



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

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November 9, 2020

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Retroactive, Sole Source** contracts with the vendors listed in **bold** below for additional funding for the Young Adult Strategies program, by increasing the total price limitation by \$601,824 from \$10,414,931 to \$11,016,755 with no change to the contract completion dates of June 30, 2021 effective retroactive to October 1, 2020 upon Governor and Council approval. 100% Federal Funds.

The original contracts were approved by Governor and Council as indicated in the table below.

Vendor Name	Vendor Code	Contract Number	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
City of Manchester	177433	1068192	Greater Manchester	\$1,294,885	\$67,500	\$1,362,385	O: June 19, 2019, item (#78E) A1: February 5, 2020, item (#7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
City of Nashua	177441	1070165	Greater Nashua	\$931,156	\$0	\$931,156	O: September 18, 2019, item (#25) A1: February 5, 2020, item (#7) A2: May 6, 2020, item (#47) A3: GA - 10/5/20

County of Cheshire	177372	1068196	Greater Monadnock	\$664,792	\$0	\$664,792	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II- 8/26/20 (#L)
Granite United Way	160015	1068198	Concord, Carroll County, and South Central	\$2,259,571	\$202,500	\$2,462,071	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II- 8/26/20 (#L) A4: TBD
Greater Seacoast Community Health	154703	1068193	Strafford County	\$750,800	\$67,500	\$818,300	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item #(47) A3: GA - 7/10/20 II- 8/26/20 (#L) A4: TBD
Lakes Region Partnership for Public Health	165635	1068197	Winnipesa aukee	\$725,216	\$67,500	\$792,716	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item #(47) A3: GA - 7/10/20 II- 8/26/20 (#L) A4: TBD
Lamprey Health Care	177677	1068952	Seacoast	\$794,643	\$61,824	\$856,467	O: June 19, 2019, item (#78E) A1: February 5,

							2020, item #(7)  A2: May 6, 2020, item #(47)  A3: GA - 7/10/20 II- 8/26/20 (#L)  A4: TBD
Mary Hitchcock Memorial Hospital	177160	177160	Greater Sullivan and Upper Valley	\$1,543,853	\$0	\$1,543,853	O: June 19, 2019, item (#78E)  A1: February 5, 2020, item #(7)  A2: May 6, 2020, item #47  A3: GA - 7/10/20 II- 8/26/20 (#L)  A4: TBD
Mid-State Health Center	158055	1068190	Central NH	\$707,878	\$67,500	\$775,378	O: June 19, 2019, item (#78E)  A1: February 5, 2020, item #(7)  A2: May 6, 2020, item #47  A3: GA - 7/10/20 II- 8/26/20 (#L)  A4: TBD
North Country Health Consortium	158557	1068199	North Country	\$742,137	\$67,500	\$809,637	O: June 19, 2019, item (#78E)  A1: February 5, 2020, item #(7)  A2: May 6, 2020, item #(47)  A3: GA - 7/10/20 II- 8/26/20 (#L)  A4: TBD
			Total	\$10,414,931	\$601,824	\$11,016,755	

Funds are available in the following accounts for State Fiscal Year 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

### **EXPLANATION**

This request is **Retroactive** because the Department did not receive the notice of award for funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) until September 22, 2020 granting the Department authority to extend funding and services. This request is **Sole Source** because the contracts were originally approved as sole source and MOP 150 requires any subsequent amendments to be labelled as sole source.

The purpose of this request is to add additional funding to seven (7) of the Contractors, to enhance services and expand outreach to young adults between the ages of 18 and 25 to prevent and reduce the use of alcohol, marijuana, and non-medical prescription drugs including opioids and illicit opioids.

The Contractors will provide evidence-informed services and programs that are appropriate and culturally relevant for young adults between the ages of 18 to 25 years in high-risk high-need communities. Approximately 8,000 individuals will be served from April 1, 2019 to June 30, 2021.

