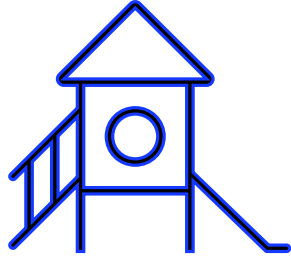


Medicaid Program Integrity

Investigate Medicaid Provider Fraud, Waste, and Abuse

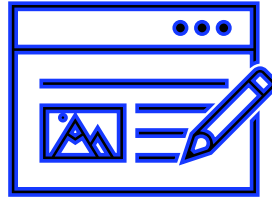


Childcare Provider & Beneficiary Audits



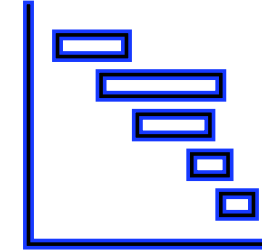
• **Provider Reviews**

- Monthly sample of providers to evaluate compliance with attendance, required signatures, and other records



• **State Fiscal Year 2025**

- 28 Providers reviewed
- 19 providers with findings
- 16 providers with overpayments
- \$18,600 recouped to date



• **Childcare Subsidy Audits**

- Federally required eligibility audit conducted every 3 years
- Currently under review – 276 sampled cases; evaluate eligibility and payment amounts
- We conduct “interim” reviews in the intervening years – sample of 611 cases, risk-based to include cases with potential errors.





Thank you.

Contact us:

Lori Weaver, Commissioner

Nathan White, Chief Financial Officer



Meredith Telus, Director, Division of Program Quality and Integrity

March 6, 2026



Department of
**HEALTH &
HUMAN SERVICES**



Policy: Subrecipient Monitoring	
	<p>New Hampshire Department of Health and Human Services Bureau of Contracts and Procurement</p> <p><i>The Mission of the Contracts Unit is to align DHHS goals and objectives with procurements, and efficiently facilitate contracts and agreements between DHHS agencies, vendors, and other partners</i></p>
<p>Effective Date: 08/01/2020</p> <p>Last Revision: 08/03/2023</p>	<p>Approved: </p> <p>Robert W. Moore, Director Date: 08/03/2023</p>
<p>Regulatory References: Regulation(s): 2 CFR Part 200 Admin Rules(s): PART Per 1002 DISCIPLINE</p>	<p>Other References: Determination Tool on the PRF, Risk Assessment Tool, Management Questionnaire, Contract Management Log</p>

Section 1 - PURPOSE OF POLICY

The purpose of this policy is to ensure subrecipients that enter into legal agreements with the Department of Health and Human Services are properly monitored proportional to their risk of non-compliance with contractual and regulatory requirements to ensure the desired contractual outcome(s); to ensure the Department’s compliance with the requirements of the Federal Uniform Guidance governing subrecipient monitoring (see [2 CFR 200.331](#) & [332](#)) for Federal funding; and set these Federal Uniform Guidance requirements governing subrecipient monitoring as standards to be applied to all funding sources.

Section 2 - SCOPE

- 2.1. This policy applies to all legal agreements the Department enters into in which federal, state, or other funds are provided to a vendor in exchange for goods or services.
- 2.2. Legal agreements with State Executive, Legislative, and Judicial Branch agencies shall be exempt from this policy as they are all part of the same financial State entity. The movement of funds from one State agency to another is effectuated through an interagency transfer, not a subaward, and therefore is not be subject to the Uniform Guidance subrecipient monitoring requirements.

Section 3 – DEFINITIONS

- 3.1. Department – Department of Health and Human Services

- 3.2. Bureau of Contracts and Procurement – The Department’s Bureau of Contracts and Procurement.
- 3.3. Grants Office – The Department’s Grants Unit; email DHHS-Grants@DHHS.nh.gov.
- 3.4. Program – The individual within the Department responsible for the program or project.
- 3.5. Finance – The individual within the Department responsible for the financial aspect of the program or project.
- 3.6. Vendor - A generic term for an entity with which the Department enters into a legal agreement to perform certain services. Vendors can be either subrecipients or contractors.
- 3.7. Subrecipient - A vendor issued funds to provide goods or services on behalf of the Department to the public.
- 3.8. Contractor - A vendor issued funds to provide goods or services to the Department to support Department operations.
- 3.9. Federal Uniform Guidance - The Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, issued by the Federal Office of Management and Budget (OMB), effective December 2014, and as amended ([see 2 CFR 200.0 et seq.](#)).
- 3.10. Legal Agreement - Any arrangement in which the Department provides a vendor funds in exchange for goods or services. The term legal agreement includes, but is not limited to contracts, grant agreements, and MOUs. MOUs should only be used to exchange funds for goods or services with the University and the Community College Systems of New Hampshire and State agencies.
- 3.11. Single Audit - An annual audit required of programs expending more than \$750,000 of federal funds. Single Audits adhere to the standards included in [2 CFR 200 Subpart F](#).
- 3.12. Subaward – As defined in 2 CFR 200.1, means an award provided by a pass-through entity to a subrecipient for the subrecipient to carry out part of a Federal award received by the pass-through entity. It does not include payments to a contractor or payments to an individual that is a beneficiary of a Federal program. A subaward may be provided through any form of legal agreement, including an agreement that the pass-through entity considers a contract.

