



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-9203 1-800-351-1888

Nancy L. Rollins
Associate
Commissioner

Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

June 11, 2013

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, New Hampshire 03301

Sole Source
47.95% Federal
52.05% General

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into **sole source** amendments with vendors by increasing the price limitation by \$1,303,092.68 in aggregate from \$9,031,971.83 to \$10,335,064.51 in aggregate for a statewide continuum of services that include, information and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance and the Senior Medicare Patrol Project, and extending the completion date from June 30, 2013 to December 31, 2013, effective July 1, 2013 or date Governor and Executive Council approval, whichever is later.

Summary of contracted amounts by vendor:

Vendor	Amount
Community Action Program Belknap and Merrimack Counties, Inc.	\$ 146,836.29
Crotched Mountain Community Care, Inc.	\$ 189,237.36
Easter Seals New Hampshire, Inc.	\$ 247,084.16
Grafton County Senior Citizens Council, Inc.	\$ 142,959.92
Lakes Region Partnership for Public Health, Inc.	\$ 102,467.17
Monadnock Collaborative	\$ 108,251.85
Southwestern Community Services, Inc.	\$ 86,655.39
Strafford Network	\$ 106,289.76
Tri-County Community Action Program, Inc.	\$ 86,655.39
Visiting Nurse Home Care & Hospice of Carroll County	\$ 86,655.39
Total	\$1,303,092.68

Funds to support this request are anticipated to be available in the following accounts in State Fiscal Year 2014 upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts within the price limitation and amend the related terms of the contract without further approval from Governor and Executive Council.

05-95-48-481010-95650000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK (100% General Funds)

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05-95-48-481510-61800000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING (50% General Funds 50% Federal Funds)

05-95-48-481010-92550000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT (55.69% General Funds 44.31% Federal Funds)

05-95-48-481010-78720000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS (25% General Funds 75% Federal Funds)

05-95-48-481010-89250000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS (100% Federal Funds)

05-95-48-481010-33170000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS (25% General Funds and 75% Federal Funds)

Please see attachment for fiscal details.

EXPLANATION

The Department is requesting that the Governor and Executive Council approve a six-month extension to these existing **sole source** agreements. The requested action seeks approval of 10 agreements that represent \$1,303,092.68 total anticipated to be spent state-wide during this six month extension. The original agreements, approved by Governor and Executive Council on June 23, 2010 included a provision for the renewal of this contract for up to two years subject to the approval of Governor and Executive Council. The Department exercised the renewal option and submitted an amendment to the Governor and Executive Council on June 22, 2011 to extend the completion from June 30, 2011 to June 30, 2013. This extension is requested so that the Department ensures uninterrupted service delivery that support the goals to empower individuals to make informed decisions and to streamline access to long-term care support, consistent with the State's long-term care policy. The Department has experienced a delay in issuing a Request for Proposals due to exploring alternate service delivery options that provide a stronger person centered approach than the previous Request for Proposals.

The Department is currently working to develop and will be issuing a Request for Proposals before September 2013 to competitively bid for these services. The Request for Proposals will be developed to highlight the Department's objectives and include an expectation for the provision of person centered approach supportive of the Department's core values.

Under the Aging and Disability Resource Center Model, known in New Hampshire as the ServiceLink Resource Centers, the Contractors provide a single point for individuals to receive long term care support such as information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

The Contractors provide these services to: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

These Contractors continue to perform satisfactorily as demonstrated through site reviews and their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party revealed unbiased reports that verified that the contractors have exceeded the expected Outcome Measures set forth in the original contracts. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

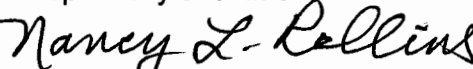
These contractors were originally selected through a competitive bid process. The Department issued a Request for Proposal published on the Department's website February 5, 2010. The evaluation committee recommended awarding agreements to these Contractors.

Area Served: Statewide.

Source of Funds: 47.95% Federal funds and 52.05% General funds.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

FINANCIAL DETAIL ATTACHMENT SHEET

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK (100% General Funds)

Community Action Program Belknap-Merrimack Counties, Inc. (Vendor #177203)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$58,532.86	\$0.00	\$58,532.86
102-500734	Contracts for Program Services	2012	\$58,532.86	\$0.00	\$58,532.86
102-500734	Contracts for Program Services	2013	\$58,532.86	\$0.00	\$58,532.86
102-500734	Contracts for Program Services	2014	\$0.00	\$29,260.00	\$29,260.00
		Subtotal	\$175,598.58	\$29,260.00	\$204,858.58

Crotched Mountain Community Care, Inc. (Vendor # 177293)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$79,817.54	\$0.00	\$79,817.54
102-500734	Contracts for Program Services	2012	\$79,817.54	\$0.00	\$79,817.54
102-500734	Contracts for Program Services	2013	\$79,817.54	\$0.00	\$79,817.54
102-500734	Contracts for Program Services	2014	\$0.00	\$39,900.00	\$39,900.00
		Subtotal	\$239,452.62	\$39,900.00	\$279,352.62

Easter Seals New Hampshire, Inc. (Vendor # 177204)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$106,423.39	\$0.00	\$106,423.39
102-500734	Contracts for Program Services	2012	\$106,423.39	\$0.00	\$106,423.39
102-500734	Contracts for Program Services	2013	\$106,423.39	\$0.00	\$106,423.39
102-500734	Contracts for Program Services	2014	\$0.00	\$53,200.00	\$53,200.00
		Subtotal	\$319,270.17	\$53,200.00	\$372,470.17

Grafton County Senior Citizens Council, Inc. (Vendor # 177675)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$58,532.86	\$0.00	\$58,532.86
102-500734	Contracts for Program Services	2012	\$58,532.86	\$0.00	\$58,532.86
102-500734	Contracts for Program Services	2013	\$58,532.86	\$0.00	\$58,532.86
102-500734	Contracts for Program Services	2014	\$0.00	\$29,260.00	\$29,260.00
		Subtotal	\$175,598.58	\$29,260.00	\$204,858.58

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$39,908.77	\$0.00	\$39,908.77
102-500734	Contracts for Program Services	2012	\$39,908.77	\$0.00	\$39,908.77
102-500734	Contracts for Program Services	2013	\$39,908.77	\$0.00	\$39,908.77
102-500734	Contracts for Program Services	2014	\$0.00	\$19,950.00	\$19,950.00
		Subtotal	\$119,726.31	\$19,950.00	\$139,676.31

Monadnock Collaborative (Vendor # 159303)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$42,569.36	\$0.00	\$42,569.36
102-500734	Contracts for Program Services	2012	\$42,569.36	\$0.00	\$42,569.36
102-500734	Contracts for Program Services	2013	\$42,569.36	\$0.00	\$42,569.36
102-500734	Contracts for Program Services	2014	\$0.00	\$21,280.00	\$21,280.00
		Subtotal	\$127,708.08	\$21,280.00	\$148,988.08

Southwestern Community Services, Inc. (Vendor # 177511)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2012	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2013	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2014	\$0.00	\$17,290.00	\$17,290.00
		Subtotal	\$103,762.80	\$17,290.00	\$121,052.80

Strafford Network (Vendor # 159217)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$42,569.36	\$0.00	\$42,569.36
102-500734	Contracts for Program Services	2012	\$42,569.36	\$0.00	\$42,569.36
102-500734	Contracts for Program Services	2013	\$42,569.36	\$0.00	\$42,569.36
102-500734	Contracts for Program Services	2014	\$0.00	\$21,280.00	\$21,280.00
		Subtotal	\$127,708.08	\$21,280.00	\$148,988.08

Tri County Community Action Program, Inc. (Vendor # 177195)

Class/Account	Contracts for Program Svcs	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2012	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2013	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2014	\$0.00	\$17,290.00	\$17,290.00
		Subtotal	\$103,762.80	\$17,290.00	\$121,052.80

Visiting Nurse Home Care & Hospice of Carroll County (Vendor # 225191)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500734	Contracts for Program Services	2011	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2012	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2013	\$34,587.60	\$0.00	\$34,587.60
102-500734	Contracts for Program Services	2014	\$0.00	\$17,290.00	\$17,290.00
		Subtotal	\$103,762.80	\$17,290.00	\$121,052.80

Total	\$1,596,350.82	\$266,000.00	\$1,862,350.82

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT AND COUNSELING (50% Federal Funds; 50% General Funds)

Community Action Program Belknap-Merrimack Counties, Inc. (Vendor #177203)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$141,537.84	\$0.00	\$141,537.84
550-500398	Assessment & Counseling	2012	\$141,537.84	\$0.00	\$141,537.84
550-500398	Assessment & Counseling	2013	\$141,537.84	\$0.00	\$141,537.84
550-500398	Assessment & Counseling	2014	\$0.00	\$70,768.92	\$70,768.92
		Subtotal	\$424,613.52	\$70,768.92	\$495,382.44

Crotched Mountain Community Care, Inc. (Vendor # 177293)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$193,006.15	\$0.00	\$193,006.15
550-500398	Assessment & Counseling	2012	\$193,006.15	\$0.00	\$193,006.15
550-500398	Assessment & Counseling	2013	\$193,006.15	\$0.00	\$193,006.15
550-500398	Assessment & Counseling	2014	\$0.00	\$96,503.08	\$96,503.08
		Subtotal	\$579,018.45	\$96,503.08	\$675,521.53

Easter Seals New Hampshire, Inc. (Vendor # 177204)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$257,341.53	\$0.00	\$257,341.53
550-500398	Assessment & Counseling	2012	\$257,341.53	\$0.00	\$257,341.53
550-500398	Assessment & Counseling	2013	\$257,341.53	\$0.00	\$257,341.53
550-500398	Assessment & Counseling	2014	\$0.00	\$128,670.77	\$128,670.77
		Subtotal	\$772,024.59	\$128,670.77	\$900,695.36

Grafton County Senior Citizens Council, Inc. (Vendor # 177675)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$141,537.84	\$0.00	\$141,537.84
550-500398	Assessment & Counseling	2012	\$141,537.84	\$0.00	\$141,537.84
550-500398	Assessment & Counseling	2013	\$141,537.84	\$0.00	\$141,537.84
550-500398	Assessment & Counseling	2014	\$0.00	\$70,768.92	\$70,768.92
		Subtotal	\$424,613.52	\$70,768.92	\$495,382.44

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$96,503.07	\$0.00	\$96,503.07
550-500398	Assessment & Counseling	2012	\$96,503.07	\$0.00	\$96,503.07
550-500398	Assessment & Counseling	2013	\$96,503.07	\$0.00	\$96,503.07
550-500398	Assessment & Counseling	2014	\$0.00	\$48,251.54	\$48,251.54
		Subtotal	\$289,509.21	\$48,251.54	\$337,760.75

Monadnock Collaborative (Vendor # 159303)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$102,936.61	\$0.00	\$102,936.61
550-500398	Assessment & Counseling	2012	\$102,936.61	\$0.00	\$102,936.61
550-500398	Assessment & Counseling	2013	\$102,936.61	\$0.00	\$102,936.61
550-500398	Assessment & Counseling	2014	\$0.00	\$51,468.31	\$51,468.31
		Subtotal	\$308,809.83	\$51,468.31	\$360,278.14

Southwestern Community Services, Inc. (Vendor # 177511)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2012	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2013	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2014	\$0.00	\$41,818.00	\$41,818.00
		Subtotal	\$250,908.00	\$41,818.00	\$292,726.00

Strafford Network (Vendor # 159217)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$102,936.61	\$0.00	\$102,936.61
550-500398	Assessment & Counseling	2012	\$102,936.61	\$0.00	\$102,936.61
550-500398	Assessment & Counseling	2013	\$102,936.61	\$0.00	\$102,936.61
550-500398	Assessment & Counseling	2014	\$0.00	\$51,468.31	\$51,468.31
		Subtotal	\$308,809.83	\$51,468.31	\$360,278.14

Tri County Community Action Program, Inc. (Vendor # 177195)

Class/Account	Contracts for Program Svcs	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2012	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2013	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2014	\$0.00	\$41,818.00	\$41,818.00
		Subtotal	\$250,908.00	\$41,818.00	\$292,726.00

Visiting Nurse Home Care & Hospice of Carroll County (Vendor # 225191)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
550-500398	Assessment & Counseling	2011	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2012	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2013	\$83,636.00	\$0.00	\$83,636.00
550-500398	Assessment & Counseling	2014	\$0.00	\$41,818.00	\$41,818.00
		Subtotal	\$250,908.00	\$41,818.00	\$292,726.00

Total	\$3,860,122.95	\$643,353.85	\$4,503,476.80

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICE BLOCK GRANT (44.31% Federal Funds; 55.69% General Funds)

Community Action Program Belknap-Merrimack Counties, Inc. (Vendor #177203)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$15,806.89	\$0.00	\$15,806.89
545-500387	I & R Contracts	2012	\$15,757.28	\$0.00	\$15,757.28
545-500387	I & R Contracts	2013	\$15,757.28	\$0.00	\$15,757.28
545-500387	I & R Contracts	2014	\$0.00	\$7,878.64	\$7,878.64
		Subtotal	\$47,321.45	\$7,878.64	\$55,200.09

Crotched Mountain Community Care, Inc. (Vendor # 177293)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$21,554.85	\$0.00	\$21,554.85
545-500387	I & R Contracts	2012	\$21,487.20	\$0.00	\$21,487.20
545-500387	I & R Contracts	2013	\$21,487.20	\$0.00	\$21,487.20
545-500387	I & R Contracts	2014	\$0.00	\$10,743.60	\$10,743.60
		Subtotal	\$64,529.25	\$10,743.60	\$75,272.85

Easter Seals New Hampshire, Inc. (Vendor # 177204)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$28,739.80	\$0.00	\$28,739.80
545-500387	I & R Contracts	2012	\$28,649.60	\$0.00	\$28,649.60
545-500387	I & R Contracts	2013	\$28,649.60	\$0.00	\$28,649.60
545-500387	I & R Contracts	2014	\$0.00	\$14,324.80	\$14,324.80
		Subtotal	\$86,039.00	\$14,324.80	\$100,363.80

Grafton County Senior Citizens Council, Inc. (Vendor # 177675)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$15,806.89	\$0.00	\$15,806.89
545-500387	I & R Contracts	2012	\$15,757.28	\$0.00	\$15,757.28
545-500387	I & R Contracts	2013	\$15,757.28	\$0.00	\$15,757.28
545-500387	I & R Contracts	2014	\$0.00	\$7,878.64	\$7,878.64
		Subtotal	\$47,321.45	\$7,878.64	\$55,200.09

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$10,777.43	\$0.00	\$10,777.43
545-500387	I & R Contracts	2012	\$10,743.60	\$0.00	\$10,743.60
545-500387	I & R Contracts	2013	\$10,743.60	\$0.00	\$10,743.60
545-500387	I & R Contracts	2014	\$0.00	\$5,371.80	\$5,371.80
		Subtotal	\$32,264.63	\$5,371.80	\$37,636.43

Monadnock Collaborative (Vendor # 159303)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$11,495.92	\$0.00	\$11,495.92
545-500387	I & R Contracts	2012	\$11,459.84	\$0.00	\$11,459.84
545-500387	I & R Contracts	2013	\$11,459.84	\$0.00	\$11,459.84
545-500387	I & R Contracts	2014	\$0.00	\$5,729.92	\$5,729.92
		Subtotal	\$34,415.60	\$5,729.92	\$40,145.52

Southwestern Community Services, Inc. (Vendor # 177511)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$9,340.44	\$0.00	\$9,340.44
545-500387	I & R Contracts	2012	\$9,311.12	\$0.00	\$9,311.12
545-500387	I & R Contracts	2013	\$9,311.12	\$0.00	\$9,311.12
545-500387	I & R Contracts	2014	\$0.00	\$4,655.56	\$4,655.56
		Subtotal	\$27,962.68	\$4,655.56	\$32,618.24

Strafford Network (Vendor # 159217)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$11,495.92	\$0.00	\$11,495.92
545-500387	I & R Contracts	2012	\$11,459.84	\$0.00	\$11,459.84
545-500387	I & R Contracts	2013	\$11,459.84	\$0.00	\$11,459.84
545-500387	I & R Contracts	2014	\$0.00	\$5,729.92	\$5,729.92
		Subtotal	\$34,415.60	\$5,729.92	\$40,145.52

Tri County Community Action Program, Inc. (Vendor # 177195)

Class/Account	Contracts for Program Svcs	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$9,340.44	\$0.00	\$9,340.44
545-500387	I & R Contracts	2012	\$9,311.12	\$0.00	\$9,311.12
545-500387	I & R Contracts	2013	\$9,311.12	\$0.00	\$9,311.12
545-500387	I & R Contracts	2014	\$0.00	\$4,655.56	\$4,655.56
		Subtotal	\$27,962.68	\$4,655.56	\$32,618.24

Visiting Nurse Home Care & Hospice of Carroll County (Vendor # 225191)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
545-500387	I & R Contracts	2011	\$9,340.44	\$0.00	\$9,340.44
545-500387	I & R Contracts	2012	\$9,311.12	\$0.00	\$9,311.12
545-500387	I & R Contracts	2013	\$9,311.12	\$0.00	\$9,311.12
545-500387	I & R Contracts	2014	\$0.00	\$4,655.56	\$4,655.56
		Subtotal	\$27,962.68	\$4,655.56	\$32,618.24

Total	\$430,195.02	\$71,624.00	\$501,819.02

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS (75% Federal Funds; 25% General Funds)

Community Action Program Belknap-Merrimack Counties, Inc. (Vendor #177203)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$15,000.00	\$0.00	\$15,000.00
570-500928	Family Caregiver	2011	\$37,000.00	\$0.00	\$37,000.00
072-500575	Grants - Federal	2012	\$14,000.00	\$0.00	\$14,000.00
570-500928	Family Caregiver	2012	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2013	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2014	\$0.00	\$15,696.97	\$15,696.97
		Subtotal	\$140,000.00	\$15,696.97	\$155,696.97

Crotched Mountain Community Care, Inc. (Vendor # 177293)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$55,000.00	\$0.00	\$55,000.00
570-500928	Family Caregiver	2011	\$37,000.00	\$0.00	\$37,000.00
072-500575	Grants - Federal	2012	\$20,000.00	\$0.00	\$20,000.00
570-500928	Family Caregiver	2012	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2013	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2014	\$0.00	\$15,696.97	\$15,696.97
		Subtotal	\$186,000.00	\$15,696.97	\$201,696.97

Easter Seals New Hampshire, Inc. (Vendor # 177204)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$80,000.00	\$0.00	\$80,000.00
570-500928	Family Caregiver	2011	\$37,000.00	\$0.00	\$37,000.00
072-500575	Grants - Federal	2012	\$20,000.00	\$0.00	\$20,000.00
570-500928	Family Caregiver	2012	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2013	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2014	\$0.00	\$15,696.97	\$15,696.97
		Subtotal	\$211,000.00	\$15,696.97	\$226,696.97

Grafton County Senior Citizens Council, Inc. (Vendor # 177675)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$0.00	\$0.00	\$0.00
570-500928	Family Caregiver	2011	\$37,000.00	\$0.00	\$37,000.00
072-500575	Grants - Federal	2012	\$14,000.00	\$0.00	\$14,000.00
570-500928	Family Caregiver	2012	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2013	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2014	\$0.00	\$15,696.97	\$15,696.97
		Subtotal	\$125,000.00	\$15,696.97	\$140,696.97

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$52,015.00	\$0.00	\$52,015.00
570-500928	Family Caregiver	2011	\$37,000.00	\$0.00	\$37,000.00
072-500575	Grants - Federal	2012	\$10,000.00	\$0.00	\$10,000.00
570-500928	Family Caregiver	2012	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2013	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2014	\$0.00	\$15,696.97	\$15,696.97
		Subtotal	\$173,015.00	\$15,696.97	\$188,711.97

Monadnock Collaborative (Vendor # 159303)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$0.00	\$0.00	\$0.00
570-500928	Family Caregiver	2011	\$37,000.00	\$0.00	\$37,000.00
072-500575	Grants - Federal	2012	\$10,000.00	\$0.00	\$10,000.00
570-500928	Family Caregiver	2012	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2013	\$37,000.00	\$0.00	\$37,000.00
570-500928	Family Caregiver	2014	\$0.00	\$15,696.97	\$15,696.97
		Subtotal	\$121,000.00	\$15,696.97	\$136,696.97

Southwestern Community Services, Inc. (Vendor # 177511)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$0.00	\$0.00	\$0.00
570-500928	Family Caregiver	2011	\$27,000.00	\$0.00	\$27,000.00
072-500575	Grants - Federal	2012	\$10,000.00	\$0.00	\$10,000.00
570-500928	Family Caregiver	2012	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2013	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2014	\$0.00	\$11,454.55	\$11,454.55
		Subtotal	\$91,000.00	\$11,454.55	\$102,454.55

Strafford Network (Vendor # 159217)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$40,000.00	\$0.00	\$40,000.00
570-500928	Family Caregiver	2011	\$27,000.00	\$0.00	\$27,000.00
072-500575	Grants - Federal	2012	\$10,000.00	\$0.00	\$10,000.00
570-500928	Family Caregiver	2012	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2013	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2014	\$0.00	\$11,454.55	\$11,454.55
		Subtotal	\$131,000.00	\$11,454.55	\$142,454.55

Tri County Community Action Program, Inc. (Vendor # 177195)

Class/Account	Contracts for Program Svcs	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$0.00	\$0.00	\$0.00
570-500928	Family Caregiver	2011	\$27,000.00	\$0.00	\$27,000.00
072-500575	Grants - Federal	2012	\$10,000.00	\$0.00	\$10,000.00
570-500928	Family Caregiver	2012	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2013	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2014	\$0.00	\$11,454.55	\$11,454.55
		Subtotal	\$91,000.00	\$11,454.55	\$102,454.55

Visiting Nurse Home Care & Hospice of Carroll County (Vendor # 225191)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
072-500575	Grants - Federal	2011	\$40,000.00	\$0.00	\$40,000.00
570-500928	Family Caregiver	2011	\$27,000.00	\$0.00	\$27,000.00
072-500575	Grants - Federal	2012	\$10,000.00	\$0.00	\$10,000.00
570-500928	Family Caregiver	2012	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2013	\$27,000.00	\$0.00	\$27,000.00
570-500928	Family Caregiver	2014	\$0.00	\$11,454.55	\$11,454.55
		Subtotal	\$131,000.00	\$11,454.55	\$142,454.55

Total	\$1,400,015.00	\$140,000.02	\$1,540,015.02

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, MEDICAL SERVICE GRANTS (100% Federal Funds)

Community Action Program Belknap-Merrimack Counties, Inc. (Vendor #177203)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$43,196.40	\$0.00	\$43,196.40
102-500731	Contracts for Program Services	2012	\$49,598.97	\$0.00	\$49,598.97
102-500731	Contracts for Program Services	2013	\$49,598.97	\$0.00	\$49,598.97
102-500731	Contracts for Program Services	2014	\$0.00	\$16,272.26	\$16,272.26
		Subtotal	\$142,394.34	\$16,272.26	\$158,666.60

Crotched Mountain Community Care, Inc. (Vendor # 177293)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$55,386.00	\$0.00	\$55,386.00
102-500731	Contracts for Program Services	2012	\$56,044.05	\$0.00	\$56,044.05
102-500731	Contracts for Program Services	2013	\$56,044.05	\$0.00	\$56,044.05
102-500731	Contracts for Program Services	2014	\$0.00	\$16,903.21	\$16,903.21
		Subtotal	\$167,474.10	\$16,903.21	\$184,377.31

Easter Seals New Hampshire, Inc. (Vendor # 177204)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$74,428.00	\$0.00	\$74,428.00
102-500731	Contracts for Program Services	2012	\$74,725.40	\$0.00	\$74,725.40
102-500731	Contracts for Program Services	2013	\$74,725.40	\$0.00	\$74,725.40
102-500731	Contracts for Program Services	2014	\$0.00	\$22,537.62	\$22,537.62
		Subtotal	\$223,878.80	\$22,537.62	\$246,416.42

Grafton County Senior Citizens Council, Inc. (Vendor # 177675)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$41,196.40	\$0.00	\$41,196.40
102-500731	Contracts for Program Services	2012	\$41,098.97	\$0.00	\$41,098.97
102-500731	Contracts for Program Services	2013	\$41,098.97	\$0.00	\$41,098.97
102-500731	Contracts for Program Services	2014	\$0.00	\$12,395.69	\$12,395.69
		Subtotal	\$123,394.34	\$12,395.69	\$135,790.03

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$185,771.80	\$0.00	\$185,771.80
102-500731	Contracts for Program Services	2012	\$238,070.03	\$0.00	\$238,070.03
102-500731	Contracts for Program Services	2013	\$102,403.03	\$0.00	\$102,403.03
102-500731	Contracts for Program Services	2014	\$0.00	\$8,451.61	\$8,451.61
		Subtotal	\$526,244.86	\$8,451.61	\$534,696.47

Monadnock Collaborative (Vendor # 159303)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$27,219.20	\$0.00	\$27,219.20
102-500731	Contracts for Program Services	2012	\$29,890.16	\$0.00	\$29,890.16
102-500731	Contracts for Program Services	2013	\$29,890.16	\$0.00	\$29,890.16
102-500731	Contracts for Program Services	2014	\$0.00	\$9,015.05	\$9,015.05
		Subtotal	\$86,999.52	\$9,015.05	\$96,014.57

Southwestern Community Services, Inc. (Vendor # 177511)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$22,550.60	\$0.00	\$22,550.60
102-500731	Contracts for Program Services	2012	\$24,285.76	\$0.00	\$24,285.76
102-500731	Contracts for Program Services	2013	\$24,285.76	\$0.00	\$24,285.76
102-500731	Contracts for Program Services	2014	\$0.00	\$7,324.73	\$7,324.73
		Subtotal	\$71,122.12	\$7,324.73	\$78,446.85

Strafford Network (Vendor # 159217)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$35,559.20	\$0.00	\$35,559.20
102-500731	Contracts for Program Services	2012	\$34,890.16	\$0.00	\$34,890.16
102-500731	Contracts for Program Services	2013	\$34,890.16	\$0.00	\$34,890.16
102-500731	Contracts for Program Services	2014	\$0.00	\$11,295.38	\$11,295.38
		Subtotal	\$105,339.52	\$11,295.38	\$116,634.90

Tri County Community Action Program, Inc. (Vendor # 177195)

Class/Account	Contracts for Program Svcs	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$27,190.60	\$0.00	\$27,190.60
102-500731	Contracts for Program Services	2012	\$24,285.76	\$0.00	\$24,285.76
102-500731	Contracts for Program Services	2013	\$24,285.76	\$0.00	\$24,285.76
102-500731	Contracts for Program Services	2014	\$0.00	\$7,324.73	\$7,324.73
		Subtotal	\$75,762.12	\$7,324.73	\$83,086.85

Visiting Nurse Home Care & Hospice of Carroll County (Vendor # 225191)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$24,106.80	\$0.00	\$24,106.80
102-500731	Contracts for Program Services	2012	\$24,285.76	\$0.00	\$24,285.76
102-500731	Contracts for Program Services	2013	\$24,285.76	\$0.00	\$24,285.76
102-500731	Contracts for Program Services	2014	\$0.00	\$7,324.73	\$7,324.73
		Subtotal	\$72,678.32	\$7,324.73	\$80,003.05

Total	\$1,595,288.04	\$118,845.01	\$1,714,133.05

05-95-48-481010-3317 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADMIN ON AGING SVCS GRANT - SMPP (75% Federal Funds; 25% General Funds)

Community Action Program Belknap-Merrimack Counties, Inc. (Vendor #177203)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$6,959.50	\$6,959.50
		Subtotal	\$0.00	\$6,959.50	\$6,959.50

Crotched Mountain Community Care, Inc. (Vendor # 177293)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$9,490.50	\$9,490.50
		Subtotal	\$0.00	\$9,490.50	\$9,490.50

Easter Seals New Hampshire, Inc. (Vendor # 177204)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$12,654.00	\$12,654.00
		Subtotal	\$0.00	\$12,654.00	\$12,654.00

Grafton County Senior Citizens Council, Inc. (Vendor # 177675)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$6,959.70	\$6,959.70
		Subtotal	\$0.00	\$6,959.70	\$6,959.70

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$4,745.25	\$4,745.25
		Subtotal	\$0.00	\$4,745.25	\$4,745.25

Monadnock Collaborative (Vendor # 159303)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$5,061.60	\$5,061.60
		Subtotal	\$0.00	\$5,061.60	\$5,061.60

Southwestern Community Services, Inc. (Vendor # 177511)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$4,112.55	\$4,112.55
		Subtotal	\$0.00	\$4,112.55	\$4,112.55

Strafford Network (Vendor # 159217)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$5,061.60	\$5,061.60
		Subtotal	\$0.00	\$5,061.60	\$5,061.60

Tri County Community Action Program, Inc. (Vendor # 177195)

Class/Account	Contracts for Program Svcs	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$4,112.55	\$4,112.55
		Subtotal	\$0.00	\$4,112.55	\$4,112.55

Visiting Nurse Home Care & Hospice of Carroll County (Vendor # 225191)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2014	\$0.00	\$4,112.55	\$4,112.55
		Subtotal	\$0.00	\$4,112.55	\$4,112.55

Total	\$0.00	\$63,269.80	\$63,269.80

05-95-48-481010-8920 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, MONEY FOLLOWS THE PERSON (100% Federal Funds)

Lakes Region Partnership for Public Health (Vendor # 165635)

Class/Account	Class Title	State Fiscal Year	Current Modified Budget	Increased (Decreased) Budget	Revised Modified Budget
102-500731	Contracts for Program Services	2011	\$37,500.00	\$0.00	\$37,500.00
102-500731	Contracts for Program Services	2012	\$75,000.00	\$0.00	\$75,000.00
102-500731	Contracts for Program Services	2013	\$37,500.00	\$0.00	\$37,500.00
		Subtotal	\$150,000.00	\$0.00	\$150,000.00

Total 8920	\$150,000.00	\$0.00	\$150,000.00

Grand Total	\$9,031,971.83	\$1,303,092.68	\$10,335,064.51



**State of New Hampshire
Department of Health and Human Services
Amendment #2 to the Community Action Program Belnap and Merrimack
Counties, Inc.**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment 2") dated this 31st day of May 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Community Action Program Belnap and Merrimack Counties, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 2 Industrial Park Drive, Concord, New Hampshire, 03302.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$1,076,764.18.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:

6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:



1. Number of individuals served
2. Number of repeat visits by individuals
3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Add Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.



- 3) People will agree that the SLRC followed-up within a reasonable amount of time.
- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through December 31, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$929,927.89.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731



And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731

d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 7,878.64
LTC funds (ServiceLink General Funds)	\$ 29,260.00
Family Caregiver Support Title III-E	\$ 15,696.97
Senior Medicare Patrol	\$ 6,959.50
State Health Insurance Assistance Program	\$ 16,272.26
Assessment & Counseling (Medicaid)	\$ 70,768.92

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Community Action Program Belknap and Merrimack Counties, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6/5/13
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Community Action Program Belknap and
Merrimack Counties, Inc.

6/4/13
Date

Ralph Littlefield
Name: Ralph Littlefield
Title: Executive Director

Acknowledgement:

State of New Hampshire, County of Merrimack on 6/4/13,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and
acknowledged that s/he executed this document in the capacity indicated above.
Signature of Notary Public or ~~Justice of the Peace~~

Elaine N. Roundy
Name and Title of Notary or ~~Justice of the Peace~~

ELAINE N. ROUNDY, Notary Public
My Commission Expires August 24, 2016

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Community Action Program Belknap and Merrimack Counties, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

5 Jun. 2013
Date

Janet P. Herrick
Name: *Janet P. Herrick*
Title: *Attorney*

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Community Action Program Belknap-Merrimack Counties Inc

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 19,354.00	\$ 6,502.00	\$ 25,856.00	\$ -	\$ 6,502.00	\$ 6,502.00	\$ 19,354.00	\$ -	\$ 19,354.00
2. Employee Benefits	\$ 7,697.00	\$ 1,488.00	\$ 9,185.00	\$ -	\$ 1,488.00	\$ 1,488.00	\$ 7,697.00	\$ -	\$ 7,697.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ 1,031.00	\$ 1,031.00	\$ -	\$ 1,031.00	\$ 1,031.00	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 27,051.00	\$ 9,021.00	\$ 36,072.00	\$ -	\$ 9,021.00	\$ 9,021.00	\$ 27,051.00	\$ -	\$ 27,051.00

0.00%

Indirect As A Percent of Direct

Contractor Initials: RR
Date: 6/9/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Community Action Program Belknap-Merrimack Counties Inc.

Budget Request for: Merrimack County ServiceLink
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,487.00	\$ -	\$ 5,487.00	\$ -	\$ -	\$ -	\$ 5,487.00	\$ -	\$ 5,487.00
2. Employee Benefits	\$ 2,291.00	\$ -	\$ 2,291.00	\$ -	\$ -	\$ -	\$ 2,291.00	\$ -	\$ 2,291.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 100.64	\$ -	\$ 100.64	\$ -	\$ -	\$ -	\$ 100.64	\$ -	\$ 100.64
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 7,878.64	\$ -	\$ 7,878.64	\$ -	\$ -	\$ -	\$ 7,878.64	\$ -	\$ 7,878.64

0.0%

Indirect As A Percent of Direct

Contractor Initials: R-Q
Date: 6/9/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

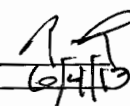
Bidder/Program Name: Community Action Program Belknap-Merrimack Counties Inc

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 1,929.00	\$ -	\$ 1,929.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 270.00	\$ -	\$ 270.00	\$ -	\$ -	\$ -	\$ 270.00	\$ -	\$ 270.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 733.00	\$ -	\$ 733.00	\$ 733.00	\$ -	\$ 733.00	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 2,199.00	\$ 733.00	\$ 2,932.00	\$ 733.00	\$ -	\$ 733.00	\$ 2,199.00	\$ -	\$ 2,199.00

Indirect As A Percent of Direct 0.00%

Contractor Initials: 
Date: 6/4/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid**

Contractor Name: Community Action Program Belknap-Merrimack Counties Inc

Budget Request for: Merrimack County ServiceLink
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 52,081.00	-	\$ 52,081.00	-	-	-	\$ 52,081.00	-	\$ 52,081.00
2. Employee Benefits	\$ 11,356.00	-	\$ 11,356.00	-	-	-	\$ 11,356.00	-	\$ 11,356.00
3. Consultants	-	-	-	-	-	-	-	-	-
4. Equipment	-	-	-	-	-	-	-	-	-
5. Rental	-	-	-	-	-	-	-	-	-
6. Repair and Maintenance	-	-	-	-	-	-	-	-	-
7. Purchase/Depreciation	-	-	-	-	-	-	-	-	-
8. Supplies	-	-	-	-	-	-	-	-	-
9. Educational	-	-	-	-	-	-	-	-	-
10. Lab	-	-	-	-	-	-	-	-	-
11. Pharmacy	-	-	-	-	-	-	-	-	-
12. Medical	-	-	-	-	-	-	-	-	-
13. Office	\$ 1,200.00	-	\$ 1,200.00	-	-	-	\$ 1,200.00	-	\$ 1,200.00
14. Travel	\$ 750.00	-	\$ 750.00	-	-	-	\$ 750.00	-	\$ 750.00
15. Occupancy	\$ 3,600.00	-	\$ 3,600.00	-	-	-	\$ 3,600.00	-	\$ 3,600.00
16. Current Expenses	-	-	-	-	-	-	-	-	-
17. Telephone	-	-	-	-	-	-	-	-	-
18. Postage	\$ 600.00	-	\$ 600.00	-	-	-	\$ 600.00	-	\$ 600.00
19. Subscriptions	-	-	-	-	-	-	-	-	-
20. Audit and Legal	-	-	-	-	-	-	-	-	-
21. Insurance	-	-	-	-	-	-	-	-	-
22. Board Expenses	-	-	-	-	-	-	-	-	-
23. Software	-	-	-	-	-	-	-	-	-
24. Marketing/Communications	-	-	-	-	-	-	-	-	-
25. Staff Education and Training	\$ 681.92	-	\$ 681.92	-	-	-	\$ 681.92	-	\$ 681.92
26. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
27. Other (specific details mandatory):	-	-	-	-	-	-	-	-	-
28. Printing	\$ 500.00	-	\$ 500.00	-	-	-	\$ 500.00	-	\$ 500.00
TOTAL	\$ 70,768.92	-	\$ 70,768.92	-	-	-	\$ 70,768.92	-	\$ 70,768.92

0.0%

Indirect As A Percent of Direct

Contractor Initials:

Date: 6/4/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title III-E Family Caregiver**

Contractor Name: Community Action Program Belknap-Merrimack Counties Inc.

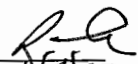
Budget Request for: NH Family Caregiver Support Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 9,750.00	-	\$ 9,750.00	-	-	-	\$ 9,750.00	-	\$ 9,750.00
2. Employee Benefits	\$ 2,980.00	-	\$ 2,980.00	-	-	-	\$ 2,980.00	-	\$ 2,980.00
3. Consultants	\$ 500.00	-	\$ 500.00	-	-	-	\$ 500.00	-	\$ 500.00
4. Equipment Rental	-	-	-	-	-	-	-	-	-
5. Purchase/Depreciation	-	-	-	-	-	-	-	-	-
6. Repair and Maintenance	-	-	-	-	-	-	-	-	-
7. Supplies	-	-	-	-	-	-	-	-	-
8. Educational	\$ 200.00	-	\$ 200.00	-	-	-	\$ 200.00	-	\$ 200.00
9. Lab	-	-	-	-	-	-	-	-	-
10. Pharmacy	-	-	-	-	-	-	-	-	-
11. Medical	-	-	-	-	-	-	-	-	-
12. Office	\$ 128.97	-	\$ 128.97	-	-	-	\$ 128.97	-	\$ 128.97
13. Travel	\$ 480.00	-	\$ 480.00	-	-	-	\$ 480.00	-	\$ 480.00
14. Occupancy	\$ 250.00	-	\$ 250.00	-	-	-	\$ 250.00	-	\$ 250.00
15. Current Expenses	-	-	-	-	-	-	-	-	-
16. Telephone	-	-	-	-	-	-	-	-	-
17. Postage	\$ 200.00	-	\$ 200.00	-	-	-	\$ 200.00	-	\$ 200.00
18. Subscriptions	-	-	-	-	-	-	-	-	-
19. Audit and Legal	-	-	-	-	-	-	-	-	-
20. Insurance	-	-	-	-	-	-	-	-	-
21. Board Expenses	-	-	-	-	-	-	-	-	-
22. Software	-	-	-	-	-	-	-	-	-
23. Marketing/Communications	\$ 500.00	-	\$ 500.00	-	-	-	\$ 500.00	-	\$ 500.00
24. Staff Education and Training	\$ 500.00	-	\$ 500.00	-	-	-	\$ 500.00	-	\$ 500.00
25. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
26. Other (specify details mandatory):	-	-	-	-	-	-	-	-	-
27. Printing	\$ 200.00	-	\$ 200.00	-	-	-	\$ 200.00	-	\$ 200.00
TOTAL	\$ 15,595.97	\$ -	\$ 15,595.97	\$ -	\$ -	\$ -	\$ 15,595.97	\$ -	\$ 15,595.97

0.0%

Indirect As A Percent of Direct

Contractor Initials: 

Date: 8/9/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program**

Contractor Name: Community Action Programs Belknap-Merrimack Counties Inc

Budget Request for: State Health Insurance Assistance Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 11,975.00	\$ -	\$ 11,975.00	\$ -	\$ -	\$ -	\$ 11,975.00	\$ -	\$ 11,975.00
2. Employee Benefits	\$ 2,060.00	\$ -	\$ 2,060.00	\$ -	\$ -	\$ -	\$ 2,060.00	\$ -	\$ 2,060.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 1,044.00	\$ -	\$ 1,044.00	\$ -	\$ -	\$ -	\$ 1,044.00	\$ -	\$ 1,044.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 693.26	\$ -	\$ 693.26	\$ -	\$ -	\$ -	\$ 693.26	\$ -	\$ 693.26
11. Staff Education and Training	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 16,272.26	\$ -	\$ 16,272.26	\$ -	\$ -	\$ -	\$ 16,272.26	\$ -	\$ 16,272.26
Indirect As A Percent of Direct	0.0%								

Contractor Initials: *R-A*
Date: *6/1/13*

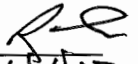
**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol**

Contractor Name: Community Action Program Belknap-Merrimack Counties Inc

 Budget Request for: Senior Medicare Patrol
 (Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,980.00	\$ -	\$ 3,980.00	\$ -	\$ -	\$ -	\$ 3,980.00	\$ -	\$ 3,980.00
2. Employee Benefits	\$ 686.00	\$ -	\$ 686.00	\$ -	\$ -	\$ -	\$ 686.00	\$ -	\$ 686.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 400.00	\$ -	\$ 400.00	\$ -	\$ -	\$ -	\$ 400.00	\$ -	\$ 400.00
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ 2,320.00	\$ 2,320.00	\$ -	\$ 2,320.00	\$ 2,320.00	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 300.00	\$ -	\$ 300.00	\$ -	\$ -	\$ -	\$ 300.00	\$ -	\$ 300.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1,343.50	\$ -	\$ 1,343.50	\$ -	\$ -	\$ -	\$ 1,343.50	\$ -	\$ 1,343.50
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 250.00	\$ -	\$ 250.00	\$ -	\$ -	\$ -	\$ 250.00	\$ -	\$ 250.00
TOTAL	\$ 6,959.50	\$ 2,320.00	\$ 9,279.50	\$ -	\$ 2,320.00	\$ 2,320.00	\$ 6,959.50	\$ -	\$ 6,959.50
Indirect As A Percent of Direct								0.0%	

Contractor Initials: 

Date: 6/24/13

Community Action Program
Belknap-Merrimack Counties, Inc.
(Name of Corporation)

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting
of Board of Directors of Community Action Program
(Name of Governing Board) (Name of Corporation)
on September 20, 2012 which was duly called at which a quorum was
(see attached)
present:

"On motion duly made and seconded, it was voted to authorize
the Executive Director, to accept grants and awards and enter into contracts, and
contract amendments from time to time with the New Hampshire Department of Health and Human
Services, Bureau of Elderly and Adult Services, to sign and otherwise fully execute such acceptances and
contracts, and contract amendments or modifications thereto, and any related documents requested by the
New Hampshire Department of Health and Human Services; Bureau of Elderly and Adult Services, this
authorization to continue until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)
Ralph Littlefield is the duly elected (Title) Executive Director of
this corporation and is still qualified and serving in such capacity.