The Contractors will continue ensuring evidenced-informed substance misuse prevention strategies are available in a variety of settings including workplaces, college campuses, community centers, and within homes via home visiting services. The strategies are designed for the targeted populations with the goals of reducing risky behaviors while enhancing protective factors to positively impact healthy decisions around the use of substances and increase knowledge of the consequences of substance misuse.

The Department will monitor contracted services by having participants complete a survey where the following outcomes will be measured:

- Participants report a decrease in past 30-day alcohol use.
- Participants report a decrease in past 30-day non-medical prescription drug use.
- Participants report a decrease in past 30-day illicit drug use including illicit opioids.
- Participants report a decrease in negative consequences from substance misuse.

Should the Governor and Executive Council not authorize this request, young adults who are most vulnerable and at risk for misusing substances and for developing a substance use disorder will not benefit from prevention and early intervention strategies.

Area served: Statewide

Source of Funds: CFDA #93.243, FAIN # SP020796

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

Respectfully submitted,

  
  
Lori A. Shibinette  
Commissioner



**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000
		SUB TOTAL		\$390,000	\$0	\$390,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, RHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS  
DISEASE CONTROL, EMERGENCY PREPAREDNESS**

**74% Federal Funds & 26% General Funds**

**CFDA #93.069**

**FAIN #U90TP922018**

**City of Nashua**

**Vendor # 177441-B011**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2020		\$197,673	\$0	\$197,673
2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2021		\$194,673	\$0	\$194,673
		Sub-Total		\$392,346	\$0	\$392,346

**County of Cheshire**

**Vendor # 177372-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
		Sub Total 2020		\$92,910	\$0	\$92,910
2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
		Sub Total 2021		\$89,910	\$0	\$89,910
		Sub-Total		\$182,820	\$0	\$182,820

**Greater Seacoast Community Health**

**Vendor # 154703-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Community Health		Sub Total 2020		\$92,580	\$0	\$92,580
2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2021		\$92,580	\$0	\$92,580
		Sub-Total		\$185,160	\$0	\$185,160

**Granite United Way - Capitol Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
Capitol Region		Sub Total 2020		\$96,430	\$0	\$96,430
2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
		Sub Total 2021		\$93,430	\$0	\$93,430
		Sub-Total		\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**Granite United Way - Carroll County Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
- Carroll County Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

**Granite United Way -South Central Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
-South Central Region			Sub Total 2020	\$97,360	\$0	\$97,360
2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

**Lamprey Health Care**

**Vendor #177677-R001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

**Lakes Region Partnership for Public Health**

**Vendor # 165635-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
Partnership for Public Health			Sub Total 2020	\$89,750	\$0	\$89,750
2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

**Manchester Health Department**

**Vendor # 177433-B009**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Department			Sub Total 2020	\$288,223	\$0	\$288,223
2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

**Mid-State Health Center**

**Vendor # 158055-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2020	\$83,600	\$0	\$83,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

**North Country Health Consortium**

**Vendor # 158557-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
			Sub Total 2020	\$91,550	\$0	\$91,550
2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			SUB TOTAL	\$2,942,102	\$0	\$2,942,102

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS**

**97% Federal Funds & 3% General Funds**

**CFDA #93.959**

**FAIN #TIO10035**

**City of Nashua**

**Vendor # 177441-B011**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
		Sub Total 2020		\$132,405	\$0	\$132,405
2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
		Sub Total 2021		\$132,405	\$0	\$132,405
		Sub-Total		\$264,810	\$0	\$264,810

**County of Cheshire**

**Vendor # 177372-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
		Sub Total 2020		\$133,986	\$0	\$133,986
2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
		Sub Total 2021		\$133,986	\$0	\$133,986
		Sub-Total		\$267,972	\$0	\$267,972

**Greater Seacoast Community Health**

**Vendor # 154703-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$85,917	\$0	\$85,917
2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
		Sub Total 2020		\$131,551	\$0	\$131,551
2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
		Sub Total 2021		\$128,014	\$0	\$128,014
		Sub-Total		\$259,565	\$0	\$259,565

**Granite United Way - Capitol Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
		Sub Total 2020		\$133,264	\$0	\$133,264
2021	102-500731	Contracts for Prog Svc	92057502	\$93,015	\$0	\$93,015
2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
		Sub Total 2021		\$133,265	\$0	\$133,265
		Sub-Total		\$266,529	\$0	\$266,529