Section 4 - POLICY STATEMENTS

- 4.1. It is the policy of the Department to apply the same procedures for subrecipient determination, risk assessment, and monitoring to all subawards, regardless of funding source.
- 4.2. The Department assesses risk and monitors subawards to ensure subrecipients provide the required goods or services to the public in accordance with subaward provisions, and applicable Federal and State statutes and regulations. This policy is designed to assist Department staff with interpreting and applying the risk-based monitoring requirements of the Federal Uniform Guidance. This policy does not establish department-wide

standards for general contract monitoring and assumes the program is monitoring legal agreements in accordance with subaward provisions, Federal and State statutes and regulations, Federal award requirements, and best practices.

- 4.3. It is the responsibility of the program engaged in the legal agreement to complete subrecipient determinations, risk assessments, and select monitoring activities to memorialize in the subawards to ensure adequate monitoring.
- 4.4. The Grants Office will facilitate an annual request for existing subrecipients to complete and remit the Management Questionnaire and required financials, and the completion of a Risk Assessment Tool (RAT). If a subrecipient does not have a previously completed RAT for the applicable subaward or a Management Questionnaire dated within the preceding twelve months, Program must conduct a risk assessment prior to finalizing a legal agreement with a subrecipient receiving a new subaward.
- 4.5. The Grants Administrator will be responsible for monitoring Programs compliance with this policy and procedure.
- 4.6. Managed Care Organizations (MCO) providing services under the exemptions defined in 2 CFR 200.101 (e) are exempt from this policy, regardless of funding source, because they are subject to ongoing rigorous monitoring conducted by the Department's Quality Assurance Unit (or Program Quality).

Section 5 - PROCEDURES

- 5.1. Notify Vendors of Subrecipient Monitoring Requirements – Bureau of Contracts and Procurement (BCP)
 - 5.1.1. The BCP is responsible for informing all vendors that intend to enter into legal agreements with the Department that the Department will:
 - 5.1.1.2 Determine whether every vendor will be considered a subrecipient or contractor.
 - 5.1.1.3 Require every subrecipient to complete and submit:
 - 5.1.1.3.1 A standard Department issued Management Questionnaire.
 - 5.1.1.3.2 Financial information as specified in the Management Questionnaire instructions.
 - 5.1.1.4 Perform a risk assessment evaluating every subrecipient's risk of noncompliance with subaward provisions, and Federal and State law or regulations.
 - 5.1.1.5 Perform enhanced monitoring to address any identified risks.
- 5.2 Determination of Subrecipient or Contractor – Program

- 5.2.1 **Determination Required:** Before the Department enters into a legal agreement, Program is required to determine whether the vendor should be considered either a subrecipient or a contractor.
- 5.2.1.1 **Agreement Specific:** Each determination is made based on the specific subaward provisions in question. Consequently, a vendor can have two legal agreements with the Department and be considered a contractor for one and a subrecipient for the other.
- 5.2.2 **Determination:** Program completes the Determination question on the Procurement Request Form (PRF), if used, to ensure the vendor is properly classified as a contractor or subrecipient pursuant to 2 CFR 200.331. The final determination is also recorded on the BCP's Management Log (see Sections 5.2.3 and 5.2.4. below articulate the differences between a contractor and a subrecipient).
- 5.2.2.1 Program submits a completed PRF, if used, to Contracts@DHHS.nh.gov. The BCP shall retain PRF's in the Centralized Inventory at least through the period required by 2 CFR 200.
- 5.2.2.2 Program should retain a digital copy of the PRF for a period of four years from the date of completion, or through the expiration of the legal agreement, including any renewals or amendments, whichever is longer.
- 5.2.2.3 The BCP incorporates the determination of the vendor as a subrecipient or contractor into the legal agreement prior to its finalization.
- 5.2.2.4 In the event a vendor is incorrectly determined on the BCP's Management Log, the Grants Office will notify the BCP's Business Systems Analyst of the correct determination for the vendor and the justification for the change. The Business Systems Analyst will update the Management Log. The Grants Office will notify the following individuals the change has been made:
- 5.2.2.4.1 Deputy CFO;
- 5.2.2.4.2 Director of Contracts and Procurements;
- 5.2.2.4.3 Budget Team Member;
- 5.2.2.4.4 Finance Manager; and
- 5.2.2.4. Administrator of Federal Audit Oversight.
- 5.2.3 **What is a Contractor?** *A contractor is a vendor that provides goods or services to the Department.* Contractors support the Department's operations in an ancillary capacity. The goods or services contractors provide are often for the Department's own use and benefit or support department operations (See 2 [CFR 200.331\(b\)](#) for more detail) and the Department is the direct recipient of the

