



State of New Hampshire

DEPARTMENT OF SAFETY
JAMES H. HAYES BLDG. 33 HAZEN DR.
CONCORD, N.H. 03305
(603) 271-2791

ROBERT L. QUINN
COMMISSIONER

RICHARD C. BAILEY, JR.
ASSISTANT COMMISSIONER

EDDIE EDWARDS
ASSISTANT COMMISSIONER

May 25, 2022

The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court

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

REQUESTED ACTION

1. Pursuant to RSA 14:30-a, VI, authorize the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services, to extend the date from June 30, 2022 to June 30, 2023 only from the New Hampshire Department of Health and Human Services, Division of Public Health Services, to develop and administer a statewide framework for Mobile Integrated Healthcare and Inter-facility transfers. This item was originally approved by the Fiscal Committee on October 22, 2021, Item# FIS 21-296 and approved by Governor and Council on October 27, 2021, Item#100. Effective upon Fiscal Committee and Governor and Council approval through June 30, 2023.

2. Pursuant to RSA 124:15, and contingent upon the approval of requested action #1, authorize the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services, to continue to fund one temporary full time Program Specialist III position (LG 23) and two temporary part time Program Specialist II (LG 2) positions to develop and administer a statewide framework for Mobile Integrated Healthcare and Inter-facility transfers. Effective upon Fiscal Committee and Governor and Council through June 30, 2023.

EXPLANATION

The purpose of the \$370,932 in Rural Health Grant funds is to better integrate local emergency medical services personnel and resources into the larger state healthcare system to prevent unnecessary emergency department visits, hospital admissions and/or readmissions. The Division of Fire Standards and Training and Emergency Medical Service (Division), Bureau of Emergency Medical Services (Bureau), is the state licensing body for Mobile Integrated Healthcare Services and for all Inter-facility transports agencies. These funds support one (1) full-time temporary position and two (2) part-time positions to educate and provide training and support to local Mobile Integrated Healthcare and Inter-facility Transports programs. These positions focus on building a statewide framework to enable local emergency medical services units to implement or enhance their own programs.

Expanding mobile integrated healthcare programs throughout the State, will result in decreased hospital admissions, decreased costs to patients, and increased savings to commercial insurance companies. Examining and building consistent guidelines for Inter-facility Transports will enable providers to effectively allocate resources to transport patients to facilities that can provide the appropriate level of care in a timely manner. This is especially important in our more rural areas where hospitals may not be able to provide certain lifesaving procedures.

The Division will utilize these funds to achieve the following program goals and objectives:

1. Develop a data analysis system relative to MIH and IFT.
2. Assist local EMS services in implementing or enhancing their own programs.
3. Decrease hospital re-admissions.
4. Decrease costs of treatments to patients.

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The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
May 25, 2022
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5. Improve integration of EMS in to the health care system.
6. Increase savings to commercial insurance companies.
7. Reduce unnecessary EMS patient transports to hospitals.
8. Develop a structure to enable hospitals to properly allocate resources for inter-facility transfers.
9. Prioritize programs and enhancements in rural portions of the state.
10. Develop educational programs.
11. Deliver educational programs.
12. Develop methods for increasing/expanding these services.
13. Recommend State of NH EMS Patient Care protocols.
14. Provide oversight to new and existing programs.

To date, the full-time temporary Program Specialist III has started the process of outreach to hospitals and emergency medical services units and begun to developing current data trends in both of these areas. Over the course of the next year this program will continue to research national and local trends in these areas, develop and provide education, develop methods for increasing and expanding these services, review and recommend changes to new and existing emergency medical service patient care protocols, and to review and provide oversight to any existing or new programs established by hospitals and/or emergency medical services units.

The following information is provided in accordance with the comptroller's instructional memorandum dated September 21, 1981.

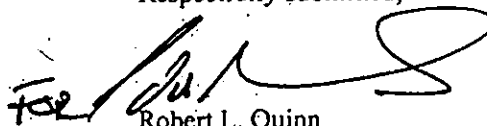
- 1) *List of personnel involved:* (1) Program Specialist III (LG 23), (2) Program Specialist II (LG21)
- 2) *Nature, Need, and Duration:* These positions are needed to assist FSTEMS with operations and administration. The proposed grant funding for this position ends on September 30, 2023.
- 3) *Relationship to existing agency programs:* These positions will provide support to FSTEMS operations and administration.
- 4) *Has a similar program been requested of the legislature and denied?* No.
- 5) *Why wasn't funding included in the agency's budget request?* The Department of Health and Human Services approached the Division about expanding these programs through grant funding they acquired.
- 6) *Can portions of the grant funds be utilized?* All grant funds must be used for eligible work within the program area.
- 7) *Estimate the funds required to continue this position:* Funds for these positions are estimated at \$302,457.00 for the duration of the grants through June 30, 2023.

The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court

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and the Honorable Council
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The original request for funds was approved by the Fiscal Committee on October 22, 2021, Item# FIS 21-296.
Authorization is being requested to continue this program through June 30, 2023.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "R. Quinn", is written over a horizontal line. The signature is stylized and cursive.