**Granite United Way - Carroll County Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
		Sub Total 2020		\$133,385	\$0	\$133,385
2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
		Sub Total 2021		\$133,385	\$0	\$133,385
		Sub-Total		\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
-South Central Region				Sub Total 2020	\$0	\$133,512
2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
				Sub Total 2021	\$0	\$133,512
				Sub-Total	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
				Sub Total 2020	\$0	\$131,149
2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
				Sub Total 2021	\$0	\$131,149
				Sub-Total	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
ership for Public Health				Sub Total 2020	\$0	\$129,008
2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
				Sub Total 2021	\$0	\$129,008
				Sub-Total	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
Department				Sub Total 2020	\$0	\$135,845
2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
				Sub Total 2021	\$0	\$135,845
				Sub-Total	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
memorial Hospital - Sullivan County Region				Sub Total 2020	\$0	\$136,362
2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
				Sub Total 2021	\$0	\$136,362
				Sub-Total	\$0	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
Mary Hitchcock Memorial Hospital - Upper Valley Region				Sub Total 2020	\$0	\$133,162
2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
				Sub Total 2021	\$0	\$136,612
				Sub-Total	\$0	\$269,774

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
Mid-State Health Center				Sub Total 2020	\$0	\$118,551
2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
				Sub Total 2021	\$0	\$133,551
				Sub-Total	\$0	\$252,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
North Country Health Consortium				Sub Total 2020	\$0	\$133,069
2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
				Sub Total 2021	\$0	\$133,069
				Sub-Total	\$0	\$266,138
				SUB TOTAL	\$0	\$3,445,412

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds

CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
				Sub-Total	\$67,500	\$195,375

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
				Sub-Total	\$67,500	\$194,991



**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**Granite United Way - Carroll County Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$161,599	\$67,500	\$229,099

**Granite United Way -South Central Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$122,178	\$67,500	\$189,678

**Lamprey Health Care**

**Vendor #177677-R001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
2021	102-500731	Contracts for Prog Svc	92052410	\$20,608	\$61,824	\$82,432
		Sub-Total		\$126,484	\$61,824	\$188,308

**Lakes Region Partnership for Public Health**

**Vendor # 165635-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$112,500	\$67,500	\$180,000

**Manchester Health Department**

**Vendor # 177433-B009**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$139,749	\$67,500	\$207,249

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
2021	102-500731	Contracts for Prog Svc	92052410	\$20,213	\$0	\$20,213
		Sub-Total		\$100,963	\$0	\$100,963

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
2021	102-500731	Contracts for Prog Svc	92052410	\$20,805	\$0	\$20,805
		Sub-Total		\$148,092	\$0	\$148,092

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$112,500	\$67,500	\$180,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$112,500	\$67,500	\$180,000
		SUB TOTAL		\$1,391,931	\$601,824	\$1,993,755

05-95-90-902510-5178 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS  
DISEASE CONTROL, IMMUNIZATION

100% Federal Funds  
CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$0	\$0
		Sub-Total		\$8,182	\$0	\$8,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,180	\$0	\$48,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$25,182	\$0	\$25,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$18,182	\$0	\$18,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$17,000	\$0	\$17,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$17,000	\$0	\$17,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$55,182	\$0	\$55,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$46,058	\$0	\$46,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182
		SUB TOTAL		\$475,876	\$0	\$475,876

**05-95-90-902510-2239 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS  
DISEASE CONTROL, HOSPITAL PREPAREDNESS**

100% Federal Funds

CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**Greater Seacoast Community Health**

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**Granite United Way - Capitol Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**Granite United Way - Carroll County Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**Granite United Way -South Central Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**Lamprey Health Care**

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**Lakes Region Partnership for Public Health**

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000
		SUB TOTAL		\$260,000	\$0	\$260,000

**05-95-90-901510-7964 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH  
PROTECTION, LEAD PREVENTION**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

