

ANNOUNCING PROVIDER FUNDING OPPORTUNITIES

The New Hampshire (NH) Department of Health and Human Services (DHHS), Division of Public Health (DPHS), **NH CARE Program is currently accepting New Provider Agreements with medical providers for one or more of the following medical services:**

- Oral Health Services,
- Mental Health and Substance Use Disorder Care Services,
- Outpatient/Ambulatory Health Services and TBFA,
- Home and Community-Based Health Services, and
- Home Health Care Services.

NOTE: The new contract binder and vetting process removes much of the administrative constraints found within the prior contracting procedure. It eliminates the application step as well as the steps leading to Governor and Counsel (G&C) approval since the attached contract binder received G&C approval on March 24, 2021.

The U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), under Part B of the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, currently fund the NH CARE Program.

The goals of NH CARE Program New Provider Agreements are to provide access to high-quality medical care and essential support services to NH residents living with Human Immunodeficiency Virus (HIV) statewide, enrolled in NH CARE.

If you are a medical provider interested in providing one or more of the services identified above to individuals enrolled in the NH CARE Program, please consider submitting an Agreement. Agreements are accepted, for these core medical services, on a continual basis.

HOW TO APPLY

Follow the steps below to become a contracted provider.

Step 1

Download and print the New Provider Agreement (*pdf*) and NH CARE Program Provider Agreement Cover Sheet Checklist (*pdf*).

Step 2

Select core medical service(s) Appendix/Appendices your Agency, Hospital System, Practice or Organization provides. Attach a comprehensive list of key contact(s) and locations, if you are an Agency with one or more subsidiaries, a provider with ancillary service agreements or a Parent Corporation with one or more subsidiaries.

- Appendix A: Oral Health Services
- Appendix B: Mental Health and Substance Use Disorder Care Services
- Appendix C: Outpatient/Ambulatory Health Services and TBFA
- Appendix D: Home and Community-Based Health Services
- Appendix E: Home Health Care Services

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Step 3

Signing authority completes the following items.

- Please fill in Provider Agreement page 1 of 10;
- Contractor (Vendor) Initials and date pages 1-9, Exhibit A, DHHS Information Security Requirements;
- Vendor Initials and date pages 1-2, Exhibit D, Certification Regarding Debarment, Suspension and Other Responsibility Matters;
- Vendor Initials and date pages 1-2 Exhibit E, Certification of Compliance with Requirements Pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower Protections;
- Vendor initials and date page 1-1 Exhibit F, Certification Regarding Environmental Tobacco Smoke;
- Please fill in, vendor initials and date page 1 of 1 Exhibit G, Certification Regarding the Federal Funding Accountability And Transparency Act (FFATA) Compliance;

Step 4

At a suitable time, return the fully executed New Provider Agreement including the NH CARE Program Provider Agreement Cover Sheet Checklist *pdf* and required attachments electronically to the NH CARE Program. (See contact information below.)

NOTE: The NH CARE Program will notify you upon receipt of your completed New Provider Agreement binder and consult with you on next steps.

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