



Jeffrey A. Meyers
Commissioner

Lisa M. Morris
Director

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

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
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January 3, 2018

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, Bureau of Population Health and Community Services, Maternal & Child Health Section, Injury Prevention Program to accept and expend federal funds in the amount of \$27,540.00 from the Department of Health and Human Services, Centers for Disease Control and Prevention to fund the Opioid Overdose Surveillance Program effective upon date of approval by the Governor and Council, through June 30, 2018, and further authorize the funds to be allocated as follows: 100% Federal Funds

05-95-90-902010-5040 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY & HEALTH SERVICES, OPIOID SURVEILLANCE

SFY18

| Class/Object | Class Title | Current Modified Budget | Increase (Decrease) Amount | Revised Modified Amount |
|-----------------------|--------------------------------|-------------------------|----------------------------|-------------------------|
| 000-401353 | Federal Funds | \$232,255.00 | \$27,540.00 | \$259,795.00 |
| | General Funds | \$0.00 | \$0.00 | \$0.00 |
| Total Revenue | | \$232,255.00 | \$27,540.00 | \$259,795.00 |
| 020-500200 | Current Expenses | \$12,734.00 | \$22,417.00 | \$35,151.00 |
| 037-500173 | PC Desktop Hardware-New | \$929.00 | \$0.00 | \$929.00 |
| 041-500801 | Audit Funds Set Aside | \$141.00 | \$156.00 | \$297.00 |
| 059-500100 | Temporary Full Time | \$49,313.00 | \$0.00 | \$49,313.00 |
| 060-500601 | Benefits | \$40,375.00 | \$0.00 | \$40,375.00 |
| 070-500709 | In State Travel Reimburse | \$6,000.00 | \$0.00 | \$6,000.00 |
| 080-500719 | Out-of-State Travel Reimbur | \$6,929.00 | \$0.00 | \$6,929.00 |
| 102-500731 | Contracts for Program Services | \$115,834.00 | \$4,967.00 | \$120,801.00 |
| Total Expenses | | \$232,255.00 | \$27,540.00 | \$259,795.00 |

EXPLANATION

The Opioid Overdose Surveillance program is funded by the Enhanced State Opioid Overdose Surveillance cooperative agreement through the Centers for Disease Control and Prevention (CDC). CDC has made supplemental funds available to New Hampshire. In order to support the Office of the Chief Medical Examiner, the bulk of the funds will be used to provide the New Hampshire Public Health Laboratory the supplies and equipment needed to begin testing samples of potential opioid-overdose cases. The remaining funds are allocated for additional third party toxicology tests for suspected opioid-overdose death cases. These efforts will improve New Hampshire's coordinated response to the opioid epidemic through more thorough and timely reporting of opioid overdose deaths in New Hampshire.

The additional funds are budgeted as follows:

Class 020 – Current Expenses funds added to this class will be used to purchase testing supplies for the New Hampshire Public Health Lab (PHL) in order to test for Fentanyl and Fentanyl analogues. The PHL specializes in emergency response and given the potency and potential for large scale overdose event or use in terrorist attack (e.g. Carfentanil); the ability to perform tests for these analogs is paramount. Currently the Department of Justice contracts with a private laboratory to perform this test. These funds will allow the PHL to be certified to perform this test in the future. The PHL would serve as a resource to help clear out backlogs (they are set up to perform large amounts of tests very quickly) of samples for the Office of the Chief Medical Examiner, the primary source of any emergency outbreak related to fentanyl, and provide testing on non-fatal samples as well at scheduled intervals to provide a better understanding of those overdoses.

Class 041 – Audit Fund Set Aside per state requirements.

Class 102 – Contracts for Program Services will be used to support an existing agreement with the Department of Justice, Office of the Chief Medical Examiner. The Department of Justice will use the additional funds to amend an existing contract with NMS Labs (National Medical Services, Inc) to cover additional toxicology testing, due to an increase in suspected overdose cases, to ensure detail is available on all suspected opioid overdose deaths.

In response to the anticipated two-part question, "Can these funds be used to offset General Funds?" and "What is the compelling reason for not offsetting General Funds?" the Division offers the following information:

These funds may not be used to offset General Funds as they are specifically granted to the State for the purpose of providing the services described above.