**Manchester Health Department**

**Vendor # 177433-B009**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$3,000	\$0	\$3,000

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
		Sub-Total		\$13,145	\$0	\$13,145

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
2020	102-500731	Contracts for Prog Svc	90036000	\$42,108	\$0	\$42,108
2021	102-500731	Contracts for Prog Svc		\$4,124	\$0	\$4,124
		Sub-Total		\$53,146	\$0	\$53,146

**Mid-State Health Center**

**Vendor # 158055-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

**North Country Health Consortium**

**Vendor # 158557-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
		Sub-Total		\$13,145	\$0	\$13,145
		SUB TOTAL		\$171,350	\$0	\$171,350

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

**County of Cheshire**

**Vendor # 177372-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

**Greater Seacoast Community Health**

**Vendor # 154703-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

**Granite United Way - Capitol Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0



**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

			Sub-Total	\$8,820	\$0	\$8,820
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**Granite United Way - Carroll County Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

**Granite United Way -South Central Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$1,818	\$0	\$1,818

**Lamprey Health Care**

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

**Lakes Region Partnership for Public Health**

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$1,818	\$0	\$1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818
		<b>SUB TOTAL</b>		<b>\$83,000</b>	<b>\$0</b>	<b>\$83,000</b>

**05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
		Sub-Total		\$80,000	\$0	\$80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$29,511	\$0	\$29,511
		Sub-Total		\$69,511	\$0	\$69,511
		<b>SUB TOTAL</b>		<b>\$149,511</b>	<b>\$0</b>	<b>\$149,511</b>

**05-95-90-900510-5173 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFORMATICS, ENVIRONMENTAL PUBLIC HEALTH TRACKING**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

			Sub-Total	\$10,309	\$0	\$10,309
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**Granite United Way - Carroll County Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

**Granite United Way - South Central Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

**Lamprey Health Care**

**Vendor #177677-R001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

**Lakes Region Partnership for Public Health**

**Vendor # 165635-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

**Manchester Health Department**

**Vendor # 177433-B009**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
		Sub-Total		\$0	\$0	\$0

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,069	\$0	\$7,069
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
		Sub-Total		\$13,254	\$0	\$13,254

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

**Vendor # 177160-B003**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333
		Sub-Total		\$13,355	\$0	\$13,355

**Mid-State Health Center**

**Vendor # 158055-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

**North Country Health Consortium**

**Vendor # 158557-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
		Sub-Total		\$13,255	\$0	\$13,255
		SUB TOTAL		\$120,750	\$0	\$120,750

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

**05-95-90-902510-7039 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PUBLIC HEALTH CRISIS RESPONSE**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90027027	\$190,000	\$0	\$190,000
		Sub-Total		\$190,000	\$0	\$190,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$240,000	\$0	\$240,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$240,000	\$0	\$240,000

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$55,000	\$0	\$55,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$55,000	\$0	\$55,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

North-Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$49,999	\$0	\$49,999
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$49,999	\$0	\$49,999
		SUB TOTAL		\$984,999	\$0	\$984,999

<b>TOTAL ALL</b>	<b>\$10,414,931</b>	<b>\$601,824</b>	<b>\$11,016,755</b>
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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services Contract**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and City of Manchester, (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 1528 Elm St Manchester, NH 03101.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,362,385.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-11, Young Adult Strategies, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-11, Young Adult Strategies, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

New Hampshire Department of Health and Human Services  
Regional Public Health Network Services




All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/24/2020  
Date

  
Name: Lisa Morris  
Title: Director, NH Division of Public Health Services

City of Manchester

11/17/20  
Date

  
Name: Joyce Craig  
Title: Mayor

New Hampshire Department of Health and Human Services  
Regional Public Health Network Services



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

OFFICE OF THE ATTORNEY GENERAL

11/25/20  
Date

Catherine Pinos  
Name: Catherine Pinos, Attorney  
Title:

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/Program Name: Regional Public Health Network Services