June 4, 2013
(Date)

Dennis T. Martin
Secretary

(Imprint seal of corporation. If none, write: "No corporate seal.")

STATE OF NEW HAMPSHIRE

COUNTY OF MERRIMACK

On June 4, 2013, before the undersigned officer personally
appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the
Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that _____
she/he executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

Elaine N. Roundy
Notary Public/Justice of the Peace

My commission expires: _____

ELAINE N. ROUNDY, Notary Public
My Commission Expires August 24, 2016

COMMUNITY ACTION PROGRAM
BELKNAP-MERRIMACK COUNTIES, INC.

CORPORATE RESOLUTION

The Board of Directors of Community Action Program Belknap-Merrimack Counties, Inc. authorizes the Executive Director, Deputy Director, Chief Accountant, President, Vice-President(s) or Treasurer of the Agency to sign contracts and reports with the State of New Hampshire, Departments of the Federal Government, which include all federal #269 and #272 Forms, and public or private nonprofit agencies *including, but not limited to, the following:*

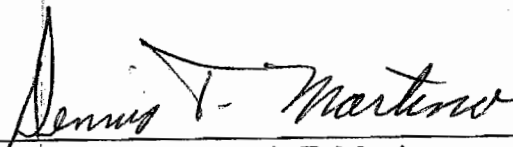
- Department of Administrative Services for food distribution programs
- Department of Education for nutrition programs
- Department of Health and Human Services
 - Bureau of Elderly and Adult Services for elderly programs
 - Bureau of Homeless and Housing Services for homeless/housing programs
 - Division of Children, Youth, and Families for child care programs
 - Division of Family Assistance for Community Services Block Grant
 - Division of Public Health Services for public health programs
- Department of Justice for child advocacy/therapy programs
- Department of Transportation-Public Transportation Bureau for transportation programs
- Public Utilities Commission for utility assistance programs
- Workforce Opportunity Council for employment and job training programs
- Department of Resources and Economic Development
- Governor's Office of Energy and Planning for Head Start, Low Income Energy Assistance, Weatherization and Block Grant programs
- New Hampshire Community Development Finance Authority
- New Hampshire Housing Finance Authority
- New Hampshire Secretary of State
- U. S. Department of Housing and Urban Development
- U. S. Department of the Treasury – Internal Revenue Service
- and other departments and divisions as required

This Resolution authorizes the signing of all supplementary and subsidiary documents necessary to executing the authorized contracts as well as any modifications or amendments relative to said contracts or agreements.

This Resolution was approved by the Board of Directors of Community Action Program Belknap-Merrimack Counties, Inc. on September 20, 2012, and has not been amended or revoked and remains in effect as of the date listed below.

June 4, 2013

Date



Dennis T. Martino
Secretary/Clerk

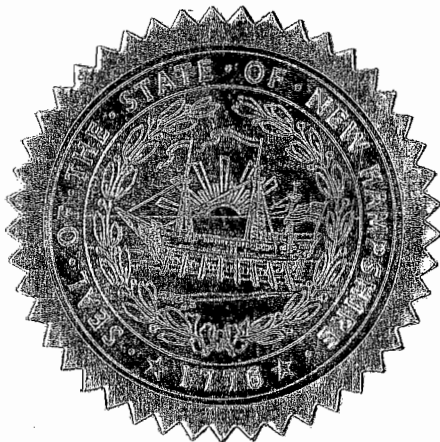
SEAL

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that COMMUNITY ACTION PROGRAM BELKNAP AND MERRIMACK COUNTIES, INC. is a New Hampshire nonprofit corporation formed May 28, 1965. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 1st day of April A.D. 2013

A handwritten signature in dark ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/29/2013

PRODUCER (603)669-3218 FAX: (603)645-4331
Ferdinando Insurance Assoc. Inc.
Laura Perrin
637 Chestnut Street
Manchester NH 03104

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
Community Action Program
Belknap-Merrimack Counties Inc.
P.O. Box 1016
Concord NH 03302

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Arch Insurance Company

INSURER B: Liberty Mutual Ins Co

INSURER C: Hanover Insurance Co

INSURER D: N.H.M.M. JUA

INSURER E:

18058

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A		GENERAL LIABILITY				EACH OCCURRENCE \$ 1,000,000
		☒ COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
		☐ CLAIMS MADE ☒ OCCUR	NCPKG02266000	6/17/2012	6/17/2013	MED EXP (Any one person) \$ 5,000
				6/17/2013	6/17/2014	PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COM/OP AGG \$ 2,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				
		☐ POLICY ☐ PROJECT ☒ LOC				
A		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
		☒ ANY AUTO	NCAUT0226600	6/17/2012	6/17/2013	BODILY INJURY (Per person) \$
		☐ ALL OWNED AUTOS		6/17/2013	6/17/2014	BODILY INJURY (Per accident) \$
		☐ SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		☐ HIRED AUTOS				
		☐ NON-OWNED AUTOS				
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
		☐ ANY AUTO				OTHER THAN EA ACC \$
						AUTO ONLY: AGG \$
A		EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE \$ 5,000,000
		☒ OCCUR ☐ CLAIMS MADE				AGGREGATE \$ 5,000,000
		☐ DEDUCTIBLE	NCUMB02266000	6/17/2012	6/17/2013	\$
		☒ RETENTION \$ 10,000		6/17/2013	6/17/2014	\$
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCJZ91446010011			☒ WC STATUTORY LIMITS ☐ OTHER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	(3a.) NH	6/17/2012	6/17/2013	E.L. EACH ACCIDENT \$ 500,000
		If yes, describe under SPECIAL PROVISIONS below	All officers included	6/17/2013	6/17/2014	E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000
A		OTHER Directors & Officers	PHSD727025	4/1/2013	4/1/2014	\$1,000,000
C		Blanket Crime	BDV1649128	3/27/2013	3/27/2014	400,000
D		Professional	NHJUA11882	12/30/2012	12/30/2013	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

NH Dept of Health & Human Services
Bureau of Elderly & Adult Services
129 Pleasant Street, Brown Bld
Concord, NH 03301

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Laura Perrin/KS5



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

Nancy L. Rollins
Associate Commissioner

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008768) with Community Action Program Belknap and Merrimack Counties, Concord, New Hampshire (Vendor # 177203) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$618,853.90 from \$311,073.99 to \$929,927.89 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$58,532.86	\$0.00	\$58,532.86
2012	102-500734	Contracts for Program Services	\$0.00	\$58,532.86	\$58,532.86
2013	102-500734	Contracts for Program Services	\$0.00	\$58,532.86	\$58,532.86
Subtotal			\$58,532.86	\$117,065.72	\$175,598.58

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$141,537.84	\$0.00	\$141,537.84

2012	550-500398	Assessment & Counseling	\$0.00	\$141,537.84	\$141,537.84
2013	550-500398	Assessment & Counseling	\$0.00	\$141,537.84	\$141,537.84
Subtotal			\$141,537.84	\$283,075.68	\$424,613.52

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$15,806.89	\$0.00	\$15,806.89
2012	545-500387	I & R Contracts	\$0.00	\$15,757.28	\$15,757.28
2013	545-500387	I & R Contracts	\$0.00	\$15,757.28	\$15,757.28
Subtotal			\$15,806.89	\$31,514.56	\$47,321.45

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$15,000.00	\$0.00	\$15,000.00
2012	072-500575	Grants - Federal	\$0.00	\$14,000.00	\$14,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$15,000.00	\$14,000.00	\$29,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
2013	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
Subtotal			\$37,000.00	\$74,000.00	\$111,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$43,196.40	\$0.00	\$43,196.40
2012	102-500731	Contracts for Program Services	\$0.00	\$49,598.97	\$49,598.97
2013	102-500731	Contracts for Program Services	\$0.00	\$49,598.97	\$49,598.97
Subtotal			\$43,196.40	\$99,197.94	\$142,394.34
Grand Total			\$311,073.99	\$618,853.90	\$929,927.89

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Community Action Program Belknap and Merrimack Counties for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Merrimack County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Community Action Program Belknap and Merrimack Counties, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and

accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Community Action Program Belknap and Merrimack Counties, Inc. through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

Area Served: Merrimack County

Source of Funds: 55.6% Federal funds and 44.4% General funds.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,

Nancy L. Rollins

Nancy L. Rollins
Associate Commissioner

Approved by:

Nicholas A. Toumpas
Nicholas A. Toumpas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
1	Program Name	New Hampshire ServiceLink Resource Center										
2	Contract Purpose	Provide services for I&R/A, LTC Counseling, NHCSP, SMP, SHIP, and SHIP-MPPA										
3												
4	RFP Bidders Summary	Area Served:	Merrimack County	Carroll County	Rockingham County	Hillsborough County	Grafton County	Belknap County	Monadnock Region	Sullivan County	Strafford County	Coos County
5	RFP CRITERIA	Max Pts	Community Action Program Belknap-Merrimack Inc	Carroll County Health and Home Care	Crooked Mountain Community Services Inc	Easter Seals New Hampshire	Grafton City Senior Citizens Council	Lakes Region Partnership for Public Health	Monadnock Collaborative	Southwestern Community Services, Inc.	Strafford Network	Tri-County Community Action Program
6	Min. Requirements	10	10.00	10.00	9.00	9.00	10.00	10.00	10.00	9.00	9.00	9.00
7	Organization, Background, Experience	15	14.90	14.50	14.10	13.60	15.00	15.00	14.70	13.50	14.30	14.30
8	Statement of Work	40	38.70	36.10	37.80	34.40	38.60	36.60	35.90	31.90	34.30	34.30
9	Budget and Narrative	35	32.30	29.40	34.00	26.60	33.40	30.40	31.80	26.00	26.70	26.70
10	Total	100	95.90	90.00	94.90	83.60	97.00	92.00	92.40	80.40	84.30	84.30
11												
12	RFP Reviewers											
13	Name and Job Title:		Department of DHHS: Agency									
14	1. Wendi Aultman, SLRC Program Manager		BEAS	Qualifications: Over ten years in administering the SLRC by providing oversight for program and policy of the SLRCs as well as coordinating efforts statewide and within BEAS.								
15	2. Cathy Crespaux, NHCSP Manager		BEAS	Six years in administering the NHCSP by overseeing the AoA grant awards to provide services through existing processes while developing new cost effective service delivery approaches with discretionary grants from AoA.								
16	3. Carol Dermont, Medicare Coordinator and Program Specialist		BEAS	Over ten years in administering the SHIP and SMP through the SLRCs.								
17	4. Donald Hunter, Senior Management Analyst		Office and Medicaid Business and Policy	Five years in Medicaid Policy, of which includes Medicare Part D Coordinator for DHHS, and works with NH Legislature and national government policy organizations.								
18	5. Sally Varney, Program Planning and Review Specialist for Quality		Division of Community Based Care	Ten years in Quality Management for federal and state funded DHHS programs.								
19												



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
 HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Frankestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

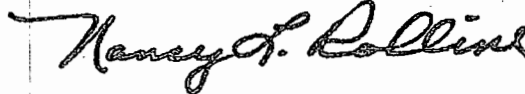
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

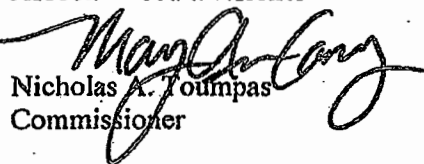
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

A		B		C	D	E	F	G	H	I	J	K	L
Allocation/Funding Sources		Contract Aims G. Total		Merrimack	Carroll	Rockingham	Hillsborough	Grafton	Bellnap	Momunhook	Sullivan	Stafford	Coos
20	Budget Awarded:												
21	Funding Source:												
22	LTC funds (ServiceLink General Funds) ¹	\$532,116.94	\$58,532.86	\$74,587.60	\$79,817.54	\$106,423.39	\$38,532.86	\$39,908.77	\$42,569.36	\$14,587.60	\$42,569.36	\$14,587.60	\$14,587.60
23	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,006.15	\$257,341.53	\$141,537.84	\$94,503.07	\$102,976.61	\$83,636.00	\$102,976.61	\$102,976.61	\$102,976.61
24	1/23/A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$11,495.92	\$11,495.92
25	Subtotal	\$1,962,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04	\$127,564.04
26	Family Caregiver Support Title III-E												
27	(Aoa) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00
28	Community Living Program (Aoa)												
29	Discretionary Grant ending Sept. 30,												
30	2011 ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$80,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00
31	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$117,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00
32	SHIP (CMS Grant)	\$190,400.00	\$20,537.00	\$13,069.40	\$3,717.80	\$13,069.40	\$20,537.00	\$20,537.00	\$13,069.40	\$13,069.40	\$13,069.40	\$13,069.40	\$13,069.40
33	SNAPP (Aoa Grant) ⁴	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$13,699.40	\$13,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
34	MRPA (CMS/Aoa Grant ending May												
35	30, 2011) ⁵	\$58,000.00	\$6,960.00	\$2,320.00	\$8,700.00	\$12,180.00	\$6,960.00	\$6,960.00	\$2,320.00	\$2,320.00	\$2,320.00	\$2,320.00	\$2,320.00
36	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$41,196.40	\$41,196.40	\$24,106.80	\$27,219.20	\$27,219.20	\$27,219.20	\$27,219.20
37	Grand Total	\$2,912,463.58	\$331,073.99	\$218,670.84	\$441,764.58	\$583,931.72	\$394,973.99	\$223,296.07	\$221,221.09	\$177,114.64	\$259,561.09	\$181,754.44	\$181,754.44
38	% Federal Funds	\$6.98%											

Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$362,942.00 in match.*

Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$132,808 in match.

Note 3: The SLRCs are not required to provide matching funds under the NEFCSP, however they have provided \$129,229 in match.

Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

*Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



State of New Hampshire
Department of Health and Human Services
Amendment #2 for Crotched Mountain Community Care, Inc.

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 31st day of May 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Crotched Mountain Community Care, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 186 Granite Street, Suite 3C, Manchester, New Hampshire, 03101.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

1) Amendment and modification of the P-37 "Agreement":

a. Delete:

Block 1.4 Contractor Address:
1361 Elm Street, Suite 400
Manchester, New Hampshire 03101

Replace with:

Block 1.4 Contractor Address:
186 Granite Street, Suite 3C
Manchester, New Hampshire 03101

b. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.

c. Change Price Limitation in Block 1.8 of the P-37 to read ~~\$1,425,984.78~~

md
\$1,425,711.78 6/12/13



2) Amendment and modification of Exhibit A:

- a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
- b. Delete "Contractor Address: 1361 Elm Street, Suite 400, Manchester, NH 03101"
- c. Add Paragraph 6.2 to Section 6:

6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:

1. Number of individuals served
2. Number of repeat visits by individuals
3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

- d. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

- e. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

MA
6/3/13



Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.
- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$1,236,474.42.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731



And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731

d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 10,743.60
LTC funds (ServiceLink General Funds)	\$ 39,900.00
Family Caregiver Support Title III-E	\$ 15,696.97
Senior Medicare Patrol	\$ 9,490.50
State Health Insurance Assistance Program	\$ 16,903.21
Assessment & Counseling (Medicaid)	\$ 96,503.08

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Crotched Mountain Community Care, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6/5/13
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Crotched Mountain Community Care, Inc.

6/3/13
Date

Margaret Davis
Name:
Title: VP/CMCC-Community Services

Acknowledgement:

State of NH, County of Merrimack on 6/3/13, before the undersigned officer, personally appeared the person identified above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

Sarah Dixon, Notary Public
Name and Title of Notary or Justice of the Peace

SARAH DIXON, Notary Public
My Commission Expires March 30, 2016

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Crotched Mountain Community Care, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

5 Jun. 2013
Date

Joanne P. Herrick
Name: *Joanne P. Herrick*
Title: *Attorney*

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: _____
(date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

State General Funds

Bidder/Program Name: Crotched Mountain Community Care

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 18,662.03	\$ 1,220.84	\$ 19,882.87	\$ 3,679.66	\$ -	\$ 3,679.66	\$ 11,972.37	\$ 1,220.84	\$ 13,193.21
2. Employee Benefits	\$ 5,010.21	\$ 574.58	\$ 5,584.79	\$ 1,731.81	\$ -	\$ 1,731.81	\$ 3,278.60	\$ 574.58	\$ 3,853.18
3. Consultants	\$ -	\$ 1,980.25	\$ 1,980.25	\$ -	\$ 1,980.25	\$ 1,980.25	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ 139.79	\$ -	\$ 139.79	\$ -	\$ -	\$ -	\$ 139.79	\$ -	\$ 139.79
Repair and Maintenance	\$ 21.51	\$ -	\$ 21.51	\$ -	\$ -	\$ -	\$ 21.51	\$ -	\$ 21.51
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 474.40	\$ -	\$ 474.40	\$ -	\$ -	\$ -	\$ 474.40	\$ -	\$ 474.40
8. Travel	\$ 653.62	\$ -	\$ 653.62	\$ -	\$ -	\$ -	\$ 653.62	\$ -	\$ 653.62
7. Occupancy	\$ 4,250.07	\$ -	\$ 4,250.07	\$ 3,300.00	\$ -	\$ 3,300.00	\$ 950.07	\$ -	\$ 950.07
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 231.83	\$ -	\$ 231.83	\$ -	\$ -	\$ -	\$ 231.83	\$ -	\$ 231.83
Postage	\$ 158.13	\$ -	\$ 158.13	\$ -	\$ -	\$ -	\$ 158.13	\$ -	\$ 158.13
Subscriptions	\$ 21.08	\$ -	\$ 21.08	\$ -	\$ -	\$ -	\$ 21.08	\$ -	\$ 21.08
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 131.77	\$ -	\$ 131.77	\$ -	\$ -	\$ -	\$ 131.77	\$ -	\$ 131.77
11. Staff Education and Training	\$ 52.71	\$ -	\$ 52.71	\$ -	\$ -	\$ -	\$ 52.71	\$ -	\$ 52.71
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatorily):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing and Reproduction	\$ 52.71	\$ -	\$ 52.71	\$ -	\$ -	\$ -	\$ 52.71	\$ -	\$ 52.71
Advertising	\$ 15.81	\$ -	\$ 15.81	\$ -	\$ -	\$ -	\$ 15.81	\$ -	\$ 15.81
TOTAL	\$ 28,665.77	\$ 3,785.75	\$ 32,451.52	\$ 8,711.27	\$ 1,990.25	\$ 10,701.52	\$ 18,154.50	\$ 1,785.50	\$ 19,940.00

Indirect As A Percent of Direct 9.9%

Contractor Initials: *mg*

Date: *6/3/13*

B-5 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)

Contractor Name: Crocheted Mountain Community Care
Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 8,428.03	\$ 657.51	\$ 9,085.54	\$ 1,981.62	\$ 1,981.62	\$ 3,963.24	\$ 6447.41	\$ 657.51	\$ 7,104.92
2. Employee Benefits	\$ 2,698.13	\$ 309.41	\$ 3,007.54	\$ 832.52	\$ 832.52	\$ 1,665.04	\$ 1,765.51	\$ 309.41	\$ 2,075.02
3. Consultants									
4. Equipment									
5. Rental									
6. Repair and Maintenance									
7. Purchase/Depreciation									
8. Supplies									
9. Educational									
10. Lab									
11. Pharmacy									
12. Medical									
13. Office	\$ 255.48	\$ 351.89	\$ 607.37	\$ 255.48	\$ 351.89	\$ 607.37	\$ 255.48	\$ 351.89	\$ 607.37
14. Travel	\$ 511.64		\$ 511.64	\$ 511.64		\$ 511.64	\$ 511.64		\$ 511.64
15. Current Expenses									
16. Telephone	\$ 124.90		\$ 124.90	\$ 124.90		\$ 124.90	\$ 124.90		\$ 124.90
17. Postage	\$ 85.16		\$ 85.16	\$ 85.16		\$ 85.16	\$ 85.16		\$ 85.16
18. Subscriptions	\$ 11.35		\$ 11.35	\$ 11.35		\$ 11.35	\$ 11.35		\$ 11.35
19. Audit and Legal									
20. Insurance									
21. Board Expenses									
22. Software									
23. Marketing/Communications	\$ 70.97		\$ 70.97	\$ 70.97		\$ 70.97	\$ 70.97		\$ 70.97
24. Staff Education and Training	\$ 26.39		\$ 26.39	\$ 26.39		\$ 26.39	\$ 26.39		\$ 26.39
25. Subcontract/Agreements									
26. Other (specific details mandatory):									
27. Printing and Reproduction	\$ 28.39		\$ 28.39	\$ 28.39		\$ 28.39	\$ 28.39		\$ 28.39
28. Advertising	\$ 8.53		\$ 8.53	\$ 8.53		\$ 8.53	\$ 8.53		\$ 8.53
TOTAL	\$ 12,690.82	\$ 986.92	\$ 13,677.74	\$ 2,914.14	\$ 2,914.14	\$ 5,828.28	\$ 9,768.88	\$ 986.92	\$ 10,755.80
Indirect As A Percent of Direct			7.6%					9.86%	

Contractor Initials: MD
Date: 6/27/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

State General Funds

Bidder/Program Name: Crooked Mountain Community Care

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	15,852.03	-	15,852.03	3,670.68	-	3,670.68	11,972.37	-	11,972.37
2. Employee Benefits	5,010.21	-	5,010.21	1,731.81	-	1,731.81	3,278.60	-	3,278.60
3. Consultants	-	-	-	-	-	-	-	-	-
4. Equipment:	-	-	-	-	-	-	-	-	-
Rental	-	-	-	-	-	-	-	-	-
Repair and Maintenance	138.79	-	138.79	-	-	-	138.79	-	138.79
Purchase/Depreciation	21.51	-	21.51	-	-	-	21.51	-	21.51
5. Supplies:	-	-	-	-	-	-	-	-	-
Educational	-	-	-	-	-	-	-	-	-
Lab	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-
Medical	-	-	-	-	-	-	-	-	-
Office	474.40	-	474.40	-	-	-	474.40	-	474.40
6. Travel	653.62	-	653.62	-	-	-	653.62	-	653.62
7. Occupancy	4,250.07	-	4,250.07	3,300.00	-	3,300.00	650.07	-	650.07
8. Current Expenses	-	-	-	-	-	-	-	-	-
Telephone	231.83	-	231.83	-	-	-	231.83	-	231.83
Postage	158.13	-	158.13	-	-	-	158.13	-	158.13
Subscriptions	21.08	-	21.08	-	-	-	21.08	-	21.08
Audit and Legal	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-
Board Expenses	-	-	-	-	-	-	-	-	-
9. Software	-	-	-	-	-	-	-	-	-
10. Marketing/Communications	131.77	-	131.77	-	-	-	131.77	-	131.77
11. Staff Education and Training	52.71	-	52.71	-	-	-	52.71	-	52.71
12. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
13. Other (specify details mandatory):	52.71	-	52.71	-	-	-	52.71	-	52.71
	15.81	-	15.81	-	-	-	15.81	-	15.81
TOTAL	28,865.77	0	28,865.77	8,711.27	0	8,711.27	18,154.50	0	18,154.50
Indirect As A Percent of Direct									9.8%

Contractor Initials: *md*
Date: *6/3/13*

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Contractor Name: Crocheted Mountain Community Care

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Medicaid

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS			Contract Share Total
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total	
1. Total Salary/Wages	75,122.81	5,905.99	81,028.80	17,789.58	-	17,789.58	57,913.23	5,905.99	63,819.22	
2. Employee Benefits	24,235.64	2,779.29	27,014.93	8,376.27	-	8,376.27	15,659.37	2,779.29	18,438.66	
3. Consultants	-	-	-	-	-	-	-	-	-	
4. Equipment	-	-	-	-	-	-	-	-	-	
5. Rental	676.20	-	676.20	-	-	-	676.20	-	676.20	
6. Repair and Maintenance	104.03	-	104.03	-	-	-	104.03	-	104.03	
7. Purchase/Depreciation	-	-	-	-	-	-	-	-	-	
8. Supplies	-	-	-	-	-	-	-	-	-	
9. Educational	-	-	-	-	-	-	-	-	-	
10. Lab	-	-	-	-	-	-	-	-	-	
11. Pharmacy	-	-	-	-	-	-	-	-	-	
12. Medical	-	-	-	-	-	-	-	-	-	
13. Office	2,284.81	-	2,284.81	-	-	-	2,284.81	-	2,284.81	
14. Travel	3,181.74	-	3,181.74	-	-	-	3,181.74	-	3,181.74	
15. Occupancy	4,595.75	-	4,595.75	-	-	-	4,595.75	-	4,595.75	
16. Current Expenses	-	-	-	-	-	-	-	-	-	
17. Telephone	1,121.91	-	1,121.91	-	-	-	1,121.91	-	1,121.91	
18. Postage	764.95	-	764.95	-	-	-	764.95	-	764.95	
19. Subscriptions	101.91	-	101.91	-	-	-	101.91	-	101.91	
20. Audit and Legal	-	-	-	-	-	-	-	-	-	
21. Insurance	-	-	-	-	-	-	-	-	-	
22. Board Expenses	-	-	-	-	-	-	-	-	-	
23. Software	-	-	-	-	-	-	-	-	-	
24. Marketing/Communications	637.45	-	637.45	-	-	-	637.45	-	637.45	
25. Staff Education and Training	254.98	-	254.98	-	-	-	254.98	-	254.98	
26. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-	
27. Other (specify details mandatory):	-	-	-	-	-	-	-	-	-	
28. Printing and Reproduction	254.98	-	254.98	-	-	-	254.98	-	254.98	
29. Advertising	76.49	-	76.49	-	-	-	76.49	-	76.49	
TOTAL	113,993.65	8,685.28	122,678.93	26,175.85	-	26,175.85	87,817.80	8,685.28	96,503.08	8.6%

Indirect As A Percent of Direct

Contractor Initials: *md*Date: *6/3/13*

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Title III Family Caregiver

Contractor Name: Crotched Mountain Community Care

Budget Request for: Family Caregiver Program

(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Incremental	Fixed	Total
1. Total Salary/Wages	\$ 12,315.28	\$ 850.66	\$ 13,275.92	\$ 2,895.24	\$ -	\$ 2,895.24	\$ -	\$ 850.66	\$ 10,380.68
2. Employee Benefits	\$ 3,942.11	\$ 452.07	\$ 4,394.18	\$ 1,302.46	\$ -	\$ 1,302.46	\$ -	\$ 452.07	\$ 3,031.72
3. Consultants	-	-	-	-	-	-	-	-	-
4. Equipment:	-	-	-	-	-	-	-	-	-
Rental	\$ 109.89	-	\$ 109.89	-	-	-	\$ 109.89	-	\$ 109.89
Repair and Maintenance	\$ 16.92	-	\$ 16.92	-	-	-	\$ 16.92	-	\$ 16.92
Purchase/Depreciation	-	-	-	-	-	-	-	-	-
5. Supplies:	-	-	-	-	-	-	-	-	-
Educational	-	-	-	-	-	-	-	-	-
Lab	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-
Medical	-	-	-	-	-	-	-	-	-
Office	\$ 373.28	-	\$ 373.28	-	-	-	\$ 373.28	-	\$ 373.28
6. Travel	\$ 514.28	-	\$ 514.28	-	-	-	\$ 514.28	-	\$ 514.28
7. Occupancy	\$ 747.53	-	\$ 747.53	-	-	-	\$ 747.53	-	\$ 747.53
8. Current Expenses	-	-	-	-	-	-	-	-	-
Telephone	\$ 182.49	-	\$ 182.49	-	-	-	\$ 182.49	-	\$ 182.49
Postage	\$ 124.42	-	\$ 124.42	-	-	-	\$ 124.42	-	\$ 124.42
Subscriptions	\$ 16.59	-	\$ 16.59	-	-	-	\$ 16.59	-	\$ 16.59
Audit and Legal	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-
Board Expenses	-	-	-	-	-	-	-	-	-
9. Software	-	-	-	-	-	-	-	-	-
10. Marketing/Communications	\$ 103.69	-	\$ 103.69	-	-	-	\$ 103.69	-	\$ 103.69
11. Staff Education and Training	\$ 41.47	-	\$ 41.47	-	-	-	\$ 41.47	-	\$ 41.47
12. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
13. Other (specify details mandatory):	-	-	-	-	-	-	-	-	-
Printing and Reproduction	\$ 41.47	-	\$ 41.47	-	-	-	\$ 41.47	-	\$ 41.47
Advertising	\$ 12.44	-	\$ 12.44	-	-	-	\$ 12.44	-	\$ 12.44
TOTAL	\$ 18,541.94	\$ 1,412.73	\$ 19,954.67	\$ 4,257.70	\$ -	\$ 4,257.70	\$ 14,284.24	\$ 1,412.73	\$ 15,696.97

Indirect As A Percent of Direct 9.0%

Contractor Initials: *MD*

Date: *6/3/13*

Family Caregiver

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program**

Contractor Name: Crotched Mountain Community Care

Budget Request for: State Health Insurance Assistance Program

(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 13,261.63	\$ 1,034.48	\$ 14,296.11	\$ 3,117.72	\$ -	\$ 3,117.72	\$ 10,143.91	\$ 1,034.48	\$ 11,178.39
2. Employee Benefits	\$ 4,245.05	\$ 485.81	\$ 4,730.86	\$ 1,487.16	\$ -	\$ 1,487.16	\$ 2,777.89	\$ 485.81	\$ 3,264.70
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ 118.45	\$ -	\$ 118.45	\$ -	\$ -	\$ -	\$ 118.45	\$ -	\$ 118.45
Repair and Maintenance	\$ 18.22	\$ -	\$ 18.22	\$ -	\$ -	\$ -	\$ 18.22	\$ -	\$ 18.22
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 401.95	\$ -	\$ 401.95	\$ -	\$ -	\$ -	\$ 401.95	\$ -	\$ 401.95
Travel	\$ 553.80	\$ -	\$ 553.80	\$ -	\$ -	\$ -	\$ 553.80	\$ -	\$ 553.80
7. Occupancy	\$ 804.88	\$ -	\$ 804.88	\$ -	\$ -	\$ -	\$ 804.88	\$ -	\$ 804.88
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 186.51	\$ -	\$ 186.51	\$ -	\$ -	\$ -	\$ 186.51	\$ -	\$ 186.51
Postage	\$ 133.98	\$ -	\$ 133.98	\$ -	\$ -	\$ -	\$ 133.98	\$ -	\$ 133.98
Subscriptions	\$ 17.86	\$ -	\$ 17.86	\$ -	\$ -	\$ -	\$ 17.86	\$ -	\$ 17.86
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 111.85	\$ -	\$ 111.85	\$ -	\$ -	\$ -	\$ 111.85	\$ -	\$ 111.85
11. Staff Education and Training	\$ 44.86	\$ -	\$ 44.86	\$ -	\$ -	\$ -	\$ 44.86	\$ -	\$ 44.86
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing and Reproduction	\$ 44.86	\$ -	\$ 44.86	\$ -	\$ -	\$ -	\$ 44.86	\$ -	\$ 44.86
Advertising	\$ 13.40	\$ -	\$ 13.40	\$ -	\$ -	\$ -	\$ 13.40	\$ -	\$ 13.40
Volunteer Time	\$ 2,391.12	\$ -	\$ 2,391.12	\$ 2,391.12	\$ -	\$ 2,391.12	\$ -	\$ -	\$ -
TOTAL	\$ 22,357.92	\$ 1,521.29	\$ 23,879.21	\$ 6,976.00	\$ -	\$ 6,976.00	\$ 15,381.92	\$ 1,521.29	\$ 16,903.21

9.8%

Contractor Initials: *ma*Date: *6/3/13*

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Grant: Senior Medicare Patrol

Contractor Name: Crofted Mountain Community Care

Budget Request for Senior Medicare Patrol

(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 7,445.88	\$ 8,028.71	\$ 15,474.59	\$ 1,750.50	\$ 1,750.50	\$ 3,501.00	\$ 5,695.38	\$ 5,695.38	\$ 11,390.76
2. Employee Benefits	\$ 2,383.43	\$ 2,656.76	\$ 5,040.19	\$ 823.77	\$ 823.77	\$ 1,647.54	\$ 1,550.68	\$ 1,550.68	\$ 3,101.36
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ 66.50	\$ -	\$ 66.50	\$ -	\$ -	\$ -	\$ 66.50	\$ 66.50	\$ 133.00
6. Repair and Maintenance	\$ 10.23	\$ -	\$ 10.23	\$ -	\$ -	\$ -	\$ 10.23	\$ 10.23	\$ 20.46
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 225.68	\$ 225.68	\$ 451.36	\$ -	\$ -	\$ -	\$ 225.68	\$ 225.68	\$ 451.36
14. Travel	\$ 310.95	\$ 310.95	\$ 621.90	\$ -	\$ -	\$ -	\$ 310.95	\$ 310.95	\$ 621.90
15. Occupancy	\$ 451.06	\$ 451.06	\$ 902.12	\$ -	\$ -	\$ -	\$ 451.06	\$ 451.06	\$ 902.12
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ 110.33	\$ 110.33	\$ 220.66	\$ -	\$ -	\$ -	\$ 110.33	\$ 110.33	\$ 220.66
18. Postage	\$ 75.23	\$ 75.23	\$ 150.46	\$ -	\$ -	\$ -	\$ 75.23	\$ 75.23	\$ 150.46
19. Subscriptions	\$ 10.05	\$ 10.05	\$ 20.10	\$ -	\$ -	\$ -	\$ 10.05	\$ 10.05	\$ 20.10
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ 62.68	\$ 62.68	\$ 125.36	\$ -	\$ -	\$ -	\$ 62.68	\$ 62.68	\$ 125.36
25. Staff Education and Training	\$ 25.08	\$ 25.08	\$ 50.16	\$ -	\$ -	\$ -	\$ 25.08	\$ 25.08	\$ 50.16
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. Printing & Reproduction	\$ 25.08	\$ 25.08	\$ 50.16	\$ -	\$ -	\$ -	\$ 25.08	\$ 25.08	\$ 50.16
29. Advertising	\$ 7.53	\$ 7.53	\$ 15.06	\$ -	\$ -	\$ -	\$ 7.53	\$ 7.53	\$ 15.06
30. Volunteer Time	\$ 2,391.12	\$ 2,391.12	\$ 4,782.24	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 13,801.75	\$ 854.15	\$ 14,655.90	\$ 4,955.39	\$ 4,955.39	\$ 9,910.78	\$ 8,636.36	\$ 8,636.36	\$ 17,272.14

8.3%

9.9%

Indirect As A Percent of Direct

Contractor Initials: *mg*

Date: *6/21/13*

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting
of Board of Directors of Crotched Mountain Community Care, Inc.
(Name of Governing Board) (Name of Corporation)
on July 7, 2000 which was duly called at which a quorum was
present:

"On motion duly made and seconded, it was voted to authorize
the Vice President of CMCC, Inc. to accept grants and awards and enter into contracts, and contract
amendments from time to time with the New Hampshire Department of Health and Human Services,
Division of Community Based Care Services, Bureau of Elderly and Adult Services, to sign and otherwise
fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any
related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue
until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)
Margaret Lins is the duly elected (Title) Vice President of
this corporation and is still qualified and serving in such capacity.

June 3, 2013
(Date)

B. F. Gayman / Benjamin F. Gayman
Secretary

(Imprint seal of corporation. If none, write: "No corporate seal.")

STATE OF NEW HAMPSHIRE

COUNTY OF Hillsborough

On June 3, 2013, before the undersigned officer personally
appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the
Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that _____ he
executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

Nancy M. Morin
Notary Public/Justice of the Peace

My commission expires:

NANCY M. MORIN, Notary Public
My Commission Expires March 6, 2018

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that CROTCHED MOUNTAIN COMMUNITY CARE, INC. is a New Hampshire nonprofit corporation formed June 6, 1986. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 20th day of May A.D. 2013

A handwritten signature in dark ink, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State

Client#: 503796

CROTCMOU

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/09/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services LLC PO Box 6360 Manchester, NH 03108-6360 603 625-1100	CONTACT NAME: PHONE (A/C, No, Ext): 603 625-1100 FAX (A/C, No): E-MAIL: ADDRESS:														
INSURED Crotched Mountain Foundation 1 Verney Drive Greenfield, NH 03047	<table border="1"> <tr> <th data-bbox="792 457 1317 489">INSURER(S) AFFORDING COVERAGE</th> <th data-bbox="1317 457 1430 489">NAIC #</th> </tr> <tr> <td data-bbox="792 489 1317 520">INSURER A: Philadelphia Insurance Company</td> <td data-bbox="1317 489 1430 520">23850</td> </tr> <tr> <td data-bbox="792 520 1317 552">INSURER B: AIM Mutual Insurance Company</td> <td data-bbox="1317 520 1430 552">33758</td> </tr> <tr> <td data-bbox="792 552 1317 583">INSURER C:</td> <td data-bbox="1317 552 1430 583"></td> </tr> <tr> <td data-bbox="792 583 1317 615">INSURER D:</td> <td data-bbox="1317 583 1430 615"></td> </tr> <tr> <td data-bbox="792 615 1317 644">INSURER E:</td> <td data-bbox="1317 615 1430 644"></td> </tr> <tr> <td data-bbox="792 644 1317 676">INSURER F:</td> <td data-bbox="1317 644 1430 676"></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Philadelphia Insurance Company	23850	INSURER B: AIM Mutual Insurance Company	33758	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Philadelphia Insurance Company	23850														
INSURER B: AIM Mutual Insurance Company	33758														
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC.		PHPK900397	08/01/2012	08/01/2013	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$200,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☒ ALL OWNED AUTOS ☒ HIRED AUTOS ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS		PHPK900397	08/01/2012	08/01/2013	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ EXCESS LIAB ☒ RETENTION \$10000 ☒ OCCUR ☐ CLAIMS-MADE		PHUB391564	08/01/2012	08/01/2013	EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	ECC60040002282013A	04/07/2013	04/07/2014	☒ WC STATUS ☐ TORY LIMITS ☐ OTH-ER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
A	Professional Liab		PHPK900397	08/01/2012	08/01/2013	\$1,000,000/\$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

This certificate covers all operations usual and customary to the insureds business.