These funds will not change the program eligibility levels. No new program will be established with the acceptance of these funds.

Area served: state-wide and contribution to national level data.

Source of funds: These funds are 100% Federal from Centers for Disease Control and Prevention (CDC) to fund the Injury Prevention Program's Opioid Overdose Surveillance Project.

Attached is the Award History and Notice of Grant Award. These funds were not added to the operating budget because they are supplemental to the original grant award and were not anticipated at the time the budget was developed.

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

Respectfully submitted,



Lisa Morris, MSSW
Director

Approved by: 

Jeffrey A. Meyers
Commissioner

LM/JAM/sc

**AWARD HISTORY
OPIOID SURVEILLANCE
NU17CE924879**

| | |
|-------------------------------------|----------------------|
| Award Ending 8/31/2017-01-02 | 254,552 |
| Award Ending 8/31/2018-02-01 | 296,978 |
| 356373/12*10 | |
| Expended through 6/30/17 | (4,307) |
| Unobligated Balance Unable to Spend | <u>(250,245)</u> |
| Award Balance 7/1/17 | \$ 296,978 |
| SFY 18 Appropriation ** | (268,478) |
| Balance Forward | <u>(960)</u> |
| Available to Accept in SFY 18 | 27,540 |
| Amount Requested this Action | <u><u>27,540</u></u> |

**** SFY 18 Appropriation**

| | Current | OYR | Total | This Action | Revised Budget |
|--|------------------|----------|------------------|-------------|------------------|
| 010-090-50400000 | | | | | |
| OPIOID SURVEILLANCE | 231,296 | 960 | 232,256 | 27,540 | 259,796 |
| 010-090-51900000 | | | | | |
| ACA HOMEVISITING | 10,132 | | 10,132 | | 10,132 |
| CANCER PREV CNTR | 33,119 | | 33,119 | | 33,119 |
| EHDI | 79,464 | | 79,464 | | 79,464 |
| FAMILY PLANNING | 37,997 | | 37,997 | | 37,997 |
| MCH | 1,461,597 | 573,475 | 2,035,072 | | 2,608,547 |
| NEWBORN HEARING | 89,228 | | 89,228 | | 89,228 |
| OPIOID | 4,784 | 4,784 | 9,568 | | 14,352 |
| OTHER FEDERAL | 170,482 | | 170,482 | | 170,482 |
| PHSBG | 297,042 | | 297,042 | | 297,042 |
| PRAMS | 53,828 | | 53,828 | | 53,828 |
| RPEG | 22,609 | | 22,609 | | 22,609 |
| WIC | 13,558 | | 13,558 | | 13,558 |
| Subtotal 51900000 | 2,273,840 | - | 2,852,099 | - | 3,430,358 |
| Allocated Cost for Opioid Surveillance | 32,398 | | 32,398 | | 32,398 |

1. DATE ISSUED MM/DD/YYYY 11/13/2017
 2. CFDA NO. 93.136
 3. ASSISTANCE TYPE Cooperative Agreement

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2920 Brandywine Road
 Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
 SEC 301,317,&391A 42USC241,247B&280B-B3

1a. SUPERSEDES AWARD NOTICE dated 08/29/2017
 except that any additions or restrictions previously imposed remain
 in effect unless specifically rescinded

4. GRANT NO. 6 NU17CE924879-02-02
 Formerly

5. ACTION TYPE Post Award Amendment

6. PROJECT PERIOD MM/DD/YYYY
 From 09/01/2016 Through 08/31/2019

7. BUDGET PERIOD MM/DD/YYYY
 From 09/01/2017 Through 08/31/2018

8. TITLE OF PROJECT (OR PROGRAM)
 New Hampshire Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality

9a. GRANTEE NAME AND ADDRESS
 New Hampshire Department of Health and Human Services
 129 PLEASANT ST
 -DUP5
 CONCORD, NH 03301-3852

9b. GRANTEE PROJECT DIRECTOR
 Mrs. JoAnne Miles-Holmes
 29 HAZEN DR
 DHHS-DPHS-MCH
 CONCORD, NH 03301
 Phone: 603-271-5384

