

Notice Number 2023-65

Rule Number He-W 686.01

1. Agency Name & Address:

**Dept. of Health and Human Services
Bureau of Family Assistance
129 Pleasant St., Brown Bldg.
Concord, NH 03301**

2. RSA Authority: RSA 167:83, II(g) & (h)
3. Federal Authority: 45 CFR 234.60 & 45 CFR 234.70
4. Type of Action:
Adoption _____
Repeal _____
Readoption _____
Readoption w/amendment X

5. Short Title: **Protective and Vendor Payments**

6. (a) Summary of what the rule says and of any proposed amendments:

He-W 686.01 specifies the circumstances under which a protective payee may be designated for all categories of financial assistance, who may and may not serve as a protective payee, the responsibilities of the protective payee, how to initiate vendor payments, and when a vendor payment shall not be made.

The Department of Health and Human Services is proposing to readopt with amendment He-W 686.01 by:

- **Replacing “applicant”, “recipient”, and “client” with “individual” and replacing “district office” with “department” for consistency with other administrative rules;**
- **Removing gender pronouns; and**
- **Replacing the term “mentally retarded” with “intellectually disabled”.**

6. (b) Brief description of the groups affected:

Individuals who are protective payees in the categories of financial assistance.

6. (c) Specific section or sections of state statute or federal statute or regulation which the rule is intended to implement:

Rule	Specific State or Federal Statutes or Regulations the Rule Implements
He-W 686.01	RSA 167:3-c, I; RSA 167:5; RSA 167:26; RSA 167:83, II(g) & (h); RSA 170-B:2, IX; RSA 463:2, IV; RSA 463-A:1, IV; RSA 464-A:2, III; RSA 464-A:2, VIII, IX, & XIV-b; 45 CFR 234.60; 45 CFR 234.70

7. Contact person for copies and questions including requests to accommodate persons with disabilities:

Name: **Nicole Valanzola** Title: **Rules Coordinator –
Administrative Rules Unit**

Address: **Dep. of Health and Human Services** Phone #: **(603) 271-9640**
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129 Pleasant Street, 2nd Floor E-mail: nicole.valanzola@dhhs.nh.gov
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TTY/TDD Access: Relay NH 1-800-735-2964
or dial 711 (in NH)

The proposed rules may be viewed and downloaded at:

<http://www.dhhs.nh.gov/oos/aru/comment.htm>

8. Deadline for submission of materials in writing or, if practicable for the agency, in the electronic format specified: **Tuesday, April 18, 2023**

Fax

E-mail

Other format (specify):

9. Public hearing scheduled for:

Date and Time: **Tuesday, April 11, 2023 at 2:00 pm**

Place: [**DHHS Brown Bldg., Auditorium, 129 Pleasant St., Concord, NH**](#)

10. Fiscal Impact Statement (Prepared by Legislative Budget Assistant):

FIS # 23:029 , dated 2/24/2023

1. Comparison of the costs of the proposed rule(s) to the existing rule(s):

There is no difference in cost when comparing the proposed rule to the existing rule.

2. Cite the Federal mandate. Identify the impact on state funds:

No federal mandate, no impact on state funds.

3. Cost and benefits of the proposed rule(s):

A. To State general or State special funds:

None.

B. To State citizens and political subdivisions:

None.

C. To independently owned businesses:

None.

11. Statement Relative to Part I, Article 28-a of the N.H. Constitution:

The proposed rule modifies an existing program or responsibility, but does not mandate any fees, duties, or expenditures on the political subdivisions of the state, and therefore does not violate Part I, Article 28-a of the N.H. Constitution.