** Supplemental Name **

CMRS II, CMRS IV, CMRS-Whitefield Inc
 Crotched Mountain Community Care Inc
 (See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

New Hampshire, State of Dept of Health & Human Svcs 105 Pleasant Street Concord, NH 03301	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: 

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008770) with Crotched Mountain Community Care, Inc., Manchester New Hampshire (Vendor # 177293) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$794,709.88 from \$441,764.54 to \$1,236,474.42 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$79,817.54	\$0.00	\$79,817.54
2012	102-500734	Contracts for Program Services	\$0.00	\$79,817.54	\$79,817.54
2013	102-500734	Contracts for Program Services	\$0.00	\$79,817.54	\$79,817.54
Subtotal			\$79,817.54	\$159,635.08	\$239,452.62

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$193,006.15	\$0.00	\$193,006.15

2012	550-500398	Assessment & Counseling	\$0.00	\$193,006.15	\$193,006.15
2013	550-500398	Assessment & Counseling	\$0.00	\$193,006.15	\$193,006.15
Subtotal			\$193,006.15	\$386,012.30	\$579,018.45

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$21,554.85	\$0.00	\$21,554.85
2012	545-500387	I & R Contracts	\$0.00	\$21,487.20	\$21,487.20
2013	545-500387	I & R Contracts	\$0.00	\$21,487.20	\$21,487.20
Subtotal			\$21,554.85	\$42,974.40	\$64,529.25

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$55,000.00	\$0.00	\$55,000.00
2012	072-500575	Grants - Federal	\$0.00	\$20,000.00	\$20,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$55,000.00	\$20,000.00	\$75,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
2013	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
Subtotal			\$37,000.00	\$74,000.00	\$111,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$55,386.00	\$0.00	\$55,386.00
2012	102-500731	Contracts for Program Services	\$0.00	\$56,044.05	\$56,044.05
2013	102-500731	Contracts for Program Services	\$0.00	\$56,044.05	\$56,044.05
Subtotal			\$55,386.00	\$112,088.10	\$167,474.10
Grand Total			\$441,764.54	\$794,709.88	\$1,236,474.42

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Crotched Mountain Community Care, Inc for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Rockingham County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Crotched Mountain Community Care, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 4

accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Crotched Mountain Community Care, Inc. through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

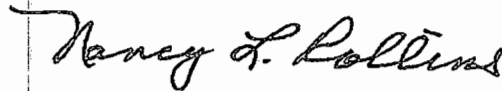
Area Served: Rockingham County

Source of Funds: 52.8% Federal funds and 47.2% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

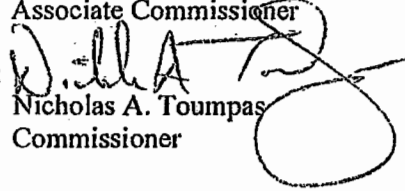
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

A		B	C	D	E	F	G	H	I	J	K	L
1	Program Name	New Hampshire ServiceLink Resource Center										
2	Contract Purpose	Provide services for I&R/LTC Counseling, NHFCSP, SMP, SHIP, and SHIP-MPPA										
3												
4	RFP Bidders Summary	Area Served:	Merrimack County	Carroll County	Rockingham County	Hillsborough County	Grafton County	Belknap County	Monadnock Region	Sullivan County	Stratford County	Cook County
5	RFP CRITERIA	Man Pts	Community Action Program Belknap-Merrimack Inc	Carroll County Health and Home Care	Crooked Mountain Community Services Inc	Easter Seal's New Hampshire	Grafton Cty Senior Citizens Council	Lakes Region Partnership for Public Health	Monadnock Collaborative	Southwestern Community Services, Inc.	Stratford Network	Tri-County Community Action Program
6	Min. Requirements	10	10,000	10,000	9,000	9,000	10,000	10,000	10,000	9,000	9,000	10,000
7	Organization Background, Experience	15	14,500	14,500	14,100	13,600	15,000	15,000	14,700	13,500	14,300	14,100
8	Statement of Work	40	38,700	36,100	37,800	34,400	38,600	36,600	35,900	31,900	34,300	27,100
9	Budget and Narrative	35	32,300	29,400	34,000	26,600	33,400	30,400	31,800	26,000	26,700	31,100
10	Total	100	95,900	90,000	94,900	83,600	97,000	92,000	92,400	80,400	84,300	83,100
11												
12	RFP Reviewers											
13	Name and Job Title:		Department of DHHS: Agency									
14	1. Wendy Aultman, SLRC Program Manager		BEAS									
15	2. Cathy Crepaux, NHFCSP Manager		BEAS									
16	3. Carol Demmon, Medicare Coordinator and Program Specialist		BEAS									
17	4. Donald Hunter, Senior Management Analyst		Office and Medicaid Business and Policy									
18	5. Sally Varney, Program Planning and Review Specialist for Quality		Division of Community Based Care									
19												

Qualifications:	
Over ten years in administering the SLRC by providing oversight for program and policy of the SLRCs as well as coordinating efforts statewide and within BEAS.	
Six years in administering the NHFCSP by overseeing the AOA grant awards to provide services through existing processes while developing new cost effective service delivery approaches with discretionary grants from AOA.	
Over ten years in administering the SHIP and SMP through the SLRCs.	
Five years in Medicaid Policy, of which includes Medicare Part D Coordinator for DHHS, and works with NH Legislature and national government policy organizations.	
Ten years in Quality Management for federal and state funded DHHS programs.	



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
 HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Frankestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSPP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSPP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

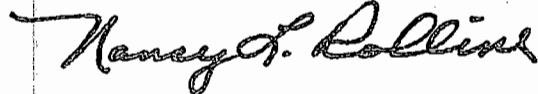
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

A	B	C	D	E	F	G	H	I	J	K	L
20 Allocation/Funding Sources											
21 Budget Awarded:											
22 Funding Source:	Contract Amts G. Total	Merimack	Carroll	Roddingham	Hillborough	Grafton	Bellnap	Monadnock	Sullivan	Stafford	Coos
23 LTC funds (ServiceLink General Funds) ¹	\$532,116.94	\$58,532.86	\$34,587.60	\$79,817.54	\$106,423.39	\$58,532.86	\$39,908.77	\$42,569.36	\$34,587.60	\$42,569.36	\$34,587.60
24 Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,008.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$83,636.00	\$102,936.61	\$83,636.00
25 I&RIA (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44
26 Subtotal	\$1,967,523.58	\$215,877.59	\$127,564.04	\$294,376.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04
27											
28 Family Caregiver Support Title III-E (AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$27,000.00	\$27,000.00	\$27,000.00
29 Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$55,000.00	\$15,000.00	\$52,000.00		\$40,000.00	
30 Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$57,000.00	\$52,000.00	\$52,000.00	\$37,000.00	\$67,000.00	\$27,000.00
31 SHIP (CMS Grant)	\$190,400.00	\$20,537.00	\$13,069.00	\$28,005.00	\$37,340.00	\$20,537.00	\$13,069.00	\$14,836.00	\$12,135.50	\$18,636.00	\$12,135.50
32 SHIP (AoA Grant) ³	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$13,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
33 MTPA (CMS/AoA Grant ending May 30, 2011) ⁴	\$58,000.00	\$6,960.00	\$2,320.00	\$8,700.00	\$12,180.00	\$6,960.00	\$2,320.00	\$2,320.00	\$2,320.00	\$6,960.00	\$6,960.00
34 Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$41,196.40	\$24,106.80	\$27,219.20	\$27,550.60	\$35,559.20	\$27,196.60
35 Grand Total	\$2,912,463.58	\$331,073.99	\$218,670.84	\$441,764.54	\$583,932.72	\$294,973.99	\$223,296.07	\$221,221.09	\$177,114.66	\$259,561.09	\$181,754.64
36 % Federal Funds	56.98%										

Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$362,942.00 in match.*

Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

Note 3: The SLRCs are not required to provide matching funds under the NHCSP, however they have provided \$129,229 in match.

Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

*Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Easter Seals New Hampshire, Inc.**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 3rd day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Easter Seals New Hampshire, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 555 Auburn Street, Manchester, New Hampshire, 03103.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$1,859,296.72.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:
 - 6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:
 1. Number of individuals served
 2. Number of repeat visits by individuals



3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.



- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

a. Delete "Contract Period July 1, 2010 through June 30, 2013."

b. Delete:

1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$1,612,212.56.

c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731

ES
6/13/2013



d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 14,324.80
LTC funds (ServiceLink General Funds)	\$ 53,200.00
Family Caregiver Support Title III-E	\$ 15,696.97
Senior Medicare Patrol	\$ 12,654.00
State Health Insurance Assistance Program	\$ 22,537.62
Assessment & Counseling (Medicaid)	\$ 128,670.77

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Easter Seals New Hampshire, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6/5/13
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Easter Seals New Hampshire, Inc.

6/3/2013
Date

Elin Treanor
Name: Elin Treanor
Title: COO/CFO

Acknowledgement:

State of New Hampshire, County of Hillsborough on June 3, 2013,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.
Signature of Notary Public or Justice of the Peace

Diane L. Boulay
Name and Title of Notary or Justice of the Peace

DIANE L. BOULAY, Notary Public
My Commission Expires September 3, 2013

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Easter Seals New Hampshire, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

5 Jun. 2013
Date

[Signature]
Name: James P. Henrich
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

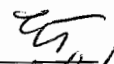
Date

Name:
Title:

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: Easter Seals NH, Inc
Budget Request for: Informational, Referral and Assistance
(Name of Program)
Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 26,442.60	\$ 2,644.26	\$ 29,086.86	\$ 1,857.89	\$ 185.79	\$ 2,043.68	\$ 24,584.71	\$ 2,458.47	\$ 27,043.18
2. Employee Benefits	\$ 7,411.36	\$ 741.13	\$ 8,152.49	\$ 485.02	\$ 48.50	\$ 533.52	\$ 6,926.34	\$ 692.63	\$ 7,618.97
3. Consultants	\$ 7,955.40	\$ 795.54	\$ 8,750.94	\$ 7,921.81	\$ 792.18	\$ 8,713.99	\$ 37.65	\$ 3.77	\$ 41.42
4. Equipment:									
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:									
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 150.60	\$ 15.06	\$ 165.66	\$ -	\$ -	\$ -	\$ 150.60	\$ 15.06	\$ 165.66
6. Travel	\$ 507.76	\$ 50.78	\$ 558.54	\$ -	\$ -	\$ -	\$ 507.76	\$ 50.78	\$ 558.54
7. Occupancy	\$ 4,113.31	\$ 411.33	\$ 4,524.64	\$ 1,068.13	\$ 106.82	\$ 1,175.00	\$ 3,045.13	\$ 304.51	\$ 3,349.64
8. Current Expenses									
Telephone	\$ 284.63	\$ 28.46	\$ 313.09	\$ -	\$ -	\$ -	\$ 284.63	\$ 28.46	\$ 313.09
Postage	\$ 451.80	\$ 45.18	\$ 496.98	\$ -	\$ -	\$ -	\$ 451.80	\$ 45.18	\$ 496.98
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ 952.37	\$ 95.24	\$ 1,047.61	\$ 952.37	\$ 95.24	\$ 1,047.61	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 470.63	\$ 47.06	\$ 517.69	\$ -	\$ -	\$ -	\$ 470.63	\$ 47.06	\$ 517.69
11. Staff Education and Training	\$ 257.72	\$ 25.77	\$ 283.49	\$ -	\$ -	\$ -	\$ 257.72	\$ 25.77	\$ 283.49
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 112.95	\$ 11.30	\$ 124.25	\$ -	\$ -	\$ -	\$ 112.95	\$ 11.30	\$ 124.25
Employment Advertising	\$ 18.26	\$ 1.83	\$ 20.09	\$ -	\$ -	\$ -	\$ 18.26	\$ 1.83	\$ 20.09
TOTAL	\$ 49,133.45	\$ 4,913.36	\$ 54,046.80	\$ 12,265.27	\$ 1,228.53	\$ 13,513.80	\$ 36,348.18	\$ 3,694.82	\$ 40,533.00
Indirect As A Percent of Direct			10.0%			10.0%			10.0%

Contractor Initials: 
Date: 6/15/2013

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Easter Seals NH, Inc

Budget Request for: Informational, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 8,655.98	\$ 865.60	\$ 9,521.58	\$ -	\$ -	\$ -	\$ 8,655.98	\$ 865.60	\$ 9,521.58
2. Employee Benefits	\$ 2,438.67	\$ 243.86	\$ 2,682.53	\$ -	\$ -	\$ -	\$ 2,438.67	\$ 243.86	\$ 2,682.53
3. Consultants	\$ 13.60	\$ 1.36	\$ 14.96	\$ -	\$ -	\$ -	\$ 13.60	\$ 1.36	\$ 14.96
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 54.40	\$ 5.44	\$ 59.84	\$ -	\$ -	\$ -	\$ 54.40	\$ 5.44	\$ 59.84
6. Travel	\$ 183.42	\$ 18.34	\$ 201.76	\$ -	\$ -	\$ -	\$ 183.42	\$ 18.34	\$ 201.76
7. Occupancy	\$ 1,099.97	\$ 110.00	\$ 1,209.97	\$ -	\$ -	\$ -	\$ 1,099.97	\$ 110.00	\$ 1,209.97
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 102.82	\$ 10.28	\$ 113.10	\$ -	\$ -	\$ -	\$ 102.82	\$ 10.28	\$ 113.10
Postage	\$ 163.20	\$ 16.32	\$ 179.52	\$ -	\$ -	\$ -	\$ 163.20	\$ 16.32	\$ 179.52
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 170.00	\$ 17.00	\$ 187.00	\$ -	\$ -	\$ -	\$ 170.00	\$ 17.00	\$ 187.00
11. Staff Education and Training	\$ 93.09	\$ 9.31	\$ 102.40	\$ -	\$ -	\$ -	\$ 93.09	\$ 9.31	\$ 102.40
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 40.80	\$ 4.08	\$ 44.88	\$ -	\$ -	\$ -	\$ 40.80	\$ 4.08	\$ 44.88
Employment Advertising	\$ 6.60	\$ 0.66	\$ 7.26	\$ -	\$ -	\$ -	\$ 6.60	\$ 0.66	\$ 7.26
TOTAL	\$ 13,022.65	\$ 1,302.25	\$ 14,324.80	\$ -	\$ -	\$ -	\$ 13,022.65	\$ 1,302.25	\$ 14,324.80

Indirect As A Percent of Direct

10.0%

Contractor Initials: *ET*Date: *6/13/2013*

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: Easter Seals NH, Inc

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 8,418.81	\$ 841.87	\$ 9,260.68	\$ 580.61	\$ 58.06	\$ 638.67	\$ 7,838.20	\$ 783.81	\$ 8,622.01
2. Employee Benefits	\$ 2,049.77	\$ 204.98	\$ 2,254.75	\$ 151.37	\$ 15.16	\$ 166.53	\$ 2,098.20	\$ 189.82	\$ 2,288.02
3. Consultants	\$ 2,486.19	\$ 248.62	\$ 2,734.81	\$ 2,476.64	\$ 247.56	\$ 2,724.20	\$ 12.55	\$ 1.28	\$ 13.83
4. Equipment:									
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:									
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 50.20	\$ 5.02	\$ 55.22	\$ -	\$ -	\$ -	\$ 50.20	\$ 5.02	\$ 55.22
6. Travel	\$ 169.25	\$ 16.93	\$ 186.18	\$ -	\$ -	\$ -	\$ 169.25	\$ 16.93	\$ 186.18
7. Occupancy	\$ 1,348.86	\$ 134.89	\$ 1,483.75	\$ 333.82	\$ 33.38	\$ 367.20	\$ 1,015.04	\$ 101.50	\$ 1,116.54
8. Current Expenses									
Telephone	\$ 94.88	\$ 9.49	\$ 104.37	\$ -	\$ -	\$ -	\$ 94.88	\$ 9.49	\$ 104.37
Postage	\$ 150.60	\$ 15.06	\$ 165.66	\$ -	\$ -	\$ -	\$ 150.60	\$ 15.06	\$ 165.66
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ 297.63	\$ 29.76	\$ 327.39	\$ 297.63	\$ 29.76	\$ 327.39	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 156.88	\$ 15.69	\$ 172.57	\$ -	\$ -	\$ -	\$ 156.88	\$ 15.69	\$ 172.57
11. Staff Education and Training	\$ 85.91	\$ 8.59	\$ 94.50	\$ -	\$ -	\$ -	\$ 85.91	\$ 8.59	\$ 94.50
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):									
Printing	\$ 37.65	\$ 3.77	\$ 41.42	\$ -	\$ -	\$ -	\$ 37.65	\$ 3.77	\$ 41.42
Employment Advertising	\$ 6.09	\$ 0.61	\$ 6.70	\$ -	\$ -	\$ -	\$ 6.09	\$ 0.61	\$ 6.70
TOTAL	\$ 15,364.72	\$ 1,536.47	\$ 16,901.19	\$ 3,339.27	\$ 333.92	\$ 3,673.19	\$ 11,516.46	\$ 1,151.55	\$ 12,668.01
Indirect As A Percent of Direct			10.0%						10.0%

Contractor Initials:

Date:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid**

Contractor Name: Easter Seals NH, Inc

Budget Request for: Long Term Supports Option Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Costs			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 78,420.48	\$ 7,842.05	\$ 86,262.53	-	-	-	\$ 78,420.48	\$ 7,842.05	\$ 86,262.53
2. Employee Benefits	\$ 21,343.70	\$ 2,134.37	\$ 23,478.07	-	-	-	\$ 21,343.70	\$ 2,134.37	\$ 23,478.07
3. Consultants	\$ 121.40	\$ 12.14	\$ 133.54	-	-	-	\$ 121.40	\$ 12.14	\$ 133.54
4. Equipment:	-	-	-	-	-	-	-	-	-
Rental	-	-	-	-	-	-	-	-	-
Repair and Maintenance	-	-	-	-	-	-	-	-	-
Purchase/Depreciation	-	-	-	-	-	-	-	-	-
5. Supplies:	-	-	-	-	-	-	-	-	-
Educational	-	-	-	-	-	-	-	-	-
Lab	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-
Medical	-	-	-	-	-	-	-	-	-
6. Travel	\$ 485.60	\$ 48.56	\$ 534.16	-	-	-	\$ 485.60	\$ 48.56	\$ 534.16
7. Occupancy	\$ 1,837.25	\$ 183.72	\$ 2,020.97	-	-	-	\$ 1,837.25	\$ 183.72	\$ 2,020.97
8. Current Expenses	\$ 9,818.83	\$ 981.88	\$ 10,800.71	-	-	-	\$ 9,818.83	\$ 981.88	\$ 10,800.71
Telephone	\$ 917.78	\$ 91.78	\$ 1,009.56	-	-	-	\$ 917.78	\$ 91.78	\$ 1,009.56
Postage	\$ 1,456.80	\$ 145.68	\$ 1,602.48	-	-	-	\$ 1,456.80	\$ 145.68	\$ 1,602.48
Subscriptions	-	-	-	-	-	-	-	-	-
Audit and Legal	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-
Board Expenses	-	-	-	-	-	-	-	-	-
Software	-	-	-	-	-	-	-	-	-
9. Marketing/Communications	\$ 1,517.50	\$ 151.75	\$ 1,669.25	-	-	-	\$ 1,517.50	\$ 151.75	\$ 1,669.25
10. Staff Education and Training	\$ 831.01	\$ 83.10	\$ 914.11	-	-	-	\$ 831.01	\$ 83.10	\$ 914.11
11. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
12. Other (specific details mandatory):	-	-	-	-	-	-	-	-	-
Printing	\$ 364.20	\$ 36.42	\$ 400.62	-	-	-	\$ 364.20	\$ 36.42	\$ 400.62
Employment Advertising	\$ 58.88	\$ 5.89	\$ 64.77	-	-	-	\$ 58.88	\$ 5.89	\$ 64.77
TOTAL	\$ 116,973.43	\$ 11,697.34	\$ 128,670.77	-	-	-	\$ 116,973.43	\$ 11,697.34	\$ 128,670.77

Indirect As A Percent of Direct 10.0%

Contractor Initials: ED
Date: 6/13/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title III E Family Caregiver**

Contractor Name: Easter Seals NH, Inc

Budget Request for: Hillsborough County SLRC
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 9,495.49	\$ 949.65	\$ 10,445.14	\$ -	\$ -	\$ -	\$ 9,495.49	\$ 949.65	\$ 10,445.14
2. Employee Benefits	\$ 2,675.48	\$ 267.55	\$ 2,943.03	\$ -	\$ -	\$ -	\$ 2,675.48	\$ 267.55	\$ 2,943.03
3. Consultants	\$ 14.80	\$ 1.48	\$ 16.28	\$ -	\$ -	\$ -	\$ 14.80	\$ 1.48	\$ 16.28
4. Equipment:									
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:									
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 59.20	\$ 5.92	\$ 65.12	\$ -	\$ -	\$ -	\$ 59.20	\$ 5.92	\$ 65.12
6. Travel	\$ 199.60	\$ 19.96	\$ 219.56	\$ -	\$ -	\$ -	\$ 199.60	\$ 19.96	\$ 219.56
7. Occupancy	\$ 1,197.02	\$ 119.70	\$ 1,316.72	\$ -	\$ -	\$ -	\$ 1,197.02	\$ 119.70	\$ 1,316.72
8. Current Expenses									
Telephone	\$ 111.89	\$ 11.19	\$ 123.08	\$ -	\$ -	\$ -	\$ 111.89	\$ 11.19	\$ 123.08
Postage	\$ 177.60	\$ 17.76	\$ 195.36	\$ -	\$ -	\$ -	\$ 177.60	\$ 17.76	\$ 195.36
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 185.00	\$ 18.50	\$ 203.50	\$ -	\$ -	\$ -	\$ 185.00	\$ 18.50	\$ 203.50
11. Staff Education and Training	\$ 101.31	\$ 10.13	\$ 111.44	\$ -	\$ -	\$ -	\$ 101.31	\$ 10.13	\$ 111.44
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):									
Printing	\$ 44.40	\$ 4.44	\$ 48.84	\$ -	\$ -	\$ -	\$ 44.40	\$ 4.44	\$ 48.84
Employment Advertising	\$ 7.18	\$ 0.72	\$ 7.90	\$ -	\$ -	\$ -	\$ 7.18	\$ 0.72	\$ 7.90
TOTAL	\$ 14,265.97	\$ 1,427.00	\$ 15,696.97	\$ -	\$ -	\$ -	\$ 14,265.97	\$ 1,427.00	\$ 15,696.97

Indirect As A Percent of Direct 10.0%

Contractor Initials: 

Date: 6/13/13

B-9 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program

Contractor Name: Easter Seals NH, Inc

Budget Request for: State Health Insurance Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 15,985.19	\$ 1,598.52	\$ 17,583.71	\$ -	\$ -	\$ -	\$ -	\$ 1,598.52	\$ 17,583.71
2. Employee Benefits	\$ 4,503.58	\$ 450.35	\$ 4,953.91	\$ -	\$ -	\$ -	\$ -	\$ 450.35	\$ 4,953.91
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Purchases/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
14. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
15. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 20,488.75	\$ 2,048.87	\$ 22,537.62	\$ -	\$ -	\$ -	\$ 20,488.75	\$ 2,048.87	\$ 22,537.62

Indirect As A Percent of Direct 10.0%

Contractor Initials: ET
Date: 6/13/2013

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol**

Contractor Name: Easter Seals NH, Inc

Budget Request for: Senior Medicare Patrol
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 8,975.07	\$ 897.51	\$ 9,872.58	\$ -	\$ -	\$ -	\$ 8,975.07	\$ 897.51	\$ 9,872.58
2. Employee Benefits	\$ 2,528.57	\$ 252.85	\$ 2,781.42	\$ -	\$ -	\$ -	\$ 2,528.57	\$ 252.85	\$ 2,781.42
3. Consultants	\$ 3,834.55	\$ 383.46	\$ 4,218.01	\$ 3,834.55	\$ 383.46	\$ 4,218.01	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontract/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 15,338.19	\$ 1,632.82	\$ 16,971.01	\$ 3,834.55	\$ 383.46	\$ 4,218.01	\$ 11,803.64	\$ 1,150.36	\$ 12,654.00

Indirect As A Percent of Direct 10.0%

Contractor Initials: *ET*
Date: *6/13/2013*

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting

of BOARD OF DIRECTORS of EASTER SEALS NH, INC.
(Name of Governing Board) (Name of Corporation)

on MAY 22, 2013 which was duly called at which a quorum was
present:

"On motion duly made and seconded, it was voted to authorize

the COO/CFO, to accept grants and awards and enter into contracts, and contract amendments from time to time with the New Hampshire Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services, to sign and otherwise fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)
KLIN TREANOR is the duly elected (Title) COO/CFO of
this corporation and is still qualified and serving in such capacity.

6-3-13
(Date)

Betty Burke
Secretary

(Imprint seal of corporation. If none, write: "No corporate seal.")

STATE OF NEW HAMPSHIRE

COUNTY OF Hillsborough

On June 3, 2013, before the undersigned officer personally appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that S he executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

Diane L Boulay
Notary Public/Justice of the Peace

My commission expires:

DIANE L. BOULAY, Notary Public
My Commission Expires September 3, 2013

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Easter Seals New Hampshire, Inc. is a New Hampshire nonprofit corporation formed November 6, 1967. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 4th day of April A.D. 2013

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/26/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Svcs of NE, Inc. PO Box 6360 Manchester, NH 03108-6360 603 625-1100	CONTACT NAME:	
	PHONE (A/C, No, Ext): 603 625-1100	FAX (A/C, No):
INSURED Easter Seals NH, Inc. Easter Seals NY, Inc. 555 Auburn Street Manchester, NH 03103	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Philadelphia Insurance Company	NAIC # 23850
	INSURER B: Liberty Mutual Insurance Co.	23043
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR		PHPK914096	09/01/2012	09/01/2013	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ☒ NON-OWNED AUTOS		PHPK914096	09/01/2012	09/01/2013	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$10,000		PHUB394930	09/01/2012	09/01/2013	EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☒ Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC7611258839013	01/01/2013	01/01/2014	☒ WC STATUTORY LIMITS ☐ OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A	Blanket-EDP RC Value		PHPK914096	09/01/2012	09/01/2013	\$3,019,050-\$500 Ded. Special Form Incl Theft

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Supplemental Names

Easter Seals NY, Inc., Easter Seals ME, Inc., STS, Inc., Agency Realty, Inc., Easter Seals Rhode Island, Inc., The Harbor Schools, Inc., Manchester Alcohol Rehabilitation Center, Inc., dba The Farnum Center, Easter Seals VT, Inc., Easter Seals CT, Inc., Webster Place Center, Inc., - The General Liability policy includes a blanket automatic Additional Insured endorsement that provides Additional Insured and a Blanket (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
Director, Division of Public Health Services, NH DHHS 29 Hazen Drive Concord, NH 03301	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008772) with Easter Seals New Hampshire, Inc., Manchester New Hampshire (Vendor # 177204) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$1,028,279.84 from \$583,932.72 to \$1,612,212.56 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$106,423.39	\$0.00	\$106,423.39
2012	102-500734	Contracts for Program Services	\$0.00	\$106,423.39	\$106,423.39
2013	102-500734	Contracts for Program Services	\$0.00	\$106,423.39	\$106,423.39
Subtotal			\$106,423.39	\$212,846.78	\$319,270.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$257,341.53	\$0.00	\$257,341.53

2012	550-500398	Assessment & Counseling	\$0.00	\$257,341.53	\$257,341.53
2013	550-500398	Assessment & Counseling	\$0.00	\$257,341.53	\$257,341.53
Subtotal			\$257,341.53	\$514,683.06	\$772,024.59

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$28,739.80	\$0.00	\$28,739.80
2012	545-500387	I & R Contracts	\$0.00	\$28,649.60	\$28,649.60
2013	545-500387	I & R Contracts	\$0.00	\$28,649.60	\$28,649.60
Subtotal			\$28,739.80	\$57,299.20	\$86,039.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$80,000.00	\$0.00	\$80,000.00
2012	072-500575	Grants - Federal	\$0.00	\$20,000.00	\$20,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$80,000.00	\$20,000.00	\$100,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
2013	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
Subtotal			\$37,000.00	\$74,000.00	\$111,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$74,428.00	\$0.00	\$74,428.00
2012	102-500731	Contracts for Program Services	\$0.00	\$74,725.40	\$74,725.40
2013	102-500731	Contracts for Program Services	\$0.00	\$74,725.40	\$74,725.40
Subtotal			\$74,428.00	\$149,450.80	\$223,878.80
Grand Total			\$583,932.72	\$1,028,279.84	\$1,612,212.56

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Easter Seals New Hampshire, Inc. for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Hillsborough County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Easter Seals New Hampshire, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and

accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Easter Seals New Hampshire, Inc. through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

Area Served: Hillsborough County

Source of Funds: 51.4% Federal funds and 48.6% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,

Nancy L. Rollins

Nancy L. Rollins
Associate Commissioner

Approved by:

Nicholas A. Toumpas
Nicholas A. Toumpas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
1	Program Name	New Hampshire ServiceLink Resource Center										
2	Contract Purpose	Provide services for L&R/LTC Counseling, NHCSP, SNP, SHIP, and SHIP-MOPPA										
3												
4	RFP Bidders Summary	Area Served:	Merrimack County	Carroll County	Rockingham County	Hillsborough County	Grafton County	Belknap County	Monadnock Region	Sullivan County	Stratford County	Cook County
5	RFP CRITERIA	Max Pts	Community Action Program Belknap-Merrimack Inc	Carroll County Health and Home Care	Crooked Mountain Community Services Inc	Easter Seal New Hampshire	Grafton Cty Senior Citizens Council	Lakes Region Partnership for Public Health	Monadnock Collaborative	Southwestern Community Services, Inc.	Stratford Network	Tri-County Community Action Program
6	Min. Requirements	10	10.00	10.00	9.00	9.00	10.00	10.00	10.00	9.00	9.00	10.00
7	Organization Background, Experience	15	14.50	14.50	14.10	13.60	15.00	15.00	14.70	13.50	14.50	14.10
8	Statement of Work	40	38.70	36.10	37.80	34.40	38.60	36.60	35.90	31.90	34.30	27.10
9	Budget and Narrative	35	32.30	29.40	34.00	26.60	33.40	30.40	31.80	26.00	26.70	31.10
10	Total	100	95.90	90.00	94.90	83.60	97.00	92.00	92.40	80.40	84.30	83.10
11												
12	RFP Reviewer											

13	Name and Job Title	Department of DHHS: Agency	Qualifications
14	1. Wendy Aultman, SLRC Program Manager	BEAS	Over ten years in administering the SLRC by providing oversight for program and policy of the SLRCs as well as coordinating efforts statewide and within BEAS.
15	2. Cathy Crepaux, NHCSP Manager	BEAS	Six years in administering the NHCSP by overseeing the AOA grant awards to provide services through existing processes while developing new cost effective service delivery approaches with discretionary grants from AOA.
16	3. Karel Demmon, Medicare Coordinator and Program Specialist	BEAS	Over ten years in administering the SHIP and SNAP through the SLRCs.
17	4. Donald Hunter, Senior Management Analyst	Office and Medicaid Business and Policy	Five years in Medicaid Policy, of which includes Medicare Part D Coordinator for DHHS, and works with NH Legislature and national government policy organizations.
18	5. Sally Varney, Program Planning and Review Specialist for Quality	Division of Community Based Care	Ten years in Quality Management for federal and state funded DHHS programs.
19			



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Franconia, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

May 24, 2010

Page 9

- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

A													
B													
C													
D													
E													
F													
G													
H													
I													
J													
K													
L													
Allocation/Funding Sources													
Budget Awarded:													
Funding Source:													
Contract Amts G. Total													
23	LTC funds (ServiceLink General Funds) ¹	\$572,116.94	\$58,532.86	\$24,587.60	\$79,817.54	\$106,423.39	\$58,532.86	\$39,908.77	\$42,569.36	\$14,587.60	\$42,569.36	\$34,587.60	
24	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,006.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$53,636.00	\$102,936.61	\$83,636.00	
25	1288/A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44	
26	Subtotal	\$1,962,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04	
27	Family Caregiver Support Title III-E (AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	
29	Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	
30	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	
31													
32	SHIP (CMS Grant)	\$190,400.00	\$20,577.00	\$13,069.00	\$28,005.00	\$37,340.00	\$20,577.00	\$15,069.00	\$14,936.00	\$12,135.50	\$18,636.00	\$12,135.50	
33	SNAPP (AoA Grant) ⁴	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$15,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10	
34	MOAPA (CMS/AoA Grant ending May 30, 2011) ⁵	\$58,000.00	\$6,960.00	\$2,320.00	\$8,700.00	\$12,180.00	\$6,960.00	\$2,320.00	\$2,320.00	\$2,320.00	\$2,320.00	\$2,320.00	
35	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$43,196.40	\$24,106.80	\$24,106.80	\$22,550.60	\$35,559.20	\$22,550.60	
36	Grand Total	\$2,912,463.58	\$311,073.99	\$218,670.84	\$441,764.54	\$583,932.72	\$311,073.99	\$223,296.07	\$221,221.09	\$177,114.64	\$259,561.09	\$181,754.64	
37	% Federal Funds	56.98%											

40 Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$362,942.00 in match.

41 Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

42 Note 3: The SLRCs are not required to provide matching funds under the NHFCS, however they have provided \$129,229 in match.

43 Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

44 *Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Grafton County Senior Citizens Council, Inc.**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment 2") dated this 31st day of May 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Grafton County Senior Citizens Council, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 10 Campbell Street, Lebanon, New Hampshire, 03766.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$1,038,887.81.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:
 - 6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:
 1. Number of individuals served
 2. Number of repeat visits by individuals
 3. Type of information/referral given to individuals



4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.
- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.



- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$895,927.89.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731
- d. Add Paragraph # 11:
For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the



Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 7,878.64
LTC funds (ServiceLink General Funds)	\$ 29,260.00
Family Caregiver Support Title III-E	\$ 15,696.97
Senior Medicare Patrol	\$ 6,959.70
State Health Insurance Assistance Program	\$ 12,395.69
Assessment & Counseling (Medicaid)	\$ 70,768.92

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Grafton County Senior Citizens Council, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6/5/13
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Grafton County Senior Citizens Council, Inc.

June 3, 2013
Date

Roberta J. Berner
Name: Roberta J. Berner
Title: Executive Director

Acknowledgement:

State of NH, County of Grafton on 6/3/13,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.
Signature of Notary Public or Justice of the Peace

[Signature]
Name and Title of Notary or Justice of the Peace

ELIZABETH A. SCHIBLEY
NOTARY PUBLIC
State of New Hampshire
My Commission Expires
February 2, 2016

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Grafton County Senior Citizens Council, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

5 JUN. 2013
Date

[Signature]
Name: JOHN P. HERRICK
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Grafton County Senior Citizens Council, Inc.

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,004.30	\$ -	\$ 3,004.30	\$ -	\$ -	\$ -	\$ 3,004.30	\$ -	\$ 3,004.30
2. Employee Benefits	\$ 691.00	\$ -	\$ 691.00	\$ -	\$ -	\$ -	\$ 691.00	\$ -	\$ 691.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 3,695.30	\$ -	\$ 3,695.30	\$ -	\$ -	\$ -	\$ 3,695.30	\$ -	\$ 3,695.30
Indirect As A Percent of Direct			0.0%						0.0%

Contractor Initials: RGB
Date: 6/3/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Grafton County Senior Citizens Council, Inc. (GCSCC)

Budget Request for: Information/Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Incremental	Fixed	Total
1. Total Salary/Wages	\$ 13,011.16	\$ -	\$ 13,011.16	\$ 8,003.00	\$ -	\$ 8,003.00	\$ 5,008.16	\$ -	\$ 5,008.16
2. Employee Benefits	\$ 2,528.00	\$ -	\$ 2,528.00	\$ 1,376.00	\$ -	\$ 1,376.00	\$ 1,152.00	\$ -	\$ 1,152.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 481.48	\$ -	\$ 481.48	\$ 41.00	\$ -	\$ 41.00	\$ 440.48	\$ -	\$ 440.48
6. Travel	\$ 937.00	\$ -	\$ 937.00	\$ 137.00	\$ -	\$ 137.00	\$ 800.00	\$ -	\$ 800.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone/fax	\$ 352.00	\$ -	\$ 352.00	\$ 192.00	\$ -	\$ 192.00	\$ 160.00	\$ -	\$ 160.00
Postage	\$ 160.00	\$ -	\$ 160.00	\$ -	\$ -	\$ -	\$ 160.00	\$ -	\$ 160.00
Subscriptions	\$ 92.00	\$ -	\$ 92.00	\$ 92.00	\$ -	\$ 92.00	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 131.00	\$ -	\$ 131.00	\$ 73.00	\$ -	\$ 73.00	\$ 58.00	\$ -	\$ 58.00
11. Staff Education and Training	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 17,792.64	\$ -	\$ 17,792.64	\$ 9,914.00	\$ -	\$ 9,914.00	\$ 7,878.64	\$ -	\$ 7,878.64

Indirect As A Percent of Direct

0.0%

Contractor Initials: RJB
Date: 6/3/13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: Grafton County Senior Citizens Council, Inc.

Budget Request for: Long Term Support Options Counseling
 (Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 13,336.70	\$ 2,762.00	\$ 16,098.70	\$ -	\$ -	\$ -	\$ 13,336.70	\$ 2,762.00	\$ 16,098.70
2. Employee Benefits	\$ 3,067.00	\$ 424.00	\$ 3,491.00	\$ -	\$ -	\$ -	\$ 3,067.00	\$ 424.00	\$ 3,491.00
3. Consultants	\$ -	\$ 52.00	\$ 52.00	\$ -	\$ -	\$ -	\$ -	\$ 52.00	\$ 52.00
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ 36.00	\$ 36.00	\$ -	\$ -	\$ -	\$ -	\$ 36.00	\$ 36.00
6. Repair and Maintenance	\$ -	\$ 31.00	\$ 31.00	\$ -	\$ -	\$ -	\$ -	\$ 31.00	\$ 31.00
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 287.00	\$ 181.00	\$ 468.00	\$ -	\$ -	\$ -	\$ 287.00	\$ 181.00	\$ 468.00
14. Travel	\$ 1,373.00	\$ 30.00	\$ 1,403.00	\$ -	\$ -	\$ -	\$ 1,373.00	\$ 30.00	\$ 1,403.00
15. Occupancy	\$ 2,070.00	\$ 6,125.00	\$ 8,195.00	\$ -	\$ -	\$ -	\$ 2,070.00	\$ 6,125.00	\$ 8,195.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ 257.00	\$ 4.00	\$ 261.00	\$ -	\$ -	\$ -	\$ 257.00	\$ 4.00	\$ 261.00
18. Postage	\$ 165.00	\$ -	\$ 165.00	\$ -	\$ -	\$ -	\$ 165.00	\$ -	\$ 165.00
19. Subscriptions	\$ 4.00	\$ -	\$ 4.00	\$ -	\$ -	\$ -	\$ 4.00	\$ -	\$ 4.00
20. Audit and Legal	\$ 206.00	\$ 18.00	\$ 224.00	\$ -	\$ -	\$ -	\$ 206.00	\$ 18.00	\$ 224.00
21. Insurance	\$ 390.00	\$ 102.00	\$ 492.00	\$ -	\$ -	\$ -	\$ 390.00	\$ 102.00	\$ 492.00
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ 311.00	\$ 311.00	\$ -	\$ -	\$ -	\$ -	\$ 311.00	\$ 311.00
24. Marketing/Communications	\$ -	\$ 774.00	\$ 774.00	\$ -	\$ -	\$ -	\$ -	\$ 774.00	\$ 774.00
25. Staff Education and Training	\$ 340.00	\$ 5.00	\$ 345.00	\$ -	\$ -	\$ -	\$ 340.00	\$ 5.00	\$ 345.00
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. In-Kind Volunteer receptionists(2)	\$ -	\$ 3,744.00	\$ 3,744.00	\$ -	\$ -	\$ -	\$ -	\$ 3,744.00	\$ 3,744.00
TOTAL	\$ 21,491.70	\$ 14,712.00	\$ 36,203.70	\$ -	\$ -	\$ -	\$ 21,491.70	\$ 4,073.00	\$ 25,564.70
Indirect As A Percent of Direct								19.0%	

Contractor Initials: 298
 Date: 6/3/13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid

Contractor Name: Grafton County Senior Citizens Council, Inc

Budget Request for: Long Term Supports Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 37,513.00	\$ 8,445.00	\$ 43,958.00	-	-	-	\$ 37,513.00	\$ 8,445.00	\$ 43,958.00
2. Employee Benefits	\$ 8,628.00	\$ 989.00	\$ 9,617.00	-	-	-	\$ 8,628.00	\$ 989.00	\$ 9,617.00
3. Consultants	-	120.00	120.00	-	-	-	-	120.00	120.00
4. Equipment:	-	-	-	-	-	-	-	-	-
Rental	\$ 443.00	\$ 83.00	\$ 526.00	-	-	-	\$ 443.00	\$ 83.00	\$ 526.00
Repair and Maintenance	\$ 386.00	\$ 72.00	\$ 458.00	-	-	-	\$ 386.00	\$ 72.00	\$ 458.00
Purchase/Depreciation	\$ 1,349.92	-	\$ 1,349.92	-	-	-	\$ 1,349.92	-	\$ 1,349.92
5. Supplies:	-	-	-	-	-	-	-	-	-
Educational	-	-	-	-	-	-	-	-	-
Lab	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-
Medical	-	-	-	-	-	-	-	-	-
6. Office	\$ 997.00	\$ 422.00	\$ 1,419.00	-	-	-	\$ 997.00	\$ 422.00	\$ 1,419.00
7. Travel	\$ 2,305.00	\$ 69.00	\$ 2,374.00	-	-	-	\$ 2,305.00	\$ 69.00	\$ 2,374.00
8. Occupancy	\$ 6,409.00	\$ 254.00	\$ 6,663.00	-	-	-	\$ 6,409.00	\$ 254.00	\$ 6,663.00
9. Current Expenses	-	-	-	-	-	-	-	-	-
Telephone	\$ 464.00	\$ 9.00	\$ 473.00	-	-	-	\$ 464.00	\$ 9.00	\$ 473.00
Postage	\$ 385.00	-	\$ 385.00	-	-	-	\$ 385.00	-	\$ 385.00
Subscriptions	\$ 10.00	\$ 10.00	\$ 20.00	-	-	-	\$ 10.00	\$ 10.00	\$ 20.00
Audit and Legal	\$ 462.00	\$ 41.00	\$ 503.00	-	-	-	\$ 462.00	\$ 41.00	\$ 503.00
Insurance	\$ 909.00	\$ 237.00	\$ 1,146.00	-	-	-	\$ 909.00	\$ 237.00	\$ 1,146.00
Board Expenses	-	-	-	-	-	-	-	-	-
10. Software	-	\$ 725.00	\$ 725.00	-	-	-	-	\$ 725.00	\$ 725.00
11. Marketing/Communications	\$ 400.00	\$ 10.00	\$ 410.00	-	-	-	\$ 400.00	\$ 10.00	\$ 410.00
12. Staff Education and Training	\$ 600.00	\$ 12.00	\$ 612.00	-	-	-	\$ 600.00	\$ 12.00	\$ 612.00
13. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
Other (specific details mandatory):	\$ 190.00	-	\$ 190.00	-	-	-	\$ 190.00	-	\$ 190.00
Program Expense	\$ -	\$ -	\$ -	-	-	-	\$ -	\$ -	\$ -
TOTAL	\$ 61,460.92	\$ 9,498.00	\$ 70,958.92	\$ 190.00	\$ -	\$ 190.00	\$ 61,270.92	\$ 9,498.00	\$ 70,768.92

Indirect As A Percent of Direct

15.5%

Contractor Initials: 298
Date: 6/3/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Title IIIIE Family Caregiver

Contractor Name: Grafton County Senior Citizens Council, Inc.

