





Lori Shibinette Commissioner

Lisa M. Morris Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301

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August 26, 2020

The Honorable Mary Jane Wallner, Chairman Fiscal Committee of the General Court State House Concord, New Hampshire 03301

His Excellency, Governor Christopher T. Sununu State House Concord, New Hampshire 03301

Informational Item

Pursuant to RSA 21-P:43, RSA 4:45, RSA 4:47, and Executive Order 2020-04 as extended by Executive Orders 2020-05 AND 2020-08, 2020-09, 2020-10, 2020-14 and 2020-15, Governor Sununu has authorized the Department of Health and Human Services, Division of Public Health Services to:

- Accept and expend funds from the Centers for Disease Control and Prevention (CDC), entitled Epidemiology and Laboratory Capacity (ELC) under the Coronavirus Aid, Relief, and Economic Security Act in the amount of \$53,092,863 effective retroactive to January 20, 2020 upon your approval through June 30, 2021, and further authorize the allocation of these funds in the accounts below. 100% Federal Funds.
- 2. Authorize the Department of Health and Human Services, Division of Public Health Services to create up to fifteen temporary, full-time positions for laboratory, epidemiology and administrative purposes effective upon your approval through June 30, 2021. 100% Federal Funds.

05-095-090-903010-19010000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: PUBLIC HEALTH DIVISION, BUREAU OF LABORATORY SERVICES, ELC CARES COVID-19

The Honorable Mary Jane Wallner, Chairman His Excellency, Governor Christopher T. Sununu August 26, 2020 Page 2

SFY2021 Class/Object	Class Title	Current Authorized Budget		TI	is Request	Adjusted Budget		
Revenue								
000-400146	Federal Funds	\$		\$	53,092,863	\$	53,092,863	
	General Funds	\$	•			`\$	-	
Total Revenue:				\$	53,092,863	\$	53,092,863	
Expense								
010-500100	Personal Services Perm	\$	-	\$	556,990	\$	556,990	
018-500106	Overtime	\$	-	\$	500,000	\$	500,000	
019-500109	Holiday Pay	S	-	\$	15,000	\$	15,000	
020-500200	Current Expenses	\$	-	\$	20,920	'\$	20,920	
024-500225	Maintenance Other than Build-Grn				50,000	\$	50,000	
026-500251	Organizational Dues	S	_	S	1,000	\$	1,000	
030-500302	OfficeEquip&Fum(Replace)	\$	•	\$	1,222,340	\$	1,222,340	
037-500173	Technology-Hardware	\$	-	\$	400,000	\$	400,000	
038-500175	Technology-Software	\$	-	\$	3,674,057	\$	3,674,057	
039-500188	Telecommunications	\$	-	S	4,500	S	4,500	
041-500801	Audit Fund Set Aside	\$	-	\$	61,057	.\$	61,057	
042-500620	Post Retirements Benefits	\$	-	\$	58,484	\$	58,484	
050-500109	Personal Service - Temp	\$	-	\$	360,462	\$	360,462	
059-500117	Temp Full Time	\$		\$	1,551,015	\$	1,551,015	
060-500601	Benefits	\$		\$	1,798,432	\$	1,798,432	
066-500543	Employee Training	\$	•	\$	7,000	\$	7,000	
070-500704	In State Travel Reimb	S	•	S	10,000	\$	10,000	
080-500710	Out of State Travel Reimb	\$		\$	28,000	\$	28,000	
102-500731	Contracts for Program Services	\$:	\$	42,373,606	\$	42,373,606	
548-500396	Reagents	S	-	\$	400,000	\$	400,000	
	S	-	S	53,092,863	S	53,092,863		

EXPLANATION

This request is being made to accept the additional grant funds available for SFY 2020 and SFY 2021 to administer the Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), Public Law 116-136. These special ELC Project E funds are to be used to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19). This ELC funding is to rapidly establish and monitor key activities related to COVID-19 in the areas of epidemiology, laboratory and informatics. Monitoring the indicators associated with these activities are intended to assist the State of New Hampshire in making data-driven policy decisions regarding testing, mitigation and prevention efforts. The notice of additional funds awarded was received May 18, 2020.