goods and services. The following are examples of activities that a contractor may perform:

- 5.2.3.1 Build and/or maintain an IT system or database.
- 5.2.3.2 Provide contracted staff to address specific staffing needs on a temporary basis (e.g., nurses, LADCs, administrative or secretarial support).
- 5.2.3.3 Conduct specialized training.
- 5.2.3.4 Provide expertise or consultant services that could include audit work, file reviews, or systems analysis.
- 5.2.3.5 Provide office space (e.g., rent/lease).
- 5.2.3.6 Maintenance work (e.g., plumbing, janitorial services, plowing).

5.2.4 **What is a Subrecipient?** A subrecipient is a vendor that provides goods or services to the public on behalf of the Department. The actions performed by a subrecipient are often consistent with a broader public purpose (See 2 [CFR 200.331\(a\)](#) for more detail). Subrecipients administer and manage programs on behalf of the Department. Consequently, when a vendor makes eligibility determinations or programmatic decisions they are likely a subrecipient. Because subrecipients provide the goods or services to members of the public, without active monitoring or reporting requirements, the Department has no reliable method to verify whether the services have been provided. The following are examples of activities that subrecipients could perform on behalf of the Department:

- 5.2.4.1 Provide referral services to clients connecting them with a service provider or skills development program.
- 5.2.4.2 Administer a scholarship or financial assistance program.
- 5.2.4.3 Provide direct healthcare, educational, or assistance services to clients (e.g., substance use, oral healthcare, counseling).
- 5.2.4.4 Coordinate and manage an integrated service delivery system.

5.2.5 **Professional Judgment in the Determination:** Department staff should employ professional judgment in the determination of subrecipient or contractor. Should staff employ professional judgment and make a determination that runs counter to 2 CFR 200.331, staff must document the rationale and the reasoning for the alternative determination and provide the documentation to the BCP.

5.2.6 **Elements of Both Contractor and Subrecipient:** If a legal agreement with a vendor requires the vendor to provide both direct services to the Department (i.e., Contractor) and provide services to the public on behalf of the Department (i.e., Subrecipient), the Department will consider the vendor to be a subrecipient. The

Department will follow this approach to be consistent with 2 CFR 200.331 and minimize the risk of noncompliance with the aforementioned code of federal regulations. However, if enhanced monitoring actions are needed (see section 5.4) they should only focus on the subrecipient elements of the legal agreement.

5.3 Subrecipient Risk Assessment – Program

5.3.1 **Evaluation of Subrecipient Risk:** Program is required to assess each subrecipient’s risk of noncompliance with subaward provisions, and Federal and State statutes and regulations.

5.3.2 **Management Questionnaire:** All subrecipients that intend to enter into legal agreements with the Department must complete a Management Questionnaire, unless a risk assessment was previously completed for the applicable subaward or a Management Questionnaire dated within the preceding twelve months is on file. The BCP shall ensure all subrecipients complete and return a completed Management Questionnaire. The BCP provides Program the completed Management Questionnaire, which is utilized to complete the programmatic questions on the RAT. *You can access the Management Questionnaire here: <http://intranet/contract-unit/sub-recipient/index.html>.*

5.3.3 **Financial Statements:** Subrecipients that intend to enter into legal agreements with the Department are required to submit financial information as specified in Management Questionnaire instructions.

5.3.3.4 **Exemptions:** The Department will not request audited financial statements from or perform Financial Risk Analyses for the following organizations:

5.3.3.4.1 The University and Community College Systems of NH. These organizations are component units of the State, which is ultimately financially liable for them.