Budget Request for: Family Caregiver Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS			Total
	Direct	Indirect	Total	Direct	Indirect	Total	Incremental	Fixed	Total	
1. Total Salary/Wages	\$ 11,025.56	\$ -	\$ 11,025.56	\$ -	\$ -	\$ -	\$ 11,025.56	\$ -	\$ -	\$ 11,025.56
2. Employee Benefits	\$ 2,535.88	\$ -	\$ 2,535.88	\$ -	\$ -	\$ -	\$ 2,535.88	\$ -	\$ -	\$ 2,535.88
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 390.00	\$ -	\$ 390.00	\$ -	\$ -	\$ -	\$ 390.00	\$ -	\$ -	\$ 390.00
7. Travel	\$ 987.00	\$ -	\$ 987.00	\$ -	\$ -	\$ -	\$ 987.00	\$ -	\$ -	\$ 987.00
8. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 302.53	\$ -	\$ 302.53	\$ -	\$ -	\$ -	\$ 302.53	\$ -	\$ -	\$ 302.53
Postage	\$ 60.00	\$ -	\$ 60.00	\$ -	\$ -	\$ -	\$ 60.00	\$ -	\$ -	\$ 60.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ 20.00	\$ -	\$ 20.00	\$ -	\$ -	\$ -	\$ 20.00	\$ -	\$ -	\$ 20.00
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 111.00	\$ -	\$ 111.00	\$ -	\$ -	\$ -	\$ 111.00	\$ -	\$ -	\$ 111.00
11. Staff Education and Training	\$ 265.00	\$ -	\$ 265.00	\$ -	\$ -	\$ -	\$ 265.00	\$ -	\$ -	\$ 265.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 15,696.97	\$ -	\$ 15,696.97	\$ -	\$ -	\$ -	\$ 15,696.97	\$ -	\$ -	\$ 15,696.97

0.0%

Indirect As A Percent of Direct

Contractor Initials: RGB
Date: 6/3/13

Family Caregiver

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program

Contractor Name: Crafton County Senior Citizens Council, Inc.
 Budget Request for: State Health Insurance Assistance Program
 (Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 13,536.64	\$ -	\$ 13,536.64	\$ 4,132.88	\$ -	\$ 4,132.88	\$ 9,403.76	\$ -	\$ 9,403.76
2. Employee Benefits	\$ 3,113.43	\$ -	\$ 3,113.43	\$ 1,234.50	\$ -	\$ 1,234.50	\$ 1,878.93	\$ -	\$ 1,878.93
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 454.50	\$ -	\$ 454.50	\$ -	\$ -	\$ -	\$ 454.50	\$ -	\$ 454.50
7. Travel	\$ 400.00	\$ -	\$ 400.00	\$ -	\$ -	\$ -	\$ 400.00	\$ -	\$ 400.00
8. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 258.50	\$ -	\$ 258.50	\$ -	\$ -	\$ -	\$ 258.50	\$ -	\$ 258.50
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 17,763.07	\$ -	\$ 17,763.07	\$ 5,367.38	\$ -	\$ 5,367.38	\$ 12,395.69	\$ -	\$ 12,395.69
Indirect As A Percent of Direct									0.0%

Contractor Initials: 298
 Date: 6/13/13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol

Contractor Name: GCSCC

Budget Request for: Senior Medicare Patrol
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,893.12	\$ -	\$ 6,893.12	\$ 1,450.00	\$ -	\$ 1,450.00	\$ 5,443.12	\$ -	\$ 5,443.12
2. Employee Benefits	\$ 1,585.42	\$ -	\$ 1,585.42	\$ 135.42	\$ -	\$ 135.42	\$ 1,450.00	\$ -	\$ 1,450.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office-Copying	\$ 66.58	\$ -	\$ 66.58	\$ -	\$ -	\$ -	\$ 66.58	\$ -	\$ 66.58
14. Travel/Mileage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
15. Occupancy	\$ 2,400.00	\$ -	\$ 2,400.00	\$ -	\$ 2,400.00	\$ 2,400.00	\$ -	\$ -	\$ -
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (Specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 8,545.12	\$ 2,400.00	\$ 10,945.12	\$ 1,585.42	\$ 2,400.00	\$ 3,985.42	\$ 6,959.70	\$ -	\$ 6,959.70

Indirect As A Percent of Direct 0.0%

Contractor Initials: RGB
Date: 6/3/13

ABSTRACT OF CORPORATE MINUTES

"On motion duly made and seconded, it was voted to authorize the President / Vice President / Treasurer/Executive Director to accept grants and awards and enter into contracts and contract amendments from time to time with the State of New Hampshire, to sign and otherwise fully execute such acceptances and contracts and contract amendments and any amendments or modifications thereto, and any related documents requested by the State of New Hampshire. This authorization to continue until revoked by vote of this governing Board."

I further certify that Roberta Berner is the duly elected
President/Vice President/Treasurer/Executive Director
of this Corporation and is still qualified and serving in
such capacity.

Carol P. Moran

Secretary of the Corporation

STATE OF NEW HAMPSHIRE, COUNTY OF GRAFTON

In witness whereof I hereunto set my hand and official seal.

Notary Public / Justice of the Peace

ELIZABETH A. SCHIBLEY
NOTARY PUBLIC
State of New Hampshire
My Commission Expires
February 2, 2016

RGB
6/3/13

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GRAFTON COUNTY SENIOR CITIZENS COUNCIL, INC. is a New Hampshire nonprofit corporation formed July 13, 1972. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 1st day of April A.D. 2013

A handwritten signature in cursive script, reading "William M. Gardner".

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

OP ID: JZ

DATE (MM/DD/YYYY)

05/20/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Kinney Pike/Hartford The Junction Market Place 1011 North Main Street White River Junction, VT 05001 Sandra D. Delisle	802-295-3329 802-296-6126	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: GRAFT-5
INSURED: Grafton County Senior Citizens Council Inc - PO Box 433 Lebanon, NH 03766		INSURER(S) AFFORDING COVERAGE INSURER A: Hanover Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOG			ZBV-8862911-02	10/25/12	10/25/13	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 600,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 Emp Ben. \$ 1,000,000
A	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS			ABV8808402-02	10/25/12	10/25/13	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
A	☒ UMBRELLA LIAB ☒ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DEDUCTIBLE ☒ RETENTION \$ 0			UHV 8882696-02	10/25/12	10/25/13	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				WC STATUTORY LIMITS ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
E-mail: rberner@gscsc.org

CERTIFICATE HOLDER

STATENH

State of NH Dept. of Health &
Human Servc. Bureau of Elderly
& Adult Services Attn: Catherine
129 Pleasant St
Concord, NH 03301

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Sandra D. Delisle

Client#: 56450

GRAFT

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/20/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Davis Towle Morrill & Everett 115 Airport Road P O Box 1260 Concord, NH 03302-1260		CONTACT NAME: PHONE (A/C, No, Ext): 603 225-6611 FAX (A/C, No): 603-225-7935 E-MAIL ADDRESS:	
INSURED Grafton County Senior Citizens Council PO Box 433 Lebanon, NH 03766		INSURER(S) AFFORDING COVERAGE INSURER A: Berkley Risk Administrators INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY ☐ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ EXCESS LIAB ☐ DED ☐ RETENTION \$ ☐ OCCUR ☐ CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	WC288300575900	11/13/2012	11/13/2013	X WC STATUTORY LIMITS E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

State of NH, Bureau of Elderly & Adult Services, NH Dept of Health & Human Services,
 Catherine Cormier
 129 Pleasant St
 Concord, NH 03301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008773) with Grafton County Senior Citizens Council, Inc., Lebanon New Hampshire (Vendor # 177675) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$601,853.90 from \$294,073.99 to \$895,927.89 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$58,532.86	\$0.00	\$58,532.86
2012	102-500734	Contracts for Program Services	\$0.00	\$58,532.86	\$58,532.86
2013	102-500734	Contracts for Program Services	\$0.00	\$58,532.86	\$58,532.86
Subtotal			\$58,532.86	\$117,065.72	\$175,598.58

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$141,537.84	\$0.00	\$141,537.84



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

June 23, 2011

Ms. Roberta Berner, Executive Director
Grafton County Senior Citizen's Council
PO Box 433
Lebanon, NH 03766

Dear Ms. Berner:

Enclosed is your contract amendment with the Bureau of Elderly and Adult Services for State Fiscal Year 2012 (July 1, 2011 through June 30, 2012). Governor and Executive Council approved the contract amendment on June 22, 2011. The Bureau of Elderly and Adult Services looks forward to working with you and appreciates the valuable management services you provide.

If you have any questions, please contact me at 603.271.7015 or catherine.a.cormier@dhhs.state.nh.us.

Sincerely,

Catherine A. Cormier
Contract Administrator

Enc.
file

2012	550-500398	Assessment & Counseling	\$0.00	\$141,537.84	\$141,537.84
2013	550-500398	Assessment & Counseling	\$0.00	\$141,537.84	\$141,537.84
Subtotal			\$141,537.84	\$283,075.68	\$424,613.52

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$15,806.89	\$0.00	\$15,806.89
2012	545-500387	I & R Contracts	\$0.00	\$15,757.28	\$15,757.28
2013	545-500387	I & R Contracts	\$0.00	\$15,757.28	\$15,757.28
Subtotal			\$15,806.89	\$31,514.56	\$47,321.45

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
2012	072-500575	Grants - Federal	\$0.00	\$14,000.00	\$14,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$0.00	\$14,000.00	\$14,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
2013	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
Subtotal			\$37,000.00	\$74,000.00	\$111,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$41,196.40	\$0.00	\$41,196.40
2012	102-500731	Contracts for Program Services	\$0.00	\$41,098.97	\$41,098.97
2013	102-500731	Contracts for Program Services	\$0.00	\$41,098.97	\$41,098.97
Subtotal			\$41,196.40	\$82,197.94	\$123,394.34
Grand Total			\$294,073.99	\$601,853.90	\$895,927.89

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Grafton County Senior Citizens Council, Inc. for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Grafton County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Grafton County Senior Citizens Council, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and

accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Grafton County Senior Citizens Council, Inc. through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

Area Served: Grafton County

Source of Funds: 54.3% Federal funds and 45.7% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,

Nancy L. Rollins

Nancy L. Rollins
Associate Commissioner

Approved by:

Nicholas A. Toumpas
Nicholas A. Toumpas
Commissioner

A		B	C	D	E	F	G	H	I	J	K
1	Program Name	New Hampshire ServiceLink Resource Center									
2	Contract Purpose	Provide services for I&R/A, LTC Counseling, NHECSP, SMP, SHP, and SHP-MDPPA									
3											
4	RFP Bidders Summary	Area Served:	Merrimack County	Carroll County	Rockingham County	Hillsborough County	Grafton County	Belknap County	Monadnock Region	Sullivan County	Strafford County
5	RFP CRITERIA	Max Pts	Community Action Program Belknap- Merrimack Inc	Carroll County Health and Home Care	Crooked Mountain Community Services Inc	Easter Seals New Hampshire	Grafton Cty Senior Citizens Council	Lakes Region Partnership for Public Health	Monadnock Collaborative	Southwestern Community Services, Inc.	Tri-Co Comm Action
6	Min. Requirements	10	10.00	10.00	10.00	9.00	10.00	10.00	10.00	9.00	9.00
7	Organization Background, Experience	15	14.50	14.50	14.10	13.60	15.00	15.00	14.70	13.50	14.30
8	Statement of Work	40	38.70	36.10	37.80	34.40	38.60	36.60	35.90	31.90	34.30
9	Budget and Narrative	35	32.30	29.40	34.00	26.60	33.40	30.40	31.80	26.00	26.70
10	Total	100	95.90	90.00	94.90	83.60	97.00	92.40	92.40	80.40	84.30
11	RFP Reviewers										
12	Name and Job Title:	Department of DHHS, Agency									
13		Qualifications:									
14	1. Wendi Aullman, SLRC Program Manager	Over ten years in administering the SLRC by providing oversight for program and policy of the SLRCs as well as coordinating efforts statewide and within BEAS.									
15	2. Cathy Crepeau, NHECSP Manager	Six years in administering the NHECSP by overseeing the AOA grant awards to provide services through existing processes while developing new cost effective service delivery approaches with discretionary grants from AOA.									
16	3. Karol Derron, Medicare Coordinator and Program Specialist	Over ten years in administering the SHP and SMP through the SLRCs.									
17	4. Donald Hunter, Senior Management Analyst	Five years in Medicaid Policy, of which includes Medicare Part D Coordinator for DHHS, and works with NH Legislature and national government policy organizations.									
18	5. Sally Varney, Program Planning and Review Specialist for Quality	Ten years in Quality Management for federal and state funded DHHS programs.									
19											



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
 HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Frankestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSPP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSPP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

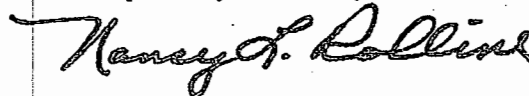
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

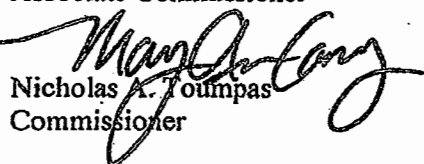
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner



**State of New Hampshire
Department of Health and Human Services
Amendment #5 for Lakes Region Partnership for Public Health, Inc.**

This 5th Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #5") dated this 3rd day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Lakes Region Partnership for Public Health, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 67 Water Street Suite 105, Laconia, New Hampshire, 03246.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on October 20, 2010, (Amendment #2 to the Contract) approved on December 8, 2010, (Amendment #3 to the Contract) approved on June 22, 2011, (Amendment #4 to the Contract) approved on March 7, 2012, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$1,393,227.18.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:

6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:



1. Number of individuals served
2. Number of repeat visits by individuals
3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.



- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$1,290,760.01.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731



d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 5,371.80
LTC funds (ServiceLink General Funds)	\$ 19,950.00
Family Caregiver Support Title III-E	\$ 48,251.54
Senior Medicare Patrol	\$ 15,696.97
State Health Insurance Assistance Program	\$ 4,745.25
Assessment & Counseling (Medicaid)	\$ 8,451.61

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #5 for Lakes Region Partnership for Public Health, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6 June 2013
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Lakes Region Partnership for Public Health,
Inc.

6/6/13
Date

Margaret M. Pritchard
Name: Margaret Pritchard
Title: Vice President, BOD

Acknowledgement:

State of NH, County of Belknap on June 6, 2013
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.
Signature of Notary Public or Justice of the Peace

Dawn H. Lacroix
Name and Title of Notary or Justice of the Peace



State of New Hampshire
Department of Health and Human Services
Amendment #5 for Lakes Region Partnership for Public Health, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

7 Jun. 2013
Date

Jeane P. Herrick
Name: *Jeane P. Herrick*
Title: *Attorney*

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
 (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Lakes Region Partnership for Public Health

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,547.00	\$ -	\$ 3,547.00	\$ -	\$ -	\$ -	\$ 3,547.00	\$ -	\$ 3,547.00
2. Employee Benefits	\$ 967.00	\$ -	\$ 967.00	\$ -	\$ -	\$ -	\$ 967.00	\$ -	\$ 967.00
3. Consultants	\$ 188.00	\$ -	\$ 188.00	\$ -	\$ -	\$ -	\$ 188.00	\$ -	\$ 188.00
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ 57.00	\$ -	\$ 57.00	\$ -	\$ -	\$ -	\$ 57.00	\$ -	\$ 57.00
Repair and Maintenance	\$ 107.00	\$ -	\$ 107.00	\$ -	\$ -	\$ -	\$ 107.00	\$ -	\$ 107.00
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 68.00	\$ -	\$ 68.00	\$ -	\$ -	\$ -	\$ 68.00	\$ -	\$ 68.00
6. Travel	\$ 25.00	\$ -	\$ 25.00	\$ -	\$ -	\$ -	\$ 25.00	\$ -	\$ 25.00
7. Occupancy	\$ 295.00	\$ -	\$ 295.00	\$ -	\$ -	\$ -	\$ 295.00	\$ -	\$ 295.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 24.00	\$ -	\$ 24.00	\$ -	\$ -	\$ -	\$ 24.00	\$ -	\$ 24.00
Subscriptions	\$ 75.00	\$ -	\$ 75.00	\$ -	\$ -	\$ -	\$ 75.00	\$ -	\$ 75.00
Audit and Legal	\$ 177.00	\$ -	\$ 177.00	\$ -	\$ -	\$ -	\$ 177.00	\$ -	\$ 177.00
Insurance	\$ 84.00	\$ -	\$ 84.00	\$ -	\$ -	\$ -	\$ 84.00	\$ -	\$ 84.00
Meeting Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 6.00	\$ -	\$ 6.00	\$ -	\$ -	\$ -	\$ 6.00	\$ -	\$ 6.00
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Internet & web-design	\$ 34.00	\$ -	\$ 34.00	\$ -	\$ -	\$ -	\$ 34.00	\$ -	\$ 34.00
Executive Director wages & benefits	\$ 496.00	\$ -	\$ 496.00	\$ -	\$ -	\$ -	\$ 496.00	\$ -	\$ 496.00
Volunteer Expenses	\$ 2,050.00	\$ -	\$ 2,050.00	\$ 2,050.00	\$ -	\$ 2,050.00	\$ -	\$ -	\$ -
TOTAL	\$ 8,200.00	\$ -	\$ 8,200.00	\$ 2,050.00	\$ -	\$ 2,050.00	\$ 6,150.00	\$ -	\$ 6,150.00

Indirect As A Percent of Direct

0.0%

0.0%

Contractor Initials: *mp*

Date: 6/6/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Lakes Region Partnership for Public Health

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract/Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,059.00	\$ -	\$ 3,059.00	\$ -	\$ -	\$ -	\$ 3,059.00	\$ -	\$ 3,059.00
2. Employee Benefits	\$ 831.00	\$ -	\$ 831.00	\$ -	\$ -	\$ -	\$ 831.00	\$ -	\$ 831.00
3. Consultants	\$ 164.00	\$ -	\$ 164.00	\$ -	\$ -	\$ -	\$ 164.00	\$ -	\$ 164.00
4. Equipment:									
Rental	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
Repair and Maintenance	\$ 93.00	\$ -	\$ 93.00	\$ -	\$ -	\$ -	\$ 93.00	\$ -	\$ 93.00
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:									
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 60.00	\$ -	\$ 60.00	\$ -	\$ -	\$ -	\$ 60.00	\$ -	\$ 60.00
6. Travel	\$ 25.00	\$ -	\$ 25.00	\$ -	\$ -	\$ -	\$ 25.00	\$ -	\$ 25.00
7. Occupancy	\$ 294.00	\$ -	\$ 294.00	\$ -	\$ -	\$ -	\$ 294.00	\$ -	\$ 294.00
8. Current Expenses									
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 20.00	\$ -	\$ 20.00	\$ -	\$ -	\$ -	\$ 20.00	\$ -	\$ 20.00
Subscriptions	\$ 79.00	\$ -	\$ 79.00	\$ -	\$ -	\$ -	\$ 79.00	\$ -	\$ 79.00
Audit and Legal	\$ 155.00	\$ -	\$ 155.00	\$ -	\$ -	\$ -	\$ 155.00	\$ -	\$ 155.00
Insurance	\$ 83.00	\$ -	\$ 83.00	\$ -	\$ -	\$ -	\$ 83.00	\$ -	\$ 83.00
Meeting Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 5.00	\$ -	\$ 5.00	\$ -	\$ -	\$ -	\$ 5.00	\$ -	\$ 5.00
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):									
Internet & web-design	\$ 29.00	\$ -	\$ 29.00	\$ -	\$ -	\$ -	\$ 29.00	\$ -	\$ 29.00
Executive Director wages & benefits	\$ 424.80	\$ -	\$ 424.80	\$ -	\$ -	\$ -	\$ 424.80	\$ -	\$ 424.80
Volunteer Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 5,371.80	\$ -	\$ 5,371.80	\$ -	\$ -	\$ -	\$ 5,371.80	\$ -	\$ 5,371.80

0.0%

Indirect As A Percent of Direct

Contractor Initials: 

Date: 6/6/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Lakes Region Partnership for Public Health

Budget Request for: Long Term Support Options Counseling

(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 8,934.00	\$ -	\$ 8,934.00	\$ -	\$ -	\$ -	\$ 8,934.00	\$ -	\$ 8,934.00
2. Employee Benefits	\$ 1,161.00	\$ -	\$ 1,161.00	\$ -	\$ -	\$ -	\$ 1,161.00	\$ -	\$ 1,161.00
3. Consultants	\$ 421.00	\$ -	\$ 421.00	\$ -	\$ -	\$ -	\$ 421.00	\$ -	\$ 421.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ 124.00	\$ -	\$ 124.00	\$ -	\$ -	\$ -	\$ 124.00	\$ -	\$ 124.00
Repair and Maintenance	\$ 233.00	\$ -	\$ 233.00	\$ -	\$ -	\$ -	\$ 233.00	\$ -	\$ 233.00
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 150.00	\$ -	\$ 150.00	\$ -	\$ -	\$ -	\$ 150.00	\$ -	\$ 150.00
6. Travel	\$ 225.00	\$ -	\$ 225.00	\$ -	\$ -	\$ -	\$ 225.00	\$ -	\$ 225.00
7. Occupancy	\$ 588.00	\$ -	\$ 588.00	\$ -	\$ -	\$ -	\$ 588.00	\$ -	\$ 588.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
Subscriptions	\$ 69.00	\$ -	\$ 69.00	\$ -	\$ -	\$ -	\$ 69.00	\$ -	\$ 69.00
Audit and Legal	\$ 398.00	\$ -	\$ 398.00	\$ -	\$ -	\$ -	\$ 398.00	\$ -	\$ 398.00
Insurance	\$ 176.00	\$ -	\$ 176.00	\$ -	\$ -	\$ -	\$ 176.00	\$ -	\$ 176.00
Meeting Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 12.00	\$ -	\$ 12.00	\$ -	\$ -	\$ -	\$ 12.00	\$ -	\$ 12.00
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Internet & web-design	\$ 72.00	\$ -	\$ 72.00	\$ -	\$ -	\$ -	\$ 72.00	\$ -	\$ 72.00
Executive Director wages & benefits	\$ 1,187.00	\$ -	\$ 1,187.00	\$ -	\$ -	\$ -	\$ 1,187.00	\$ -	\$ 1,187.00
Volunteer Expenses	\$ 4,600.00	\$ -	\$ 4,600.00	\$ 4,600.00	\$ -	\$ 4,600.00	\$ -	\$ -	\$ -
TOTAL	\$ 18,400.00	\$ -	\$ 18,400.00	\$ 4,600.00	\$ -	\$ 4,600.00	\$ 13,800.00	\$ -	\$ 13,800.00

Indirect As A Percent of Direct

0.0%

0.0%

Contractor Initials: YMPDate: 6/26/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid**

Contractor Name: Lakes Region Partnership for Public Health

Budget Request for: Assessment & Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 30,328.00	\$ -	\$ 30,328.00	\$ -	\$ -	\$ -	\$ 30,328.00	\$ -	\$ 30,328.00
2. Employee Benefits	\$ 5,210.00	\$ -	\$ 5,210.00	\$ -	\$ -	\$ -	\$ 5,210.00	\$ -	\$ 5,210.00
3. Consultants	\$ 1,472.00	\$ -	\$ 1,472.00	\$ -	\$ -	\$ -	\$ 1,472.00	\$ -	\$ 1,472.00
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ 423.00	\$ -	\$ 423.00	\$ -	\$ -	\$ -	\$ 423.00	\$ -	\$ 423.00
6. Repair and Maintenance	\$ 795.00	\$ -	\$ 795.00	\$ -	\$ -	\$ -	\$ 795.00	\$ -	\$ 795.00
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 513.00	\$ -	\$ 513.00	\$ -	\$ -	\$ -	\$ 513.00	\$ -	\$ 513.00
14. Travel	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00	\$ -	\$ 600.00
15. Occupancy	\$ 2,061.00	\$ -	\$ 2,061.00	\$ -	\$ -	\$ -	\$ 2,061.00	\$ -	\$ 2,061.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ 181.00	\$ -	\$ 181.00	\$ -	\$ -	\$ -	\$ 181.00	\$ -	\$ 181.00
19. Subscriptions	\$ 59.00	\$ -	\$ 59.00	\$ -	\$ -	\$ -	\$ 59.00	\$ -	\$ 59.00
20. Audit and Legal	\$ 1,391.00	\$ -	\$ 1,391.00	\$ -	\$ -	\$ -	\$ 1,391.00	\$ -	\$ 1,391.00
21. Insurance	\$ 606.00	\$ -	\$ 606.00	\$ -	\$ -	\$ -	\$ 606.00	\$ -	\$ 606.00
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ 43.00	\$ -	\$ 43.00	\$ -	\$ -	\$ -	\$ 43.00	\$ -	\$ 43.00
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. Internet & web-design	\$ 248.00	\$ -	\$ 248.00	\$ -	\$ -	\$ -	\$ 248.00	\$ -	\$ 248.00
29. Executive Director wages & benefits	\$ 4,323.54	\$ -	\$ 4,323.54	\$ -	\$ -	\$ -	\$ 4,323.54	\$ -	\$ 4,323.54
30. Volunteer Expenses	\$ 12,062.00	\$ -	\$ 12,062.00	\$ 12,062.00	\$ -	\$ 12,062.00	\$ -	\$ -	\$ -
TOTAL	\$ 60,313.54	\$ -	\$ 60,313.54	\$ 12,062.00	\$ -	\$ 12,062.00	\$ 48,251.54	\$ -	\$ 48,251.54

Indirect As A Percent of Direct

0.0%

Contractor Initials: *YRP*Date: *10/21/13*

B-8 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title IIIIE Family Caregiver

Contractor Name: Lakes Region Partnership for Public Health

Budget Request for: Family Caregiver Support
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 9,063.00	\$ -	\$ 9,063.00	\$ -	\$ -	\$ -	\$ 9,063.00	\$ -	\$ 9,063.00
2. Employee Benefits	\$ 2,432.00	\$ -	\$ 2,432.00	\$ -	\$ -	\$ -	\$ 2,432.00	\$ -	\$ 2,432.00
3. Consultants	\$ 479.00	\$ -	\$ 479.00	\$ -	\$ -	\$ -	\$ 479.00	\$ -	\$ 479.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ 144.00	\$ -	\$ 144.00	\$ -	\$ -	\$ -	\$ 144.00	\$ -	\$ 144.00
Repair and Maintenance	\$ 270.00	\$ -	\$ 270.00	\$ -	\$ -	\$ -	\$ 270.00	\$ -	\$ 270.00
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical Office	\$ 174.00	\$ -	\$ 174.00	\$ -	\$ -	\$ -	\$ 174.00	\$ -	\$ 174.00
6. Travel	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
7. Occupancy	\$ 736.00	\$ -	\$ 736.00	\$ -	\$ -	\$ -	\$ 736.00	\$ -	\$ 736.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 62.00	\$ -	\$ 62.00	\$ -	\$ -	\$ -	\$ 62.00	\$ -	\$ 62.00
Subscriptions	\$ 12.00	\$ -	\$ 12.00	\$ -	\$ -	\$ -	\$ 12.00	\$ -	\$ 12.00
Audit and Legal	\$ 453.00	\$ -	\$ 453.00	\$ -	\$ -	\$ -	\$ 453.00	\$ -	\$ 453.00
Insurance	\$ 213.00	\$ -	\$ 213.00	\$ -	\$ -	\$ -	\$ 213.00	\$ -	\$ 213.00
Meeting Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 14.00	\$ -	\$ 14.00	\$ -	\$ -	\$ -	\$ 14.00	\$ -	\$ 14.00
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Internet & web-design	\$ 83.00	\$ -	\$ 83.00	\$ -	\$ -	\$ -	\$ 83.00	\$ -	\$ 83.00
Executive Director wages & benefits	\$ 1,361.97	\$ -	\$ 1,361.97	\$ -	\$ -	\$ -	\$ 1,361.97	\$ -	\$ 1,361.97
Volunteer Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 15,696.97	\$ -	\$ 15,696.97	\$ -	\$ -	\$ -	\$ 15,696.97	\$ -	\$ 15,696.97

Indirect As A Percent of Direct 0.0%

Contractor Initials: YAP
Date: 6/16/13

Family Caregiver

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program**

Contractor Name: Lakes Region Partnership for Public Health

Budget Request for: State Health Insurance Assistance Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,207.00	\$ -	\$ 5,207.00	\$ -	\$ -	\$ -	\$ 5,207.00	\$ -	\$ 5,207.00
2. Employee Benefits	\$ 1,020.00	\$ -	\$ 1,020.00	\$ -	\$ -	\$ -	\$ 1,020.00	\$ -	\$ 1,020.00
3. Consultants	\$ 258.00	\$ -	\$ 258.00	\$ -	\$ -	\$ -	\$ 258.00	\$ -	\$ 258.00
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ 77.00	\$ -	\$ 77.00	\$ -	\$ -	\$ -	\$ 77.00	\$ -	\$ 77.00
6. Repair and Maintenance	\$ 144.00	\$ -	\$ 144.00	\$ -	\$ -	\$ -	\$ 144.00	\$ -	\$ 144.00
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 93.00	\$ -	\$ 93.00	\$ -	\$ -	\$ -	\$ 93.00	\$ -	\$ 93.00
14. Travel	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
15. Occupancy	\$ 442.00	\$ -	\$ 442.00	\$ -	\$ -	\$ -	\$ 442.00	\$ -	\$ 442.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ 31.00	\$ -	\$ 31.00	\$ -	\$ -	\$ -	\$ 31.00	\$ -	\$ 31.00
19. Subscriptions	\$ 19.00	\$ -	\$ 19.00	\$ -	\$ -	\$ -	\$ 19.00	\$ -	\$ 19.00
20. Audit and Legal	\$ 244.00	\$ -	\$ 244.00	\$ -	\$ -	\$ -	\$ 244.00	\$ -	\$ 244.00
21. Insurance	\$ 126.00	\$ -	\$ 126.00	\$ -	\$ -	\$ -	\$ 126.00	\$ -	\$ 126.00
22. Meeting Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ 8.00	\$ -	\$ 8.00	\$ -	\$ -	\$ -	\$ 8.00	\$ -	\$ 8.00
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. Internet & web-design	\$ 45.00	\$ -	\$ 45.00	\$ -	\$ -	\$ -	\$ 45.00	\$ -	\$ 45.00
29. Executive Director wages & benefits	\$ 687.61	\$ -	\$ 687.61	\$ -	\$ -	\$ -	\$ 687.61	\$ -	\$ 687.61
30. Volunteer Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 8,451.61	\$ -	\$ 8,451.61	\$ -	\$ -	\$ -	\$ 8,451.61	\$ -	\$ 8,451.61

Indirect As A Percent of Direct

0.0%

Contractor Initials: 

Date: 6/10/13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol

Contractor Name: Lakes Region Partnership for Public Health

Budget Request for: Senior Medicare Patrol
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 2,971.00	\$ -	\$ 2,971.00	\$ -	\$ -	\$ -	\$ 2,971.00	\$ -	\$ 2,971.00
2. Employee Benefits	\$ 563.00	\$ -	\$ 563.00	\$ -	\$ -	\$ -	\$ 563.00	\$ -	\$ 563.00
3. Consultants	\$ 145.00	\$ -	\$ 145.00	\$ -	\$ -	\$ -	\$ 145.00	\$ -	\$ 145.00
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ 45.00	\$ -	\$ 45.00	\$ -	\$ -	\$ -	\$ 45.00	\$ -	\$ 45.00
6. Repair and Maintenance	\$ 83.00	\$ -	\$ 83.00	\$ -	\$ -	\$ -	\$ 83.00	\$ -	\$ 83.00
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 54.00	\$ -	\$ 54.00	\$ -	\$ -	\$ -	\$ 54.00	\$ -	\$ 54.00
14. Travel	\$ 25.00	\$ -	\$ 25.00	\$ -	\$ -	\$ -	\$ 25.00	\$ -	\$ 25.00
15. Occupancy	\$ 284.00	\$ -	\$ 284.00	\$ -	\$ -	\$ -	\$ 284.00	\$ -	\$ 284.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ 18.00	\$ -	\$ 18.00	\$ -	\$ -	\$ -	\$ 18.00	\$ -	\$ 18.00
19. Subscriptions	\$ 23.00	\$ -	\$ 23.00	\$ -	\$ -	\$ -	\$ 23.00	\$ -	\$ 23.00
20. Audit and Legal	\$ 134.00	\$ -	\$ 134.00	\$ -	\$ -	\$ -	\$ 134.00	\$ -	\$ 134.00
21. Insurance	\$ 82.00	\$ -	\$ 82.00	\$ -	\$ -	\$ -	\$ 82.00	\$ -	\$ 82.00
22. Meeting Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ 5.00	\$ -	\$ 5.00	\$ -	\$ -	\$ -	\$ 5.00	\$ -	\$ 5.00
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other Volunteer	\$ 1,581.75	\$ -	\$ 1,581.75	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. Internet & web-design	\$ 26.00	\$ -	\$ 26.00	\$ -	\$ -	\$ -	\$ 26.00	\$ -	\$ 26.00
29. Executive Director wages and Benefits	\$ 277.25	\$ -	\$ 277.25	\$ -	\$ -	\$ -	\$ 277.25	\$ -	\$ 277.25
TOTAL	\$ 6,327.00	\$ -	\$ 6,327.00	\$ 1,581.75	\$ -	\$ 1,581.75	\$ 4,745.25	\$ -	\$ 4,745.25

0.0%

Indirect As A Percent of Direct

Contractor Initials:

Date: 8/16/13

CERTIFICATE OF VOTE

I, John Beland, of Lakes Region Partnership for Public Health, Inc. , do hereby certify that:

1. I am the duly elected Secretary of the Lakes Region Partnership for Public Health, Inc;
2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of the corporation duly held on September 29, 2011;

RESOLVED: That this corporation enters into a contract with the State of New Hampshire, acting through its Department of Health and Human Services;.

RESOLVED: That the President and/or Vice President is hereby authorized on behalf of this corporation to enter into said contract with the State and to execute any and all documents, agreements, and other instruments; and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable, or appropriate. Sally Minkow is the duly elected President and Margaret Pritchard is the duly elected Vice President of the corporation.

3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of June 6, 2013.

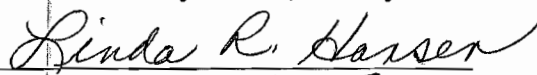
IN WITNESS WHEREOF, I have hereunto set my hand as the Secretary of the corporation this 6th day of June, 2013.


Secretary, Board of Directors

(CORPORATE SEAL)
STATE OF NH
COUNTY OF BELKNAP

The foregoing instrument was acknowledged before me this 6th day of June, 2013 by John Beland.



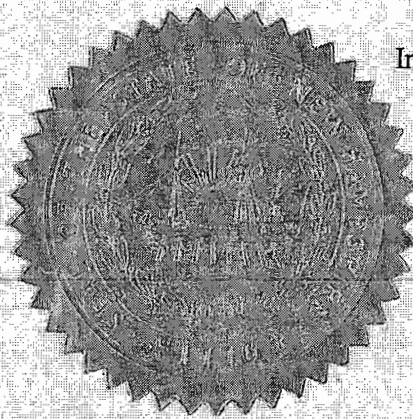

Notary Public/Justice of the Peace
My Commission Expires: 12/3/2013

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Lakes Region Partnership for Public Health, Inc. is a New Hampshire nonprofit corporation formed April 21, 2005. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 4th day of April A.D. 2013

A handwritten signature in dark ink, appearing to read "William M. Gardner", written in a cursive style.

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/5/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	CONTACT NAME: Pat Mack PHONE (A/C No. Ext): (603) 293-2791 FAX (A/C No.): (603) 293-7188 E-MAIL ADDRESS: pat@esinsurance.com
INSURED Lakes Region Partnership for Public Health, 67 Water Street, Suite 105 Laconia NH 03246	INSURER(S) AFFORDING COVERAGE INSURER A: Great American Ins Group INSURER B: Hartford Underwriters Insuranc INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 2013 All Lines

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR		MAC3793453-07	3/10/2013	3/10/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC							
	A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☒ SCHEDULED AUTOS ☒ NON-OWNED AUTOS		CAP1898681-03	3/10/2013	3/10/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 1,000,000	
		A	UMBRELLA LIAB EXCESS LIAB DED ☒ RETENTION \$ 10,000		UMB3793454-07	3/10/2013	3/10/2014	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
B			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☐ N/A	04WECRJ0009	1/1/2013	1/1/2014	WC STATUTORY LIMITS E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Div of Public Health Svcs, NH DHHS Attn: The Director 29 Hazen Drive Concord, NH 03301-6504	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Pat Mack/PAT <i>Pat Mack</i>



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

February 22, 2012

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into a sole source amendment to an existing Agreement (Purchase Order: State Fiscal Year 2011 #1008774, and State Fiscal Year 2012 #1016488) with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire (Vendor # 165635), acting as the fiscal agent for the ServiceLink Aging and Disability Network. This Request amends the scope of services provided under the existing Agreement ending June 30, 2013 by: expanding outreach and education relative to Medicare cost saving under the State Health Insurance Assistance Program; enhancing volunteerism and education relative to Medicare fraud and abuse under the Senior Medicare Patrol Program; and extending the completion date for the pilot project, Veteran Directed - Home and Community Based Services in Belknap County. This amendment will increase the price limitation by \$91,509.00 from \$1,199,251.01 to \$1,290,760.01 effective upon Governor and Executive Council approval. The original Agreement was approved by Governor and Executive Council on June 23, 2010 (Item #135), and amended on October 20, 2010 (Item #68), December 8, 2010 (Item #141), and June 22, 2011 (Item #231). Funds are available in State Fiscal Years 2012 and 2013, with the authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$39,908.77	\$0.00	\$39,908.77
2012	102-500734	Contracts for Program Services	\$39,908.77	\$0.00	\$39,908.77
2013	102-500734	Contracts for Program Services	\$39,908.77	\$0.00	\$39,908.77
Subtotal			\$119,726.31	\$0.00	\$119,726.31

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$96,503.07	\$0.00	\$96,503.07
2012	550-500398	Assessment & Counseling	\$96,503.07	\$0.00	\$96,503.07
2013	550-500398	Assessment & Counseling	\$96,503.07	\$0.00	\$96,503.07
Subtotal			\$289,509.21	\$0.00	\$289,509.21

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$10,777.43	\$0.00	\$10,777.43
2012	545-500387	I & R Contracts	\$10,743.60	\$0.00	\$10,743.60
2013	545-500387	I & R Contracts	\$10,743.60	\$0.00	\$10,743.60
Subtotal			\$32,264.63	\$0.00	\$32,264.63

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$52,015.00	\$0.00	\$52,015.00
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	072-500575	Grants - Federal	\$10,000.00	\$0.00	\$10,000.00
2012	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
2013	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
Subtotal			\$173,015.00	\$0.00	\$173,015.00

05-95-48-481010-8920 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MONEY FOLLOWS THE PERSON

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$37,500.00	\$0.00	\$37,500.00
2012	102-500731	Contracts for Program Services	\$75,000.00	\$0.00	\$75,000.00
2013	102-500731	Contracts for Program Services	\$37,500.00	\$0.00	\$37,500.00
Subtotal			\$150,000.00	\$0.00	\$150,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$185,771.80	\$0.00	\$185,771.80
2012	102-500731	Contracts for Program Services	\$171,707.03	\$66,363.00	\$238,070.03
2013	102-500731	Contracts for Program Services	\$77,257.03	\$25,146.00	\$102,403.03
Subtotal			\$434,735.86	\$91,509.00	\$526,244.86

Grand Total			\$1,199,251.01	\$91,509.00	\$1,290,760.01

EXPLANATION

This amendment is designated as sole source because the additional deliverables requested of the vendor under this amendment were not competitively bid. Lakes Region Partnership for Public Health was selected to provide these because it has successfully provided similar services under the existing agreement. Additionally, both the Bureau of Elderly and Adult Services and the ServiceLink Network agree that continuation of the existing relationship with the vendor provides the greatest benefits and efficiencies to New Hampshire citizens. The original Agreement approved by Governor and Council on June 23, 2010, item #135, was awarded through a competitive bid process. The Request for Proposals for this agreement was posted on the Department of Health and Human Services website on February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010.