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The funds are to be budgeted as follows:

Class 010	The funds will be used to pay for full time positions.
Class 018	The funds will be used to pay overtime expense.
Class 019	The funds will be used to pay holiday pay.
Class 020	The funds will be used to pay for current expense items.
Class 024	The funds will be used to pay service & maintenance on lab equipment.
Class 026	The funds will be used to pay memberships
Class 030	The funds will be used to pay for equipment.
Class 037	The funds will be used to pay for computer hardware.
Class 038	The funds will be used to pay for computer software.
Class 039	The funds will be used to pay for telecommunications.
Class 041	The funds will be used to pay for audit fund set aside.
Class 042	The funds will be used to pay for post retirement expense.
Class 050	The funds will be used to pay for part time temporary positions.
Class 059	The funds will be used to pay for full time temporary positions.
Class 060	The funds will be used to pay for benefits.
Class 066	The funds will be used to pay for employee training.
Class 070	The funds will be used to pay for in-state travel.
Class 080	The funds will be used to pay for out-of-state travel.
Class 102	The funds will be used to pay for contracts.
Class 548	The funds will be used to pay for reagents.

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

- 1. List of personnel involved: Approximately 15 Temporary full time positions; 4 Laboratory Scientists, 2 Program Specialist IIIs, 4 Program Specialists IVs, 1 Administrator IV, 1 Business Systems Analyst I; 1 System Development Specialist VI, 1 Public Health Nurse Liaison and 1 Health Promotion Advisor.
- 2. Nature, Need, and Duration: The positions will provide for the increased needs caused by the COVID-19 public health event. The positions will be needed while the event is ongoing.
- 3. Relationship to existing agency programs: This is a new public health event.
- 4. Has a similar program been requested of the legislature and denied? No
- 5. Why wasn't funding included in the agency's budget request? At the time of budget submission COVID-19 was not a known public health event.
- 6. Can portions of the grant funds be utilized? All grant dollars are being used for this request.
- 7. Estimate the funds required to continue this position(s): The positions necessary for this work will not be permanent.

Area served: Statewide

Source of Funds: 100% Federal funds from the Centers for Disease Control.

If Federal Funds become no longer available, General Funds will not be requested to support the program expenditures.