10a. GRANTEE AUTHORIZING OFFICIAL
 Ms. Dolores Cooper
 29 Hazen Drive
 Concord, NH 03301-6504
 Phone: 603-271-4613

10b. FEDERAL PROJECT OFFICER
 Terry Davis
 4770 Buford Hwy
 DUIP
 Atlanta, GA 30341
 Phone: 770-488-3940

ALL AMOUNTS ARE SHOWN IN USD

| | |
|--|------------|
| 11. APPROVED BUDGET (Excludes Direct Assistance) | |
| I Financial Assistance from the Federal Awarding Agency Only | |
| II Total project costs including grant funds and all other financial participation <input checked="" type="checkbox"/> | |
| a. Salaries and Wages | 71,011.00 |
| b. Fringe Benefits | 45,854.00 |
| c. Total Personnel Costs | 116,865.00 |
| d. Equipment | 0.00 |
| e. Supplies | 37,738.00 |
| f. Travel | 1,789.00 |
| g. Construction | 0.00 |
| h. Other | 1,447.00 |
| i. Contractual | 166,136.00 |
| j. TOTAL DIRECT COSTS | 323,975.00 |
| k. INDIRECT COSTS | 32,398.00 |
| l. TOTAL APPROVED BUDGET | 356,373.00 |
| m. Federal Share | 356,373.00 |
| n. Non-Federal Share | 0.00 |

| | | | |
|--|--------------------|------------|--------------------|
| 12. AWARD COMPUTATION | | | |
| a. Amount of Federal Financial Assistance (from item 11m) | | 356,373.00 | |
| b. Less Unobligated Balance From Prior Budget Periods | | 0.00 | |
| c. Less Cumulative Prior Award(s) This Budget Period | | 356,373.00 | |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION | | 0.00 | |
| 13. Total Federal Funds Awarded to Date for Project Period | | 610,925.00 | |
| 14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project): | | | |
| YEAR | TOTAL DIRECT COSTS | YEAR | TOTAL DIRECT COSTS |
| a. 3 | | d. 6 | |
| b. 4 | | e. 7 | |
| c. 5 | | f. 8 | |

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

| | |
|---|----------|
| a. DEDUCTION | b |
| b. ADDITIONAL COSTS | |
| c. MATCHING | |
| d. OTHER RESEARCH (Add / Deduct Option) | |
| e. OTHER (See REMARKS) | |

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDOING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

a. The grant program legislation.
 b. The grant program regulations.
 c. This award notice including terms and conditions, if any, noted below under REMARKS.
 d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached - Yes No)

GRANTS MANAGEMENT OFFICIAL: Brownie Anderson-Rana, Grants Management Officer

| | | | | | |
|---------------------|-------------------------------|--------------------|---------------------|---------------------|---------------|
| 17. OBJ CLASS 41.51 | 18a. VENDOR CODE 1026000618B1 | 18b. EIN 026000618 | 19. DUNS 011040545 | 20. CONG. DIST. 02 | |
| FY-ACCOUNT NO. | DOCUMENT NO. | CFDA | ADMINISTRATIVE CODE | AMT ACTION FIN ASST | APPROPRIATION |
| 21. a. 7-93905UW | b. 16CE924879 | c. 93.136 | d. CE | e. \$0.00 | f. 75-17-0952 |
| 22. a. 7-939039R | b. 16CE924879 | c. 93.136 | d. CE | e. \$0.00 | f. 75-17-0952 |
| 23. a. | b. | c. | d. | e. | f. |

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2920 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
SEC 301,317,&391A 42USC241,247B&280B-B3

| | | |
|---|---|---|
| 1. DATE ISSUED MM/DD/YYYY 10/27/2016 | 2. CFDA NO. 93.136 | 3. ASSISTANCE TYPE Cooperative Agreement |
| 1a. SUPERSEDES AWARD NOTICE dated 08/24/2016 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded | | |
| 4. GRANT NO. 6 NU17CE924879-01-02 Formerly | 5. ACTION TYPE Post Award Amendment | |
| 6. PROJECT PERIOD From 09/01/2016 | Through 08/31/2019 | |
| 7. BUDGET PERIOD From 09/01/2016 | Through 08/31/2017 | |