Robert L. Quinn
Commissioner of Safety



State of New Hampshire

DEPARTMENT OF SAFETY
 JAMES H. HAYES BLDG. 33 HAZEN DR
 CONCORD, N.H. 03305
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RICHARD C. BAILEY, JR.
 ASSISTANT COMMISSIONER

ROBERT L. QUINN
 COMMISSIONER

EDDIE EDWARDS
 ASSISTANT COMMISSIONER

September 30, 2021

The Honorable Ken Weyler, Chairman
 Fiscal Committee of the General Court
 State House
 Concord, New Hampshire 03301

FIS 21-296
 10/22/2021

G&C #100
 10/27/2021

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

REQUESTED ACTION

1. Pursuant to RSA 14:30-a, VI, authorize the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services, to accept and expend funds from the New Hampshire Department of Health and Human Services, Division of Public Health Services, in the amount of \$370,932.00 to development and administer a statewide framework for Mobile Integrated Healthcare and Inter-facility transfers. Effective upon Fiscal Committee and Governor and Council approval through June 30, 2022. Funding source: 100% Transfer from other agencies.

2. Pursuant to RSA 124:15, and contingent upon the approval of requested action #1, authorize the Department of Safety, Division of Fire Standards and Training and Emergency Medical Services, to create one temporary full time Program Specialist III position (LG 23) and two temporary part time Program Specialist II (LG 21) positions to assist with the development and administration of a statewide framework for Mobile Integrated Healthcare and Inter-facility transfers. Effective upon Fiscal Committee and Governor and Council through June 30, 2022. Funding Source: 100% Transfer from other agencies.

Funds are to be budgeted as follows:

02-023-023-237010-33400000 Dept. of Safety - FSTEMS – Fire Standards & Training Grant
 Activity Code: 23EMSRH202

<u>Class</u>	<u>Description</u>	<u>Current</u> <u>SFY2022 Adj</u> <u>Authorized</u>	<u>Requested</u> <u>Action</u>	<u>SFY2022</u> <u>Adjusted</u> <u>Authorized</u>
OOD-488595	Transfer from other Agencies	(\$95,879.00)	(\$370,932.00)	(\$466,811.00)
020-500212	Current Expense (Consumable)	\$0.00	\$2,625.00	\$2,625.00
030-500301	Equipment New Replacement	\$21,248.00	\$0.00	\$21,248.00
037-500311	Technology - Hardware	\$0.00	\$7,200.00	\$7,200.00
038-509038	Technology - Software	\$74,575.00	\$3,000.00	\$77,575.00
039-500180	Telecommunications	\$0.00	\$11,550.00	\$11,550.00
040-500800	Indirect Costs	\$6.00	\$0.00	\$6.00
041-500801	Audit Fund Set Aside	\$50.00	\$0.00	\$50.00
050-500109	Personal Service Temp App	\$0.00	\$148,552.00	\$148,552.00
059-500117	Temp Full Time	\$0.00	\$91,102.00	\$91,102.00
060-500601	Benefits	\$0.00	\$62,803.00	\$62,803.00
066-500546	Employee Training	\$0.00	\$6,000.00	\$6,000.00

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070-500704	In State Travel Reimbursement	\$0.00	\$8,100.00	\$8,100.00
102-500731	Contracts for Program Services	\$0.00	\$30,000.00	\$30,000.00
	Totals	\$95,879.00	\$370,932.00	\$466,811.00

EXPLANATION

The purpose of these funds is to establish the roles and responsibilities within the Department of Safety to better integrate local emergency medical services personnel and resources into the large healthcare system so that individuals with multiple chronic conditions or functional impairments can receive care and prevent unnecessary emergency department visits, hospital admissions and/or readmissions. The Division of Fire Standards and Training and Emergency Medical Service, Bureau of Emergency Medical Services, the licensing body for Mobile Integrated Healthcare Services and for all Inter-facility transports agencies will hire one (1) full time and two (2) part-time positions to educate and provide training to support the development of local Mobile Integrated Healthcare and Inter-facility Transports programs.

With the development of Mobile Integrated Healthcare programs throughout the State will reduce the number of ambulance transports and hospitals admissions by preventing both the exacerbation medical illness and/or acute trauma. These programs are especially import in rural communities where specialty health care may be hard to access. This grant will ensure quality patient care and that patients get referred or transported to the most appropriate facility without a delay in care.

Inter-facility transfers play a key role in transporting individuals whose sickness and trauma cannot be prevented and require a higher level of care than the receiving hospital can administer. These transfers are in coordination with local emergency medical services units and critical access hospitals which provide paramedic or critical care services to these patients during a transfer from one hospital to a hospital of higher care.

Developing a robust state framework for these programs will increase the level of care patients receive and will create a system to efficiently and effectively transfer patients timely to receive the care they required. All of the State's critical access hospitals are in rural parts of the State which require a lengthy transport time to a facility of higher care. The goal of each of these programs is to reduce the amount of time it takes to treats these patients or transfer them to a higher level of care.

The overall effectiveness of this grant will be determined by the number of emergency medical services units and providers trained in the areas of Mobile Integrated Healthcare and Inter-facility transfers. Additionally, the intent of this grant will be the expansion of Mobile Integrated Healthcare programs in conjunction with critical access hospitals. Each these programs will be able to track the number of patients which have participated and in conjunction with the hospitals be able to determine the effectiveness of each program. Lastly, by researching, analyzing and providing training for Inter-facility transfers, this program should be able to reduce transports times for patients in need of a facility with a higher level of care.