ServiceLink Resource Centers Overview

The 10 ServiceLink Resources Centers statewide are funded by multiple sources that support a single point of entry for three main programs; Information and Referrals and Long-term care Assessment and Counseling; Family Caregiver; and Medicare health insurance assistance through the State Health Insurance Assistance Program (SHIP) and Medicare fraud and abuse through the Senior Medicare Patrol Program (SMP). These programs primarily serve adults over the age of 18 who are chronically physically ill or disabled, seniors over age sixty (60) and any person seeking resources and information related to aging, long term care, social services, independent living, wellness education or activities and social involvement. The goals of the ServiceLink Resources are to empower individuals to make informed decisions and to streamline access to long-term care.

Expanded outreach and education relative to Medicare cost saving under the State Health Insurance Assistance Program

This amendment expands the scope of services under the State Health Insurance Assistance Program through March 31, 2012. Additional grant funding has been awarded based on performance (See attached grant award). Centers for Medicare & Medicaid approved additional funding to increase enrollment into cost-saving Medicare programs. Individuals with limited income and resources who are new to Medicare, those who are considering Medicare health plan options, and those living with disabilities and chronic illness, including their caregivers and families, will benefit through increased outreach and updated educational materials. The price limitation for the continuation for these activities increased by \$11,071 based on receipt of the performance award and \$5,000 available in the basic grant award.

Enhanced volunteerism and education relative to Medicare fraud and abuse under the Senior Medicare Patrol Program

The vendor has successfully completed enhancements to the statewide volunteer program to educate Medicare beneficiaries to protect themselves from fraudulent billing, unethical sales practices, and other types of marketing and telephone scams on January 31, 2012. During this project, the vendor accomplished Senior Medicare Patrol Program Foundations training for fifteen (15) ServiceLink staff and six (6) volunteers, created a new state-focused Senior Medicare Patrol Program brochure, and conducted outreach in over thirty (30) locations reaching over eight hundred (800) people with Medicare. The completion date for this activity had been inaccurately stated in the agreement. This amendment corrects the date.

Additionally, Administration of Aging has awarded another grant, for the period September 30, 2011 through September 29, 2012 (See attached grant award), to continue to increase volunteer recruitment and trainings by fifty percent (50%) and improve reporting of Senior Medicare Patrol Program activities into the national Senior Medicare Patrol Program database utilized by Medicare contractors and the Office of the Inspector General. The price limitation for the continuation for these activities increased by \$50,292 in State Fiscal Year 2012 and \$25,146 in State Fiscal Year 2013. The vendor will begin to provide these services upon Governor and Council approval through September 30, 2012.

Extend the completion date for the pilot project, Veteran Directed - Home and Community Based Services in Belknap County at no additional cost.

Under the current contract, the vendor successfully developed a pilot family caregiver model for Veterans in Belknap County, called the Veteran Directed - Home and Community Based Services, by September 29, 2011. Administration on Aging has approved a no cost extension for the project to September 29, 2012 (See attached grant award). This model provides caregivers counseling and choices of supports in which to continue providing care for their loved ones in the community and delays early admission to nursing homes. The federal Veterans Administration and the Administration on Aging require Bureau of Elderly and Adult Services to continue oversight of the vendor activity. This amendment adds the end date of the project to be

consistent with the Administration on Aging extension of September 29, 2012, which enables the Bureau of Elderly and Adult Services to continue required oversight. There is no cost to this extension.

Should this Request not be approved, the senior population will not longer have these supports in place to navigate the cost-saving programs under Medicare, not be made aware of potential fraud under Medicare that could result in financial burdens, and not have the supports as a family caregiver to keep their loved ones at home with possible early admission to nursing homes.

Performance Measures

Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected performance measures:

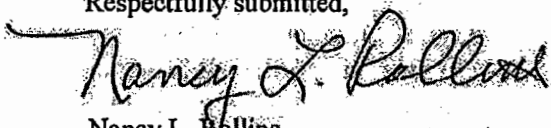
- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance, Long-term Support Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the ServiceLink services received.
- By June 30, 2011, 90% of consumers receiving Information & Referral/Assistance, Long-term Support Options, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving Long-term Support Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

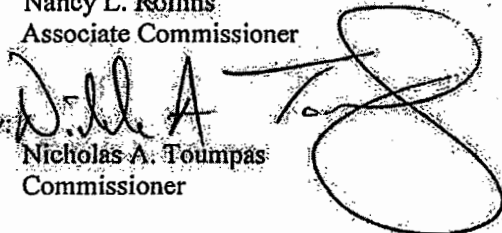
Area Served: Statewide.

Source of Funds: 100% Federal Funds.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,


Nancy L. Rollins
Associate Commissioner

Approved by: 
Nicholas A. Toumpas
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008774) with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire (Vendor # 165635) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, Special Projects by the Senior Medicare Patrol Program (SMP) for capacity building, Veteran Directed – Home and Community Based Services, Medicare Improvements for Patients and Providers Act (MIPPA), and Nursing Home Transition to Community Living Project (NHPCT), by increasing the price limitation by \$618,589.94 from \$580,661.07 to \$1,199,251.01 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. The original Agreement was approved by Governor and Executive Council on June 23, 2010 (Item #135), and amended and approved by Governor and Executive Council on October 20, 2010 (Item #68), and on December 8, 2010 (Item #141). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$39,908.77	\$0.00	\$39,908.77
2012	102-500734	Contracts for Program Services	\$0.00	\$39,908.77	\$39,908.77
2013	102-500734	Contracts for Program Services	\$0.00	\$39,908.77	\$39,908.77
Subtotal			\$39,908.77	\$79,817.54	\$119,726.31

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$96,503.07	\$0.00	\$96,503.07
2012	550-500398	Assessment & Counseling	\$0.00	\$96,503.07	\$96,503.07
2013	550-500398	Assessment & Counseling	\$0.00	\$96,503.07	\$96,503.07
Subtotal			\$96,503.07	\$193,006.14	\$289,509.21

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$10,777.43	\$0.00	\$10,777.43
2012	545-500387	I & R Contracts	\$0.00	\$10,743.60	\$10,743.60
2013	545-500387	I & R Contracts	\$0.00	\$10,743.60	\$10,743.60
Subtotal			\$10,777.43	\$21,487.20	\$32,264.63

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$52,015.00	\$0.00	\$52,015.00
2012	072-500575	Grants - Federal	\$0.00	\$10,000.00	\$10,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$52,015.00	\$10,000.00	\$62,015.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
2013	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
Subtotal			\$37,000.00	\$74,000.00	\$111,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$269,456.80	(\$83,685.00)	\$185,771.80
2012	102-500731	Contracts for Program Services	\$0.00	\$171,707.03	\$171,707.03
2013	102-500731	Contracts for Program Services	\$0.00	\$77,257.03	\$77,257.03
Subtotal			\$269,456.80	\$165,279.06	\$434,735.86

05-95-48-481010-8920 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, MONEY FOLLOWS THE PERSON

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$75,000.00	(\$37,500.00)	\$37,500.00
2012	102-500731	Contracts for Program Services	\$0.00	\$75,000.00	\$75,000.00
2013	102-500731	Contracts for Program Services	\$0.00	\$37,500.00	\$37,500.00
Subtotal			\$75,000.00	\$75,000.00	\$150,000.00

Grand Total			\$580,661.07	\$618,589.94	\$1,199,251.01

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Lakes Region Partnership for Public Health, Inc. for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Belknap County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Lakes Region Partnership for Public Health, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Additional Provisions

Special Project for Senior Medicare Patrol Program funded by a grant from the Administration on Aging (see attached award) for capacity building presently ends September 29, 2011. Governor and Council approved an amendment with this contractor on December 8, 2010 (Item #141) to complete the goals of this building capacity project. Bureau of Elderly and Adult Services has extended the project completion date from September 29, 2011 to March 30, 2012 in this amendment, pending anticipated approval of the no cost extension from the Administration on Aging.

Bid Process

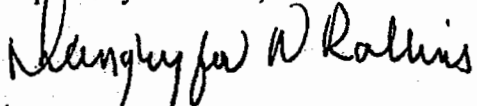
This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

Area Served: Belknap County

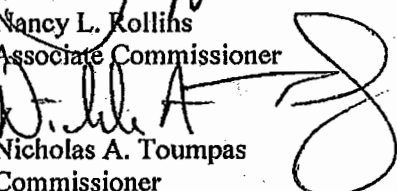
Source of Funds: 69.7% Federal funds and 30.3% General funds.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,


Nancy L. Rollins
Associate Commissioner

Approved by:


Nicholas A. Toumpas
Commissioner



Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

November 10, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into a sole source amendment to an existing Agreement (Purchase Order #1008774) with Lakes Region Partnership for Public Health, Inc. (LRPPH), Laconia, New Hampshire (Vendor # 165635), acting as the fiscal agent to operate Belknap County ServiceLink Resource Center, to provide fiscal oversight and program functions for the Nursing Home Person Centered Transition to Community Living Project (NHPCT), Veteran Directed - Home and Community Based Services (VD-HCBS), State Health Insurance Assistance Program - Medicare Improvements for Patients & Providers Act (SHIP-MIPPA), and Senior Medicare Patrol Project (SMP) services by increasing the contract amount by \$280,985.00 from \$299,676.07 to \$580,661.07, effective date of Governor and Council approval through June 30, 2011. The original Agreement was approved by Governor and Council on June 23, 2010 (Item # 135) and amended and approved by Governor and Council on October 20, 2010, (Item # 68).

2) Upon approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to make an advance payment of \$85,763.00 to LRPPH to provide one-half of the subcontract amounts for initial costs associated with the NHPCT, SHIP-MIPPA and SMP projects in Requested Action #1. Funds are available in the following accounts in SFY 11.

05-95-48-481010-9563 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77	\$ 0.00	\$39,908.77
		Subtotal	\$ 39,908.77	\$ 0.00	\$39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07	\$ 0.00	\$96,503.07
		Subtotal	\$ 96,503.07	\$ 0.00	\$96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43	\$ 0.00	\$ 10,777.43
		Subtotal	\$ 10,777.43	\$ 0.00	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00	\$ 0.00	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 44,015.00	\$ 8,000.00	\$ 52,015.00
		Subtotal	\$ 81,015.00	\$ 8,000.00	\$ 89,015.00

05-95-48-481010-8920-HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY-ADULT SERVICES, GRANTS TO LOCALS, MONEY FOLLOWS THE PERSON

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	102-500731	Contracts for Program Services	\$ 0.00	\$ 75,000.00	\$ 75,000.00
		Subtotal	\$ 0.00	\$ 75,000.00	\$ 75,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	102-500731	Contracts for Program Services	\$ 71,471.80	\$ 197,985.00	\$ 269,456.80
		Subtotal	\$ 71,471.80	\$ 197,985.00	\$ 269,456.80
		Contract Total	\$299,676.07	\$ 280,985.00	\$580,661.07

EXPLANATION

This is a sole source amendment for the following reasons: 1) Based on discussions between BEAS and the members of the ServiceLink Network it was determined that LRPPH should enter into an agreement with BEAS to provide these services; and 2) the original Agreement (approved by Governor and Council on June 23, 2010, item # 135) was awarded to LRPPH through a competitive bid process. The Request for Proposals (RFP)

was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council.

The purpose of this Requested Action is to implement four pilot projects as follows: 1) Nursing Home Person Centered Transition to Community Living Project; 2) a pilot program for Veteran Directed-Home and Community Based Services (VD-HCBS) in Belknap County; 3) enhancement and further development of the Medicare Improvements for Patients and Providers Act (MIPPA) outreach plan and preventive services promotion activities; and 4) provide enhanced funding for the Senior Medicare Patrol program (SMP) for capacity building project for design and implementation of regional plans to manage a statewide volunteer program. These projects are described below in more detail. BEAS received three grant awards, two from the Administration on Aging (AoA) and one from the Centers for Medicare & Medicaid (CMS) for MIPPA; one SMP Capacity Building award from AoA and another CMS award for Nursing Home Transition to Community Living Project (NHPCT). See attached Notice of Awards.

The Nursing Home Transition to Community Living Project (NHPCT)

The Belknap County ServiceLink Resource Center (SLRC) as a New Hampshire Aging and Disability Resource Center (ADRC) shall utilize the basic elements of the NHPCTC Project to strengthen the Aging and Disability Resource Center-Money Follows the Person (ADRC-MFP) partnership in NH to continue to rebalance the Long term care system throughout the state. The NHPCT project targets persons who enter a nursing home and request to talk to someone about the possibility of returning to the community. Through Section Q of a Minimum Data Set assessment all nursing home residents admitted to a nursing home receive, nursing home staff will identify and refer individuals to "local contact agencies". Primary examples of a local contact agency include the ADRC and the Center for Independent Living (CIL) in a state. In New Hampshire, ServiceLink and Granite State Independent Living are identified as local contact agencies. The NHPCT project will position the state to provide a community level presence, outreach and education.

Veteran Directed – Home and Community Based Services

The Belknap County ServiceLink Resource Center of Belknap County will pilot a project in Belknap County that will utilize the basic elements of the Transitions in Caregiving Program (aka Community Living Program) to meet the readiness criteria to facilitate veteran enrollment into the VD-HCBS program in which veterans at risk of nursing home placement will be able to choose a consumer-directed model for services, similar to the Transitions in Caregiving (TIC) model. TIC is a consumer-directed model that supports informal caregivers caring for older adults at risk of placement in a nursing facility and ultimately spend down to Medicaid.

Enhancement and further development of a MIPPA

The primary mission of MIPPA is to ensure that Medicare services and programs are available to certain population groups. This project provides targeted outreach and education to low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Programs (MSP). Distribution of funding for this project is based on Federal statistics indicating the areas of the state with the highest number of potentially eligible Medicare Beneficiaries. LRPPH shall ensure the provision of: 1) MIPPA outreach education, partnership development and enrollment assistance through-out the state and at the SLRC of Belknap; and 2) funding for the aforementioned activities listed in 1) above by subcontracting with the other remaining nine ServiceLink Resource Centers in New Hampshire, known collectively as ServiceLink Network.

Senior Medicare Patrol program for capacity building project

The SMP was established to empower beneficiaries/consumers to be aware of and to help prevent health care fraud errors and abuse through outreach and education using trained volunteer and supportive staff networks. This project is focused on building the capacity of the SMP in NH by creating regionally based plans for developing a volunteer network program that includes all components: volunteer promotion, recruitment, screening, retention, and recognition to maintain a quality, well-trained pool of volunteers. Region 1 includes Coos, Carroll, and Grafton ServiceLink catchment areas, Region 2 includes Belknap, Strafford, Merrimack, and Rockingham ServiceLink catchment areas, and Region 3 includes the Monadnock region, Hillsborough, and Sullivan ServiceLink catchment areas.

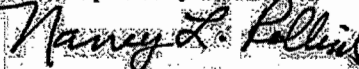
BEAS shall make advance payments to LRPPH as outlined in the attached Amendment Exhibit B Purchase of Services for the following reasons: 1) \$27,963 for one-half of the subcontract amounts to the other nine SLRCs that will provide NHPCT outreach, education and training; 2) \$30,650 for one-half of the subcontract amounts to the other nine SLRCs that will provide MIPPA outreach, education, partnership development and LIS/MSP enrollment; and 3) \$27,150.00 for one-half of the subcontract amounts to three other SLRCs that will build capacity for the SMP program and improve SMP performance.

The area served NHPCT, SHIP-MIPPA and SMP projects is statewide and for the VD-HCBS program is Belknap County and.

Source of Funds: This amendment is funded with one hundred percent Federal CMS and AoA funds.

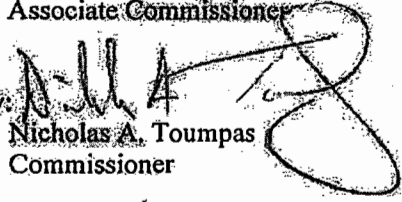
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

September 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into a sole source amendment to an existing Agreement (Purchase Order #1008774) with Lakes Region Partnership for Public Health, Inc. (LRPPH), Laconia, New Hampshire (Vendor # 165635), acting as the fiscal agent to operate Belknap County ServiceLink Resource Center, to provide Veteran Directed - Home and Community Based Services (VD-HCBS) and State Health Insurance Assistance Program (SHIP) services by increasing the contract amount by \$76,380.00 from \$223,296.07 to \$299,676.07, effective date of Governor and Council approval through June 30, 2011. The original Agreement was approved by Governor and Council on June 23, 2010 (Item # 135).

2) Upon approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to make an advance payment of \$54,515.00 to LRPPH to assist with the start-up and to fund the subcontracts, for initial costs associated with the projects in Requested Action #1. Funds are available in the following accounts in SFY 11.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77	\$ 0.00	\$ 39,908.77
		Subtotal	\$ 39,908.77	\$ 0.00	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget

SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07	\$ 0.00	\$ 96,503.07
		Subtotal	\$ 96,503.07	\$ 0.00	\$ 96,503.67

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43	\$ 0.00	\$ 10,777.43
		Subtotal	\$ 10,777.43	\$ 0.00	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00	\$ 0.00	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00	\$ 29,015.00	\$ 44,015.00
		Subtotal	\$ 52,000.00	\$ 29,015.00	\$ 81,015.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80	\$ 47,365.00	\$ 60,434.00
		Subtotal	\$ 24,106.80	\$ 47,365.00	\$ 60,434.00
		Contract Total	\$223,296.07	\$ 76,380.00	\$299,676.07

EXPLANATION

This is a sole source amendment for the following reasons: 1) Based on discussions between BEAS and the members of the ServiceLink Network it was determined that LRPPH should enter into an agreement with BEAS to provide these services; and 2) the original Agreement (approved by Governor and Council on June 23, 2010, item # 135) was awarded to LRPPH through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council.

The purpose of this Requested Action is to implement two pilot projects as follows: 1) a pilot program for Veteran Directed-Home and Community Based Services (VD-HCBS) in Belknap County; and 2) provide enhanced funding for New Hampshire State Health Insurance Assistance Program (NH SHIP) Special Projects known as Staff Development and Volunteer Management for the entire ServiceLink Resource Center (SLRC) network. These Projects are described below in more detail. BEAS received two grant awards, one from the Administration on Aging (AoA), for The Community Living Program Cooperative Agreement and one from SHIP Supplemental and Performance Award by the Centers for Medicare and Medicaid (CMS) to support this work. See attached Notice of Awards.

Veteran Directed – Home and Community Based Services

The Belknap County ServiceLink Resource Center of Belknap County will pilot a project in Belknap County that will utilize the basic elements of the Transitions in Caregiving Program (aka Community Living Program) to meet the readiness criteria to facilitate veteran enrollment into the VD-HCBS program in which veterans at risk of nursing home placement will be able to choose a consumer-directed model for services, similar to the Transitions in Caregiving (TIC) model. TIC is a consumer-directed model that supports informal caregivers caring for older adults at risk of placement in a nursing facility and ultimately spend down to Medicaid.

Staff Development and Volunteer Management NH SHIP

The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance, to Medicare eligible persons, their families and caregivers and to recruit, train, and maintain a network of volunteers to help provide these services statewide. LRPPH shall provide: 1) SHIP Staff Development to the staff at Belknap ServiceLink such as attending the mandatory SHIP National Conference and obtaining their required Medicare related continuing education credits and trainings; 2) Volunteer Management activities such as recruitment and recognition at Belknap ServiceLink; and 3) funding for the aforementioned activities listed in 1) and 2) above by subcontracting with the remaining nine ServiceLink Resource Centers in New Hampshire, known collectively as ServiceLink Network.

BEAS shall make advance payments to LRPPH as outlined in the attached Amendment Exhibit B Purchase of Services for the following reasons: 1) \$29,015.00 for the start-up and development of the VD-HCBS program's infrastructure which includes developing a provider agreement with the Veterans Administration in Manchester, New Hampshire and with a Financial Management Service to serve as "Employer of Record" under the TIC model, and includes limited funding for direct services to Veterans; and 2) \$25,500.00 for LRPPH's up front costs (\$2,000.00) and to fund subcontracts with the nine other SLRCs to provide Staff Development and Volunteer Management under NH SHIP so staff may attend the mandatory Medicare conferences and trainings.

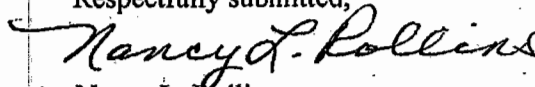
The area served for the VD-HCBS program is Belknap County and for NH SHIP is statewide.

Source of Funds: One hundred percent Federal CMS and AoA funds.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

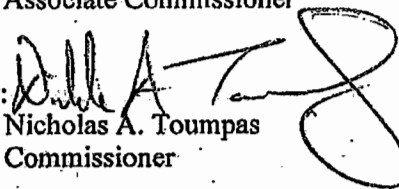
His Excellency, Governor John H. Lynch
and the Honorable Executive Council
September 24, 2010
Page 4

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Frankestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSPP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSPP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

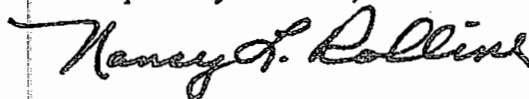
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

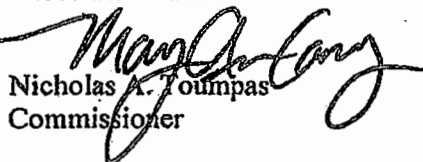
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
20	Allocation/Funding Sources											
21	Budget Awarded:											
22	Funding Source:	Contract Amts G. Total	Merrimack	Carroll	Rochingham	Hillborough	Grafton	Bellnap	Monadnock	Sullivan	Stafford	Coos
23	LTC funds (ServiceLink General Funds) ¹	\$532,116.94	\$58,532.86	\$74,517.60	\$79,817.54	\$106,423.39	\$58,532.86	\$39,908.77	\$42,569.36	\$34,587.60	\$42,569.36	\$34,587.60
24	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,006.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$83,636.00	\$102,936.61	\$83,636.00
25	I&R/A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44
26	Subtotal	\$1,962,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04
27	Family Caregiver Support Title III-E											
28	(AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$27,000.00	\$27,000.00	\$27,000.00
	Community Living Program (AoA Discretionary Grant ending Sept. 30,											
29	2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$50,000.00	\$50,000.00	\$15,000.00	\$52,000.00	\$52,000.00	\$40,000.00	
30	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$57,000.00	\$52,000.00	\$57,000.00	\$57,000.00	\$67,000.00	\$27,000.00
31												
32	SHIP (CMS Grant)	\$190,400.00	\$20,537.00	\$13,069.00	\$28,005.00	\$37,340.00	\$20,537.00	\$13,069.00	\$14,936.00	\$12,135.50	\$18,636.00	\$12,135.50
33	SNAPP (AoA Grant) ²	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$13,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
	MPPA (CMS/AoA Grant ending May											
34	30, 2011) ⁴	\$58,000.00	\$6,960.00	\$7,320.00	\$8,700.00	\$12,180.00	\$6,960.00	\$7,320.00	\$7,320.00	\$7,320.00	\$6,960.00	\$6,960.00
35	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$43,196.40	\$24,106.80	\$27,219.20	\$27,550.60	\$35,559.20	\$27,190.60
36	Grand Total	\$2,912,463.58	\$311,073.99	\$218,670.84	\$441,764.54	\$583,932.72	\$329,973.99	\$223,296.07	\$221,221.09	\$177,114.64	\$259,561.09	\$181,754.64
37	% Federal Funds	56.98%										

36 Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$162,942.00 in match.*

37 Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

38 Note 3: The SLRCs are not required to provide matching funds under the NHFCSP, however they have provided \$129,229 in match.

39 Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

40 * Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Monadnock Collaborative**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 3rd day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Monadnock Collaborative (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 105 Castle Street, Keene, New Hampshire, 03431.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$787,184.88.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:
 - 6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:
 1. Number of individuals served
 2. Number of repeat visits by individuals



3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.



- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$678,933.03.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731



d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 5,729.92
LTC funds (ServiceLink General Funds)	\$ 21,280.00
Family Caregiver Support Title III-E	\$ 15,696.97
Senior Medicare Patrol	\$ 5,061.60
State Health Insurance Assistance Program	\$ 9,015.05
Assessment & Counseling (Medicaid)	\$ 51,468.31

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Monadnock Collaborative



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6/5/13
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

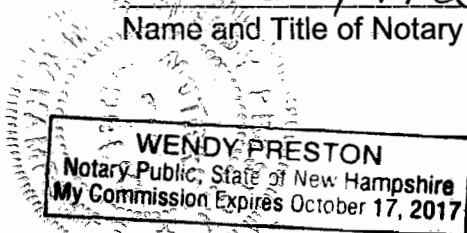
Monadnock Collaborative

June 4, 2013
Date

Melinda Feola-Mahar
Name: Melinda Feola-Mahar
Title: Executive Director

Acknowledgement:
State of NH, County of Cheshire on June 4, 13,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.
Signature of Notary Public or Justice of the Peace

Wendy Preston
Name and Title of Notary or Justice of the Peace



State of New Hampshire
Department of Health and Human Services
Amendment #2 for Monadnock Collaborative



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

OFFICE OF THE ATTORNEY GENERAL

5 Jun. 2013
Date

Jeannette P. Herrick
Name: Jeannette P. Herrick
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Monadnock Collaborative

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,519.00	\$ 751.90	\$ 8,270.90	\$ 3,944.00	\$ 141.15	\$ 4,085.15	\$ 3,575.00	\$ 610.75	\$ 4,185.75
2. Employee Benefits	\$ 1,700.00	\$ 170.00	\$ 1,870.00	-	\$ 170.00	\$ 170.00	\$ 1,700.00	-	\$ 1,700.00
3. Consultants	\$ -	\$ -	\$ -	-	-	-	-	-	-
4. Equipment:	\$ -	\$ -	\$ -	-	-	-	-	-	-
Rental	\$ -	\$ -	\$ -	-	-	-	-	-	-
Repair and Maintenance	\$ 200.00	\$ 20.00	\$ 220.00	\$ 200.00	\$ 20.00	\$ 220.00	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	-	-	-	-	-	-
5. Supplies:	\$ -	\$ -	\$ -	-	-	-	-	-	-
Educational	\$ -	\$ -	\$ -	-	-	-	-	-	-
Lab	\$ -	\$ -	\$ -	-	-	-	-	-	-
Pharmacy	\$ -	\$ -	\$ -	-	-	-	-	-	-
Medical	\$ -	\$ -	\$ -	-	-	-	-	-	-
Office	\$ 400.00	\$ 40.00	\$ 440.00	-	\$ 40.00	\$ 40.00	\$ 400.00	-	\$ 400.00
6. Travel	\$ 200.00	\$ 20.00	\$ 220.00	-	\$ 20.00	\$ 20.00	\$ 200.00	-	\$ 200.00
7. Occupancy	\$ 675.50	\$ 67.55	\$ 743.05	\$ 100.00	\$ 67.55	\$ 167.55	\$ 575.50	-	\$ 575.50
8. Current Expenses	\$ -	\$ -	\$ -	-	-	-	-	-	-
Telephone	\$ 124.00	\$ 12.40	\$ 136.40	-	\$ 12.40	\$ 12.40	\$ 124.00	-	\$ 124.00
Postage	\$ -	\$ -	\$ -	-	-	-	-	-	-
Subscriptions	\$ -	\$ -	\$ -	-	-	-	-	-	-
Audit and Legal	\$ -	\$ -	\$ -	-	-	-	-	-	-
Insurance	\$ -	\$ -	\$ -	-	-	-	-	-	-
Board Expenses	\$ -	\$ -	\$ -	-	-	-	-	-	-
9. Software	\$ -	\$ -	\$ -	-	-	-	-	-	-
10. Marketing/Communications	\$ 100.00	\$ 10.00	\$ 110.00	-	\$ 10.00	\$ 10.00	\$ 100.00	-	\$ 100.00
11. Staff Education and Training	\$ 75.00	\$ 7.50	\$ 82.50	-	\$ 7.50	\$ 7.50	\$ 75.00	-	\$ 75.00
12. Subcontract/Agreements	\$ -	\$ -	\$ -	-	-	-	-	-	-
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	-	-	-	-	-	-
TOTAL	\$ 10,593.50	\$ 1,059.35	\$ 12,092.85	\$ 4,244.00	\$ 488.60	\$ 4,732.60	\$ 6,749.50	\$ 610.75	\$ 7,360.25
Indirect As A Percent of Direct			10.0%			9.05%			

Contractor Initials: MM
Date: 10/4/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Monadnock Collaborative

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Costs			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 4,542.00	\$ 227.10	\$ 4,769.10	\$ 301.00	\$ -	\$ 301.00	\$ 4,241.00	\$ 227.10	\$ 4,468.10
2. Employee Benefits	\$ 959.00	\$ 47.95	\$ 1,006.95	\$ -	\$ -	\$ -	\$ 959.00	\$ 47.95	\$ 1,006.95
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 53.00	\$ 2.65	\$ 55.65	\$ -	\$ -	\$ -	\$ 53.00	\$ 2.65	\$ 55.65
6. Travel	\$ 106.00	\$ 5.30	\$ 111.30	\$ -	\$ -	\$ -	\$ 106.00	\$ 5.30	\$ 111.30
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 84.00	\$ 4.20	\$ 88.20	\$ -	\$ -	\$ -	\$ 84.00	\$ 4.20	\$ 88.20
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontract/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 5,744.00	\$ 287.20	\$ 6,031.20	\$ 301.00	\$ -	\$ 301.00	\$ 5,430.00	\$ 286.92	\$ 5,725.92
Indirect As A Percent of Direct									5.3%

Contractor Initials: 

Date: 6/14/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Monadnock Collaborative

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 10,461.08	\$ 1,046.11	\$ 11,507.19	\$ 461.08	\$ 500.00	\$ 961.08	\$ 10,000.00	\$ 500.00	\$ 10,500.00
2. Employee Benefits	\$ 2,000.00	\$ 200.00	\$ 2,200.00	\$ 898.55	\$ 200.00	\$ 1,098.55	\$ 1,101.45	\$ -	\$ 1,101.45
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ 1,000.00	\$ 100.00	\$ 1,100.00	\$ 371.95	\$ 50.00	\$ 421.95	\$ 624.05	\$ 50.00	\$ 674.05
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 465.00	\$ 46.50	\$ 511.50	\$ -	\$ 46.50	\$ 46.50	\$ 465.00	\$ -	\$ 465.00
6. Travel	\$ 208.00	\$ 20.80	\$ 228.80	\$ -	\$ 20.80	\$ 20.80	\$ 208.00	\$ -	\$ 208.00
7. Occupancy	\$ 675.50	\$ 67.55	\$ 743.05	\$ 125.00	\$ 40.05	\$ 165.05	\$ 550.00	\$ 27.50	\$ 577.50
8. Current Expenses	\$ 200.00	\$ 20.00	\$ 220.00	\$ -	\$ 10.00	\$ 10.00	\$ 200.00	\$ 10.00	\$ 210.00
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 100.00	\$ 10.00	\$ 110.00	\$ -	\$ 5.00	\$ 5.00	\$ 100.00	\$ 5.00	\$ 105.00
11. Staff Education and Training	\$ 75.00	\$ 7.50	\$ 82.50	\$ -	\$ 3.75	\$ 3.75	\$ 75.00	\$ 3.75	\$ 78.75
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 15,184.58	\$ 1,518.46	\$ 16,703.04	\$ 1,856.58	\$ 876.10	\$ 2,732.68	\$ 13,325.50	\$ 596.25	\$ 13,919.75

Indirect As A Percent of Direct

10.0%

Contractor Initials: *dhm*Date: *6/4/13*

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid**

Contractor Name: Monadnock Collaborative

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 42,174.00	\$ 2,108.70	\$ 44,282.70	\$ 4,680.00	\$ 2,108.00	\$ 6,788.00	\$ 37,494.00	\$ -	\$ 37,494.00
2. Employee Benefits	\$ 8,907.00	\$ 445.35	\$ 9,352.35	\$ 2,500.00	\$ 445.35	\$ 2,945.35	\$ 6,407.00	\$ -	\$ 6,407.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 488.00	\$ 24.40	\$ 512.40	\$ -	\$ 24.40	\$ 24.40	\$ 488.00	\$ -	\$ 488.00
6. Travel	\$ 1,512.00	\$ 75.60	\$ 1,587.60	\$ -	\$ 75.60	\$ 75.60	\$ 1,512.00	\$ -	\$ 1,512.00
7. Occupancy	\$ 3,253.00	\$ 162.65	\$ 3,415.65	\$ -	\$ 48.65	\$ 48.65	\$ 3,253.00	\$ 114.00	\$ 3,367.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 1,200.00	\$ 60.00	\$ 1,260.00	\$ -	\$ 60.00	\$ 60.00	\$ 1,200.00	\$ -	\$ 1,200.00
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 300.00	\$ 15.00	\$ 315.00	\$ -	\$ 15.00	\$ 15.00	\$ 300.00	\$ -	\$ 300.00
11. Staff Education and Training	\$ 700.00	\$ 35.00	\$ 735.00	\$ -	\$ 35.00	\$ 35.00	\$ 700.00	\$ -	\$ 700.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 58,534.00	\$ 2,926.70	\$ 61,460.70	\$ 7,180.00	\$ 2,812.00	\$ 9,992.00	\$ 51,354.00	\$ 114.00	\$ 51,468.00

Indirect As A Percent of Direct 0.2%

Contractor Initials: 
Date: 6/4/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title IIIIE Family Caregiver**

Contractor Name: Monadnock Collaborative

Budget Request for: Family Caregiver Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 12,989.00	\$ 649.45	\$ 13,638.45	\$ -	\$ 649.45	\$ 649.45	\$ 12,989.00	\$ -	\$ 12,989.00
2. Employee Benefits	\$ 3,592.00	\$ 179.60	\$ 3,771.60	\$ 2,092.00	\$ 179.60	\$ 2,271.60	\$ 1,500.00	\$ -	\$ 1,500.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 240.00	\$ 12.00	\$ 252.00	\$ -	\$ 12.00	\$ 12.00	\$ 240.00	\$ -	\$ 240.00
6. Travel	\$ 480.00	\$ 24.00	\$ 504.00	\$ 172.00	\$ 24.00	\$ 196.00	\$ 308.00	\$ -	\$ 308.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 210.00	\$ 10.50	\$ 220.50	\$ -	\$ 10.50	\$ 10.50	\$ 210.00	\$ -	\$ 210.00
Postage	\$ 150.00	\$ 7.50	\$ 157.50	\$ -	\$ 7.50	\$ 7.50	\$ 150.00	\$ -	\$ 150.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 300.00	\$ 15.00	\$ 315.00	\$ -	\$ 15.00	\$ 15.00	\$ 300.00	\$ -	\$ 300.00
11. Staff Education and Training	\$ 100.00	\$ 5.00	\$ 105.00	\$ 100.00	\$ 5.00	\$ 105.00	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (Specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 18,061.00	\$ 903.05	\$ 18,964.05	\$ 2,364.00	\$ 903.05	\$ 3,267.05	\$ 15,697.00	\$ -	\$ 15,697.00
Indirect As A Percent of Direct									0.0%

Family Caregiver

Contractor Initials: 

Date: 6/4/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program**

Contractor Name: Monadnock Collaborative

Budget Request for: State Health Insurance Assistance Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,433.00	\$ 371.65	\$ 7,804.65	\$ 371.65	\$ 102.80	\$ 474.45	\$ 7,433.00	\$ -	\$ 7,433.00
2. Employee Benefits	\$ 2,056.00	\$ 102.80	\$ 2,158.80	\$ 1,773.00	\$ -	\$ 1,773.00	\$ 283.00	\$ -	\$ 283.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 192.00	\$ 9.60	\$ 201.60	\$ -	\$ -	\$ -	\$ 192.00	\$ -	\$ 192.00
7. Travel	\$ 243.00	\$ 12.15	\$ 255.15	\$ -	\$ -	\$ -	\$ 243.00	\$ -	\$ 243.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 384.00	\$ 19.20	\$ 403.20	\$ -	\$ -	\$ -	\$ 384.00	\$ -	\$ 384.00
11. Staff Education and Training	\$ 480.00	\$ 24.00	\$ 504.00	\$ -	\$ -	\$ -	\$ 480.00	\$ -	\$ 480.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 10,785.00	\$ 539.40	\$ 11,324.40	\$ 1,773.00	\$ 539.40	\$ 2,312.40	\$ 9,015.00	\$ -	\$ 9,015.00

Indirect As A Percent of Direct

0.0%

Contractor Initials: MPDate: 6/17/13

SHIP

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Grant: Senior Medicare Patrol

Contractor Name: Monadnock Collaborative

Budget Request for: Senior Medicare Patrol Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 4,181.00	\$ -	\$ 4,181.00	\$ 418.10	\$ -	\$ 418.10	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 1,156.00	\$ -	\$ 1,156.00	\$ 115.60	\$ -	\$ 115.60	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 108.00	\$ -	\$ 108.00	\$ 10.80	\$ -	\$ 10.80	\$ -	\$ -	\$ -
7. Occupancy	\$ 150.00	\$ -	\$ 150.00	\$ 15.00	\$ -	\$ 15.00	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 482.00	\$ -	\$ 482.00	\$ 48.20	\$ -	\$ 48.20	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 270.00	\$ -	\$ 270.00	\$ 27.00	\$ -	\$ 27.00	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (Specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 6,347.00	\$ -	\$ 6,347.00	\$ 634.70	\$ -	\$ 634.70	\$ -	\$ -	\$ -
Indirect As A Percent of Direct									0.0%

Contractor Initials: *JA*
Date: *6/4/13*

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting

of Board of Directors of Monadnock Collaborative
(Name of Governing Board) (Name of Corporation)

on October 17, 2005 which was duly called at which a quorum was
present:

"On motion duly made and seconded, it was voted to authorize

the Executive Director, to accept grants and awards and enter into contracts, and contract amendments from time to time with the New Hampshire Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services, to sign and otherwise fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)
Melinda Feola-Mahar is the duly elected (Title) Executive Director of
this corporation and is still qualified and serving in such capacity.

June 4, 2013
(Date)

Jane Wan
Board Representative

(Imprint seal of corporation. If none, write: "No corporate seal.")

NO CORPORATE SEAL

STATE OF NEW HAMPSHIRE

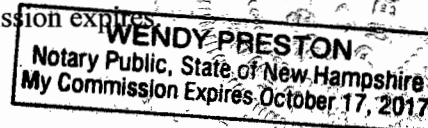
COUNTY OF Cheshire

On June 4, 2013, before the undersigned officer personally appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that _____ he executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

Wendy Preston
Notary Public/Justice of the Peace

My commission expires



State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Monadnock Collaborative is a New Hampshire nonprofit corporation formed June 6, 2001. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 5th day of June, A.D. 2013

A handwritten signature in cursive script, reading "William M. Gardner".