5.3.3.4.2 Political Subdivisions, which includes counties and municipalities.

5.3.3.4.3 Subrecipients who are not required to produce financial statements, audited or certified, and only file annual tax returns.

5.3.4 **Financial Risk Analysis (FRA):** The BCP’s Administrator of Federal Audit Oversight inputs ten different financial data points into the Financial Risk Analysis Tool. The tool applies weights to each financial data point and a financial score is populated. The subrecipient is assigned a Green, Yellow, Red or N/A financial risk, based on the financial risk score that is used for the financial question on the RAT as described below in section 5.3.6, which is determined using the following ratios and scoring methodology:

SCORING METHODOLOGY		
<p>SCORING METHOD: Uses a fixed value for each ratio. The ratios of the vendors as calculated using the data within the respective financial statements is compared to a fixed guideline target score. The actual score is calculated as a percentage of the target value. For instance the current ratio target value is ratio is 1.0:1, expressed as a number it equals 1. Therefore, if a particular company has a current ratio of 1.0:1 the score for that ratio would be 100%, as it is equal to 100% of the target or goal amount as entered into the "fixed guideline" field. If the company actually had a ratio of 1.2:1 the score calculated would be 100% + 20% = 120%. This calculation holds for all of the ratios where a higher ratio value is "better". As for debt ratios, a "lower" ratio value is better. The scoring for these is slightly different. The difference between the actual ratio and the guideline ratio is calculated as a percentage. For positive differences the difference percentage is a positive value, for negative differences the percentage is negative. This difference is either added or subtracted from the base of 100%. Therefore, if the difference of the guideline ratio is exceeded by the actual calculated ratio for a particular vendor by 20% then the score will be a positive 120%. Conversely, if the actual calculated ratio is 20% less than the guideline ratio the score will be 100% - 20% = 80%</p>		
RATIOS		
<i>Ratio</i>	<i>Category</i>	<i>Formula with Descriptions</i>
Days Revenue In Accounts Receivable Net	Liquidity	(Accounts receivable less allowance for doubtful accounts)/(revenue/365)
Current Ratio	Liquidity	Current assets / current liabilities
Days Expense In Working Capital	Liquidity	(Current assets - current liabilities) / ((revenue - operating income - depreciation)/365)
ROE(Net Increase To Net Assets)	Operating Results	Increase in net assets / net assets
Operation Income To Revenue	Operating Results	Operating income / revenue
Cash Flow % Of Revenue	Operating Results	(Increase in net assets + depreciation) / revenue
Debt To Equity	Leverage	(Total assets - net assets)/net assets
Long Term Debt To Equity	Leverage	Long term debt / net assets
Debt Ratio	Leverage	(Total assets - net assets)/total assets
Cash Flow To Total Debt	Reserve	(Op. Surplus + depreciation) / (total assets - net assets)

Days Expense In Available Net Assets	Reserve	Net assets / ((revenue - operating income - depreciation)/365)
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RISK ANALYSIS SUMMARY SHEET

RFP-2017-ABC-01-EXAMPLE

	BIDDER	HEALTH SCORE* - ALL YEARS AVERAGE	HEALTH SCORE* - LATEST YEAR RESULTS	HIGHEST RISK LEVEL MEASURED	SCORING BREAKDOWN - <i>ALL YEARS AVERAGE</i> (Minimum Score -200%, Maximum Score +200%)					SCORING BREAKDOWN - <i>Most Recent Year</i> (Minimum Score -200%, Maximum Score +200%)				
		Financial Risk Score %	Financial Risk Score % *	FINAL RISK LEVEL	LIQUIDITY (30%)	OPERATIONS (30%)	LEVERAGE (20%)	RESERVE (20%)	TOTAL (100%)	LIQUIDITY (30%)	OPERATIONS (30%)	LEVERAGE (20%)	RESERVE (20%)	TOTAL (100%)
1	VENDOR A	107.7%	61.0%	61.0%	22.6%	31.7%	13.3%	40.0%	107.7%	16.8%	(4.5%)	8.7%	40.0%	61.0%
2	VENDOR B	137.5%	146.7%	137.5%	21.6%	50.2%	25.6%	40.0%	137.5%	25.3%	57.2%	24.3%	40.0%	146.7%
3	VENDOR C	117.3%	150.6%	117.3%	20.0%	30.9%	30.7%	35.7%	117.3%	20.0%	60.0%	30.6%	40.0%	150.6%
4	VENDOR D	(69.7%)	(26.3%)	69.7%	(7.4%)	(28.7%)	(19.4%)	(14.1%)	(69.7%)	(8.4%)	(39.2%)	19.5%	1.8%	(26.3%)
5	VENDOR E	32.3%	52.1%	32.3%	5.9%	10.4%	16.0%	0.0%	32.3%	3.2%	5.3%	12.2%	31.5%	52.1%