Candidates for these positions will have a knowledge of New Hampshire emergency medical services as well as a working knowledge of being an emergency medical services provider in the State and/or New England.

The funds are to be budgeted as follows:

- Class 020 Current Expenses: to be used to purchase consumables to support the program, such as paper and ink
- Class 037 Technology Hardware: to be used to purchase computer equipment needed to support the grant program
- Class 038 Technology Software: to be used to purchase computer software needed to support the grant program
- Class 039 Telecommunications: to be used to provide phone and data to the staff assigned to the program

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- Class 050 Personal Service Temp: to be used to pay part time staff for developing both programs and to provide training to local first responders and agencies
- Class 059 Temp Full-Time: to be used to pay salaries for one new full-time temp positions supporting this program
- Class 060 Benefits: to pay the benefits associated with the program positions.
- Class 066 Employee Training: will provide funding for registration for staff training in relation to Mobile Integrated Healthcare and Inter-facility transports
- Class 070 In-State Travel: to be used to cover travel expenses associated with community outreach.
- Class 102 Contracts for Program Services: to be used to cover expenses related to bringing in contracted trainers to provide education to local first responders and agencies.

The following information is provided in accordance with the comptroller's instructional memorandum dated September 21, 1981.

- 1) *List of personnel involved:* (1) Program Specialist III (LG 23), (2) Program Specialist II (LG21)
- 2) *Nature, Need, and Duration:* These positions are needed to assist FSTEMS with operations and administration. The proposed grant funding for this position ends on September 30, 2023.
- 3) *Relationship to existing agency programs:* These positions will provide support to FSTEMS operations and administration.
- 4) *Has a similar program been requested of the legislature and denied?* No.
- 5) *Why wasn't funding included in the agency's budget request?* The Department of Health and Human Services approached the Division about expanding these programs through grant funding they acquired.
- 6) *Can portions of the grant funds be utilized?* All grant funds must be used for eligible work within the program area.
- 7) *Estimate the funds required to continue this position:* Funds for these positions are estimated at \$302,457.00 for the duration of the grants through June 30, 2023.

This grant was not budgeted in SFY 2022 because these funds were not available or anticipated during the development of the Department's SFY 22/23 biennial budget.

In the event that federal funds are no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Robert L. Quinn
Commissioner of Safety

**Fire Standards and Training and Emergency Medical Services
Fire Standards and Training Grant
Fiscal Situation**

Federal Funds Awarded:

FFY2021 Highway Safety EMS Records Mgt (POP 10/1/2020 - 9/30/2021)	\$45,562.50
FFY2020 State Homeland Security Grant (POP 9/1/2020 - 9/31/2023)	\$21,248.00
FFY2022 DHHS Rural Health Grant (POP 9/1/2020 - 9/31/2023)	\$400,000.00
Total Grant Funds Awarded	\$466,810.50

Prior Fiscal Year Actual Expenses:

Less expenses in FY 2021	\$0.00
Less expenses in FY 2022	\$0.00
Total Prior Fiscal Year Actual Expenses	\$0.00

Net Grant Funds Remaining as of 9/30/2021 **\$466,810.50**

Less SFY 2022 Appropriation including prior year encumbrances (\$95,878.50)
Account 02-23-23-237000-33400000

Excess grant funds available to appropriate **\$370,932.00**

This Request **\$370,932.00**

MEMORANDUM OF UNDERSTANDING BETWEEN
THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES



AND

THE NEW HAMPSHIRE DEPARTMENT OF SAFETY

MOU-2022-DPHS-01-EMERG

1. GENERAL PROVISIONS

- 1.1. This Memorandum of Understanding (MOU) is between the New Hampshire Department of Health and Human Services (DHHS), 129 Pleasant Street, Concord, NH 03301 and the New Hampshire Department of Safety (DOS), 33 Hazen Drive, Concord, NH 03301 (referred to as the "Parties").
- 1.2. As a result of the COVID-19 pandemic, it is of the utmost importance that the public and businesses in the State of New Hampshire (NH) have adequate healthcare staffing resources to serve the public. To address this need, the Division of Public Health Services (DPHS) shall fund three positions at DOS which include: one (1) full-time Specialty Services Coordinator, one (1) part-time Mobile Integrated Healthcare (MIH) Program Coordinator, and one (1) part-time Inter-Facility Transfer (IFT) Program Coordinator.
- 1.3. The DOS's MIH program provides critical resources to communities, and reduces the amount of ambulance transports and admissions to hospitals by preventing both the exacerbation of medical illness and/or acute trauma. The DOS' IFT program assists the community by providing access to specialized transportation resources [Paramedic Inter-Facility Transport (PIFT) and Critical Care Transport (CCT)] to individuals whose sickness and trauma cannot be prevented and require a higher level of care than the receiving facility can handle. These positions support Critical Access Hospitals (CAH) to promote the proper care in the appropriate facility or in pre-hospital settings.
- 1.4. The purpose of this MOU is to set forth the roles and responsibilities of the DHHS and the DOS regarding the specialty services being provided by this funding, that fit most intuitively with the work that the Bureau of Emergency Medical Services (EMS) already conducts, throughout the State of NH. EMS is the licensing body for MIH Service and for all of the IFT agencies. These two program coordinators and the specialty coordinator will serve interested agencies and provide services best by integrating into the existing EMS system.
- 1.5. In connection with the performance of this MOU, the DHHS and the DOS shall comply with all applicable laws and regulations.