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/5/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	CONTACT NAME: Pat Mack PHONE (A/C, No, Ext): (603) 293-2791 FAX (A/C, No): (603) 293-7188 E-MAIL ADDRESS: Pat@esinsurance.com
INSURED Monadnock Collaborative & Pilot Health, LLC 105 Castle Street Keene NH 03431	INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Insurance Co INSURER B: Guard Insurance INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 2013-2014

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC		PHPK967901	2/1/2013	2/1/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 20,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY ☐ ANY AUTO ALL OWNED AUTOS ☒ HIRED AUTOS ☒ SCHEDULED AUTOS NON-OWNED AUTOS		PHPK967901	2/1/2013	2/1/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	A ☒ UMBRELLA LIAB ☒ EXCESS LIAB ☒ CLAIMS-MADE DED RETENTION \$		PHUB408669	02/01/2013	02/01/2014	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	B WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☐ N/A	MONWC350464	7/1/2012	7/1/2013	WC STATU-TORY LIMITS ☐ OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

NH DHHS Bureau of Adult and Elderly Servi
29 Hazen Drive
Concord, NH 03301-6504

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Fairly Kennedy

ACORD 25 (2010/05)

INS025 (201005) 01

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008776) with Monadnock Collaborative, Keene New Hampshire (Vendor # 159303) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$457,711.94 from \$221,221.09 to \$678,933.03, and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$42,569.36	\$0.00	\$42,569.36
2012	102-500734	Contracts for Program Services	\$0.00	\$42,569.36	\$42,569.36
2013	102-500734	Contracts for Program Services	\$0.00	\$42,569.36	\$42,569.36
Subtotal			\$42,569.36	\$85,138.72	\$127,708.08

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$102,936.61	\$0.00	\$102,936.61



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

June 23, 2011

Ms. Melinda Feola-Mahr, Executive Director
Monadnock Collaborative
105 Castle St
Keene, NH 03431

Dear Ms. Feola-Mahr:

Enclosed is your contract amendment with the Bureau of Elderly and Adult Services for State Fiscal Year 2012 (July 1, 2011 through June 30, 2012). Governor and Executive Council approved the contract amendment on June 22, 2011. The Bureau of Elderly and Adult Services looks forward to working with you and appreciates the valuable management services you provide.

If you have any questions, please contact me at 603.271.7015 or catherine.a.cormier@dhhs.state.nh.us.

Sincerely,

Catherine A. Cormier
Contract Administrator

Enc.
file

2012	550-500398	Assessment & Counseling	\$0.00	\$102,936.61	\$102,936.61
2013	550-500398	Assessment & Counseling	\$0.00	\$102,936.61	\$102,936.61
Subtotal			\$102,936.61	\$205,873.22	\$308,809.83

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$11,495.92	\$0.00	\$11,495.92
2012	545-500387	I & R Contracts	\$0.00	\$11,459.84	\$11,459.84
2013	545-500387	I & R Contracts	\$0.00	\$11,459.84	\$11,459.84
Subtotal			\$11,495.92	\$22,919.68	\$34,415.60

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
2012	072-500575	Grants - Federal	\$0.00	\$10,000.00	\$10,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$0.00	\$10,000.00	\$10,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$37,000.00	\$0.00	\$37,000.00
2012	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
2013	570-500928	Family Caregiver	\$0.00	\$37,000.00	\$37,000.00
Subtotal			\$37,000.00	\$74,000.00	\$111,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$27,219.20	\$0.00	\$27,219.20
2012	102-500731	Contracts for Program Services	\$0.00	\$29,890.16	\$29,890.16
2013	102-500731	Contracts for Program Services	\$0.00	\$29,890.16	\$29,890.16
Subtotal			\$27,219.20	\$59,780.32	\$86,999.52
Grand Total			\$221,221.09	\$457,711.94	\$678,933.03

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Monadnock Collaborative for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Monadnock Region ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Monadnock Collaborative has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and

accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Monadnock Collaborative through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

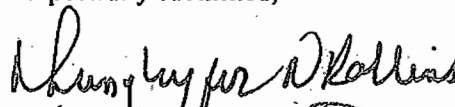
Area Served: Monadnock Region

Source of Funds: 56.3% Federal funds and 43.7% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

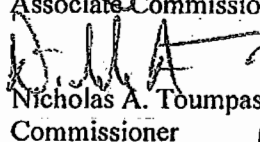
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

A		B	C	D	E	F	G	H	I	J	K	L
1	Program Name	New Hampshire ServiceLink Resource Center										
2	Contract Purpose	Provide services for 1&2R/A, LTC Counseling, NHCSP, SNP, SHIP, and SHIP-MIPPA										
3												
4	RFP Bidders Summary	Area Served:	Merrimack County	Carroll County	Rockingham County	Hillsborough County	Grafton County	Bellamy County	Monadnock Region	Sullivan County	Stratford County	Coos County
5	RFP CRITERIA	Max Pts										
6	Min. Requirements	10	Community Action Program Belknap-Merrimack Inc	Carroll County Health and Home Care	Crooked Mountain Community Services Inc	Easter Seals New Hampshire	Grafton Cty Senior Citizens Council	Lakes Region Partnership for Public Health	Monadnock Collaborative	Southwestern Community Services, Inc.	Stratford Network	Tri-County Community Action Program
7	Organization Background, Experience	15	14.90	14.90	14.10	13.60	15.00	15.00	10.00	13.50	14.30	14.8
8	Statement of Work	40	38.70	36.10	37.80	34.40	38.60	36.60	35.90	31.90	34.30	27.5
9	Budget and Narrative	35	32.30	29.40	34.00	26.60	33.40	30.40	31.80	26.00	26.70	31.1
10	Total	100	95.90	90.00	94.90	83.60	97.00	92.00	92.40	80.40	84.30	83.4
11	RFP Reviewers											
12	Name and Job Title:	Department of DHHS: Agency										
13		Qualifications:										
14	1. Wendi Aullman, SLRC Program Manager	Over ten years in administering the SLRC by providing oversight for program and policy of the SLRCs as well as coordinating efforts statewide and within BEAS.										
15	2. Cathy Crepaux, NHCSP Manager	Six years in administering the NHCSP by overseeing the AoA grant awards to provide services through existing processes while developing new cost effective service delivery approaches with discretionary grants from AoA.										
16	3. Carol Demmon, Medicare Coordinator and Program Specialist	Over ten years in administering the SHIP and SNP through the SLRCs.										
17	4. Donald Hunter, Senior Management Analyst	Five years in Medicaid Policy, of which includes Medicare Part D Coordinator for DHHS, and works with NH Legislature and national government policy organizations.										
18	5. Sally Varney, Program Planning and Review Specialist for Quality	Ten years in Quality Management for federal and state funded DHHS programs.										
19												



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Franconia, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

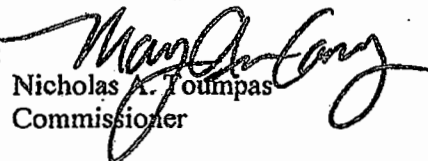
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
20	Allocation/Funding Sources											
21	Budget Awarded:											
22	Funding Source:											
23	LTC funds (ServiceLink General Funds) ¹											
24	Assessment & Counseling (Medicaid)											
25	I&R/A (Social Services Block Grant)											
26	Subtotal											
27	Family Caregiver Support Title III-E (AoA) ²											
28	Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³											
29	Subtotal											
30	SHIP (CMS Grant)											
31	SNPP (AoA Grant) ⁴											
32	MRPA (CMS/AoA Grant ending May 30, 2011) ⁵											
33	Subtotal											
34	Grand Total											
35	% Federal Funds											

Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$162,942.00 in match.*

Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

Note 3: The SLRCs are not required to provide matching funds under the NEFCSP, however they have provided \$129,229 in match.

Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

*Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Southwestern Community Services, Inc.**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 6th day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Southwestern Community Services, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 63 Community Way, Keene, New Hampshire, 03431.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$631,410.99.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:

6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:

 1. Number of individuals served
 2. Number of repeat visits by individuals
 3. Type of information/referral given to individuals
 4. Type of follow up performed



5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.
- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.



- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$544,755.60.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731

- d. Add Paragraph # 11:
For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the



Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 4,655.56
LTC funds (ServiceLink General Funds)	\$ 17,290.00
Family Caregiver Support Title III-E	\$ 11,454.55
Senior Medicare Patrol	\$ 4,112.55
State Health Insurance Assistance Program	\$ 7,324.73
Assessment & Counseling (Medicaid)	\$ 41,818.00

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Southwestern Community Services, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

7 June 2013
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Southwestern Community Services, Inc.

June 07, 2013
Date

Wm. A. Marcello, CEO
Name: Wm. A. Marcello
Title: Chief Executive Officer

Acknowledgement:

State of New Hampshire, County of Cheshire on June 7 2013,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

Leisa J Perrotta
Name and Title of Notary or Justice of the Peace



206/07/13

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Southwestern Community Services, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

10 Jun. 2013
Date

JEANNE P. HERRICK
Name: JEANNE P. HERRICK
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Southwestern Community Services

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,000.00	\$ 350.00	\$ 7,350.00	\$ 284.82	\$ -	\$ 284.82	\$ 6,705.29	\$ 350.00	\$ 7,055.29
2. Employee Benefits	\$ 1,935.50	\$ 96.78	\$ 2,032.28	\$ 1,400.00	\$ -	\$ 1,400.00	\$ 535.50	\$ 96.78	\$ 632.28
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ 250.00	\$ 12.50	\$ 262.50	\$ 250.00	\$ 12.50	\$ 262.50	\$ -	\$ -	\$ -
7. Purchase/Depreciation	\$ 600.00	\$ 30.00	\$ 630.00	\$ 600.00	\$ 30.00	\$ 630.00	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 200.00	\$ 10.00	\$ 210.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
14. Travel	\$ 375.00	\$ 18.75	\$ 393.75	\$ 150.00	\$ -	\$ 150.00	\$ 225.00	\$ -	\$ 225.00
15. Occupancy	\$ 200.00	\$ 10.00	\$ 210.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 300.00	\$ -	\$ 300.00
18. Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ 250.00	\$ 12.50	\$ 262.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ 250.00	\$ 12.50	\$ 262.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specify details mandatory):	\$ 550.00	\$ 27.50	\$ 577.50	\$ 550.00	\$ 27.50	\$ 577.50	\$ -	\$ -	\$ -
28. TOTAL	\$ 11,610.50	\$ 560.53	\$ 12,171.03	\$ 3,244.82	\$ 70.00	\$ 3,314.82	\$ 8,165.79	\$ 446.78	\$ 8,612.57
Indirect As A Percent of Direct		5.0%						5.5%	

Contractor Initials: 
Date: 2/6/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Southwestern Community Services

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,224.00	\$ 161.20	\$ 3,385.20	-	-	-	\$ 3,224.00	\$ 161.20	\$ 3,385.20
2. Employee Benefits	\$ 892.00	\$ 44.60	\$ 936.60	-	-	-	\$ 892.00	\$ 44.60	\$ 936.60
3. Consultants	-	-	-	-	-	-	-	-	-
4. Equipment:	-	-	-	-	-	-	-	-	-
Rental	-	-	-	-	-	-	-	-	-
Repair and Maintenance	\$ 100.00	\$ 5.00	\$ 105.00	-	-	-	\$ 100.00	\$ 5.00	\$ 105.00
Purchase/Depreciation	-	-	-	-	-	-	-	-	-
5. Supplies:	-	-	-	-	-	-	-	-	-
Educational	-	-	-	-	-	-	-	-	-
Lab	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-
Medical	-	-	-	-	-	-	-	-	-
Office	\$ 50.00	\$ 2.50	\$ 52.50	-	-	-	\$ 50.00	\$ 2.50	\$ 52.50
6. Travel	\$ 100.00	\$ 5.00	\$ 105.00	-	-	-	\$ 100.00	\$ 5.00	\$ 105.00
7. Occupancy	-	-	-	-	-	-	-	-	-
8. Current Expenses	-	-	-	-	-	-	-	-	-
Telephone	-	-	-	-	-	-	-	-	-
Postage	\$ 50.00	\$ 2.50	\$ 52.50	-	-	-	\$ 50.00	\$ 2.50	\$ 52.50
Subscriptions	-	-	-	-	-	-	-	-	-
Audit and Legal	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-
Board Expenses	-	-	-	-	-	-	-	-	-
9. Software	-	-	-	-	-	-	-	-	-
10. Marketing/Communications	-	-	-	-	-	-	-	-	-
11. Staff Education and Training	\$ 120.00	\$ 6.00	\$ 126.00	\$ 107.24	-	\$ 107.24	\$ 17.28	\$ 6.00	\$ 23.28
12. Subcontracts/Agreements	-	-	-	-	-	-	-	-	-
13. Other (specific details mandatory):	-	-	-	-	-	-	-	-	-
TOTAL	\$ 4,636.00	\$ 226.80	\$ 4,862.80	\$ 107.24	-	\$ 107.24	\$ 4,433.76	\$ 221.80	\$ 4,655.56
Indirect As A Percent of Direct			5.0%					5.0%	

Contractor Initials: 

Date: 06/07/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds**

Bidder/Program Name: Southwestern Community Services

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,500.00	\$ 375.00	\$ 7,875.00	\$ 1,000.00	\$ -	\$ 1,000.00	\$ 6,500.00	\$ 375.00	\$ 6,875.00
2. Employee Benefits	\$ 2,073.75	\$ 103.69	\$ 2,177.44	\$ 1,500.00	\$ 0.01	\$ 1,500.01	\$ 573.75	\$ 103.68	\$ 677.43
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ 250.00	\$ 12.50	\$ 262.50	\$ 250.00	\$ 12.50	\$ 262.50	\$ -	\$ 1	\$ -
Purchase/Depreciation	\$ 600.00	\$ 30.00	\$ 630.00	\$ 600.00	\$ 30.00	\$ 630.00	\$ -	\$ -	\$ -
Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 200.00	\$ 10.00	\$ 210.00	\$ -	\$ 10.00	\$ 10.00	\$ 200.00	\$ -	\$ 200.00
Travel	\$ 375.00	\$ 18.75	\$ 393.75	\$ 150.00	\$ 18.75	\$ 168.75	\$ 225.00	\$ 225.00	\$ 200.00
Occupancy	\$ 200.00	\$ 10.00	\$ 210.00	\$ -	\$ 10.00	\$ 10.00	\$ 200.00	\$ -	\$ 200.00
Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Marketing/Communications	\$ 250.00	\$ 12.50	\$ 262.50	\$ -	\$ 12.50	\$ 12.50	\$ 250.00	\$ -	\$ 250.00
Staff Education and Training	\$ 250.00	\$ 12.50	\$ 262.50	\$ -	\$ 12.50	\$ 12.50	\$ 250.00	\$ -	\$ 250.00
Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other (specific details mandatory):	\$ 550.00	\$ 27.50	\$ 577.50	\$ 550.00	\$ 27.50	\$ 577.50	\$ -	\$ -	\$ -
TOTAL	\$ 12,248.75	\$ 612.44	\$ 12,861.19	\$ 4,050.00	\$ 133.76	\$ 4,183.76	\$ 8,198.75	\$ 478.83	\$ 8,677.43
Indirect As A Percent of Direct		5.0%			5.0%			5.0%	

Contractor Initials: _____
Date: _____

Date: 206/07/13

LT Support Options Counseling

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid**

Contractor Name: Southwestern Community Services

Budget Request for: Long Term Supports Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 30,393.00	\$ 1,519.65	\$ 31,912.65	\$ -	\$ -	\$ -	\$ 30,393.00	\$ 1,519.65	\$ 31,912.65
2. Employee Benefits	\$ 8,403.66	\$ 420.18	\$ 8,823.85	\$ 2,403.00	\$ -	\$ 2,403.00	\$ 6,054.67	\$ 420.18	\$ 6,474.85
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ 200.00	\$ 10.00	\$ 210.00	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ 10.00	\$ 10.00
7. Purchase/Depreciation	\$ 500.00	\$ 25.00	\$ 525.00	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ 25.00	\$ 25.00
8. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 300.00	\$ 15.00	\$ 315.00	\$ -	\$ -	\$ -	\$ 300.00	\$ 15.00	\$ 315.00
14. Travel	\$ 1,260.00	\$ 63.00	\$ 1,323.00	\$ -	\$ -	\$ -	\$ 1,260.00	\$ 63.00	\$ 1,323.00
15. Occupancy	\$ 1,260.00	\$ 60.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 60.00	\$ 1,260.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ 450.00	\$ 22.50	\$ 472.50	\$ -	\$ -	\$ -	\$ 450.00	\$ 22.50	\$ 472.50
18. Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ 554.00	\$ 27.70	\$ 581.70	\$ 500.00	\$ 2.70	\$ 502.70	\$ -	\$ 25.00	\$ 25.00
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. TOTAL	\$ 43,260.66	\$ 2,163.03	\$ 45,423.70	\$ 3,603.00	\$ 2.70	\$ 3,605.70	\$ 35,657.67	\$ 2,160.33	\$ 41,818.00

Indirect As A Percent of Direct

Contractor Initials,

Date 22/06/07/13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

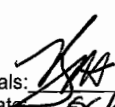
Title IIIIE Family Caregiver

Contractor Name: Southwestern Community Services

Budget Request for Family Caregiver Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect	Total	Direct Incremental	Indirect	Total	Direct Incremental	Indirect	Total
1. Total Salary/Wages	\$ 10,400.00	\$ 520.00	\$ 10,920.00	\$ -	\$ 520.00	\$ 520.00	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 2,876.00	\$ 143.90	\$ 3,021.90	\$ -	\$ 143.90	\$ 143.90	\$ 786.00	\$ -	\$ 786.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 50.00	\$ 2.50	\$ 52.50	\$ -	\$ 2.50	\$ 2.50	\$ 50.00	\$ -	\$ 50.00
7. Travel	\$ 126.00	\$ 6.30	\$ 132.30	\$ -	\$ 6.30	\$ 6.30	\$ 126.00	\$ -	\$ 126.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 250.00	\$ 12.50	\$ 262.50	\$ 167.45	\$ 12.50	\$ 179.95	\$ 82.55	\$ -	\$ 82.55
11. Staff Education and Training	\$ 150.00	\$ 7.50	\$ 157.50	\$ 150.00	\$ 7.50	\$ 157.50	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 13,854.00	\$ 692.70	\$ 14,546.70	\$ 2,399.45	\$ 692.70	\$ 3,092.15	\$ 11,454.55	\$ -	\$ 11,454.55
Indirect As A Percent of Direct			5.0%						0.0%

Contractor Initials: 
Date: 06/07/13

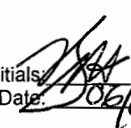
**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program**

Contractor Name: Southwestern Community Services

Budget Request for: State Health Insurance Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,238.78	\$ 311.94	\$ 6,550.72	\$ -	\$ 311.94	\$ 311.94	\$ 6,238.78	\$ -	\$ 6,238.78
2. Employee Benefits	\$ 1,725.03	\$ 86.25	\$ 1,811.28	\$ 1,725.03	\$ 86.25	\$ 1,811.28	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ 320.00	\$ 16.00	\$ 336.00	\$ 67.05	\$ 16.00	\$ 83.05	\$ 252.95	\$ -	\$ 252.95
13. Office	\$ 193.00	\$ 9.65	\$ 202.65	\$ -	\$ 9.65	\$ 9.65	\$ 193.00	\$ -	\$ 193.00
14. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
15. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ 320.00	\$ 16.00	\$ 336.00	\$ -	\$ 16.00	\$ 16.00	\$ 320.00	\$ -	\$ 320.00
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ 320.00	\$ 16.00	\$ 336.00	\$ -	\$ 16.00	\$ 16.00	\$ 320.00	\$ -	\$ 320.00
25. Staff Education and Training	\$ 320.00	\$ 16.00	\$ 336.00	\$ 320.00	\$ 16.00	\$ 336.00	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (Specify details in addendum)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. TOTAL	\$ 9,436.81	\$ 471.84	\$ 9,908.65	\$ 2,112.08	\$ 471.84	\$ 2,583.92	\$ 7,324.73	\$ -	\$ 7,324.73
Indirect As A Percent of Direct			5.0%						0.0%

Contractor Initials: 
Date: 2/26/13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol

Contractor Name: Southwestern Community Services

 Budget Request for: Senior Medicare Patrol
 (Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,509.32	\$ 175.47	\$ 3,684.79	\$ -	\$ -	\$ -	\$ 3,509.32	\$ -	\$ 3,509.32
2. Employee Benefits	\$ 970.32	\$ 48.52	\$ 1,018.84	\$ 970.32	\$ 48.52	\$ 1,018.84	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 180.00	\$ 9.00	\$ 189.00	\$ 180.00	\$ 9.00	\$ 189.00	\$ -	\$ -	\$ -
6. Travel	\$ 109.00	\$ 5.45	\$ 114.45	\$ 15.77	\$ 5.45	\$ 21.22	\$ 93.23	\$ -	\$ 93.23
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 180.00	\$ 9.00	\$ 189.00	\$ -	\$ 9.00	\$ 9.00	\$ 180.00	\$ -	\$ 180.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 180.00	\$ 9.00	\$ 189.00	\$ -	\$ 9.00	\$ 9.00	\$ 180.00	\$ -	\$ 180.00
11. Staff Education and Training	\$ 180.00	\$ 9.00	\$ 189.00	\$ 180.00	\$ 9.00	\$ 189.00	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ 300.00	\$ 15.00	\$ 315.00	\$ 150.00	\$ 15.00	\$ 165.00	\$ 150.00	\$ -	\$ 150.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 5,608.64	\$ 280.43	\$ 5,889.07	\$ 1,496.09	\$ 280.44	\$ 1,776.53	\$ 4,112.55	\$ -	\$ 4,112.55

5.0%

0.0%

Indirect As A Percent of Direct

Contractor Initials: 

Date: 6/6/13

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting
of SCS Board of Directors of Southwestern Community Services
(Name of Governing Board) (Name of Corporation)
on April 6, 2013 which was duly called at which a quorum was
present:

"On motion duly made and seconded, it was voted to authorize
the Chief Executive Officer, to accept grants and awards and enter into contracts, and contract
amendments from time to time with the New Hampshire Department of Health and Human Services,
Division of Community Based Care Services, Bureau of Elderly and Adult Services, to sign and otherwise
fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any
related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue
until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)
William A. Marcello is the duly elected (Title) Chief Executive Officer of
this corporation and is still qualified and serving in such capacity.

June 7, 2013
(Date)

Elain C...
Secretary

(Imprint seal of corporation. If none, write: "No corporate seal.")

STATE OF NEW HAMPSHIRE

COUNTY OF Cheshire

On June 7, 2013, before the undersigned officer personally
appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the
Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that _____ he
executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

Leisa J Perrotta
Notary Public/Justice of the Peace

My commission expires:



State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that SOUTHWESTERN COMMUNITY SERVICES, INC. is a New Hampshire nonprofit corporation formed May 19, 1965. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 1st day of April A.D. 2013

A handwritten signature in dark ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/7/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Clark - Mortenson Insurance P.O. Box 606 Keene NH 03431		CONTACT NAME: PHONE (A/C, No. Ext): 603-352-2121 E-MAIL ADDRESS: csr24@clark-mortenson.com FAX (A/C, No): 603-357-8491		
INSURED SOUTHWESTERNCOM Southwestern Comm Services Inc PO Box 603 Keene NH 03431		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: Philadelphia Insurance Company		0
		INSURER B: Maine Employer Mutual Insurance Co.		
		INSURER C:		
		INSURER D:		
		INSURER E:		
		INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 1268132479

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATION MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC			PHPK883363	6/30/2013	6/30/2014	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ ALL OWNED AUTOS ☒ HIRED AUTOS ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS			PHPK883363	6/30/2013	6/30/2014	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☒ RETENTION \$10,000			PHUB386674	6/30/2013	6/30/2014	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N N N/A			3102800768	4/1/2013	4/1/2014	☒ WC STATUTORY LIMITS E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
A	Professional Liability			PHPK883363	6/30/2013	6/30/2014	\$1,000,000 per occurrence \$2,000,000 general aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Workers Compensation Statutory coverage provided for State of NH
All Executive Officers are included in the Workers Compensation coverage

CERTIFICATE HOLDER**CANCELLATION**

State of NH Dept. of Health & Human Services Division
of Community Based Care Services
129 Pleasant Street
Concord NH 03301-3857

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008778) with Southwestern Community Services, Inc., Keene New Hampshire (Vendor # 177511) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$367,640.96 from \$177,114.64 to \$544,755.60 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$34,587.60	\$0.00	\$34,587.60
2012	102-500734	Contracts for Program Services	\$0.00	\$34,587.60	\$34,587.60
2013	102-500734	Contracts for Program Services	\$0.00	\$34,587.60	\$34,587.60
Subtotal			\$34,587.60	\$69,175.20	\$103,762.80

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$83,636.00	\$0.00	\$83,636.00

2012	550-500398	Assessment & Counseling	\$0.00	\$83,636.00	\$83,636.00
2013	550-500398	Assessment & Counseling	\$0.00	\$83,636.00	\$83,636.00
Subtotal			\$83,636.00	\$167,272.00	\$250,908.00

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$9,340.44	\$0.00	\$9,340.44
2012	545-500387	I & R Contracts	\$0.00	\$9,311.12	\$9,311.12
2013	545-500387	I & R Contracts	\$0.00	\$9,311.12	\$9,311.12
Subtotal			\$9,340.44	\$18,622.24	\$27,962.68

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
2012	072-500575	Grants - Federal	\$0.00	\$10,000.00	\$10,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$0.00	\$10,000.00	\$10,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$27,000.00	\$0.00	\$27,000.00
2012	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
2013	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
Subtotal			\$27,000.00	\$54,000.00	\$81,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$22,550.60	\$0.00	\$22,550.60
2012	102-500731	Contracts for Program Services	\$0.00	\$24,285.76	\$24,285.76
2013	102-500731	Contracts for Program Services	\$0.00	\$24,285.76	\$24,285.76
Subtotal			\$22,550.60	\$48,571.52	\$71,122.12
Grand Total			\$177,114.64	\$367,640.96	\$544,755.60

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Southwestern Community Services, Inc. for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Sullivan County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Southwestern Community Services, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an

independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Southwester Community Services through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

Area Served: Sullivan County

Source of Funds: 55.8% Federal funds and 44.2% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,

Nancy L. Rollins

Nancy L. Rollins
Associate Commissioner

Approved by:

Nicholas A. Toumpas
Nicholas A. Toumpas
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES
BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
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May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

May 24, 2010

Page 5

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Franconia, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

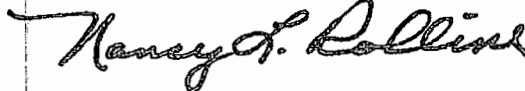
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

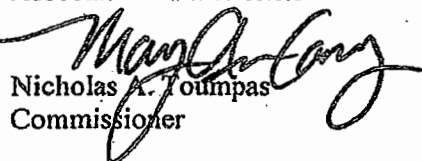
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
	Allocation/Funding Sources											
20	Budget Awarded:											
21	Funding Source:	Contract Amts G. Total	Merrimack	Carroll	Rockingham	Hillsborough	Grafton	Bellmap	Monabrook	Sullivan	Stratford	Coos
22	LTC funds (Serviceslink General Funds) ¹	\$532,116.94	\$58,532.86	\$34,587.60	\$79,817.54	\$106,423.39	\$88,532.86	\$39,908.77	\$42,569.36	\$34,587.60	\$42,569.36	\$34,587.60
23	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,004.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$83,636.00	\$102,936.61	\$83,636.00
24	1283/A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$38,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44
25	Subtotal	\$1,969,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04
26	Family Caregiver Support Title III-E (AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$57,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$27,000.00	\$27,000.00	\$27,000.00
27	Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$55,000.00	\$12,000.00	\$52,000.00	\$40,000.00	\$40,000.00	\$40,000.00
28	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$57,000.00	\$52,000.00	\$37,000.00	\$27,000.00	\$67,000.00	\$27,000.00
29	SHIP (CMS Grant)	\$190,400.00	\$20,517.00	\$13,069.00	\$28,005.00	\$37,340.00	\$20,517.00	\$13,069.00	\$14,936.00	\$12,135.50	\$18,636.00	\$12,135.50
30	SNAPP (AoA Grant) ²	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$12,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
31	MTPA (CMS/AoA Grant ending May 30, 2011) ⁴	\$58,000.00	\$6,960.00	\$2,320.00	\$3,700.00	\$12,180.00	\$6,960.00	\$2,320.00	\$2,320.00	\$2,320.00	\$6,960.00	\$6,960.00
32	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$43,196.40	\$24,106.80	\$27,219.20	\$22,550.60	\$35,559.20	\$22,550.60
33	Grand Total	\$2,912,463.58	\$311,073.99	\$218,670.84	\$441,764.54	\$583,932.72	\$324,073.99	\$223,295.07	\$221,221.09	\$171,114.64	\$259,561.09	\$181,754.64
34	% Federal Funds	56.98%										

Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$162,942.00 in match.

Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

Note 3: The SLRCs are not required to provide matching funds under the NEPCSP, however they have provided \$129,239 in match.

Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

* Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Strafford Network**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 3rd day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Strafford Network (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 1 Wakefield Street Suite 306, Rochester, New Hampshire, 03867.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$813,562.79.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:

6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:

 1. Number of individuals served



2. Number of repeat visits by individuals
3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through Decernber 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.



- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$707,273.03.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731



d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 5,729.92
LTC funds (ServiceLink General Funds)	\$ 21,280.00
Family Caregiver Support Title III-E	\$ 11,454.55
Senior Medicare Patrol	\$ 5,061.60
State Health Insurance Assistance Program	\$ 11,295.38
Assessment & Counseling (Medicaid)	\$ 51,468.31

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Strafford Network



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

7 June 2013
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Strafford Network

Date

Brian Collins
Name: Brian Collins
Title: President Board of Directors

Acknowledgement:

State of New Hampshire, County of Strafford on June 3, 2013
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

Martha J. Green
Name and Title of Notary or Justice of the Peace

MARTHA J. GREEN
Notary Public - New Hampshire
My Commission Expires March 4, 2014

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Strafford Network



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

OFFICE OF THE ATTORNEY GENERAL

6/10/13
Date

Jeanne P. Herrick
Name: Jeanne P. Herrick
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: STRAFFORD NETWORK
Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost:			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,900.00	\$ -	\$ 3,900.00	\$ 390.00	\$ -	\$ 390.00	\$ 390.00	\$ -	\$ 390.00
2. Employee Benefits	\$ 337.34	\$ -	\$ 337.34	\$ 33.73	\$ -	\$ 33.73	\$ 33.73	\$ -	\$ 33.73
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 50.00	\$ -	\$ 50.00	\$ 50.00	\$ -	\$ 50.00	\$ 50.00	\$ -	\$ 50.00
11. Staff Education and Training	\$ 300.00	\$ -	\$ 300.00	\$ 300.00	\$ -	\$ 300.00	\$ 300.00	\$ -	\$ 300.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 4,587.34	\$ -	\$ 4,587.34	\$ 773.73	\$ -	\$ 773.73	\$ 773.73	\$ -	\$ 773.73
Indirect As A Percent of Direct			0.0%						0.0%

Contractor Initials: 
Date: 6-3-13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: STRAFFORD NETWORK
Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,900.00	\$ -	\$ 3,900.00	\$ -	\$ -	\$ -	\$ 3,900.00	\$ -	\$ 3,900.00
2. Employee Benefits	\$ 337.35	\$ -	\$ 337.35	\$ -	\$ -	\$ -	\$ 337.35	\$ -	\$ 337.35
3. Payroll Service Fee (0.09%)	\$ 39.00	\$ -	\$ 39.00	\$ 39.00	\$ -	\$ 39.00	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 75.00	\$ -	\$ 75.00	\$ -	\$ -	\$ -	\$ 75.00	\$ -	\$ 75.00
7. Travel	\$ 125.00	\$ -	\$ 125.00	\$ -	\$ -	\$ -	\$ 125.00	\$ -	\$ 125.00
8. Current Expenses	\$ 744.45	\$ -	\$ 744.45	\$ -	\$ -	\$ -	\$ 744.45	\$ -	\$ 744.45
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 137.00	\$ -	\$ 137.00	\$ -	\$ -	\$ -	\$ 137.00	\$ -	\$ 137.00
Subscriptions	\$ 64.12	\$ -	\$ 64.12	\$ -	\$ -	\$ -	\$ 64.12	\$ -	\$ 64.12
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ 297.00	\$ -	\$ 297.00	\$ -	\$ -	\$ -	\$ 297.00	\$ -	\$ 297.00
Printing and Reproduction	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 5,567.80	\$ 201.12	\$ 5,768.92	\$ 39.00	\$ -	\$ 39.00	\$ 5,528.80	\$ 201.12	\$ 5,729.92

Indirect As A Percent of Direct 3.6%

Contractor Initials: BK
Date: 6-3-13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: STRAFFORD NETWORK

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor/Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 17,493.00	\$ -	\$ 17,493.00	\$ 3,813.81	\$ -	\$ 3,813.81	\$ 13,679.19	\$ -	\$ 13,679.19
2. Employee Benefits	\$ 1,513.13	\$ -	\$ 1,513.13	\$ 329.89	\$ -	\$ 329.89	\$ 1,183.24	\$ -	\$ 1,183.24
3. Payroll Service Fee (0.09%)	\$ 163.00	\$ -	\$ 163.00	\$ 163.00	\$ -	\$ 163.00	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 450.00	\$ -	\$ 450.00	\$ 400.00	\$ -	\$ 400.00	\$ 50.00	\$ -	\$ 50.00
7. Occupancy	\$ 1,863.96	\$ -	\$ 1,863.96	\$ 500.00	\$ -	\$ 500.00	\$ 1,000.00	\$ -	\$ 1,000.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00	\$ 863.96	\$ -	\$ 863.96
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ 150.00	\$ 150.00	\$ -	\$ -	\$ -	\$ -	\$ 150.00	\$ 150.00
Subscriptions	\$ 40.00	\$ -	\$ 40.00	\$ -	\$ -	\$ -	\$ -	\$ 40.00	\$ 40.00
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 100.00	\$ -	\$ 100.00	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 200.00	\$ -	\$ 200.00	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (Specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing and Reproduction	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
Bookkeeping	\$ -	\$ 300.00	\$ 300.00	\$ -	\$ -	\$ -	\$ -	\$ 300.00	\$ 300.00
TOTAL	\$ 23,583.09	\$ 490.00	\$ 24,073.09	\$ 6,606.70	\$ -	\$ 6,606.70	\$ 15,976.39	\$ 490.00	\$ 17,466.39
Indirect As A Percent of Direct	2.1%			2.9%			2.9%		

Contractor Initials:

Date: 6-3-13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid**

Contractor Name: STRAFFORD NETWORK

Budget Request for: Long Term Support Options Counseling
(Name of Program)

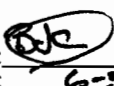
Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 26,244.50	\$ -	\$ 26,244.50	\$ -	\$ -	\$ -	\$ 26,244.50	\$ -	\$ 26,244.50
2. Employee Benefits	\$ 6,620.00	\$ -	\$ 6,620.00	\$ -	\$ -	\$ -	\$ 6,620.00	\$ -	\$ 6,620.00
3. Payroll Service Fee (0.09%)	\$ 236.00	\$ -	\$ 236.00	\$ 236.00	\$ -	\$ 236.00	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ 2,811.00	\$ -	\$ 2,811.00	\$ -	\$ -	\$ -	\$ 2,811.00	\$ -	\$ 2,811.00
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1,000.00	\$ -	\$ 1,000.00	\$ 500.00	\$ -	\$ 500.00	\$ 500.00	\$ -	\$ 500.00
6. Travel	\$ 1,796.87	\$ -	\$ 1,796.87	\$ -	\$ -	\$ -	\$ 1,796.87	\$ -	\$ 1,796.87
7. Occupancy	\$ 5,194.00	\$ -	\$ 5,194.00	\$ 500.00	\$ -	\$ 500.00	\$ 4,694.00	\$ -	\$ 4,694.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ 1,049.00	\$ 1,049.00	\$ -	\$ -	\$ -	\$ -	\$ 1,049.00	\$ 1,049.00
Postage	\$ -	\$ 500.00	\$ 500.00	\$ -	\$ -	\$ -	\$ -	\$ 500.00	\$ 500.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ 6,540.00	\$ 6,540.00	\$ -	\$ 3,750.00	\$ 3,750.00	\$ -	\$ -	\$ -
Insurance	\$ -	\$ 1,587.00	\$ 1,587.00	\$ -	\$ -	\$ -	\$ -	\$ 1,587.00	\$ 1,587.00
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
10. Marketing/Communications	\$ 285.50	\$ 100.00	\$ 385.50	\$ -	\$ 100.00	\$ 100.00	\$ 285.50	\$ -	\$ 285.50
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (Specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing and Reproduction	\$ 52.32	\$ 47.68	\$ 100.00	\$ -	\$ 47.68	\$ 47.68	\$ 52.32	\$ -	\$ 52.32
Bookkeeping	\$ 2,436.32	\$ -	\$ 2,436.32	\$ -	\$ -	\$ -	\$ 2,436.32	\$ -	\$ 2,436.32
TOTAL	\$ 46,775.31	\$ 9,823.68	\$ 56,601.99	\$ 1,236.00	\$ 3,897.68	\$ 5,133.68	\$ 45,542.31	\$ 5,926.00	\$ 51,468.31

Indirect As A Percent of Direct

21.0%

13.0%

Contractor Initials: 
Date: 6-3-13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title III Family Caregiver

Contractor Name: STRAFFORD NETWORK

Budget Request for: Family Caregiver Program
(Name of Program)

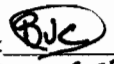
Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,800.00	\$ -	\$ 7,800.00	\$ -	\$ -	\$ -	\$ 7,800.00	\$ -	\$ 7,800.00
2. Employee Benefits	\$ 674.70	\$ -	\$ 674.70	\$ -	\$ -	\$ -	\$ 674.70	\$ -	\$ 674.70
3. Payroll Service Fee (0.09%)	\$ 70.00	\$ -	\$ 70.00	\$ 70.00	\$ -	\$ 70.00	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 510.00	\$ -	\$ 510.00	\$ 100.00	\$ -	\$ 100.00	\$ 410.00	\$ -	\$ 410.00
7. Occupancy	\$ 500.00	\$ -	\$ 500.00	\$ 100.00	\$ -	\$ 100.00	\$ 400.00	\$ -	\$ 400.00
8. Current Expenses	\$ 927.45	\$ -	\$ 927.45	\$ 39.00	\$ -	\$ 39.00	\$ 888.45	\$ -	\$ 888.45
Telephone	\$ -	\$ 185.22	\$ 185.22	\$ -	\$ -	\$ -	\$ -	\$ 185.22	\$ 185.22
Postage	\$ -	\$ 96.18	\$ 96.18	\$ -	\$ -	\$ -	\$ -	\$ 96.18	\$ 96.18
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
11. Staff Education and Training	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing and Reproduction	\$ 236.00	\$ -	\$ 236.00	\$ -	\$ -	\$ -	\$ 236.00	\$ -	\$ 236.00
Bookkeeping	\$ -	\$ 64.00	\$ 64.00	\$ -	\$ -	\$ -	\$ -	\$ 64.00	\$ 64.00
TOTAL	\$ 11,418.15	\$ 345.40	\$ 11,763.55	\$ 309.00	\$ -	\$ 309.00	\$ 11,095.15	\$ 345.40	\$ 11,454.55

Indirect As A Percent of Direct

3.0%

3.1%

Contractor Initials: 

Date: 6-3-13

Family Caregiver

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program

Contractor Name: STRAFFORD NETWORK
Budget Request for: State Health Insurance Assistance Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 10,440.00	\$ -	\$ 10,440.00	\$ 2,385.00	\$ -	\$ 2,385.00	\$ 8,055.00	\$ -	\$ 8,055.00
2. Employee Benefits	\$ 903.05	\$ -	\$ 903.05	\$ 206.30	\$ -	\$ 206.30	\$ 696.75	\$ -	\$ 696.75
3. Payroll Service Fee (0.09%)	\$ 83.00	\$ -	\$ 83.00	\$ 83.00	\$ -	\$ 83.00	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 344.00	\$ -	\$ 344.00	\$ -	\$ -	\$ -	\$ 344.00	\$ -	\$ 344.00
6. Travel	\$ 255.76	\$ -	\$ 255.76	\$ 69.76	\$ -	\$ 69.76	\$ 186.00	\$ -	\$ 186.00
7. Occupancy	\$ 468.00	\$ -	\$ 468.00	\$ 280.00	\$ -	\$ 280.00	\$ 188.00	\$ -	\$ 188.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ 186.00	\$ 186.00	\$ -	\$ -	\$ -	\$ -	\$ 186.00	\$ 186.00
Postage	\$ -	\$ 370.38	\$ 370.38	\$ -	\$ 185.00	\$ 185.00	\$ -	\$ 185.38	\$ 185.38
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 150.00	\$ -	\$ 150.00	\$ 75.00	\$ -	\$ 75.00	\$ 75.00	\$ -	\$ 75.00
11. Staff Education and Training	\$ 100.00	\$ -	\$ 100.00	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ 1,200.00	\$ 1,200.00	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 1,200.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing and Reproduction	\$ 179.25	\$ -	\$ 179.25	\$ -	\$ -	\$ -	\$ 179.25	\$ -	\$ 179.25
Bookkeeping	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 12,923.06	\$ 1,756.38	\$ 14,679.44	\$ 3,196.06	\$ 185.00	\$ 3,384.06	\$ 9,724.00	\$ 1,571.38	\$ 11,295.38

16.2%

13.6%

Indirect As A Percent of Direct

Contractor Initials: BUC

Date: 6-3-13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol**

Contractor Name: STRAFFORD NETWORK

Budget Request for: Senior Medicare Patrol
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 3,314.00	\$ -	\$ 3,314.00	\$ -	\$ -	\$ -	\$ 3,314.00	\$ -	\$ 3,314.00
2. Employee Benefits	\$ 286.60	\$ -	\$ 286.60	\$ -	\$ -	\$ -	\$ 286.60	\$ -	\$ 286.60
3. Payroll Service Fee (0.09%)	\$ 30.00	\$ -	\$ 30.00	\$ 30.00	\$ -	\$ 30.00	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Purchase/Depreciation	\$ 750.00	\$ -	\$ 750.00	\$ 750.00	\$ -	\$ 750.00	\$ -	\$ -	\$ -
8. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 400.00	\$ -	\$ 400.00	\$ 280.00	\$ -	\$ 280.00	\$ 120.00	\$ -	\$ 120.00
14. Travel	\$ 214.00	\$ -	\$ 214.00	\$ 100.00	\$ -	\$ 100.00	\$ 114.00	\$ -	\$ 114.00
15. Occupancy	\$ 564.00	\$ -	\$ 564.00	\$ -	\$ -	\$ -	\$ 564.00	\$ -	\$ 564.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ 25.00	\$ 25.00	\$ -	\$ 25.00	\$ 25.00
18. Postage	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ 20.00	\$ 20.00	\$ -	\$ 30.00	\$ 30.00
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ 250.00	\$ -	\$ 250.00	\$ 100.00	\$ -	\$ 100.00	\$ 150.00	\$ -	\$ 150.00
25. Staff Education and Training	\$ 400.00	\$ -	\$ 400.00	\$ 200.00	\$ -	\$ 200.00	\$ 200.00	\$ -	\$ 200.00
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
28. Printing and Reproduction	\$ 500.00	\$ -	\$ 500.00	\$ 242.00	\$ -	\$ 242.00	\$ 258.00	\$ -	\$ 258.00
29. TOTAL	\$ 6,708.60	\$ 100.00	\$ 6,808.60	\$ 1,702.00	\$ 45.00	\$ 1,747.00	\$ 5,006.60	\$ 55.00	\$ 5,061.60

Indirect As A Percent of Direct

1.5%

1.10%

Contractor Initials: BJCDate: 6-3-13

**STRAFFORD NETWORK
ABSTRACT OF CORPORATE MINUTES**

The following is a true abstract of a motion which was voted on and passed by a quorum of the Board of Directors of Strafford Network on June 3, 2013.