8. TITLE OF PROJECT (OR PROGRAM)
New Hampshire Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality

| | |
|--|---|
| 9a. GRANTEE NAME AND ADDRESS New Hampshire Department of Health and Human Services 129 Pleasant St Concord, NH 03301-3852 | 9b. GRANTEE PROJECT DIRECTOR JoAnne Miles 29 Hazen Drive Concord, NH 03301-6504 Phone: 603-271-5384 |
|--|---|

| | |
|---|--|
| 10a. GRANTEE AUTHORIZING OFFICIAL Mrs. Dolores Cooper 29 Hazen Drive CONCORD, NH 03301-6504 Phone: 603-271-4613 | 10b. FEDERAL PROJECT OFFICER Terry Davis 4770 Buford Hwy DUIP Atlanta, GA 30341 Phone: 770-488-3940 |
|---|--|

ALL AMOUNTS ARE SHOWN IN USD

| | | | |
|---|------------|---|--------------------|
| 11. APPROVED BUDGET (Excludes Direct Assistance) | | 12. AWARD COMPUTATION | |
| I Financial Assistance from the Federal Awarding Agency Only | | a. Amount of Federal Financial Assistance (from item 11m) 254,552.00 | |
| II Total project costs including grant funds and all other financial participation <input type="checkbox"/> | | b. Less Unobligated Balance From Prior Budget Periods 0.00 | |
| a. Salaries and Wages | 67,173.00 | c. Less Cumulative Prior Award(s) This Budget Period 254,552.00 | |
| b. Fringe Benefits | 43,543.00 | d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 0.00 | |
| c. Total Personnel Costs | 110,716.00 | 13. Total Federal Funds Awarded to Date for Project Period 254,552.00 | |
| d. Equipment | 0.00 | 14. RECOMMENDED FUTURE SUPPORT | |
| e. Supplies | 12,463.00 | (Subject to the availability of funds and satisfactory progress of the project): | |
| f. Travel | 12,929.00 | YEAR | TOTAL DIRECT COSTS |
| g. Construction | 0.00 | a. 2 | |
| h. Other | 975.00 | d. 5 | |
| i. Contractual | 94,328.00 | b. 3 | |
| j. TOTAL DIRECT COSTS | 231,411.00 | e. 6 | |
| k. INDIRECT COSTS | 23,141.00 | c. 4 | f. 7 |
| l. TOTAL APPROVED BUDGET | 254,552.00 | 15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: | |
| m. Federal Share | 254,552.00 | a. DEDUCTION | |
| n. Non-Federal Share | 0.00 | b. ADDITIONAL COSTS | |
| | | c. MATCHING | |
| | | d. OTHER RESEARCH (Add / Deduct Option) | |
| | | e. OTHER (See REMARKS) | |
| | | 16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: | |
| | | a. The grant program legislation. | |
| | | b. The grant program regulations. | |
| | | c. This award notice including terms and conditions, if any, noted below under REMARKS. | |
| | | d. Federal administrative requirements, cost principles and audit requirements applicable to this grant. | |
| | | In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system. | |

REMARKS (Other Terms and Conditions Attached - Yes No)

GRANTS MANAGEMENT OFFICIAL: **Barbara (Rene) Benyard, Grants Management Officer, Team Lead**

| | | | | |
|---------------------|-------------------------------|--------------------|---------------------|---------------------|
| 17. OBJ CLASS 41.51 | 18a. VENDOR CODE 1026000618B1 | 18b. EIN 026000618 | 19. DUNS 011040545 | 20. CONG. DIST. 02 |
| FY-ACCOUNT NO. | DOCUMENT NO. | CFDA | ADMINISTRATIVE CODE | AMT ACTION FIN ASST |
| 21. a. 6-93905UW | b. 16CE924879 | c. 93.136 | d. CE | e. \$0.00 |
| 22. a. | b. | c. | d. | f. |
| 23. a. | b. | c. | d. | f. |