

CHAPTER Agr 3500 COST OF CARE

Statutory Authority: RSA 437:9, V and RSA 437-B:1, IV

PART Agr 3501 REASONABLE DAILY BOARDING AND CARE

Agr 3501.01 Maximum fees. The daily maximum allowable fees shall be:

- (a) No more than \$20 per non-livestock animal, using the definition of livestock in RSA 21:34-a,(II),(a),(4), regardless of species;
- (b) No more than \$40 per non-poultry livestock animal; and
- (c) No more than \$5 per poultry animal.

PART Ag 3502 EQUITABLE ACCESS TO FUNDS

Agr 3502.01 Review process.

- (a) All applications shall be for reimbursement of costs already incurred, and which are supported by the required documentation. There shall be no pre-approval for anticipated or other ineligible costs.
- (b) Review of applications by the commissioner shall occur within the first 10 business days of January, April, July, and October of each year.
- (c) Municipalities may submit an application at any time, though no more than one application per review period.
- (d) The completed “Cost of Care Reimbursement Form for Municipalities” shall be sent to “Commissioner, New Hampshire Department of Agriculture, Markets & Food, PO Box 2042, Concord, NH 03302-2042” or hand-delivered to New Hampshire Department of Agriculture, Markets & Food, State House Annex, 25 Capitol Street, Second Floor, Concord, NH 03301.
- (e) To be considered during the next review period, a completed application must be received by the commissioner’s office before close of business on December 31 for January review, March 31 for April review, June 30 for July review, or September 30 for October review.
- (f) In accordance with RSA 437-B:1, III, the commissioner shall respond to the application within 15 days, acknowledging receipt and any missing documentation that shall be required for approval.
- (g) Incomplete applications will not be considered until all required materials have been submitted to the department.
- (h) If available funds are not adequate to fully reimburse all complete, approved applications, each applicant shall be considered for a pro-rated portion as total available funds in the cost of care account, RSA 437-B:1, will allow.
- (i) Per RSA 437-B:1, III, no individual application shall be reimbursed more than \$500,000.

Agr 3502.02 Pre-requisites. No application shall be considered unless:

- (a) It is submitted on the “Cost of Care Reimbursement Form for Municipalities”;
- (b) In accordance with RSA 437-B:1, I, the payee is a municipality currently registered as a vendor with state treasurer and that is eligible for payment from state funds; and
- (c) In accordance with RSA 437-B:1, III, criminal charges have been filed pursuant to RSA 644:8 or RSA 644:8-a in the case referenced on the “Cost of Care Reimbursement Form for Municipalities”.

PART Agr 3503 EMERGENCY VETERINARY TREATMENT

Agr 3503.01 Emergency veterinary treatment. Application for reimbursement of emergency veterinary treatment shall:

- (a) Be made as part of the regular application process;
- (b) Be accompanied by a written statement from a veterinarian currently licensed pursuant to RSA 332-B indicating that the specific treatment was necessary and appropriate;
- (c) Be capped at \$500 per animal; and
- (d) Be capped at \$5000 per court case.

PART Agr 3504 FORMS

Agr 3504.01 Cost of Care Reimbursement Form for Municipalities.

(a) The “Cost of Care Reimbursement Form for Municipalities” may be submitted once per review period, by an arresting officer or their designee, on behalf of a municipality, to the commissioner, in order to apply for reimbursement of the costs of care incurred from caring for animals pending the resolution of any action brought for animal cruelty under RSA 644:8 or RSA 644:8-a.

(b) The arresting officer or their designee shall provide the following on the form:

- (1) Municipality name;
- (2) Municipality business address;
- (3) Municipality business telephone number;
- (4) Name and title of arresting officer;
- (5) Court case title and docket number;
- (6) Municipality vendor identification number;

(7) Certification by the arresting officer or their designee that the application is correct in all its particulars; and

(8) Arresting officer or designee signature, title, and date signed.

(c) Total requested reimbursement for the dates indicated shall be determined by arresting officer or their designee by:

- (1) Indicating the date range and total number of days covered by the application;
- (2) Separately listing for non-livestock animals:
 - a. The number of non-livestock animals for which care was provided on each day of the specified date range; and
 - b. The total number of reimbursable days by adding the total number of non-livestock animals cared for on each day of the specified date range;
- (3) Multiplying the total number of reimbursable non-livestock days by \$20;
- (4) Separately listing the number of days of boarding and care provided for livestock animals:
 - a. The number of livestock animals for which care was provided on each day of the specified date range; and
 - b. The total number of reimbursable days by adding the total number of livestock animals cared for on each day of the specified date range;
- (5) Multiplying the total number of reimbursable livestock days by \$40;
- (6) Separately listing the number of days of boarding and care provided for poultry animals:
 - a. The number of poultry animals for which care was provided on each day of the specified date range; and
 - b. The total number of reimbursable days by adding the total number of poultry animals cared for on each day of the specified date range;
- (7) Multiplying the total number of reimbursable poultry days by \$5;
- (8) Separately listing costs incurred by animal for emergency veterinary care, not to exceed \$500 per animal, during the specified date range;
- (9) Adding the total for emergency veterinary care, not to exceed \$5000 per court case, during the specified date range;
- (10) Adding the subtotals to calculate the requested reimbursement total; and
- (11) Attaching to the form:

- a. Invoices or billing records from entities providing routine daily boarding and care of animals, including the date range, total fee, the daily fee per animal, and the numbers and types of animals cared for;
- b. Invoices from veterinarians who provided emergency veterinary treatment; and
- c. Written statements from veterinarians who provided emergency veterinary treatment indicating that the specific treatment was necessary and appropriate.

(d) The form shall include a place for the administrator to sign and date that the administrator received the invoice from the participating veterinarian.

(e) An applicant shall be notified of an incomplete application at the time of receipt by the commissioner in accordance with RSA 541-A:29.

(f) Upon review by the commissioner, if an applicant meets the requirements of Agr 3502.01, then the commissioner shall:

- (1) Sign and date Part 2 – Certification by Commissioner section of the form certifying approval was granted; and
- (2) Submit the form to the state treasurer for payment.

APPENDIX

RULE NUMBER	STATUTE IMPLEMENTED
Agr 3501	RSA 437:9, V
Agr 3502 thru Agr 3504	RSA 437-B:1, IV