On a motion duly made and seconded, it was voted **"That Strafford Network execute an amended contract with the NH Department of Health and Human Services to serve as the fiscal agent for Strafford County ServiceLink."**

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that Brian Collins is the duly elected President of Strafford Network and as President has the authority to accept grants and awards and enter into contracts, and contract amendments from time to time with State and Federal Agencies and/or Departments to sign and otherwise fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any related documents requested by the State and Federal Agencies and/or Departments.

6/10/13
Date

Rene S. Philpott
Secretary

NO CORPORATE SEAL

STATE OF NEW HAMPSHIRE
COUNTY OF STRAFFORD

On June 10, 2013, before the undersigned officer, personally appeared the person in the corporation identified in the foregoing certificate, know to me (or satisfactorily proven) to be the Secretary of the corporation identified in the foregoing certificate, and acknowledged that she executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

Loraine Carver
Notary

My Commission Expires: _____

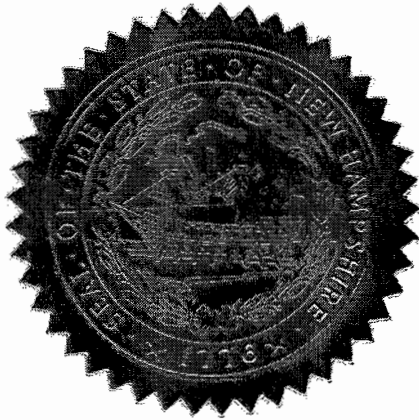
Lorraine Carver Notary Public State of New Hampshire My Commissions Expires May 9, 2017



State of New Hampshire
Department of State

CERTIFICATE

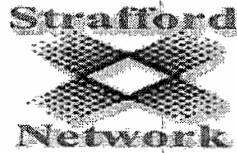
I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that STRAFFORD NETWORK is a New Hampshire nonprofit corporation formed September 21, 2000. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 7th day of June A.D. 2013

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner
Secretary of State



May 31, 2013

Catherine Cormier
State of New Hampshire, Department of Health and Human Services
Office of Business Operations, Contracts and Procurement
129 Pleasant Street
Concord, NH 03301-3857

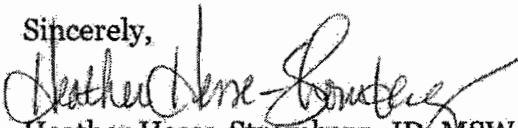
RE: Strafford Network's General Liability Insurance

Dear Ms. Cormier,

Strafford Network's current general liability insurance expires on 7/01/13. We are currently in the process of obtaining quotes for next fiscal year so we do not yet have a new Certificate of Insurance. We fully intend to fulfill our duties under the contract but will continue to carry the coverage we currently carry (\$1,000,000 per each occurrence and \$2,000,000 general aggregate) as adding an umbrella policy would increase our premium by 56%. We will provide the State with a Certificate of Insurance proving coverage as soon as it is received.

Thank you for your assistance with this important matter.

Sincerely,


Heather Hesse-Stromberg, JD, MSW
Interim Executive Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/24/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425		CONTACT NAME: Pat Mack PHONE (A/C No. Ext): (603) 293-2791 FAX (A/C No): (603) 293-7188 E-MAIL ADDRESS: pat@esinsurance.com	
INSURED Strafford Network 1 Old Dover Road, Suite #6 Rochester NH 03867		INSURER(S) AFFORDING COVERAGE INSURER A: Great American Ins Group INSURER B: Travelers Indemnity Co INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: 2012 Cert REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR		MAC6630092-10	7/1/2012	7/1/2013	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC						
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☒ ALL OWNED AUTOS ☒ HIRED AUTOS	☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS		MAC6630092-10	7/1/2012	7/1/2013	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB	☐ OCCUR ☐ CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
	DED RETENTION \$						\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☐	N/A	6KUB-4276P39-2-12	7/1/2012	7/1/2013	WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

State of NH Dept of Health and Human Serv
129 Pleasant Street
Concord, NH 03301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Pat Mack/PAT

Pat Mack

ACORD 25 (2010/05)

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INS025 (201005) 01

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008779) with Strafford Network, Rochester New Hampshire (Vendor # 159217) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$447,711.94 from \$259,561.09 to \$707,273.03 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$42,569.36	\$0.00	\$42,569.36
2012	102-500734	Contracts for Program Services	\$0.00	\$42,569.36	\$42,569.36
2013	102-500734	Contracts for Program Services	\$0.00	\$42,569.36	\$42,569.36
Subtotal			\$42,569.36	\$85,138.72	\$127,708.08

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$102,936.61	\$0.00	\$102,936.61

2012	550-500398	Assessment & Counseling	\$0.00	\$102,936.61	\$102,936.61
2013	550-500398	Assessment & Counseling	\$0.00	\$102,936.61	\$102,936.61
Subtotal			\$102,936.61	\$205,873.22	\$308,809.83

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$11,495.92	\$0.00	\$11,495.92
2012	545-500387	I & R Contracts	\$0.00	\$11,459.84	\$11,459.84
2013	545-500387	I & R Contracts	\$0.00	\$11,459.84	\$11,459.84
Subtotal			\$11,495.92	\$22,919.68	\$34,415.60

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$40,000.00	\$0.00	\$40,000.00
2012	072-500575	Grants - Federal	\$0.00	\$10,000.00	\$10,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$40,000.00	\$10,000.00	\$50,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$27,000.00	\$0.00	\$27,000.00
2012	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
2013	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
Subtotal			\$27,000.00	\$54,000.00	\$81,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$35,559.20	\$0.00	\$35,559.20
2012	102-500731	Contracts for Program Services	\$0.00	\$34,890.16	\$34,890.16
2013	102-500731	Contracts for Program Services	\$0.00	\$34,890.16	\$34,890.16
Subtotal			\$35,559.20	\$69,780.32	\$105,339.52
Grand Total			\$259,561.09	\$447,711.94	\$707,273.03

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Strafford Network for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Strafford County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Strafford Network has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an

independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to make informed decisions about services they needed and were able to trust that they received unbiased and accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Strafford Network through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

Area Served: Strafford County

Source of Funds: 55.3% Federal funds and 44.7% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,

Nancy L. Rollins

Nancy L. Rollins
Associate Commissioner

Approved by:

Nicholas A. Toumpas
Nicholas A. Toumpas
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
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Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS; ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Francestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

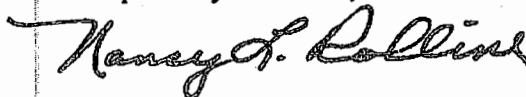
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

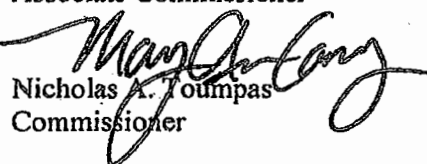
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
20	Allocation/Funding Sources											
21	Budget Awarded:											
22	Funding Source:	Contract Amts G. Total	Merrimack	Carroll	Rockingham	Hillsborough	Grafton	Bellnap	Mondnock	Sullivan	Stafford	Cos
23	LTC funds (ServiceLink General Funds) ¹	\$532,116.94	\$58,532.86	\$34,587.60	\$79,817.54	\$106,423.39	\$58,532.86	\$39,908.77	\$42,569.36	\$34,587.60	\$42,569.36	\$34,587.60
24	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,066.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$83,636.00	\$102,936.61	\$83,636.00
25	IA&R/A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44
26	Subtotal	\$1,967,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04
27												
28	Family Caregiver Support Title III-E (AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$27,000.00	\$27,000.00	\$27,000.00
29	Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$55,000.00	\$15,000.00	\$52,000.00	\$27,000.00	\$40,000.00	\$27,000.00
30	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$57,000.00	\$52,000.00	\$37,000.00	\$27,000.00	\$67,000.00	\$27,000.00
31												
32	SHIP (CMS Grant)	\$190,400.00	\$20,537.00	\$13,069.00	\$28,005.00	\$37,340.00	\$20,537.00	\$13,069.00	\$14,836.00	\$12,135.50	\$18,636.00	\$12,135.50
33	SMPP (AoA Grant) ²	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$13,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
34	MDPPA (CMS/AoA Grant ending May 30, 2011) ¹	\$58,000.00	\$6,960.00	\$2,320.00	\$8,700.00	\$12,180.00	\$6,960.00	\$2,320.00	\$2,320.00	\$2,320.00	\$6,960.00	\$6,960.00
35	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$41,196.40	\$24,106.80	\$27,219.20	\$22,550.60	\$35,559.20	\$27,190.60
36	Grand Total	\$2,912,463.58	\$311,073.99	\$218,670.84	\$441,764.54	\$583,932.72	\$294,073.99	\$223,296.07	\$221,221.09	\$177,114.66	\$259,561.09	\$181,754.64
37	% Federal Funds											56.98%

Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$362,942.00 in match.*

Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$132,808 in match.

Note 3: The SLRCs are not required to provide matching funds under the NIEFCS, however they have provided \$129,229 in match.

Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

*Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Tri-County Community Action Program, Inc.**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 31st day of May 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Tri-County Community Action Program, Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 30 Exchange Street, Berlin, New Hampshire, 03570.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services;

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

- 1) Amendment and modification of the P-37 "Agreement":
 - a. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.
 - b. Change Price Limitation in Block 1.8 of the P-37 to read \$636,050.99.
- 2) Amendment and modification of Exhibit A:
 - a. Delete "Contract Period: July 1, 2010 through June 30, 2013."
 - b. Add Paragraph 6.2 to Section 6:

6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:



1. Number of individuals served
2. Number of repeat visits by individuals
3. Type of information/referral given to individuals
4. Type of follow up performed
5. Frequency of follow ups
6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.

c. Add Paragraph 7.2 to Section 7:

7.2 For the period of July 1, 2103 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.

d. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals

Performance measures:

- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.



- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contract Period July 1, 2010 through June 30, 2013."
- b. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$549,395.60.
- c. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:
Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731



d. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$ 4,655.56
LTC funds (ServiceLink General Funds)	\$ 17,290.00
Family Caregiver Support Title III-E	\$ 11,454.55
Senior Medicare Patrol	\$ 4,112.55
State Health Insurance Assistance Program	\$ 7,324.73
Assessment & Counseling (Medicaid)	\$ 41,818.00

e. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

f. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Tri-County Community Action Program, Inc.



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

6/5/13
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Tri-County Community Action Program, Inc.

6.3.13
Date

Peter Higbee
Name: Peter Higbee
Title: Chief Operating Officer

Acknowledgement:

State of NH, County of Coo's on 6/3/13,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

Suzanne C. French
Name and Title of Notary Public or Justice of the Peace

SUZANNE C. FRENCH
NOTARY PUBLIC
State of New Hampshire
My Commission Expires
August 13, 2013

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Tri-County Community Action Program, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

5 Jun. 2013
Date

Jeane P. Herrick
Name: *Jeane P. Herrick*
Title: *Attorney*

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

State General Funds

Bidder/Program Name: Tri County Community Action Program, Inc.

Budget Request for: Information, Referral and Assistance

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 4,480.00	\$ -	\$ 4,480.00	\$ 720.00	\$ -	\$ 720.00	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 1,840.00	\$ -	\$ 1,840.00	\$ -	\$ -	\$ -	\$ 4,480.00	\$ -	\$ 4,480.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,840.00	\$ -	\$ 1,840.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Travel	\$ 460.00	\$ -	\$ 460.00	\$ -	\$ -	\$ -	\$ 460.00	\$ -	\$ 460.00
8. Occupancy	\$ 1,950.00	\$ -	\$ 1,950.00	\$ 1,950.00	\$ -	\$ 1,950.00	\$ -	\$ -	\$ -
9. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 275.00	\$ -	\$ 275.00	\$ -	\$ -	\$ -	\$ 275.00	\$ -	\$ 275.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ 705.00	\$ 705.00	\$ -	\$ -	\$ -	\$ -	\$ 705.00	\$ 705.00
TOTAL	\$ 9,005.00	\$ 705.00	\$ 10,430.00	\$ 2,670.00	\$ -	\$ 2,670.00	\$ 7,055.00	\$ 705.00	\$ 7,760.00

Indirect As A Percent of Direct 7.8%

9.99%

Contractor Initials: P.H.
Date: 6.3.13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)**

Contractor Name: Tri County Community Action program

Budget Request for: Information & Referral Assistance

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 2,657.00	\$ -	\$ 2,657.00	\$ -	\$ -	\$ -	\$ 2,657.00	\$ -	\$ 2,657.00
2. Employee Benefits	\$ 1,138.00	\$ -	\$ 1,138.00	\$ -	\$ -	\$ -	\$ 1,138.00	\$ -	\$ 1,138.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 222.00	\$ -	\$ 222.00	\$ -	\$ -	\$ -	\$ 222.00	\$ -	\$ 222.00
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ 438.56	\$ 438.56	\$ -	\$ -	\$ -	\$ -	\$ 438.56	\$ 438.56
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 4,217.00	\$ 438.56	\$ 4,655.56	\$ -	\$ -	\$ -	\$ 4,217.00	\$ 438.56	\$ 4,655.56
Indirect As A Percent of Direct			10.4%				10.40%		

Contractor Initials: P.H.
Date: 6.3.13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Bidder/Program Name: Tri-County Community Action Program

Budget Request for: Long Term Support Options Counseling

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,120.00	\$ -	\$ 6,120.00	\$ -	\$ -	\$ -	\$ 6,120.00	\$ -	\$ 6,120.00
2. Employee Benefits	\$ 2,510.00	\$ -	\$ 2,510.00	\$ -	\$ -	\$ -	\$ 2,510.00	\$ -	\$ 2,510.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 3,200.00	\$ -	\$ 3,200.00	\$ 3,200.00	\$ -	\$ 3,200.00	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ 900.00	\$ 900.00	\$ -	\$ -	\$ -	\$ -	\$ 900.00	\$ 900.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 11,530.00	\$ 900.00	\$ 12,430.00	\$ 3,200.00	\$ -	\$ 3,200.00	\$ 8,630.00	\$ 900.00	\$ 9,530.00
Indirect As A Percent of Direct			7.5%					10.43%	

Contractor Initials: P.H.
Date: 6.3.13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Medicaid

Contractor Name: Tri-County Community Action Program

Budget Request for: Long Term Supports Option Counseling

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 22,908.00	\$ -	\$ 22,908.00	\$ -	\$ -	\$ -	\$ 22,908.00	\$ -	\$ 22,908.00
2. Employee Benefits	\$ 9,395.00	\$ -	\$ 9,395.00	\$ -	\$ -	\$ -	\$ 9,395.00	\$ -	\$ 9,395.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ 150.00	\$ -	\$ 150.00	\$ -	\$ -	\$ -	\$ 150.00	\$ -	\$ 150.00
14. Travel	\$ 2,255.00	\$ -	\$ 2,255.00	\$ -	\$ -	\$ -	\$ 2,255.00	\$ -	\$ 2,255.00
15. Occupancy	\$ 2,160.00	\$ -	\$ 2,160.00	\$ -	\$ -	\$ -	\$ 2,160.00	\$ -	\$ 2,160.00
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ 450.00	\$ -	\$ 450.00	\$ -	\$ -	\$ -	\$ 450.00	\$ -	\$ 450.00
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory):	\$ -	\$ 3,800.00	\$ 3,800.00	\$ -	\$ -	\$ -	\$ -	\$ 3,800.00	\$ 3,800.00
28. TOTAL	\$ 38,018.00	\$ 3,800.00	\$ 41,818.00	\$ -	\$ -	\$ -	\$ 38,018.00	\$ 3,800.00	\$ 41,818.00
Indirect As A Percent of Direct									
								10.0%	

Contractor Initials: P.H.
Date: 6.3.13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Title III-E Family Caregiver

Contractor Name: Tri-County Community Action Program

Budget Request for: NH Family Caregiver

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,950.00	\$ -	\$ 6,950.00	\$ -	\$ -	\$ -	\$ 6,950.00	\$ -	\$ 6,950.00
2. Employee Benefits	\$ 2,849.55	\$ -	\$ 2,849.55	\$ -	\$ -	\$ -	\$ 2,849.55	\$ -	\$ 2,849.55
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rent	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 350.00	\$ -	\$ 350.00	\$ -	\$ -	\$ -	\$ 350.00	\$ -	\$ 350.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 65.00	\$ -	\$ 65.00	\$ -	\$ -	\$ -	\$ 65.00	\$ -	\$ 65.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ 1,040.00	\$ 1,040.00	\$ -	\$ -	\$ -	\$ -	\$ 1,040.00	\$ 1,040.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 10,414.55	\$ 1,040.00	\$ 11,454.55	\$ -	\$ -	\$ -	\$ 10,414.55	\$ 1,040.00	\$ 11,454.55

10.0%

Indirect As A Percent of Direct

Contractor Initials: P.H.
Date: 6.3.13

Family Caregiver

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program**

Contractor Name: Tri-County Community Action Program

Budget Request for: SHIP

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 4,450.00	\$ -	\$ 4,450.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 1,824.00	\$ -	\$ 1,824.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
14. Travel	\$ 275.00	\$ -	\$ 275.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
15. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
16. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
17. Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
18. Postage	\$ 110.00	\$ -	\$ 110.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19. Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
20. Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
21. Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
22. Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
23. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
24. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
25. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
26. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
27. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 6,659.00	\$ 665.73	\$ 7,324.73	\$ -	\$ -	\$ -	\$ 6,659.00	\$ 665.73	\$ 7,324.73

Indirect As A Percent of Direct

10.0%

SHIP

 Contractor Initials: P. H.
 Date: 6.3.13

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol**

Contractor Name: Tri-County Community Action Program

 Budget Request for: Senior Medicare Patrol
 (Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 2,559.55	\$ -	\$ 2,559.55	\$ -	\$ -	\$ -	\$ 2,559.55	\$ -	\$ 2,559.55
2. Employee Benefits	\$ 1,053.00	\$ -	\$ 1,053.00	\$ -	\$ -	\$ -	\$ 1,053.00	\$ -	\$ 1,053.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 925.00	\$ -	\$ 925.00	\$ 925.00	\$ -	\$ 925.00	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 250.00	\$ -	\$ 250.00	\$ 250.00	\$ -	\$ 250.00	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 200.00	\$ -	\$ 200.00	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ 500.00	\$ 500.00	\$ -	\$ -	\$ -	\$ -	\$ 500.00	\$ 500.00
TOTAL	\$ 4,987.55	\$ 500.00	\$ 5,487.55	\$ 1,375.00	\$ -	\$ 1,375.00	\$ 3,612.55	\$ 500.00	\$ 4,112.55
Indirect As A Percent of Direct			10.0%					13.84%	

 Contractor Initials: P. H.
 Date: 6.3.13

CERTIFICATE OF VOTE/AUTHORITY

I, Todd Fahey, do hereby certify that:

1. I am the Special Trustee appointed by the NH Probate Court to act on behalf of, and with all the powers of, the Tri-County Community Action Program, Inc., Board of Directors;

2. The following are resolutions of the corporation, duly enacted on June 3rd, 2013:

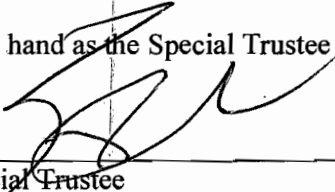
RESOLVED: That this corporation may enter into any and all contracts, amendments, renewals, revisions or modifications thereto, with the State of New Hampshire, acting through its Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services; this authorization to continue until revoked by this Special Trustee or by a reconstituted TCCAP Board of Directors.

RESOLVED: That the Tri-County Community Action Program Chief Operating Officer is hereby authorized on behalf of this corporation to enter into said contracts with the State, and to execute any and all documents, agreements, and other instruments, and any amendments, revisions, or modifications thereto, including related documents requested by the Bureau of Elderly and Adult Services, as he may deem necessary, desirable or appropriate.

3. Peter Higbee is the Tri-County Community Action Program Chief Operating Officer.

4. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of June 3rd, 2013.

IN WITNESS WHEREOF, I have hereunto set my hand as the Special Trustee of the corporation this 3rd day of June, 2013.

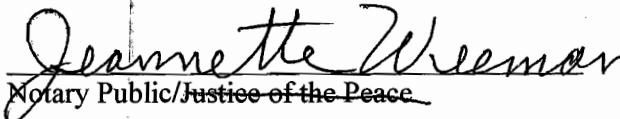


Todd Fahey, Special Trustee

STATE OF NH - COUNTY OF COÖS

On June 3, 2013 before the undersigned officer personally appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the Special Trustee of the corporation identified in the foregoing certificate, and acknowledged that he executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.



Notary Public/Justice of the Peace

My Commission Expires:

JEANNETTE M. WEEMAN, Notary Public
My Commission Expires March 10, 2015

(Imprint seal of corporation. If none, write: "No corporate seal.")

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that TRI-COUNTY COMMUNITY ACTION PROGRAM, INC. (TRI-COUNTY CAP) is a New Hampshire nonprofit corporation formed May 18, 1965. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 4th day of April A.D. 2013

A handwritten signature in cursive script, appearing to read "Wm Gardner", written in dark ink.

William M. Gardner
Secretary of State

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/23/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Davis Towle Morrill & Everett 115 Airport Road P O Box 1260 Concord, NH 03302-1260		CONTACT NAME: PHONE (A/C, No, Ext): 603 225-6611 FAX (A/C, No): 603-225-7935 E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A : Philadelphia Insurance Co.	
INSURED Tri County Community Action Program Inc 30 Exchange Street Berlin, NH 03570		INSURER B : Memic Indemnity Company	
		INSURER C :	
		INSURER D :	
		INSURER E :	
		INSURER F :	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC		PHPK897586	07/22/2012	07/22/2013	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ☒ NON-OWNED AUTOS		PHPK897586	07/22/2012	07/22/2013	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	UMBRELLA LIAB ☐ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$10000		PHUB390921	07/22/2012	07/22/2013	EACH OCCURRENCE \$2,000,000 AGGREGATE \$2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	3102801186	07/01/2012	07/01/2013	☒ WC STATU-TORY LIMITS ☐ OTH-ER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

****Workers Compensation****

Workers Compensation States: NH

RE: Service Link Resource Center of Coos County - contract extension

CERTIFICATE HOLDER

CANCELLATION

State of NH
 Dept of Health & Human Services
 129 Pleasant St
 Concord, NH 03301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

John Towle

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008784) with Tri-County Community Action Program, Inc., Berlin, New Hampshire (Vendor # 177195) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$367,640.96 from \$181,754.64 to \$549,395.60 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$34,587.60	\$0.00	\$34,587.60
2012	102-500734	Contracts for Program Services	\$0.00	\$34,587.60	\$34,587.60
2013	102-500734	Contracts for Program Services	\$0.00	\$34,587.60	\$34,587.60
Subtotal			\$34,587.60	\$69,175.20	\$103,762.80

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$83,636.00	\$0.00	\$83,636.00



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

June 23, 2011

Mr. Lawrence M. Kelly, Executive Director
Tri-County Community Action Program
30 Exchange St.
Berlin, NH 03570

Dear Mr. Kelly:

Enclosed is your contract amendment with the Bureau of Elderly and Adult Services for State Fiscal Year 2012 (July 1, 2011 through June 30, 2012). Governor and Executive Council approved the contract amendment on June 22, 2011. The Bureau of Elderly and Adult Services looks forward to working with you and appreciates the valuable management services you provide.

If you have any questions, please contact me at 603.271.7015 or catherine.a.cormier@dhhs.state.nh.us.

Sincerely,

Catherine A. Cormier
Contract Administrator

Enc.
file

2012	550-500398	Assessment & Counseling	\$0.00	\$83,636.00	\$83,636.00
2013	550-500398	Assessment & Counseling	\$0.00	\$83,636.00	\$83,636.00
Subtotal			\$83,636.00	\$167,272.00	\$250,908.00

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$9,340.44	\$0.00	\$9,340.44
2012	545-500387	I & R Contracts	\$0.00	\$9,311.12	\$9,311.12
2013	545-500387	I & R Contracts	\$0.00	\$9,311.12	\$9,311.12
Subtotal			\$9,340.44	\$18,622.24	\$27,962.68

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
2012	072-500575	Grants - Federal	\$0.00	\$10,000.00	\$10,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$0.00	\$10,000.00	\$10,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$27,000.00	\$0.00	\$27,000.00
2012	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
2013	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
Subtotal			\$27,000.00	\$54,000.00	\$81,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$27,190.60	\$0.00	\$27,190.60
2012	102-500731	Contracts for Program Services	\$0.00	\$24,285.76	\$24,285.76
2013	102-500731	Contracts for Program Services	\$0.00	\$24,285.76	\$24,285.76
Subtotal			\$27,190.60	\$48,571.52	\$75,762.12
Grand Total			\$181,754.64	\$367,640.96	\$549,395.60

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Tri-County Community Action Program, Inc. for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Coos County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Tri-County Community Action Program, Inc. has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to

make informed decisions about services they needed and were able to trust that they received unbiased and accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Tri-County Community Action through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

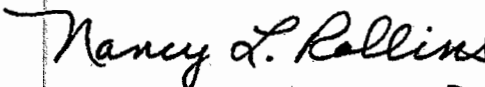
Area Served: Coos County

Source of Funds: 55.8% Federal funds and 44.2% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

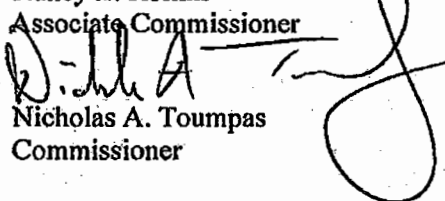
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:


Nicholas A. Toumpas
Commissioner

A	B	C	D	E	F	G	H	I	J	K	L
1	Program Name	New Hampshire ServiceLink Resource Center									
2	Contract Purpose	Provide services for M&A, LTC Counseling, NHCSP, SMP, SHIP, and SHIP-MPPA									
3											
4	RFP Bidders Summary	Area Served:	Carroll County	Rockingham County	Hillsborough County	Grafton County	Belknap County	Monadnock Region	Sullivan County	Strafford County	Coos County
5	RFP CRITERIA		Community Action Program Belknap-Merrimack Inc	Crooked Mountain Community Services Inc	Easter Seals New Hampshire	Grafton City Senior Citizens Council	Lakes Region Partnership for Public Health	Monadnock Collaborative	Southwestern Community Services, Inc.	Strafford Network	Tri-County Community Action Proge
6	Min. Requirements	10	10.00	9.00	9.00	9.00	10.00	10.00	9.00	9.00	9.00
7	Organization Background, Experience	15	14.50	14.10	13.60	15.00	15.00	14.70	13.50	14.30	14.30
8	Statement of Work	40	38.70	37.80	34.40	38.60	36.60	35.90	31.90	34.30	34.30
9	Budget and Narrative	35	32.30	29.40	26.60	33.40	30.40	31.80	26.00	26.70	26.70
10	Total	100	95.90	94.90	83.60	97.00	92.00	92.40	80.40	84.30	84.30
11											
12	RFP Reviewers										
13	Name and Job Title		Department of DHHS: Agency								
14	1. Wendi Aulman, SLRC Program Manager		BEAS								
15	2. Cathy Cragg, NHCSP Manager		BEAS								
16	3. Carol Darnon, Medicaid Coordinator and Program Specialist		BEAS								
17	4. Donald Hunter, Senior Management Analyst		Office of Medicaid Business and Policy								
18	5. Sally Varney, Program Planning and Review Specialist for Quality		Division of Community Based Care								
19											

Qualifications:	
Over ten years in administering the SLRC by providing oversight for program and policy of the SLRCs as well as coordinating efforts statewide and within BEAS	
Six years in administering the NHCSP by overseeing the AoA grant awards to provide services through existing processes while developing new cost effective service delivery approaches with discretionary grants from AoA	
Over ten years in administering the SHIP and SMP through the SLRCs	
Five years in Medicaid Policy, of which includes Medicaid Part D Coordinator for DHHS, and works with NH Legislature and national government policy organizations	
Ten years in Quality Management for federal and state funded DHHS programs	



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
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Nancy L. Rollins
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129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
 HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Frankestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

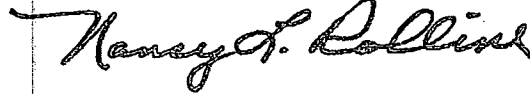
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Ioumpas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
20	Allocation/Funding Sources											
21	Budget Awarded:											
22	Funding Source:	Contract Amts G. Total	Merrimack	Carroll	Rockingham	Hillsborough	Grafton	Belknap	Monmouth	Sullivan	Stafford	Coos
23	LTC funds (ServiceLink General Funds) ¹	\$532,116.94	\$58,532.86	\$34,587.60	\$79,817.54	\$106,423.39	\$58,532.86	\$39,908.77	\$42,569.36	\$34,587.60	\$42,569.36	\$34,587.60
24	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$193,008.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$83,636.00	\$102,936.61	\$83,636.00
25	1283A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44
26	Subtotal	\$1,962,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04
27												
28	Family Caregiver Support Title III-E (AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$27,000.00	\$27,000.00	\$27,000.00
29	Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$55,000.00	\$15,000.00	\$55,000.00		\$40,000.00	\$27,000.00
30	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$57,000.00	\$72,000.00	\$57,000.00	\$27,000.00	\$67,000.00	\$27,000.00
31												
32	SHIP (CMS Grant)	\$190,400.00	\$20,577.00	\$13,069.00	\$24,005.00	\$37,340.00	\$20,577.00	\$13,069.00	\$14,936.00	\$12,135.50	\$18,636.00	\$12,135.50
33	SNPP (AoA Grant) ²	\$126,540.00	\$15,699.40	\$8,717.80	\$18,681.00	\$24,908.00	\$15,699.40	\$8,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
34	MDPPA (CMS/AoA Grant ending May 30, 2011) ⁴	\$58,000.00	\$6,960.00	\$2,320.00	\$8,700.00	\$12,180.00	\$6,960.00	\$2,320.00	\$2,320.00	\$2,320.00	\$6,960.00	\$6,960.00
35	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$43,196.40	\$24,106.80	\$27,219.20	\$22,550.60	\$35,559.20	\$22,550.60
36	Grand Total	\$2,912,463.58	\$311,073.99	\$214,670.84	\$541,764.54	\$583,932.72	\$324,673.99	\$223,296.07	\$221,221.09	\$177,114.64	\$259,561.09	\$181,754.64
37	% Federal Funds	56.98%										

38

39

40 Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$362,942.00 in match.*

41 Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

42 Note 3: The SLRCs are not required to provide matching funds under the NEHCSP, however they have provided \$129,229 in match.

43 Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

44 *Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).



**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Visiting Nurse Home Care & Hospice of Carroll County**

This 2nd Amendment to the ServiceLink Resource Center contract (hereinafter referred to as "Amendment #2") dated this 3rd day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Visiting Nurse Home Care & Hospice of Carroll County, formerly Carroll County Health and Home Care Services (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 1529 White Mountain Highway, North Conway, New Hampshire, 03860.

WHEREAS based on a Certificate of Merger of Domestic Voluntary Corporations filed with the New Hampshire Secretary of State on December 29, 2011, Carroll County Health and Home Care Services (merged corporation) into Visiting Nurse & Hospice Care Services of Northern Carroll County (surviving corporation).

WHEREAS the above referenced surviving corporation changed the name of the corporation from Visiting Nurse & Hospice Care Services of Northern Carroll County to Visiting Nurse Home Care & Hospice of Carroll County as referenced in an Affidavit of Amendment filed with the New Hampshire Secretary of State on December 29, 2011.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 23, 2010, and amended by an agreement (Amendment #1 to the Contract) approved on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties;

WHEREAS the Department is extending the contract for six (6) months to continue the delivery of services.

WHEREAS based on a Certificate of Merger of Domestic Voluntary Corporations filed with the New Hampshire Secretary of State on December 29, 2011, Carroll County Health and Home Care Services (merged corporation) into Visiting Nurse & Hospice Care Services of Northern Carroll County (surviving corporation).

WHEREAS the above referenced surviving corporation changed the name of the corporation from Visiting Nurse & Hospice Care Services of Northern Carroll County to

**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Visiting Nurse Home Care & Hospice of Carroll County**



Visiting Nurse Home Care & Hospice of Carroll County as referenced in an Affidavit of Amendment filed with the New Hampshire Secretary of State on December 29, 2011.

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree as follows:

1) Amendment and modification of the P-37:

a. Delete:

Block 1.3 Contractor Name:

Carroll County Health and Home Care Services

Replace with:

Block 1.3 Contractor Name:

Visiting Nurse Home Care & Hospice of Carroll County

b. Delete:

Block 1.4 Contractor Address:

448 White Mountain Highway
Chocorua, New Hampshire 03817

Replace with:

Block 1.4 Contractor Address:

1529 White Mountain Highway
North Conway, New Hampshire, 03860

c. Delete:

Block 1.5 Contractor Phone Number:

(603) 323-9394

Replace with:

Block 1.5 Contractor Phone Number:

603-356-7006

d. Change Completion Date in Block 1.7 of the P-37 to read December 31, 2013.

e. Change Price Limitation in Block 1.8 of the P-37 to read \$672,967.19.

2) Amendment and modification of Exhibit A:

a. Delete "Contract Period: July 1, 2010 through June 30, 2013."

b. Delete "Contractor Name: Carroll County Health and Home Care Services."

**c. Delete "Contractor Address: 448 White Mountain Highway, P O Box 420
Chocorua, NH 03817."**

d. Delete "Contractor Telephone: 603-356-5461 Ext 194."



- e. Add Paragraph 6.2 to Section 6:
- 6.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall collect data, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the following criteria:
1. Number of individuals served
 2. Number of repeat visits by individuals
 3. Type of information/referral given to individuals
 4. Type of follow up performed
 5. Frequency of follow ups
 6. Were individuals able to utilize provided information, including but not limited to, to apply for benefits, find and obtain referred services, assistance through parties.
- f. Add Paragraph 7.2 to Section 7:
- 7.2 For the period of July 1, 2013 through December 31, 2013, the Contractor shall report, for each service, Information, Referral, and Assistance; Long Term Support Options Counseling; Family Caregiver Support; State Health Insurance Assistance, and Senior Medicare Patrol, on the criteria mentioned in 6.2: Reporting shall occur for each month of delivered service.
- g. Section 8 is deleted and replaced with:

Section 8 Performance Outcome Measurements

Performance outcome measurements provide information describing how well the SLRC is doing. BEAS shall be working with the contractor to develop and improve on tools and state level frameworks that evaluate progress of the SLRC.

The programmatic and individual outcome measure below will be evaluated over the contract period. Performance and outcome measures will be enhanced based on what is identified.

Goal:

Empower older people, their families, and other consumers to make informed decisions about, and to be able to easily access, existing health and long-term care options.

Individual Outcome: Empowered Individuals
Performance measures:

**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Visiting Nurse Home Care & Hospice of Carroll County**



- 1) People receiving ServiceLink Services are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- 2) People receiving ServiceLink Services will trust the information provided by the SLRC.
- 3) People will agree that the SLRC followed-up within a reasonable amount of time.
- 4) People report they were able to make informed decisions about their LTSS options as a result of information, and if necessary, the one-on-one counseling they and/or their family caregivers received.
- 5) People receiving SLRC services will agree they have been able to effectively and seamlessly navigate through the LTSS system and successfully access the options they have identified, from among the options that are available, as best meeting their particular needs, preferences, and circumstances within a timeframe that meets both their immediate and ongoing needs.
- 6) Consumers reported that they received access assistance when requested.
- 7) People receiving SLRC services report have the opportunity to self-direct their services and support.
- 8) People receiving SLRC services report they have been able to make optimal use of their own private resources and their informal support system.

Metrics (data sources):

- 1) Quantifiable individual-level feedback documenting personal experiences on each of the above performance measures including measures of individual satisfaction with the process and the degree to which an individual's needs and preferences were met, and whether an individual was confused/frustrated trying to understand and navigate the LTSS; and
- 2) Number and percent of all individuals with service plans that were offered the option to self-direct and the number and percent that choose to do so.

3) Amendment and modification of Exhibit B:

- a. Delete "Contractor: Carroll County Health & Home Care Services."
- b. Delete "Contract Period July 1, 2010 through June 30, 2013."
- c. Delete:
 1. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of \$586,311.80.
- d. For the period of July 1, 2013 through December 31, 2013, delete from the paragraph # 2 table:

**State of New Hampshire
Department of Health and Human Services
Amendment #2 for Visiting Nurse Home Care & Hospice of Carroll County**



Senior Medicare Patrol Project (SMP) AoA 05-95-48-481010-89250000-102-500731

And replace with: Senior Medicare Patrol Project (SMP) ACL 05-95-48-481010-33170000-102-500731

e. Add Paragraph # 11:

For the period of July 1, 2013 through December 31, 2013, subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor from the following:

Information and Referral (Social Services Block Grant)	\$	4,655.56
LTC funds (ServiceLink General Funds)	\$	17,290.00
Family Caregiver Support Title III-E	\$	11,454.55
Senior Medicare Patrol	\$	4,112.55
State Health Insurance Assistance Program	\$	7,324.73
Assessment & Counseling (Medicaid)	\$	41,818.00

f. Add Paragraph #12:

12. For the period of July 1, 2013 through December 31, 2013, the Contractor shall complete budget forms for each service by funding source using the forms provided by DHHS. Budgets named B-4 through B-10 are included in this contract. DHHS shall approve the budgets. The Bureau of Elderly and Adult Services shall pay for actual costs on the budget line items and amounts identified in the budget section "Requested Budget to be Funded by DHHS Contract Share." For the funding sources that require a match, in paragraph 16, the Contractor is required to fund the difference between the total costs of the programs less the state's share. If the Contractor elects to provide additional funding toward the cost of other programs and funding sources, then the Contractor is obligated to fund the difference between the total costs of the programs less the state's share. Contractors shall report on a monthly basis the total cost of the program for the month, the amount requested to be paid by the state and the source of funds and amount for the contractor's share.

g. Add Paragraph #13:

13. The Contractor shall complete Time Sheets for staff as instructed and on forms provided by DHHS.

4) Contractor agrees to Exhibits D through J extended to December 31, 2013.

