



**THE STATE OF NEW HAMPSHIRE  
INSURANCE DEPARTMENT**

21 SOUTH FRUIT STREET SUITE 14  
CONCORD, NEW HAMPSHIRE 03301

FIS 18 042 44

Roger A. Seigny  
Commissioner

Alexander K. Feldvebel  
Deputy Commissioner

February 12, 2018

The Honorable Neal M. Kurk, Chairman  
Fiscal Committee of the General Court  
State House  
Concord, NH 03301

*[Signature]* 3/16/18  
Approved by Fiscal Committee Date

His Excellency, Governor Christopher T. Sununu  
and the Honorable Executive Council  
State House  
Concord, NH 03301

Requested Action

1. Pursuant to RSA 14:30-a, VI authorize the New Hampshire Insurance Department (NHID) to accept and expend federal grant funds in the amount of \$ 139,012 for FY 2018 from the U.S. Department of Health and Human Services ("USDHHS") for the purpose of improving the rate review process. This action is to be effective upon Fiscal Committee and Governor and Executive Council approval through September 18, 2018.
2. Pursuant to RSA 124:15 authorize NHID to increase class 046 (Consultants) appropriation to enter into new consultant contracts effective upon Fiscal Committee and Governor and Executive Council approval through September 18, 2018.

Funds will be budgeted as set forth in the table below. Source of Funds is 100% Federal Funds.

FY 2018 Rate Review Cycle IV  
02-24-24-240010-59300000

Fiscal Year 2018		
Class	Descriptions	New Appropriations
46	Consultants	\$139,012
	<b>Total New Appropriations:</b>	\$139,012
	<b>Source of Funds</b>	
0	Federal Funds	\$139,012

EXPLANATION

The New Hampshire Insurance Department (NHID) requests authorization to budget funds accounts in FY 2018.

Class 046      Increase the Consultants by \$ 139,012 to cover expenses for new consultant contracts to support changes to data collection tools and procedures associated with the public hearings concerning health insurance costs increases, until the Rate Review Cycle IV ends on September 18, 2018.

Your consideration of the request is appreciated.

Respectfully submitted,



Roger A. Sevigny

FISCAL SITUATION

U.S. Department of Health and Human Services Appropriation	\$1,179,000.00
FY 2018 Requested Appropriation	\$ 139,012.00
FY 2015 Appropriation	\$ 398,777.00
FY 2016 Continuing Resolution Appropriation	\$ 444,179.00
FY 2017 Agency Budget Request	\$ 197,032.00
Total Appropriation	<u>\$1,179,000.00</u>

1. DATE ISSUED MM/DD/YYYY 07/27/2017	2. CFDA NO. 93.511	3. ASSISTANCE TYPE Project Grant
1a. SUPERSEDES AWARD NOTICE dated 08/17/2016 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded		
4. GRANT NO. 4 PRPPR140070-01-02 Formerly	5. ACTION TYPE Post Award Amendment	
6. PROJECT PERIOD From MM/DD/YYYY 09/19/2014	Through MM/DD/YYYY 09/18/2018	
7. BUDGET PERIOD From MM/DD/YYYY 09/19/2014	Through MM/DD/YYYY 09/18/2018	

Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
Office of Acquisitions and Grants Management  
7500 Security Boulevard  
Baltimore, MD 21244-1850

**NOTICE OF AWARD**  
AUTHORIZATION (Legislation/Regulations)  
Section 2794 of the Public Health Service Act (Section 1003 of the  
Affordable Care Act)

8. TITLE OF PROJECT (OR PROGRAM)  
Grants to States to Support Health Insurance Rate Review and Increase Transparency in the Pricing of  
Medical Services, Cycle IV

9a. GRANTEE NAME AND ADDRESS  
State of New Hampshire Insurance Department  
21 S Fruit St  
-DUP3  
Concord, NH 03301-2428

9b. GRANTEE PROJECT DIRECTOR  
Mr. Alexander 88113 K. Feldvebel  
21 S Fruit St  
Concord, NH 03301-2428  
Phone: 603-271-2261

10a. GRANTEE AUTHORIZING OFFICIAL  
Mr. Alexander 88113 K. Feldvebel  
21 S Fruit St  
Concord, NH 03301-2428  
Phone: 603-271-2261

10b. FEDERAL PROJECT OFFICER  
James Taing  
7500 Security Boulevard  
null  
null  
Baltimore, MD 21244-null  
Phone: None

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)	
I Financial Assistance from the Federal Awarding Agency Only	II
II Total project costs including grant funds and all other financial participation	
a. Salaries and Wages .....	35,100.00
b. Fringe Benefits .....	2,685.00
c. Total Personnel Costs .....	37,785.00
d. Equipment .....	0.00
e. Supplies .....	0.00
f. Travel .....	0.00
g. Construction .....	0.00
h. Other .....	7,179.00
i. Contractual .....	1,134,036.00
j. TOTAL DIRECT COSTS	1,179,000.00
k. INDIRECT COSTS	0.00
l. TOTAL APPROVED BUDGET	1,179,000.00
m. Federal Share	1,179,000.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION	
a. Amount of Federal Financial Assistance (from item 11m)	1,179,000.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	1,179,000.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	0.00
13. Total Federal Funds Awarded to Date for Project Period	1,179,000.00

14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):			
YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 2		d. 5	
b. 3		e. 6	
c. 4		f. 7	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
a. DEDUCTION	b
b. ADDITIONAL COSTS	
c. MATCHING	
d. OTHER RESEARCH (Add / Deduct Option)	
e. OTHER (See REMARKS)	

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

a. The grant program legislation.  
b. The grant program regulations.  
c. This award notice including terms and conditions, if any, noted below under REMARKS.  
d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached -  Yes  No)

This Notice of Award approves the 12 Months No Cost Extension as per the grantee's request dated July 26, 2017.

GRANTS MANAGEMENT OFFICIAL: Christopher Clark, Grants Management Specialist

17. OBJ CLASS 4115	18a. VENDOR CODE 1026000618M1	18b. EIN 026000618	19. DUNS 808591051	20. CONG. DIST. 02
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 4-5992933	b. PRPPR0070A	c. IPR	d. \$0.00	e. 75X0112
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.