- 5.3.4.1 **Green:** No financial basis upon which to require any enhanced financial monitoring.
- 5.3.4.2 **Yellow:** The vendor poses some financial risk but should not be monitored on more than a quarterly basis.
- 5.3.4.3 **Red:** Vendor represents a higher financial risk which could be a reason to require some form of enhanced monitoring, but at no more than on a monthly basis.
- 5.3.4.4 N/A: Unable to ascertain a reasonable risk score due to insufficiencies in the submitted information.

5.3.5 **Transmit Financial Risk Analysis to Program:** The BCP provides the completed FRA to Program, who may choose to use the FRA as an indicator of subrecipient risk.

5.3.6 **Risk Assessment Tool:** Program must complete the RAT for all subrecipients using data from the Management Questionnaire. They may use the FRA. RAT's are not required for contractors. *The Risk Assessment Tool is located [here: http://intranet/contract-unit/sub-recipient/index.html](http://intranet/contract-unit/sub-recipient/index.html).*

5.3.6.1 **Mandatory Approval:** The RAT must have a dated approval signature of the Program Manager or equivalent, or the Grants Administrator. Electronic signatures are an acceptable form of approval.

5.3.7 **Risk of Noncompliance:** Department staff are evaluating the subrecipient’s risk of noncompliance with subaward provisions, and applicable Federal and State statutes and regulations.

5.4 Subrecipient Monitoring Actions - Program

5.4.1 **Basic Required Monitoring Activities:** Basic required monitoring activities consist of reviews of documentation for reimbursements or spenddowns to confirm allowable costs, regular contract monitoring meetings, required financial reporting, performance reports, review of other documented requirements, whether required by the Federal Award, federal or state regulation or rule, or departmental policy. If no enhanced risks of non-compliance are identified by the RAT, no additional monitoring activities are required.

5.4.2 **Risks and Selection of Enhanced Monitoring Activities:** The completed RAT determines the level of risk posed by a subrecipient. Program may include previous experience with a subrecipient in the same or similar legal agreement to determine appropriate monitoring activities. Per Uniform Guidance, the Department must take appropriate action to mitigate each identified risk. If risks are present, Program must select monitoring activities with a logical connection to mitigate the identified risk(s) for each subaward. Program communicates these activities to the BCP to incorporate into the final subaward. In certain circumstances, basic monitoring activities can be appropriate to mitigate identified risks.

5.4.3 **Professional Judgment:** Professional judgment must be applied when selecting monitoring activities. There is no standard formula that can be used to address the risks identified through the RAT. Consequently, staff must take into account the context of each risk type and its relationship to the specific organization.

5.4.4 **Addressing Multiple Risks:** Where possible, a single monitoring action should be used to address multiple risks. Each risk identified does not require a corresponding monitoring activity. Instead, the Department staff should select monitoring activities that provide the widest degree of oversight while minimizing the total burden on time and resources.

5.4.5 **Enhanced Monitoring Activities:** The Department staff may utilize any monitoring activity to address identified risk providing there is a logical connection between the risk and the monitoring activity that ensures the subaward is used for authorized purposes, applicable subaward goals are achieved, and adherence to the subaward provisions, and applicable Federal and State statutes and regulations . Please document and retain applicable files, notes, or other evidence of monitoring for four years, or through the expiration of the subaward, including any renewals or amendments, whichever is longer. Possible monitoring activities include, but are not limited to:

- 5.4.5.1 **File Review:** Review subrecipient files to ensure that they are carrying out the subaward in accordance with requirements.
- 5.4.5.2 **Monitor Financial Solvency:** Review financial data on a monthly, quarterly, or semi-annual basis to verify a subrecipient has the ability to pay its bills, continue to operate, and carry out the subaward in accordance with applicable provisions.
- 5.4.5.3 **Provide Training or Technical Assistance:** Provide training or technical assistance to subrecipients to ensure programs are delivered as intended.
- 5.4.5.4 **On-Site Review:** Visit a subrecipient's location to review operating procedures, interview staff involved with administering the subaward, and inspect facilities to identify any potential problems that could result in noncompliance with the provisions of the subaward.
- 5.4.5.5 **Trend and Comparative Analysis:** Compare trends across similar subrecipients by population, per capita cost, or utilization rates on a monthly, quarterly, or semi-annual basis. This form of monitoring should be conducted consistently on all applicable legal agreements.
- 5.4.5.6 **Corrective Action Plan:** If a subrecipient is not meeting performance targets stipulated in the subaward, Department staff meet with the subrecipient to identify potential barriers or impediments, and establish a Corrective Action Plan to describe the methods the subrecipient will use to improve performance and how the Department staff will monitor progress towards meeting subaward requirements or goals.
- 5.4.5.7 **Monitoring Status:** Monitor the status of any lawsuit, investigation or inspection identified by the subrecipient; program specific Single Audit findings; and/or non-compliance with any State agency subaward by requesting regular progress reports, copies of finalized determinations, any corrective action plans, or other related documentation.

5.5 Final Selections of Subrecipient Monitoring Actions - Program

- 5.5.1 **Retention:** Program should retain a copy of the completed RAT for four years from the date of completion, or through the expiration of the legal agreement, including any renewals or amendments, whichever is longer; and Program must send a copy of the completed RAT to the BCP Specialist and to the Grants Office at DHHS-Grants@DHHS.nh.gov. The Grants Office must retain a copy of the completed RAT in the Centralized Inventory at least through the period required by 2 CFR 200.
- 5.5.2 **Provide Selected Monitoring Actions to BCP:** After Program completes the RAT with the appropriate monitoring activities for an individual subaward, it is provided to the BCP.

- 5.5.3 **Incorporation of Monitoring Actions:** The BCP shall incorporate the selected monitoring actions into the final subaward.
- 5.5.4 **Subaward Language:** The BCP shall utilize standardized language for monitoring activities where possible. In instances where a non-standard approach is used, the BCP will develop new language.

Section 6 - SANCTIONS

- 6.1 Any employee found to have violated this policy shall be subject to appropriate discipline, up to and including termination, as provided by the Administrative Rules of the Division of Personnel.

Section 7 – POLICY REVIEW

- 7.1 This policy will be reviewed annually by the Grants Administrator or designee.

Section 8 – VERSION CONTROL

Version	Date	Notes
1.0	03/05/2018	Original version.
2.0	08/01/2020	Second version.
2.1	11/16/2020	Version update.
3.0	08/19/2022	Third version.
3.1	08/03/2023	Version update.

Management Questionnaire



NH Department of Health and Human Services

DHHS Overview*

Office of the
Commissioner

Administrative Business Supports

- Legal & Regulatory
- Finance

Population Health

Division of Public Health

- Population Health & Community Services
- Infectious Disease Control
- Public Health Protection
- Laboratory Services
- Public Health Statistics and Information
- Public Health Systems, Policy & Performance
- Emergency Preparedness, Response and Recovery
- State Epidemiologist

Office of Health Equity

Division of Medicaid Services

- Clinical Operations
- Medicaid Policy
- Dental Services
- Health Care Reform
- Managed Care

DHHS 24/7 Facilities

- New Hampshire Hospital
- Glenclyff Home for the Elderly
- Sununu Youth Services Center

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* Overview represents DHHS program areas, functions, and business entities, not necessarily reporting structures.

Human Services & Behavioral Health

Division of Economic Stability

- Family Assistance
- Employment Supports
- Child Support Services
- Child Development & Head Start Collaboration

Division for Behavioral Health

- Mental Health
- Drug & Alcohol Services
- Children's Mental Health
- Housing Supports

Division of Long Term Supports & Services

- Adult Protection Services
- Adult & Aging Services
- Developmental Services
- Family Centered Services

Division for Children, Youth & Families

- Field Services
- Family, Community & Program Support
- Professional & Strategic Development
- Evaluation, Analytics & Reporting
- Sununu Youth Services Center

Operations

Division of Program Quality and Integrity

- Program Quality
- Program Integrity

Bureau of Human Resource Management

- Organizational Development & Training Services

Bureau of Information Services

- Data Management
- Data Warehouse
- Information Security
- Medicaid Management Information System
- DHHS Systems Oversight
- Linkage to DoIT
- Project Management and LEAN

Bureau of Facilities Maintenance & Office Services

- HHS Facilities & State Office
- Safety & Wellness
- Office Services
- Oversight – Institutional Services

Bureau of Communications & Public Information

Employee Assistance Program