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Visiting Nurse Home Care & Hospice of Carroll County



This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

7 June 2013
Date

Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

Visiting Nurse Home Care & Hospice of Carroll
County

06-03-2013
Date

Sandra Bate
Name:
Title: Exec. Director

Acknowledgement:
State of New Hampshire County of Carroll on 6/3/2013,
before the undersigned officer, personally appeared the person identified above, or
satisfactorily proven to be the person whose name is signed above, and acknowledged
that s/he executed this document in the capacity indicated above.
Signature of Notary Public or Justice of the Peace

Gail F. Boucher
Name and Title of Notary or Justice of the Peace

GAIL F BOUCHER
Notary Public - New Hampshire
My Commission Expires 2/22/2017

State of New Hampshire
Department of Health and Human Services
Amendment #2 for Visiting Nurse Home Care & Hospice of Carroll County



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

OFFICE OF THE ATTORNEY GENERAL

10 Jun. 2013
Date

Jeannette P. Henrich
Name: Jeannette P. Henrich
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on:
_____ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

B-4 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: Information, Referral and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Costs			Contractor Share / Match			Requested Budget to be Funded by DHHS Contract Shares		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,763.68	\$ -	\$ 5,763.68	\$ -	\$ -	\$ -	\$ 5,763.68	\$ -	\$ 5,763.68
2. Employee Benefits	\$ 2,233.43	\$ -	\$ 2,233.43	\$ -	\$ -	\$ -	\$ 2,233.43	\$ -	\$ 2,233.43
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
Travel	\$ 249.56	\$ -	\$ 249.56	\$ -	\$ -	\$ -	\$ 249.56	\$ -	\$ 249.56
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 99.17	\$ -	\$ 99.17	\$ -	\$ -	\$ -	\$ 99.17	\$ -	\$ 99.17
Postage	\$ 99.16	\$ -	\$ 99.16	\$ -	\$ -	\$ -	\$ 99.16	\$ -	\$ 99.16
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 75.00	\$ -	\$ 75.00	\$ -	\$ -	\$ -	\$ 75.00	\$ -	\$ 75.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 25.00	\$ -	\$ 25.00	\$ -	\$ -	\$ -	\$ 25.00	\$ -	\$ 25.00
In-Kind Revenue Match	\$ -	\$ 2,881.67	\$ 2,881.67	\$ -	\$ 2,881.67	\$ 2,881.67	\$ -	\$ 2,881.67	\$ 2,881.67
TOTAL	\$ 8,645.00	\$ 2,881.67	\$ 11,526.67	\$ -	\$ 2,881.67	\$ 2,881.67	\$ 8,645.00	\$ -	\$ 8,645.00
Indirect As A Percent of Direct									0.0%

Contractor Initials: 
Date: 8-3-13

B-5 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title XX Social Services Block Grant (SSBG)

Contractor Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: Information, Referral, and Assistance
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 2,984.54	\$ -	\$ 2,984.54	\$ -	\$ -	\$ -	\$ 2,984.54	\$ -	\$ 2,984.54
2. Employee Benefits	\$ 1,156.51	\$ -	\$ 1,156.51	\$ -	\$ -	\$ -	\$ 1,156.51	\$ -	\$ 1,156.51
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 264.73	\$ -	\$ 264.73	\$ -	\$ -	\$ -	\$ 264.73	\$ -	\$ 264.73
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
Postage	\$ 149.78	\$ -	\$ 149.78	\$ -	\$ -	\$ -	\$ 149.78	\$ -	\$ 149.78
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 4,655.56	\$ -	\$ 4,655.56	\$ -	\$ -	\$ -	\$ 4,655.56	\$ -	\$ 4,655.56
Indirect As A Percent of Direct								0.0%	

Contractor Initials: 
Date: 6-3-13

B-6 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
State General Funds

Bidder/Program Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,763.68	\$ -	\$ 5,763.68	\$ -	\$ -	\$ -	\$ 5,763.68	\$ -	\$ 5,763.68
2. Employee Benefits	\$ 2,233.43	\$ -	\$ 2,233.43	\$ -	\$ -	\$ -	\$ 2,233.43	\$ -	\$ 2,233.43
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
6. Travel	\$ 249.56	\$ -	\$ 249.56	\$ -	\$ -	\$ -	\$ 249.56	\$ -	\$ 249.56
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 99.16	\$ -	\$ 99.16	\$ -	\$ -	\$ -	\$ 99.16	\$ -	\$ 99.16
Telephone	\$ 99.17	\$ -	\$ 99.17	\$ -	\$ -	\$ -	\$ 99.17	\$ -	\$ 99.17
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Staff Education and Training	\$ 75.00	\$ -	\$ 75.00	\$ -	\$ -	\$ -	\$ 75.00	\$ -	\$ 75.00
11. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 25.00	\$ -	\$ 25.00	\$ -	\$ -	\$ -	\$ 25.00	\$ -	\$ 25.00
In-Kind Revenue Match	\$ -	\$ 2,881.67	\$ 2,881.67	\$ -	\$ 2,881.67	\$ 2,881.67	\$ -	\$ -	\$ -
TOTAL	\$ 8,645.00	\$ 2,881.67	\$ 11,526.67	\$ -	\$ 2,881.67	\$ 2,881.67	\$ 8,645.00	\$ -	\$ 8,645.00
Indirect As A Percent of Direct								0.0%	

Contractor Initials: AR
Date: 6-3-13

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Medicaid

Contractor Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: Long Term Support Options Counseling
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Costs			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 22,854.78	\$ -	\$ 22,854.78	\$ -	\$ -	\$ -	\$ 22,854.78	\$ -	\$ 22,854.78
2. Employee Benefits	\$ 8,856.23	\$ -	\$ 8,856.23	\$ -	\$ -	\$ -	\$ 8,856.23	\$ -	\$ 8,856.23
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 230.14	\$ -	\$ 230.14	\$ -	\$ -	\$ -	\$ 230.14	\$ -	\$ 230.14
7. Occupancy	\$ 7,315.80	\$ -	\$ 7,315.80	\$ -	\$ -	\$ -	\$ 7,315.80	\$ -	\$ 7,315.80
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 276.13	\$ -	\$ 276.13	\$ -	\$ -	\$ -	\$ 276.13	\$ -	\$ 276.13
Postage	\$ 300.00	\$ -	\$ 300.00	\$ -	\$ -	\$ -	\$ 300.00	\$ -	\$ 300.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 184.92	\$ -	\$ 184.92	\$ -	\$ -	\$ -	\$ 184.92	\$ -	\$ 184.92
In-Direct Fiscal Fee	\$ -	\$ 1,800.00	\$ 1,800.00	\$ -	\$ -	\$ -	\$ -	\$ 1,800.00	\$ 1,800.00
In-Kind Revenue Match	\$ -	\$ 5,764.50	\$ 5,764.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 40,018.00	\$ 7,564.50	\$ 47,582.50	\$ -	\$ 5,764.50	\$ 5,764.50	\$ 40,018.00	\$ 1,800.00	\$ 41,818.00
Indirect As A Percent of Direct								4.5%	

Contractor Initials:

Date: 6-3-13

B-8 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Title IIIIE Family Caregiver

Contractor Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: Family Caregiver Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Costs			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,160.92	\$ -	\$ 7,160.92	\$ -	\$ -	\$ -	\$ 7,160.92	\$ -	\$ 7,160.92
2. Employee Benefits	\$ 2,774.86	\$ -	\$ 2,774.86	\$ -	\$ -	\$ -	\$ 2,774.86	\$ -	\$ 2,774.86
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
Travel	\$ 449.35	\$ -	\$ 449.35	\$ -	\$ -	\$ -	\$ 449.35	\$ -	\$ 449.35
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
Postage	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 95.92	\$ -	\$ 95.92	\$ -	\$ -	\$ -	\$ 95.92	\$ -	\$ 95.92
In-Direct Fiscal Fee	\$ -	\$ 623.50	\$ 623.50	\$ -	\$ -	\$ -	\$ -	\$ 623.50	\$ 623.50
TOTAL	\$ 10,831.05	\$ 623.50	\$ 11,454.55	\$ -	\$ -	\$ -	\$ 10,831.05	\$ 623.50	\$ 11,454.55
Indirect As A Percent of Direct								5.8%	

Family Caregiver

Contractor Initials:

Date: 6-3-13

B-9 BUDGET

New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: State Health Insurance Assistance Program

Contractor Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: State Health Insurance Assistance Program
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Costs			Contractor Share/Match			Requested Budget to be Funded by DHHS Contract Share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,019.56	\$ -	\$ 5,019.56	\$ -	\$ -	\$ -	\$ 5,019.56	\$ -	\$ 5,019.56
2. Employee Benefits	\$ 1,945.08	\$ -	\$ 1,945.08	\$ -	\$ -	\$ -	\$ 1,945.08	\$ -	\$ 1,945.08
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 360.09	\$ -	\$ 360.09	\$ -	\$ -	\$ -	\$ 360.09	\$ -	\$ 360.09
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 7,324.73	\$ -	\$ 7,324.73	\$ -	\$ -	\$ -	\$ 7,324.73	\$ -	\$ 7,324.73
Indirect As A Percent of Direct								0.0%	

SHIP

Contractor Initials: 6-3-13
Date: 

**New Hampshire Department of Health and Human Services
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD
Grant: Senior Medicare Patrol**

Contractor Name: Visiting Nurse Home Care & Hospice of Carroll County

Budget Request for: Senior Medicare Patrol
(Name of Program)

Budget Period: 7/1/13-12/31/13

Line Item	Total Program Cost			Contractor Share/Match			Requested Budget to be Funded by DHHS/Contract Share		
	Direct Incremental	Indirect	Total	Direct Incremental	Indirect	Total	Direct Incremental	Indirect	Total
1. Total Salary/Wages	\$ 2,151.24	\$ -	\$ 2,151.24	\$ -	\$ -	\$ -	\$ 2,151.24	\$ -	\$ 2,151.24
2. Employee Benefits	\$ 833.61	\$ -	\$ 833.61	\$ -	\$ -	\$ -	\$ 833.61	\$ -	\$ 833.61
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Office	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
7. Travel	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
8. Occupancy	\$ 527.70	\$ -	\$ 527.70	\$ -	\$ -	\$ -	\$ 527.70	\$ -	\$ 527.70
Telephone	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
Postage	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing	\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -	\$ -	\$ 50.00	\$ -	\$ 50.00
In-Kind Revenue Match	\$ -	\$ 1,435.50	\$ 1,435.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 4,112.55	\$ 1,435.50	\$ 5,548.05	\$ -	\$ 1,435.50	\$ 1,435.50	\$ 4,112.55	\$ -	\$ 4,112.55

Indirect As A Percent of Direct 0.0%

Contractor Initials: 6313-
Date: 4

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting
of Board of Directors of
(Name of Governing Board)

Visiting Nurse Home
Care 1 Hospice of Carroll
(Name of Corporation) COVH
(VNHCH)

on JAN. 10, 2013 which was duly called at which a quorum was
present:

"On motion duly made and seconded, it was voted to authorize
the Executive Director, to accept grants and awards and enter into contracts, and contract
amendments from time to time with the New Hampshire Department of Health and Human Services,
Division of Community Based Care Services, Bureau of Elderly and Adult Services, to sign and otherwise
fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any
related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue
until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)
Sandra Runk is the duly elected (Title) Executive Director of VNHCH
this corporation and is still qualified and serving in such capacity.

6/3/2013
(Date)

[Signature]
Secretary

(Imprint seal of corporation. If none, write: "No corporate seal.")

STATE OF NEW HAMPSHIRE

COUNTY OF Carroll

On June 3rd, 2013, before the undersigned officer personally
appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the
Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that § he
executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

[Signature]
Notary Public/Justice of the Peace

My commission expires:

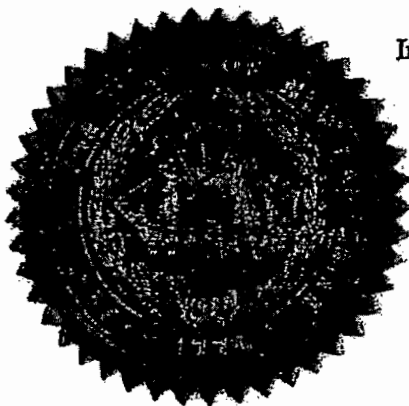
GAIL F BOUCHER
Notary Public - New Hampshire
My Commission Expires 2/22/2017

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that Visiting Nurse Home Care & Hospice of Carroll County is a New Hampshire nonprofit corporation formed November 16, 1992. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 11th day of April A.D. 2013

A handwritten signature in dark ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/07/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Svcs LLC, CL PO Box 406 Portland, ME 04112-0406		CONTACT NAME: PHONE (A/C, No, Ext): 603 625-1100 FAX (A/C, No): E-MAIL ADDRESS:	
INSURED Visiting Nurse Homecare and Hospice of Carroll County PO Box 5001 North Conway, NH 03860-5001		INSURER(S) AFFORDING COVERAGE	
		INSURER A: ProMutual Group	
		INSURER B: ProSelect Insurance Company	
		INSURER C: National Union Fire Ins Pittsbu	
		INSURER D:	
		INSURER E:	
INSURER F:		NAIC #	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

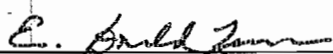
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY ☐ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC			220831GL	03/01/2013	03/01/2014	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$50,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000 \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	☒ UMBRELLA LIAB ☐ EXCESS LIAB ☐ DED ☒ RETENTION \$10000 ☐ OCCUR ☐ CLAIMS-MADE			220831CA	03/01/2013	03/01/2014	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATU-TORY LIMITS E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	D & O Claims Made			014160572	10/31/2012	10/31/2013	3,000,000 each claim 25,000 deductible

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

This Certificate of Insurance is issued as a matter of information only and confers no rights upon the holder and does not amend, extend or alter the coverage afforded by policies designated on the Certificate.

CERTIFICATE HOLDER

CANCELLATION

DHHS 129 Pleasant St. Concord, NH 03301	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 

Client#: 1038472

VISITNUR26

ACORDTM**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

6/07/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Svcs LLC, CL PO Box 406 Portland, ME 04112-0406		CONTACT NAME: PHONE (A/C, No, Ext): 603 625-1100 FAX (A/C, No): E-MAIL ADDRESS:	
INSURED Visiting Nurse Home Care & Hospice of Carroll County PO Box 432 North Conway, NH 03860		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Technology Insurance Company, I	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		NAIC # 42376	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY ☐ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ HIRED AUTOS ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y ☒ N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			TWC3324014	07/01/2012	07/01/2013	X WC STATUTORY LIMITS ☐ OTH-ER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Evidence of Workers' Compensation Coverage.

CERTIFICATE HOLDER**CANCELLATION**

DHHS
129 Pleasant St.
Concord, NH 03301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

E. Gould

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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2011

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to amend an existing agreement (Purchase Order #1008769) with Carroll County Health & Home Care Services, Chocorua, New Hampshire (Vendor # 167159) to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, Senior Medicare Patrol Project (SMP) services, by increasing the price limitation by \$367,640.96 from \$218,670.84 to \$586,311.80 and extending the completion date from June 30, 2011 to June 30, 2013, effective July 1, 2011. Governor and Executive Council approved the original Agreement on June 23, 2010 (Item #135). Funds are anticipated to be available in State Fiscal Years 2012 and 2013, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500734	Contracts for Program Services	\$34,587.60	\$0.00	\$34,587.60
2012	102-500734	Contracts for Program Services	\$0.00	\$34,587.60	\$34,587.60
2013	102-500734	Contracts for Program Services	\$0.00	\$34,587.60	\$34,587.60
Subtotal			\$34,587.60	\$69,175.20	\$103,762.80

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	550-500398	Assessment & Counseling	\$83,636.00	\$0.00	\$83,636.00

2012	550-500398	Assessment & Counseling	\$0.00	\$83,636.00	\$83,636.00
2013	550-500398	Assessment & Counseling	\$0.00	\$83,636.00	\$83,636.00
Subtotal			\$83,636.00	\$167,272.00	\$250,908.00

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	545-500387	I & R Contracts	\$9,340.44	\$0.00	\$9,340.44
2012	545-500387	I & R Contracts	\$0.00	\$9,311.12	\$9,311.12
2013	545-500387	I & R Contracts	\$0.00	\$9,311.12	\$9,311.12
Subtotal			\$9,340.44	\$18,622.24	\$27,962.68

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	072-500575	Grants - Federal	\$40,000.00	\$0.00	\$40,000.00
2012	072-500575	Grants - Federal	\$0.00	\$10,000.00	\$10,000.00
2013	072-500575	Grants - Federal	\$0.00	\$0.00	\$0.00
Subtotal			\$40,000.00	\$10,000.00	\$50,000.00

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	570-500928	Family Caregiver	\$27,000.00	\$0.00	\$27,000.00
2012	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
2013	570-500928	Family Caregiver	\$0.00	\$27,000.00	\$27,000.00
Subtotal			\$27,000.00	\$54,000.00	\$81,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES,
HHS: ELDERLY AND ADULT SERVICES, MEDICAL SERVICES GRANTS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2011	102-500731	Contracts for Program Services	\$24,106.80	\$0.00	\$24,106.80
2012	102-500731	Contracts for Program Services	\$0.00	\$24,285.76	\$24,285.76
2013	102-500731	Contracts for Program Services	\$0.00	\$24,285.76	\$24,285.76
Subtotal			\$24,106.80	\$48,571.52	\$72,678.32
Grand Total			\$218,670.84	\$367,640.96	\$586,311.80

EXPLANATION

The purpose of this Requested Action is to enter into an amendment with Carroll County Health & Home Care Services for State Fiscal Year 2012 and State Fiscal Years 2013 to operate the Carroll County ServiceLink Resource Center. This ServiceLink Resource Center will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program services, and Senior Medicare Patrol Project services. This ServiceLink Resource Center will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs.

ServiceLink Overview

The goals of the ServiceLink Resource Center are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goals of the ServiceLink Resource Center are virtually identical to the Administration on Aging's Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions.

As stated in the original Agreement and in the original Governor and Council letter approved on June 23, 2010 (Item #135) include a provision to extend the Agreement for a two-year period. This amendment exercises this option to extend the Agreement for two years. Carroll County Health & Home Care Services has performed successfully. Bureau of Elderly and Adult intends to competitively bid for these services for the next biennium, State Fiscal Years 2014 and 2015.

This contractor continues to demonstrate highly successful SLRC programs seen through their performance measures, adherence to reporting requirements, and outcome measures. Results surveyed by an independent party, revealed unbiased reports that verified that this contractor has exceeded the expected Outcome Measures set forth in the original contract. Individuals have received information that has enhanced their ability to

make informed decisions about services they needed and were able to trust that they received unbiased and accurate information in a timely manner that resulted in meeting their needs. Individuals are familiar with ServiceLink Resource Centers and receive customized options, information and assistance based on choice, needs, values, and preferences as well as follow up from ServiceLink Resource Center staff.

The Bureau continues with process improvement by expanding its current performance outcome measures in two areas. BEAS will monitor Options Counseling to demonstrate whether individuals were counseled on their options and understood them, and access services such as interpreters, large print, hearing access were received by those requesting it. BEAS implements reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes as needed within the contract period.

Individuals rely on ServiceLink Resource Centers as a resource for a wide array of services including long-term care programs. They are able to access an array of information in a streamlined, one stop approach. Should this contract not be approved, information and direct services for other long-term care programs such as family caregiver supports and Medicare counseling will no longer be available from a single consistent, unbiased and accurate source. Information will become fragmented, putting at risk individuals seeking cost saving programs and services, based on needs preferences, values, and choice.

Bid Process

This Agreement was awarded to Carroll County Health & Home Care Services through a competitive bid process. The Request for Proposals was posted on the Department of Health and Human Services website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals on February 8, 9, and 10, 2010. The proposal covered State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: ServiceLink Resource Center Program Manager, New Hampshire Family Caregiver Support Program Manager, Medicare Coordinator and Program Specialist, Division of Community Based Care Services Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with the Department of Health and Human Services. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary.

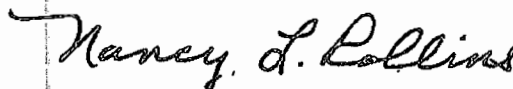
Area Served: Carroll County

Source of Funds: 55.8% Federal funds and 44.2% General funds.

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
May 24, 2010
Page 5

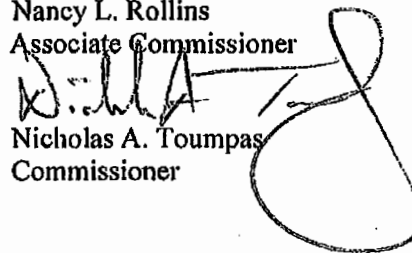
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:


Nicholas A. Toumpas
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857
603-271-4680 1-800-351-1888
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 24, 2010

His Excellency, Governor John H. Lynch
and the Honorable Executive Council
State House
Concord, N.H. 03301

REQUESTED ACTION

1) Authorize the Department of Health and Human Services (DHHS), Division of Community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS) to enter into an agreement with Lakes Region Partnership for Public Health, Inc., Laconia, New Hampshire, (Vendor #165635) acting as fiscal agent for Belknap County ServiceLink, to provide information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services, to elderly and chronically ill adults, in an amount not to exceed \$223,296.07, effective July 1, 2010 or date of Governor and Council approval, whichever is later, through June 30, 2011. Funds are anticipated to be available in the following accounts in State Fiscal Year (SFY) 2011:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500734	Social Service Contracts	\$ 39,908.77
		Subtotal	\$ 39,908.77

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	550-500398	Assessment and Counseling	\$ 96,503.07
		Subtotal	\$ 96,503.07

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	545-500387	Information & Referral Contracts	\$ 10,777.43
		Subtotal	\$ 10,777.43

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	570-500928	Family Care Giver	\$ 37,000.00
SFY 2011	072-500575	Grants to Non-Profits-Federal	\$ 15,000.00
		Subtotal	\$ 52,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Fiscal Year	Class/Object Code	Class Title	State Fiscal Year 2011
SFY 2011	102-500731	Contracts for Program Services	\$ 24,106.80
		Subtotal	\$ 24,106.80
		Contract Total	\$223,296.07

2) Upon Approval of Requested Action #1, authorize the Department of Health and Human Services (DHHS), Division of community Based Care Services (DCBCS), Bureau of Elderly and Adult Services (BEAS), to enter into Agreements with the following nine (9) vendors for the amount of \$2,689,167.51 as specified on the following pages. Funds are available in the following accounts in SFY 11:

05-95-48-481010-9565 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, SERVICELINK

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	FY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500734	Social Service Contracts	\$58,532.86
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500734	Social Service Contracts	\$34,587.60
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500734	Social Service Contracts	\$79,817.54
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500734	Social Service Contracts	\$106,423.39
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500734	Social Service Contracts	\$58,532.86
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500734	Social Service Contracts	\$42,569.36
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500734	Social Service Contracts	\$34,587.60
Strafford Network	Strafford County	Vendor# 159217	102-500734	Social Service Contracts	\$42,569.36

Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500734	Social Service Contracts	\$34,587.60
		Subtotal			\$492,208.17

05-95-48-481510-6180 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, MEDICAL SERVICES, LTC ASSESSMENT & COUNSELING

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	550-500398	Assessment and Counseling	\$141,537.84
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	550-500398	Assessment and Counseling	\$83,636.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	550-500398	Assessment and Counseling	\$193,006.15
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	550-500398	Assessment and Counseling	\$257,341.53
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	550-500398	Assessment and Counseling	\$141,537.84
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	550-500398	Assessment and Counseling	\$102,936.61
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	550-500398	Assessment and Counseling	\$83,636.00
Strafford Network	Strafford County	Vendor# 159217	550-500398	Assessment and Counseling	\$102,936.61
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	550-500398	Assessment and Counseling	\$83,636.00
		Subtotal			\$1,190,204.58

05-95-48-481010-9255 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
HHS: ELDERLY – ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	545-500387	Information & Referral Contracts	\$15,806.89
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	545-500387	Information & Referral Contracts	\$9,340.44
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	545-500387	Information & Referral Contracts	\$21,554.85

Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	545-500387	Information & Referral Contracts	\$28,739.80
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	545-500387	Information & Referral Contracts	\$15,806.89
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	545-500387	Information & Referral Contracts	\$11,495.92
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	545-500387	Information & Referral Contracts	\$9,340.44
Strafford Network	Strafford County	Vendor# 159217	545-500387	Information & Referral Contracts	\$11,495.92
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	545-500387	Information & Referral Contracts	\$9,340.44
		Subtotal			\$132,921.59

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS,
 HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	570-500928	Family Care Giver	\$37,000.00
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	570-500928	Family Care Giver	\$27,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	570-500928	Family Care Giver	\$37,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	570-500928	Family Care Giver	\$37,000.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	570-500928	Family Care Giver	\$37,000.00
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	570-500928	Family Care Giver	\$37,000.00
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	570-500928	Family Care Giver	\$27,000.00
Strafford Network	Strafford County	Vendor# 159217	570-500928	Family Care Giver	\$27,000.00
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	570-500928	Family Care Giver	\$27,000.00
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	072-500575	Grants to Non-Profits - Federal	\$15,000.00

Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	072-500575	Grants to Non-Profits - Federal	\$40,000.00
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	072-500575	Grants to Non-Profits - Federal	\$55,000.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	072-500575	Grants to Non-Profits - Federal	\$80,000.00
Strafford Network	Strafford County	Vendor# 159217	072-500575	Grants to Non-Profits - Federal	\$40,000.00
		Subtotal			\$523,000.00

05-95-48-481010-8925 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SVCS, HHS: ELDERLY - ADULT SERVICES, GRANTS TO LOCALS, MEDICAID SERVICES GRANTS

Vendor Name	Area Served	Vendor#	Class/Object Code	Class Title	SFY 2011 Amount
Community Action Program Belknap and Merrimack Counties, Inc.	Merrimack County	Vendor# 177203	102-500731	Contracts for Program Services	\$43,196.40
Carroll County Health & Home Care Services	Carroll County	Vendor# 167159	102-500731	Contracts for Program Services	\$24,106.80
Crotched Mountain Community Care, Inc.	Rockingham County*	Vendor# 177293	102-500731	Contracts for Program Services	\$55,386.00
Easter Seals New Hampshire, Inc.	Hillsborough County	Vendor# 177204	102-500731	Contracts for Program Services	\$74,428.00
Grafton County Senior Citizens Council, Inc.	Grafton County	Vendor# 177675	102-500731	Contracts for Program Services	\$41,196.40
Monadnock Collaborative	Monadnock Region*	Vendor# 159303	102-500731	Contracts for Program Services	\$27,219.20
Southwestern Community Services, Inc.	Sullivan County	Vendor# 177511	102-500731	Contracts for Program Services	\$22,550.60
Strafford Network	Strafford County	Vendor# 159217	102-500731	Contracts for Program Services	\$35,559.20
Tri-County Community Action Program, Inc.	Coos County	Vendor# 177195	102-500731	Contracts for Program Services	\$27,190.60
		Subtotal			\$350,833.20
		Total Contracts			\$2,689,167.51

*Monadnock Region is defined as all the cities and towns in Cheshire County with twelve (12) cities and towns located in Hillsborough County (Antrim, Bennington, Frankestown, Greenfield, Greenville, Hancock, Mason, New Ipswich, Peterborough, Sharon, Temple, and Windsor).

EXPLANATION

The purpose of Requested Action #1 is to enter into an agreement with Lakes Region Partnership for Public Health for SFY 11 to operate the Belknap County ServiceLink Resource Center (SLRC). This SLRC will provide a single point to receive information, assistance and referral services, long-term care options counseling, family caregiver supports, State Health Insurance Assistance Program (SHIP) services, and Senior Medicare Patrol Project (SMP) services. This SLRC will serve: 1) persons age 60 and over; 2) adults over the age of 18 who are chronically, physically ill or disabled and who may need long term care supports; 3) family members, caregivers, advocates and providers; 4) any persons desiring information and supportive referrals regarding issues related to aging, long term care, social service programs, independent living, disability issues as well as opportunities to volunteer, wellness education and activities, and social involvement; 5) a resource for health and long-term support professionals and others who provide services to the elderly and to people with disabilities; and 6) people planning for future long-term support needs. Although this explanation specifically applies to Lakes Region Partnership for Public Health, Inc., the explanation for Requested Action #2 is similar, with a few additional provisions that are listed at the end of this letter. All contracts have been approved by the State Department of Justice and the State Department of Administrative Services.

ServiceLink Overview

The goals of the SLRC are to empower individuals to make informed choices and to streamline access to long-term support, consistent with the State's long-term care policy. The goal of ServiceLink is virtually identical to the Administration on Aging's (AoA) Goal 1: To empower individuals to make informed decisions and to streamline access to long-term care. Long-term support refers to a wide range of in-home, community-based and institutional services and programs that are designed to help individuals with disabilities and chronic conditions. This model encourages the use of less costly long-term support services and programs, thereby decreasing premature use of more expensive institutional care.

The ServiceLink model was predicated on the assumption that if people are to make informed decisions about long-term care, they need timely and accurate information that is responsive to their needs. One of the basic functions of ServiceLink is to maintain timely and accurate information about available services and supports, which it does through a web-enabled resource database accessible by anyone.

NH's system is recognized nationally as a leading model for Aging and Disability Resource Centers and the network is well known throughout the state as the key place for individuals to receive information, explore options and be connected to supports. As reported in the State Fiscal Year 2009 ServiceLink Resource Center Management Report, the following accomplishments have been achieved statewide and in SFY 10 year-to-date reporting has projected numbers to increase from the listed SFY 2009 accomplishments below:

- There were a total of 83,872 contacts, which is a 24% increase from the prior year. A contact to the SLRC can be made in many forms such as calls, emails, faxes, and walk-ins.
- There were a total of 125,327 connections, which is a 30% increase from the prior year. A connection from a SLRC is the total number of referrals to agencies and services within the community.
- There were a total of 1,303 home visits, which is a 12% increase from the prior year. A home visit is a SLRC staff person doing home or community visits to assist consumers who cannot come into the office.
- There were a total of 482 public education workshops/presentations, which is an increase of 13% from the prior year. Education can range from subject specific topics such as Medicare to collaborative topics with another agency.
- There are a total of 210 volunteers who have contributed to 9,425 volunteer hours. The number of volunteers was a 30% increase from the prior year. Volunteers assist with many functions such as certified Medicare Volunteers.

- The SLRC has served 4,595 family caregivers statewide, an increase of 38% over the prior year. There are eight (8) SLRC staff trained as class leaders in the evidence-based curriculum "Powerful Tools for Caregivers." These staff in turn provided training to more than eighty (80) family caregivers.
- There have been 20,207 Medicare inquiries, an increase of 60% over the prior year. Also there have been more than 7,800 hours of Medicare counseling to 17,261 individuals.

ServiceLink Programs:

Each SLRC employs staff in the role of Center Manager, Information and Referral Specialist, Family Caregiver Support Specialist and State Health Insurance Program/ Senior Medicare Patrol Project (SHIP/SMP) Coordinator. The SLRC also employs staff in the role of Long-term Support Counselor, who has the primary responsibility of working with individuals and families to identify needs and to fully explore health care and long-term care options available in that community. Each SLRC works with a staff member assigned from the Division of Family Assistance (DFA), who determines financial eligibility for Medicaid and a long-term care nurse who determines clinical eligibility for services. These staff work together to help the individual and their family to identify current and future needs, explore options, and develop a long-term care plan.

Through a supported decision-making model, SLRC also provides assistance to those individuals who, for a variety of reasons need help in making decisions for themselves or for family members about long-term care. SLRC also assist consumers to navigate what is often a complex and bewildering process of applying for services at a time when they must deal with their own health care crises or on behalf of a family member or other person. For these individuals, SLRC is the single point of entry for long-term care services and supports, including Medicaid nursing home care and the Medicaid Waiver services. The model has demonstrated that individuals can access the services and supports they need more quickly.

However, SLRC referrals are not limited to Medicaid applicants and recipients only. SLRC is the nexus for linking people to Social Services Block Grant services, Older Americans Act services, privately funded services, and services which are unique to a regional service area, regardless of an individual's income.

NH Family Caregiver Support Program (NHFCSPP) is funded by AoA, and the state general funded Alzheimer's disease and Related Disorders (ADRD) respite grant program for caregivers. Both programs work with persons who are not Medicaid eligible to provide timely intervention and supports to caregivers so that they can continue in their caregiving roles and avoid spend down and placement of the care recipient. The NHFCSPP utilizes a consumer-directed model, known in New Hampshire as the Transition in Caregiving (TIC) that allows consumers to choose and supervise their respite provider and use supplemental services flexibly. Since September 2007 to present, BEAS has been in receipt of three major AoA grants through Community Living Program Cooperative Agreements (see attached for latest grant award) that has successfully supported pilot regions with the SLRCs by the development and implementation of the TIC model. With the latest award from AoA, BEAS continues expansion of the TIC model with other SLRCs so that it's statewide. Individuals are being served more efficiently and responsively now that the process has been streamlined and decentralized at the community level through the SLRCs. In addition, the new model has implemented a systematic attempt to combine these funds with other community and personal resources.

BEAS administers NH's SHIP at the community level through the SLRCs. The primary mission of NH SHIP is to provide information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage including such topics as Medicare coverage, Medicare Prescription Drug Benefit, Medicare Supplemental Plans, and long term care insurance to Medicare eligible persons, their families and caregivers. NH SHIP also strives to recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC regions. Additionally, BEAS has received Medicare Improvements for Patients & Providers Act (MIPPA) that is a one time project ending in May 2011 that provides targeted outreach and

education for low-income people so they can have access to the Low Income Subsidy (LIS) with Medicare Part D and the Medicare Savings Program (MSP) (see attached grant award).

BEAS administers NH's SMP at the community level through the SLRCs. The SMP's primary mission is to a) increase community awareness of the importance of health care fraud control through education, counseling, assistance and outreach to people with Medicare; b) recruit, train, and maintain a network of volunteers to help with providing these services in the SLRC region; and c) refer potential fraudulent cases for further investigation. The program makes Medicare and Medicaid beneficiaries more informed health care consumers and enables them to play an important role in helping to avoid payment errors.

Bid Process

This Agreement was awarded to Lakes Region Partnership for Public Health, Inc. through a competitive bid process. The Request for Proposals (RFP) was posted on the DHHS' website February 5, 2010 and notification of its release was sent to potential bidders. A legal notice was published in the New Hampshire Union Leader soliciting applications through a Request for Proposals (RFP) on February 8, 9, and 10, 2010. The proposal covers State Fiscal Year 2011 with BEAS retaining an option to renew the contract for one two-year period at its discretion, and upon approval of Governor and Executive Council. The proposal was reviewed and scored by five (5) reviewers as follows: SLRC Program Manager, NHFCSP Manager, Medicare Coordinator and Program Specialist, DCBCS Program Planning and Review Specialist for Quality Management, and Senior Management Analyst with the Office of Medicaid Business and Policy, all employed with DHHS. The reviewers have six to over ten years experience in managing agreements with vendor for various public health/services/education programs. See attached bidders summary and allocation/funding sources. (Each of the other nine (9) vendors responded to the RFP as noted above and were selected using the same process).

Performance Measures

The following performance outcome measures will be used to measure the effectiveness of this SLRC agreement with Lakes Region Partnership for Public Health, Inc. (Each of the other nine (9) SLRC agreements will be measured using the same performance outcome measures). BEAS deployed reporting requirements in which to collect data and measure performances, and to develop standards in order to monitor and improve the SLRC and its services. BEAS has developed and will continue to develop with the SLRC contractors, performances and outcomes such as the following:

- By June 30, 2011, 95% of consumers receiving Information & Referral/Assistance (I&R/A), Long-term Support (LTS) Options, Medicare, and Caregiver Support Counseling are satisfied with courtesy, timeliness and helpfulness of the SLRC services received.
- By June 30, 2011, 90% of consumers receiving I&R/A, LTS, Medicare, and Caregiver support Counseling will trust the information provided by the Resource Center.
- By June 30, 2011, 90% of all consumers will agree that the resource center followed-up within a reasonable amount of time.
- 95% of consumers receiving LTS Options Counseling report that the SLRC staff explained their options to their understanding.
- 95% of all consumers reported that they received access assistance when requested.

Additional Provisions

All the contractors will provide the same scope of services with the exception of the following:

May 24, 2010

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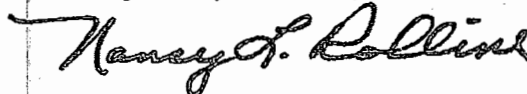
- Community Action Program of Belknap and Merrimack Counties, Inc. contract includes \$2,000, as awarded through this RFP, to administer all calls coming from out of state and unrecognized phone exchanges.
- Strafford Network contract includes \$3,700 to subcontract the services of processing Medicare Supplemental Insurance comparisons for the ServiceLink Program statewide. This was a sole source agreement and not part of the RFP process. Strafford Network has done this in the past.
- Grafton County Senior Citizens Council, Inc., Monadnock Collaborative, Southwestern, and Tri-County Community Action Program, Inc. will not receive funding from the Community Living Program, an AoA grant to support the NHFCSP. These four vendors currently serving as the SLRC for their respective counties have received previous grant monies to develop and implement the TIC model. The CLP funds awarded in this contract continue to support the counties that previously did not receive funding to develop and implement this model statewide.

Area Served: Belknap County

Source of Funds: 56.98% Federal and 43.02% General of the total amount requested in Requested Actions 1 and 2.

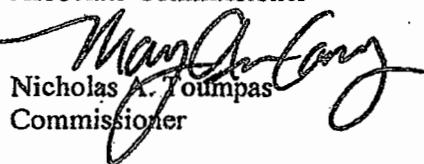
In the event that Federal Funds become no longer available, General Funds will not be requested to support these programs.

Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toupas
Commissioner

	A	B	C	D	E	F	G	H	I	J	K	L
20	Allocation/Funding Sources											
21	Budget Awarded:											
22	Funding Source:	Contract Amts G. Total	Merrimack	Carroll	Rockingham	Hillsborough	Grafton	Bellamy	Monadnock	Sullivan	Strafford	Coos
23	LTC funds (ServiceLink General Funds) ¹	\$532,116.94	\$58,532.86	\$74,587.60	\$79,817.54	\$106,423.39	\$58,532.86	\$39,908.77	\$42,569.36	\$14,587.60	\$42,569.36	\$14,587.60
24	Assessment & Counseling (Medicaid)	\$1,286,707.64	\$141,537.84	\$83,636.00	\$191,006.15	\$257,341.53	\$141,537.84	\$96,503.07	\$102,936.61	\$53,636.00	\$102,936.61	\$53,636.00
25	W&R/A (Social Services Block Grant)	\$143,699.00	\$15,806.89	\$9,340.44	\$21,554.85	\$28,739.80	\$15,806.89	\$10,777.43	\$11,495.92	\$9,340.44	\$11,495.92	\$9,340.44
26	Subtotal	\$1,962,523.58	\$215,877.59	\$127,564.04	\$294,378.54	\$392,504.72	\$215,877.59	\$147,189.27	\$157,001.89	\$127,564.04	\$157,001.89	\$127,564.04
27	Family Caregiver Support Title III-E (AoA) ²	\$330,000.00	\$37,000.00	\$27,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00	\$37,000.00
28	Community Living Program (AoA Discretionary Grant ending Sept. 30, 2011) ³	\$245,000.00	\$15,000.00	\$40,000.00	\$55,000.00	\$80,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00
29	Subtotal	\$575,000.00	\$52,000.00	\$67,000.00	\$92,000.00	\$117,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00	\$52,000.00
30	Subtotal	\$190,400.00	\$20,537.00	\$13,069.00	\$28,005.00	\$37,340.00	\$20,537.00	\$13,069.00	\$14,936.00	\$12,135.50	\$18,636.00	\$12,135.50
31	SHIP (CMS Grant)	\$126,540.00	\$15,699.40	\$5,717.80	\$18,681.00	\$24,908.00	\$15,699.40	\$5,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
32	SHIP (CMS Grant)	\$126,540.00	\$15,699.40	\$5,717.80	\$18,681.00	\$24,908.00	\$15,699.40	\$5,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
33	SHIP (CMS Grant)	\$126,540.00	\$15,699.40	\$5,717.80	\$18,681.00	\$24,908.00	\$15,699.40	\$5,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
34	SHIP (CMS Grant)	\$126,540.00	\$15,699.40	\$5,717.80	\$18,681.00	\$24,908.00	\$15,699.40	\$5,717.80	\$9,963.20	\$8,095.10	\$9,963.20	\$8,095.10
35	Subtotal	\$374,940.00	\$43,196.40	\$24,106.80	\$55,386.00	\$74,428.00	\$43,196.40	\$24,106.80	\$27,319.20	\$22,590.60	\$35,559.20	\$22,590.60
36	Grand Total	\$2,912,463.58	\$311,073.99	\$218,670.84	\$441,764.54	\$553,932.72	\$294,073.99	\$223,296.07	\$221,221.09	\$177,114.64	\$259,561.09	\$181,751.64
37	% Federal Funds	56.98%										

40 Note 1: The SLRCs are required to match these funds by 25% that is an expected match of \$177,372.31. The SLRCs are actually providing \$362,942.00 in match.

41 Note 2: The SLRCs are required to match these funds by 25% that is an expected match of \$41,413.35. The SLRCs are actually providing \$152,808 in match.

42 Note 3: The SLRCs are not required to provide matching funds under the NHFCSP, however they have provided \$129,229 in match.

43 Note 4: The allocation of funding is based on the federal statistics reported to BEAS related to potential LIS beneficiaries not enrolled.

44 *Match is defined as cash or in-kind such as volunteer hours, occupancy, and administrative costs (several SLRCs waived or requested much less than the 10% indirect costs).