Respectfully submitted,

Lori A. Shibinette Commissioner

DATE ISSUED MM/DD/YYYY 05/18/2020 1a. SUPERSEDES AWARD NOTICE dated 04/23/2020 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded				DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention						
2. CFDA NO.		·].	Centers for Disea	ase Control a	ind Preve	ention		
93.323 - Epidemiology and	Laboratory Capaci	ty for Infectious Diseases (E	ilC)		•					
3. ASSISTANCE TYPE Coop	erative Agreement			긕	2939	Brandywine Ro	ad			
4. GRANT NO. 6 NU50CK00		6. TYPE OF AWARD		_		inta, GA 30341				
Formerty	3022-01-01	Demonstration			•					
4a, FAIN NU50CK000522		5a, ACTION TYPE P	ost Award Amendment		•	•				
6. PROJECT PERIOD	MM/DDYYYY		MM/DO/YYYY	NOTICE OF AWARD AUTHORIZATION (Legislation/Regulations) 301(A)AND317(K)(2)PHS42USC241(A)247B(K)2						
From	08/01/2019	Through	07/31/2024							
7. BUDGET PERIOD	MM/DD/YYYY		MM/DO/YYYY							
From	08/01/2019	Through	07/31/2020							
8. TITLE OF PROJECT (OR Epidemiology and Labora		evention and Control of Em	erging Infactious Disease:	(ELC)	•					
Sa. GRANTEE NAME AND A			<u> </u>		TEE PROJECT DIRECTOR	<u>- —</u>				
HEALTH AND HUMAN \$	ERVICES, NEW H	AMPSHIRE DEPT OF			STINE LOUISE BEAN AZEN DRIVE					
Concord, NH 03301-385	2				SION OF PUBLIC HEALTH SERVICE	:				
				CON	CORD, NH 03301					
					e: 6032714657 <u> </u>					
10a. GRANTEE AUTHORIZI	IG OFFICIAL			1	RAL PROJECT OFFICER					
Ms. Richelle Swanson					Vayne Brathwaite Clifton Rd			,		
29 Hazen Drive Division of Public Health	Sandras			C-18						
Concord, NH 03301-385				Division of Preparedness and Emerging Infections						
				Atlan	ta, GA 30333					
			ALL AMOUNTS ARE	SHOWN IN	JSD ·					
11, APPROVED BUDGET (Ex	cludes Direct Assis	tance)			COMPUTATION			40.050.572.00		
! Financial Assistance from the		= -		I	of Federal Financial Assistance (fro			68,958,573.00 0,00		
Il Total project costs including	grant funds and al	I other financial participation		1	obligated Balance From Prior Budg mulative Prior Award(s) This Budge			7,901,781.00		
 Salaries and Waget 		***************************************	1,154,176.00	d. AMOUN	61,058,792.00					
 b. Fringe Senefits 			552,272.00	13. Total Fo	3. Total Federal Funds Awarded to Date for Project Period			58,958,573.00		
c. Total Personnel	Costs	*******	1,708,448.00	14. RECOMMENDED FUTURE SUPPORT						
d. Equipment	************	**************		YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL	DIRECT COSTS		
Supplies			88,968.00	8. 2	TOTAL BIRECT COSTS	d. 5	1017			
f. Travel			50,610.00	b. 3		e. 6				
g. Construction	**********	*************	0.00	c 4		f. 7				
n. Other	**********		66,546,411.00	15. PROGRA	N INCOME SHALL BE USED IN ACCORD WI	TH ONE OF THE FOLLOW	ANG			
i. Contractual	***********		155,552.00	a.	DEDUCTION ADDITIONAL COSTS			ь Б		
	COSTS		68,558,989.00		MATCHING OTHER RESEARCH (Add / Deduct Option)		.	لتا		
			399,584.00		OTHER (See REMARKS)					
k. INDIRECT COSTS			000,004.00	16, THE AWA	RD IS BASED ON AN APPLICATION SUBMI	TTED TO, AND AS APPRI	OVED BY, THE FE	DERAL AWARDING AGENCY ID EITHER DIRECTLY		
I. TOTAL APPROVE	BUDGET	1	68,958,573.00	a. The grant program legislation						
			68,958,573.00		The grant program regulations. This award notice including terms and condit Federal administrative requirements, cost pr	bone, if any, noted below us unciples and audit requirem	nder REMARKS, sents applicable to	this grant.		
m. Federal Share				in the event t	In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shat prevail. Acceptance of the grant terms and conditions is actnowledged by the grantize when funds are drawn or otherwise					
n. Non-Federal Share			0,00		plance of the grant ferms and conditions in the grant payment system.					
			_							
REMARKS (Other Ter	ms and Conditions	Attached - XY	es [No)	•					

GRANTS MANAGEMENT OFFICIAL:

Brownie Anderson-Rana, Grants Management Officer

2939 Flowers Road

Malistop TV2

Atlanta, GA 30341-5509

Phone: 770-488-2771

,	M, 110-100-2111									
17.08J CL/	ASS 41.51	18a. VENDOR CODE	102600061883	185. EIN	026000618	19. DUN	\$ 011040545	20. CON	G. DIST.	02
F	FY-ACCOUNT NO. DOCUMENT NO.		Al	ADMINISTRATIVE CODE		MT ACTION FIN ASST	APPROPRIATION			
21, a,	0-9390EWQ	b. 19NU50	CK000522C3	c	CK	d.	\$0,00	e.	75-20	024 -09 43
22. a.	0-9390F7F	b. 19NU50	CK000522C4	c.	CK	d.	\$61,056,792.00	е.	75	5-X-0140
23. a.		b.	•	c.		d.		e.	_	