



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**LEGAL AND REGULATORY SERVICES**  
**HEALTH FACILITIES LICENSING & CERTIFICATION**

Lori A. Weaver  
Commissioner

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November 18, 2025

Scott Logan  
Social Security Administration  
Office of Income Security Programs  
Keys Section  
2518 Robert M. Ball Building  
6401 Security Boulevard  
Baltimore, MD 21235

Re: Fiscal Year 2026 Keys Certification Letter

Dear Mr. Logan,

I am writing in my capacity as Manager of the New Hampshire Department of Health and Human Services, Bureau of Licensing and Certification. This Bureau is comprised of several licensing units, including the Health Facility Licensing Unit and the Community Residence Certification Unit. I am writing in response to your letter dated September 5, 2025, requesting submission of a Keys Certification.

The Health Facility Licensing Unit inspects and licenses or certifies a variety of residential settings that offer an alternative to institutional living for the elderly and individuals with disabilities. These facilities are regulated through different statutory and administrative rules. These include:

- Certified Community Residences serving up to three individuals with developmental disabilities, mental illness, or acquired brain disorder. These residences are certified and inspected under RSA 126-A, NH Administrative Rule He-M 1001, and NH Administrative Rule He-M 1002.
- Licensed Community Residences serving four or more individuals with developmental disabilities, mental illness, or acquired brain disorder. These residences are licensed and inspected under RSA 151 and NH Administrative Rule He-P 814.
- Resident Care Facilities providing residential care. These are licensed and inspected under RSA 151 and NH Administrative Rule He-P 804.
- Supported Residential Health Care Facilities providing supported residential health care. These are licensed and inspected under RSA 151 and NH Administrative Rule He-P 805.
- Adult Family Care Residences. These are licensed under RSA 151 and NH Administrative Rule He-P 813

The Health Facility Licensing Unit currently employs one Clinical Licensing Unit Chief as well as five full-time Licensing and Evaluation Coordinators who conduct clinical and life safety inspections of the Residential and Supported Residential Health Care Facilities, Licensed Community Residences, and Adult Family Care Residences. Each Residential and Supported Resident Health Care Facility, Licensed Community Residence, and Adult Family care Residence undergoes at least two annual unannounced on-site surveys, one clinical and one Life Safety, to ensure that these facilities are following the applicable state statute, state licensing and/or certification rule, and state and local fire code. The Community Residence Certification Unit currently employs a supervisor and five full time Licensing and Evaluation Coordinators. These Licensing and Evaluation Coordinators conduct annual inspections of the certified Community residences, licensed Community Residences, and the Adult Family Care Residences. The Health Facilities Licensing Unit also investigates complaints that allege a violation of the applicable statute or administrative rule. Complaints relative to certified Community Residences are not investigated by the Bureau. Rather, they are investigated by the New Hampshire Department of Health and Human Services, Bureau of Developmental Disabilities.

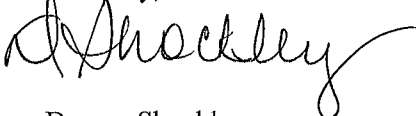
Each residence or facility undergoes an inspection before a certification or license is issued. Licensed facilities undergo two on-site inspections, one clinical and one life safety. Licenses must be renewed annually. Community Residence certifications are valid for either one year or two years depending upon the number of deficiencies cited during the course of the inspection. If deficiencies are cited during the course of an inspection or complaint investigation, a deficiency report is issued, and the residence or facility is required to submit Plan of Correction (POC) indicating what corrective action it plans to take to remedy the deficiency. Failure to submit an acceptable POC, failure to implement corrective action pursuant to an accepted POC, or failure to maintain the implementation of corrective action constitute grounds for enforcement action. Such enforcement action could entail the issuance of a directed POC, imposition of an administrative fine, or suspension or revocation of certification or license. Deficiency reports are public documents that are uploaded to our website and can be accessed and downloaded by the public.