2. TERM

- 2.1. Effective date: This MOU is effective upon Governor and Executive Council approval.
- 2.2. Duration: The duration of this MOU is from the Effective Date through September 30, 2023. The parties will include a two year renewal option, pending additional federal funding and achievement of performance measures.
- 2.3. Modification: The parties may modify this MOU by mutual written agreement at any time, subject to appropriate State approval.
- 2.4. Termination: Either party may, at its sole discretion, terminate this MOU for any reason, in whole or in part, by providing thirty (30) days written notice to the other party. In the event of an early termination of this MOU for any other reason than the

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Memorandum of Understanding Between DHHS and DOS
MOU-2022-DPHS-01-EMERG



completion of services, DOS shall deliver to DHHS, not later than thirty (30) days after the termination, a "Termination Report" describing in detail all activities performed and the MOU funds used up to and including the date of termination. In the event the services and/or prescribed outcomes described within this MOU are not met to the satisfaction of DHHS, DHHS reserves the right to immediately terminate this Agreement upon written notice.

3. RESPONSIBILITIES OF THE NEW HAMPSHIRE DEPARTMENT OF SAFETY

3.1. The DOS agrees to:

3.1.1. Facilitate the hiring of the program coordinator positions and the specialty coordinator position, as soon as possible, with a goal of filling positions by December 31, 2021, dependent upon EMSs capacity to temporarily support those salaries and benefits as approved by the Division of Personnel. EMS will provide bi-weekly updates to the DHHS on the recruitment and hiring process. Positions to be recruited for include:

3.1.1.1. One (1) full-time, Specialty Services Coordinator, responsible for all activities of the Specialty Services sub-section within the Clinical Systems section of the EMS, overseeing the development and execution of all Specialty Services to include, but not limited to: the MIH and IFT Programs.

3.1.1.2. One (1) part-time, Mobile Integrated Healthcare Program Coordinator, responsible for the coordination of MIH operations within NH including infrastructure; serving as the primary channel for internal and external MIH stakeholder communications; overseeing the MIH application process to ensure proper customer service transparency and efficiency; and continuously improving MIH operations and outcomes by utilizing evidence-based methods.

3.1.1.3. One (1) part-time, Inter-Facility Transport Program Coordinator, responsible for the coordination of a broad range of functions related to the development, management, and oversight of the State of NH's PIET and CCT Programs. This includes, but is not limited to: advocacy and program development with other facilities and outside users; troubleshooting operational problems; and conducting training sessions.

3.1.2. Coordinate meetings as needed between interested CAHs and EMS agency/agencies to implement a MIH initiative and learn of the resources and technical assistance available to them.

3.1.3. Provide support to CAHs to promote the proper care in the appropriate facility or in pre-hospital settings.

3.1.4. Connect CAHs to agencies providing MIH or agencies that may partner to provide MIH support to hospital entities.

3.1.5. Support training, implementation, and partnership with local CAHs for agencies seeking to begin MIH programming.

3.1.6. Conduct bi-weekly meetings and provide updates on:

3.1.6.1. The status of the hiring process;

**Memorandum of Understanding Between DHHS and DOS
MOU-2022-DPHS-01-EMERG**



- 3.1.6.2. The number of times outreach activities were conducted, including but not limited to: emails, phone calls, and/or mail to EMS agencies and/or CAHs; and
- 3.1.6.3. The status of planning or execution of any trainings or education sessions targeting MIH or IFT, including attendance for completed trainings and participants with respective agencies represented.
- 3.1.7. Report data twice annually on the following:
 - 3.1.7.1. The number of EMS agencies and/or hospitals engaged in discussions on MIH and IFT;
 - 3.1.7.2. Barriers or challenges experienced in completion of deliverables; and
 - 3.1.7.3. Indicate and/or disclose any MIH program that begins and is deemed "unsustainable" by stakeholders.
- 3.2. Payments shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line item, as specified in Exhibits A-1, Budget through Exhibit A-3, Budget.
 - 3.2.1. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to DPHSContractBilling@dhhs.nh.gov; or invoices may be mailed to:

Lisa Cacciola, Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301
Lisa.M.Cacciola@dhhs.nh.gov

4: RESPONSIBILITIES OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

- 4.1. The DHHS agrees to:
 - 4.1.1. Provide funds through the Center for Disease Control (CDC) COVID Disparities Grant to recruit and hire three (3) positions assigned to the Bureau of EMS and shall ensure that the job descriptions meet the requirements of the Grant.
 - 4.1.2. Mail, or email, invoices to:

NH Department of Safety
Bureau of Emergency Medical Services
Attn: Jeffrey Phillips
33 Hazen Drive
Concord, NH 03301
Jeffrey.R.Phillips@dos.nh.gov

5: IT IS FURTHER UNDERSTOOD AND AGREED BETWEEN THE PARTIES:

- 5.1. Notwithstanding any provision of this MOU to the contrary, all obligations of the DHHS hereunder are contingent upon COVID Disparities Grant funds from the Center of Disease Control (CDC) and Prevention. Notwithstanding any provision of this MOU to the contrary, all obligations of DHHS hereunder, including without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds. DHHS shall not be required to transfer funds from



Memorandum of Understanding Between DHHS and DOS
MOU-2022-OPHS-01-EMERG

any other source in the event that COVID Disparities Grant funds from the Center of Disease Control (CDC) and Prevention are reduced or become unavailable:

- 5.1.1. The Parties may agree to changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.
- 5.2. Disputes arising under this MOU which cannot be resolved between the agencies shall be referred to the New Hampshire Department of Justice for review and resolution.
- 5.3. This Agreement shall be construed in accordance with the laws of the State of New Hampshire.
- 5.4. The parties hereto do not intend to benefit any third parties and this MOU shall not be construed to confer any such benefit.
- 5.5. In the event any of the provisions of this MOU are held to be contrary to any state or federal law, the remaining provisions of this MOU will remain in full force and effect.
- 5.6. This MOU, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire MOU and understandings between the parties, and supersedes all prior MOU and understandings relating hereto.
- 5.7. Nothing herein shall be construed as a waiver of sovereign immunity, such immunity being hereby specifically preserved.

APPROVALS:

Lori A. Shiblette
 Lori A. Shiblette
 Commissioner
 NH Department of Health and Human Services

8.27.21
 Date

Robert L. Quinn
 Robert L. Quinn
 Commissioner
 NH Department of Safety

8/26/21
 Date

The preceding Memorandum of Understanding, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

8/30/21
 Date:

Catherine Pinus
 Name: CATHERINE PINUS
 Title: Attorney

**Memorandum of Understanding Between DHHS and DOS
MOU-2022-DPHS-01-EMERG**



The foregoing Memorandum of Understanding was approved by the following authority of the State of New Hampshire:

Date: _____

Name: _____
Title: _____

Exhibit A-1, SFY 2022 Budget

New Hampshire Department of Health and Human Services										
Contractor Name: Department of Safety										
Project Title: Emergency Specialty Services										
Budget Period: 7/1/2021 - 6/30/2022										
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHS Contract Share			
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total	
1. Total Salary/Wages	\$7,179.00		\$7,179.00							
2. Employee Benefits	26,077.00		26,077.00							
3. Consultants	19,301.00		19,301.00							
4. Equipment	7,200.00		7,200.00							
Rental										
Repair and Maintenance										
Purchase/Depreciation										
5. Supplies										
Educational										
Lab										
Pharmacy										
Medical										
Other	1,125.00		1,125.00							
6. Travel	3,800.00		3,800.00							
7. Occupancy										
8. Current Expenses	4,830.00		4,830.00							
Telephone										
Postage										
Examinations										
Fuel and Travel										
Insurance										
Board Expenses										
9. Software	1,500.00		1,500.00							
10. Marketing/Communications										
11. Staff Education and Training	8,000.00		8,000.00							
12. Subcontractor Agreements	15,000.00		15,000.00							
13. Other (include entity mandatory)										
TOTAL	176,932.00		176,932.00							
Indirect As A Percent of Direct 0.0%										

Exhibit A-3, SFY 2023 Budget

New Hampshire Department of Health and Human Services											
Contractor Name: Department of Safety											
Project Title: Emergency Specialty Services											
Budget Period: 7/1/2023 - 6/30/2023											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHAS contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	118,794.00		118,794.00								
2. Employee Benefits	26,724.00		26,724.00								
3. Consultants	13,274.00		13,274.00								
4. Equipment:											
Rental											
Repair and Maintenance											
Purchase/Construction											
5. Supplies:											
Educational											
Lab											
Pharmacy											
Medical											
Office	1,500.00		1,500.00								
6. Travel	4,500.00		4,500.00								
7. Occupancy											
8. Current Expenses:											
Telephone	8,000.00		8,000.00								
Printing											
Supplies											
Acute and Legal											
Insurance											
Board Expenses											
9. Software	1,500.00		1,500.00								
10. Marketing/Communications											
11. Staff Education and Training	1,000.00		1,000.00								
12. Subcontract/Agreements	11,000.00		11,000.00								
13. Other (specify details monthly)											
TOTAL	201,500.00		201,500.00								
Indirect As A Percent of Direct											0.0%

Exhibit A-3, SFY 2024 Budget

New Hampshire Department of Health and Human Services											
Contractor Name: Department of Safety											
Project Title: Emergency Specialty Services											
Budget Period: 7/1/2023 - 6/30/2023											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHA's contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	19,187.00		19,187.00								
2. Employee Benefits	6,276.00		6,276.00								
3. Consultants											
4. Equipment											
Rental											
Repair and Maintenance											
Purchase/Depreciation											
5. Supplies											
Educational											
Lab											
Pharmacy											
Medical											
Office	375.00		375.00								
6. Travel	600.00		600.00								
7. Occupancy											
8. Current Expenses											
Telephone	1,630.00		1,630.00								
Postage											
Subscriptions											
Audit and Legal											
Insurance											
Other Expenses											
9. Software	1,500.00		1,500.00								
10. Marketing/Communications											
11. Staff Education and Training											
12. Subcontracts/Agreements											
13. Other (include details mandatory)											
TOTAL	23,068.00		23,068.00								

Indirect As A Percent of Direct

0.0%

407 mac



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Shibbette
Commissioner

Patricia M. Tilley
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4817 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

August 26, 2021

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a Memorandum of Understanding with the New Hampshire Department of Safety (VC#177878), Concord, NH, in the amount of \$400,000, to procure three (3) positions and conduct related trainings to support specialty services programs administered by the Bureau of Emergency Medical Services, with the option to renew for up to two (2) additional years, effective upon Governor and Council approval through September 30, 2023. 100% Federal Funds.