He-P and He-M series of administrative rules are updated regularly and available to the public on the Department of Health and Human Services website: [NH Health Facilities Administrative Rules](#). These rules include enforcement procedures and waiver procedures.

Waivers must be requested in writing. For most licensing and certification categories, waivers are permanent unless the Department approves them for a specific period of time. Waivers for certified community residences are valid for up to five years, but not longer, unless an extension is requested and granted.

Two thousand, six hundred, thirty-nine inspections were conducted. All residences and facilities that have been issued deficiency reports have submitted acceptable Plans of Correction. Seventy-one warnings were sent, and twenty-two fines were imposed. All fines were paid or are compliant with agreed upon payment plans and there are none are under appeal.

Sincerely,

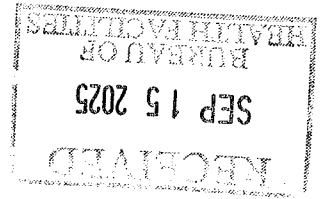
A handwritten signature in black ink, appearing to read 'D Shockley', with a stylized, flowing script.

Doreen Shockley  
Bureau of Licensing and Certification



## SOCIAL SECURITY

September 5, 2025



Doreen P. Shockley  
Manager  
Bureau of Licensing & Certification  
Department of Health and Human Services  
129 Pleasant St  
Concord NH 03301-3857

Dear Doreen P. Shockley:

This letter is to remind States that the Governor or their designee must submit an annual certification of compliance with Section 1616(e) of the Social Security Act (the Keys Amendment). The purpose of this statute is to assure the development of State standards for safe and appropriate residential settings as an alternative to institutional living for Supplemental Security Income (SSI) recipients; limit the use of SSI funds for substandard facilities; and publicize the standards and enforcement procedures for these facilities as a means of involving the public in monitoring the standards.

Section 1616(e) requires each State to:

- Designate one or more State or local authorities to establish and enforce standards for residential facilities where significant numbers of SSI recipients reside, or are likely to reside;
- Make annually available for public review a summary of the standards that are developed;
- Make available to any interested individual a copy of such standards along with the enforcement procedures, a list of waivers of such standards, and any violations; and
- Certify compliance with these provisions annually to the Commissioner of the Social Security Administration.

As required by Section 1616(e), we ask that you provide a certification each Federal fiscal year. If your State is in full compliance with this provision, please clearly state so in your certification letter. We would appreciate receiving your fiscal year 2026 certification by January 1, 2026. In addition, please send the certification for all agencies in one letter.

To ensure that our files are up to date, please send us any new or revised standards and enforcement procedures that you may have implemented since your last submission. The certifications, enforcement procedures and State standards are used as a reference source by Federal agencies and a variety of interested parties outside the Federal Government, including researchers.

**We are requesting you email a copy of your signed certification letter to [Keys.Cert@ssa.gov](mailto:Keys.Cert@ssa.gov).** A hard copy signed certification letter is no longer required.

Some important reminders on reporting deficient facilities are:

- You are required to report the name and address of any facility that no longer meets State standards and the effective date of the violation to your Social Security Administration (SSA) Regional Office.
- When a deficient facility again meets the standards, you should notify the Regional Office of the effective date of your approval of the facility.

If you do report a deficient facility, please also give the Regional Office the name and social security number of any SSI recipients in the facility.

Remember that you that you can request an electronic boarding home listing (obtained from SSA's State Date Exchange) to help you identify potential candidates for licensing. The listing contains information on specific residence addresses within each State where three or more unrelated SSI recipients reside. It is available upon request to the Regional Office.

Thank you for your continued cooperation and responsiveness. If you or members of your staff have any questions, please have them contact Betsy Blair at [Betsy.Blair@ssa.gov](mailto:Betsy.Blair@ssa.gov).

Sincerely,

*Scott Logan*

Scott Logan  
Keys Section  
Office of Income Security Programs