Funds are available in the following account for State Fiscal Years 2022 and 2023 and are anticipated to be available in State Fiscal Year 2024 upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

05-95-90-901010-57710000-HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POLICY AND PERFORMANCE, PH COVID-19 HEALTH DISPARITIES

State Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
2022	085-508523	Contracts for Opr Svc	90577150	\$170,932
2023	085-508523	Contracts for Opr Svc	90577150	\$200,000
2024	085-508523	Contracts for Opr Svc	90577150	\$29,068
			Total	\$400,000

EXPLANATION

The purpose of this Memorandum of Understanding is to establish the roles and responsibilities of the Department and the Department of Safety to better integrate local Emergency Medical Services personnel and resources into the larger healthcare system so that individuals with multiple chronic conditions or functional impairment can receive care and prevent unnecessary emergency department visits, hospital admissions and/or readmissions. The Bureau of Emergency Medical Services, the licensing body for Mobile Integrated Healthcare Services and for all Inter-Facility Transport agencies, will hire one (1) full time and two (2) part

time positions to educate and provide training to support the development of local Mobile Integrated Healthcare and Inter-Facility Transport programs.

The Department of Safety's Mobile Integrated Healthcare Program reduces the number of ambulance transports and admission to hospitals by preventing both the exacerbation of medical illness and/or acute trauma. The Department of Safety's Inter-Facility Transport Program assists communities by providing access to specialized transportation resources (Paramedic Inter-Facility Transport and Critical Care Transport) to individuals whose sickness and trauma cannot be prevented and require a higher level of care than the receiving facility can administer.

Mobile Integrated Healthcare Programs at the local level will improve care for individuals with complex medical conditions. This is especially important in rural communities where specialty health care may be hard to access. More than 5,500 licensed Emergency Medical Service (EMS) providers serving for the 295 units across the State will have the opportunity for additional training and education.

The Bureau of Emergency Medical Services will facilitate the hiring of the program coordinator positions and the specialty coordinator position, as soon as possible, with the goal of filling positions by December 31, 2021. Positions to be recruited for include:

- One (1) full-time, Specialty Services Coordinator;
- One (1) part-time, Mobile Integrated Healthcare Program Coordinator; and
- One (1) part-time, Inter-Facility Transport Program Coordinator.

The Bureau of Emergency Medical Services personnel shall provide an annual report of progress on both programs and meet bi-weekly with DHHS. The Bureau will support to Critical Access Hospitals and rural EMS agencies by:

- Ensuring quality-care of patients in the most appropriate facility or in pre-hospital settings;
- Connecting Critical Access Hospitals to agencies providing, or willing to provide Mobile Integrated Healthcare services as outlined within New Hampshire Patient Care Protocols;
- Supporting training, implementation, and partnerships with local Critical Access Hospitals for agencies seeking to begin Mobile Integrated Healthcare programming;

The Department will monitor the services by reviewing the following data elements:

- Obtaining the number of Emergency Medical Services agencies and/or hospitals engaged in discussions on Mobile Integrated Healthcare and Inter-Facility Transport;
- Identifying barriers and challenges experienced in completion of activities; and
- Reporting of any Mobile Integrated Healthcare Program that begins and is deemed "unsustainable" by stakeholders.

Should the Governor and Council not authorize this request, the Bureau of Emergency Medical Services would lack the resources and ability to grow the Mobile Integrated Healthcare Service and Inter-Facility Transport initiatives. The Department will not be able to complete the work plan submitted to the Centers for Disease Control and Prevention for this funding. Without these staffing resources, patient care in rural New Hampshire will not be appropriately supported and assisted by the Bureau of Emergency Medical Services to include additional evidence-based and high quality chronic disease care options through Mobile Integrated Healthcare Initiatives.

Area served: Statewide

Source of Federal Funds: CFDA #: 93.391, FAIN #: NH75OT000031

Respectfully submitted,



Lori A. Shabinette
Commissioner

MEMORANDUM OF UNDERSTANDING BETWEEN
THE STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES



AND

THE NEW HAMPSHIRE DEPARTMENT OF SAFETY
MOU-2022-DPHS-01-EMERG

1. GENERAL PROVISIONS

- 1.1. This Memorandum of Understanding (MOU) is between the New Hampshire Department of Health and Human Services (DHHS), 129 Pleasant Street, Concord, NH 03301 and the New Hampshire Department of Safety (DOS), 33 Hazen Drive, Concord, NH 03301 (referred to as the "Parties").
- 1.2. As a result of the COVID-19 pandemic, it is of the utmost importance that the public and businesses in the State of New Hampshire (NH) have adequate healthcare staffing resources to serve the public. To address this need, the Division of Public Health Services (DPHS) shall fund three positions at DOS which include: one (1) full-time Specialty Services Coordinator, one (1) part-time Mobile Integrated Healthcare (MIH) Program Coordinator, and one (1) part-time Inter-Facility Transfer (IFT) Program Coordinator.
- 1.3. The DOS's MIH program provides critical resources to communities, and reduces the amount of ambulance transports and admissions to hospitals by preventing both the exacerbation of medical illness and/or acute trauma. The DOS' IFT program assists the community by providing access to specialized transportation resources [Paramedic Inter-Facility Transport (PIFT) and Critical Care Transport (CCT)] to individuals whose sickness and trauma cannot be prevented and require a higher level of care than the receiving facility can handle. These positions support Critical Access Hospitals (CAH) to promote the proper care in the appropriate facility or in pre-hospital settings.
- 1.4. The purpose of this MOU is to set forth the roles and responsibilities of the DHHS and the DOS regarding the specialty services being provided by this funding, that fit most intuitively with the work that the Bureau of Emergency Medical Services (EMS) already conducts, throughout the State of NH. EMS is the licensing body for MIH Service and for all of the IFT agencies. These two program coordinators and the specialty coordinator will serve interested agencies and provide services best by integrating into the existing EMS system.
- 1.5. In connection with the performance of this MOU, the DHHS and the DOS shall comply with all applicable laws and regulations.

2. TERM

- 2.1. Effective date: This MOU is effective upon Governor and Executive Council approval.
- 2.2. Duration: The duration of this MOU is from the Effective Date through September 30, 2023. The parties will include a two year renewal option, pending additional federal funding and achievement of performance measures.
- 2.3. Modification: The parties may modify this MOU by mutual written agreement at any time, subject to appropriate State approval.
- 2.4. Termination: Either party may, at its sole discretion, terminate this MOU for any reason, in whole or in part, by providing thirty (30) days written notice to the other party. In the event of an early termination of this MOU for any other reason than the



completion of services, DOS shall deliver to DHHS, not later than thirty (30) days after the termination, a "Termination Report" describing in detail all activities performed and the MOU funds used up to and including the date of termination. In the event the services and/or prescribed outcomes described within this MOU are not met to the satisfaction of DHHS, DHHS reserves the right to immediately terminate this Agreement upon written notice.

3. RESPONSIBILITIES OF THE NEW HAMPSHIRE DEPARTMENT OF SAFETY

3.1. The DOS agrees to:

3.1.1. Facilitate the hiring of the program coordinator positions and the specialty coordinator position, as soon as possible, with a goal of filling positions by December 31, 2021, dependent upon EMSs capacity to temporarily support those salaries and benefits as approved by the Division of Personnel. EMS will provide bi-weekly updates to the DHHS on the recruitment and hiring process. Positions to be recruited for include:

3.1.1.1. One (1) full-time, Specialty Services Coordinator, responsible for all activities of the Specialty Services sub-section within the Clinical Systems section of the EMS, overseeing the development and execution of all Specialty Services to include, but not limited to: the MIH and IFT Programs.

3.1.1.2. One (1) part-time, Mobile Integrated Healthcare Program Coordinator, responsible for the coordination of MIH operations within NH including infrastructure; serving as the primary channel for internal and external MIH stakeholder communications; overseeing the MIH application process to ensure proper customer service, transparency and efficiency; and continuously improving MIH operations and outcomes by utilizing evidence-based methods.

3.1.1.3. One (1) part-time, Inter-Facility Transport Program Coordinator, responsible for the coordination of a broad range of functions related to the development, management, and oversight of the State of NH's PIFT and CCT Programs. This includes, but is not limited to: advocacy and program development with other facilities and outside users; troubleshooting operational problems; and conducting training sessions.

3.1.2. Coordinate meetings as needed between interested CAHs and EMS agency/agencies to implement a MIH initiative and learn of the resources and technical assistance available to them.

3.1.3. Provide support to CAHs to promote the proper care in the appropriate facility or in pre-hospital settings.

3.1.4. Connect CAHs to agencies providing MIH or agencies that may partner to provide MIH support to hospital entities.

3.1.5. Support training, implementation, and partnership with local CAHs for agencies seeking to begin MIH programming.

3.1.6. Conduct bi-weekly meetings and provide updates on:

3.1.6.1. The status of the hiring process;

Memorandum of Understanding Between DHHS and DOS
MOU-2022-DPHS-01-EMERG



- 3.1.6.2. The number of times outreach activities were conducted, including but not limited to: emails, phone calls, and/or mail to EMS agencies and/or CAHs; and
- 3.1.6.3. The status of planning or execution of any trainings or education sessions targeting MIH or IFT, including attendance for completed trainings and participants with respective agencies represented.
- 3.1.7. Report data twice annually on the following:
 - 3.1.7.1. The number of EMS agencies and/or hospitals engaged in discussions on MIH and IFT;
 - 3.1.7.2. Barriers or challenges experienced in completion of deliverables; and
 - 3.1.7.3. Indicate and/or disclose any MIH program that begins and is deemed "unsustainable" by stakeholders.
- 3.2. Payments shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line item, as specified in Exhibits A-1, Budget through Exhibit A-3, Budget.
 - 3.2.1. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to DPHSContractBilling@dhhs.nh.gov, or invoices may be mailed to:

Lisa Cacciola, Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301
Lisa.M.Cacciola@dhhs.nh.gov

4: RESPONSIBILITIES OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

- 4.1. The DHHS agrees to:
 - 4.1.1. Provide funds through the Center for Disease Control (CDC) COVID Disparities Grant to recruit and hire three (3) positions assigned to the Bureau of EMS and shall ensure that the job descriptions meet the requirements of the Grant.
 - 4.1.2. Mail, or email, invoices to:

NH Department of Safety
Bureau of Emergency Medical Services
Attn: Jeffrey Phillips
33 Hazen Drive
Concord, NH 03301
Jeffrey.R.Phillips@dos.nh.gov

5: IT IS FURTHER UNDERSTOOD AND AGREED BETWEEN THE PARTIES:

- 5.1. Notwithstanding any provision of this MOU to the contrary, all obligations of the DHHS hereunder are contingent upon COVID Disparities Grant funds from the Center of Disease Control (CDC) and Prevention. Notwithstanding any provision of this MOU to the contrary, all obligations of DHHS hereunder, including without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds. DHHS shall not be required to transfer funds from



Memorandum of Understanding Between DHHS and DOS
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any other source in the event that COVID Disparities Grant funds from the Center of Disease Control (CDC) and Prevention are reduced or become unavailable:

- 5.1.1. The Parties may agree to changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.
- 5.2. Disputes arising under this MOU which cannot be resolved between the agencies shall be referred to the New Hampshire Department of Justice for review and resolution.
- 5.3. This Agreement shall be construed in accordance with the laws of the State of New Hampshire.
- 5.4. The parties hereto do not intend to benefit any third parties and this MOU shall not be construed to confer any such benefit.
- 5.5. In the event any of the provisions of this MOU are held to be contrary to any state or federal law, the remaining provisions of this MOU will remain in full force and effect.
- 5.6. This MOU, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire MOU and understandings between the parties, and supersedes all prior MOU and understandings relating hereto.
- 5.7. Nothing herein shall be construed as a waiver of sovereign immunity, such immunity being hereby specifically preserved.

APPROVALS:

Lori A. Shiblette

Lori A. Shiblette
Commissioner
NH Department of Health and Human Services

8.27.21

Date

Robert L. Quinn

Robert L. Quinn
Commissioner
NH Department of Safety

8/26/21

Date

The preceding Memorandum of Understanding, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

8/30/21

Date:

Catherine Pinos

Name:
Title:

CATHERINE PINOS
Attorney

**Memorandum of Understanding Between DHHS and DOS
MOU-2022-DPHS-01-EMERG**



The foregoing Memorandum of Understanding was approved by the following authority of the State of New Hampshire:

Date: _____

Name: _____
Title: _____

Exhibit A-1, SFY 2022 Budget

New Hampshire Department of Health and Human Services											
Contractor Name: Department of Safety											
Project Title: Emergency Specialty Services											
Budget Period: 7/1/2021 - 6/30/2022											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	\$ 87,179.00	\$ -	\$ 87,179.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
2. Employee Benefits	\$ 26,077.00	\$ -	\$ 26,077.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
3. Consultants	\$ 19,301.00	\$ -	\$ 19,301.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
4. Equipment	\$ 7,200.00	\$ -	\$ 7,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Office	\$ 1,125.00	\$ -	\$ 1,125.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
6. Travel	\$ 3,500.00	\$ -	\$ 3,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
8. Current Expenses:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Telephone	\$ 4,950.00	\$ -	\$ 4,950.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Auto and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
9. Software	\$ 1,500.00	\$ -	\$ 1,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
11. Staff Education and Training	\$ 5,000.00	\$ -	\$ 5,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
12. Subcontracts/Agreements	\$ 15,000.00	\$ -	\$ 15,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
TOTAL	\$ 178,932.00	\$ -	\$ 178,932.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		

Indirect As A Percent of Direct

0.0%

Exhibit A-2, SFY 2023 Budget

New Hampshire Department of Health and Human Services

Contractor Name: Department of Safety

Project Title: Emergency Specialty Services

Budget Period: 7/1/2022 - 6/30/2023

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 119,796.00	\$ -	\$ 119,796.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 36,776.00	\$ -	\$ 36,776.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Consultants	\$ 13,378.00	\$ -	\$ 13,378.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1,500.00	\$ -	\$ 1,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 4,500.00	\$ -	\$ 4,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 6,800.00	\$ -	\$ 6,800.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 1,500.00	\$ -	\$ 1,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,000.00	\$ -	\$ 1,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontract Agreements	\$ 15,000.00	\$ -	\$ 15,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 290,066.00	\$ -	\$ 290,066.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Indirect As A Percent of Direct

0.0%

New Hampshire Department of Health and Human Services									
Contractor Name: Department of Safety									
Project Title: Emergency Specialty Services									
Budget Period: 7/1/2023 - 9/30/2023									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHRH contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	19,167.00		19,167.00						
2. Employee Benefits	5,876.00		5,876.00						
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office									
6. Travel	373.00		373.00						
7. Occupancy	300.00		300.00						
8. Current Expenses									
Telephone									
Postage	1,850.00		1,850.00						
Subscriptions									
Audit and Legal									
Insurance									
Board Expenses									
9. Software									
10. Marketing/Communications	1,500.00		1,500.00						
11. Staff Education and Training									
12. Subcontracts/Agreements									
13. Other (specify below mandatory):									
TOTAL	29,944.00		29,944.00						
Indirect As A Percent of Direct			0.0%						