Budget Request for: Young Adult Strategies

Budget Period: FY21

Line Item	Description	FY20	FY21	FY22	FY23	FY24	FY25	FY26	FY27	FY28	FY29	FY30
1.	Test Reagents/Supplies	\$ 22,500.00	\$ 22,500.00									
2.	Employee Benefits	\$ 8,200.00	\$ 8,200.00									
3.	Commodities	\$ 27,800.00	\$ 27,800.00									
4.	Equipment											
5.	Travel											
6.	Rent and Maintenance											
7.	Purchase/Consumables	\$ 4,800.00	\$ 4,800.00									
8.	Supplies											
9.	Education											
10.	Lab											
11.	Pharmacy											
12.	Medical											
13.	Other											
14.	Travel	\$ 400.00	\$ 400.00									
15.	Outpatient	\$ 2,000.00	\$ 2,000.00									
16.	Current Expenses	\$ 11,200.00	\$ 11,200.00									
17.	Leasehold											
18.	Utilities											
19.	Subscriptions											
20.	Asset and Legal											
21.	Insurance											
22.	Rent/Leasehold											
23.	Supplies											
24.	Information/Communications	\$ 10,000.00	\$ 10,000.00									
25.	Staff Education and Training	\$ 8,000.00	\$ 8,000.00									
26.	Subcontract/Management	\$ 1,100.00	\$ 1,100.00									
27.	Other (Specify details in narrative)											
28.	Variable											
29.	Contract											
30.	TOTAL	\$ 68,800.00	\$ 68,800.00									

Indirect As A Percent of Direct 8.0%

CERTIFICATE OF VOTE

I, Matthew Normand, do hereby certify that:  
(Name of the City Clerk of the Municipality)

1. I am duly elected City Clerk of the City of Manchester
2. The following is a true copy of an action duly adopted at a meeting of the Board of Mayor and Aldermen duly held on November 17, 2020

RESOLVED: That this Municipality enter into a contract with the State of New Hampshire, Department of Health and Human Services.

RESOLVED: That Joyce Craig  
(Mayor of the City of Manchester)

hereby is authorized on behalf of this municipality to enter into the 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.

3. The foregoing action on has not been amended or revoked and remains in full force and effect as of November 18, 2020
4. Joyce Craig (is/are) the duly elected Mayor of the City of Manchester.

Matthew Normand  
(Signature of the Clerk of the Municipality)

State of New Hampshire  
County of Hillsborough

The foregoing instrument was acknowledge before me this 18 day of

November, 2020 by Lisa McCarthy  
(Name of Person Signing Above)

(NOTARY  
SEAL)

Lisa McCarthy  
(Name of Notary Public)

Title: Notary Public/Justice of the Peace  
Commission Expires: \_\_\_\_\_

**LISA M. MCCARTHY**  
NOTARY PUBLIC  
State of New Hampshire  
My Commission Expires  
June 24, 2025

Kevin J. O'Neil  
Risk Manager



## CITY OF MANCHESTER

### Office of Risk Management

#### CERTIFICATE OF COVERAGE

NH DHHS  
129 Pleasant Street  
Concord, New Hampshire 03301-3857

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 within the financial limits of RSA 507-B as follows:

Limits of Liability (in thousands 000)		
GENERAL LIABILITY	Bodily Injury and Property Damage	
	Each Person	325
	Each Occurrence	1000
AUTOMOBILE LIABILITY	Bodily Injury and Property Damage	
	Each Person	325
	Each Occurrence	1000
WORKER'S COMPENSATION	Statutory Limits	

The City of Manchester, New Hampshire maintains a Self-Insured, Self-Funded Program and retains outside claim service administration. All coverages are continuous until otherwise notified. Effective on the date Certificate issued and expiring upon completion of contract. Notwithstanding any requirements, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the coverage afforded by the limits described herein is subject to all the terms, exclusions and conditions of RSA 507-B.

#### DESCRIPTION OF OPERATIONS/LOCATION/CONTRACT PERIOD

For the City of Manchester's Regional Public Health Network Services Contract from July 1, 2019 through June 30, 2021.

Issued the 15<sup>th</sup> day of May, 2019.

  
Risk Manager

One City Hall Plaza • Manchester, New Hampshire 03101 • (603) 624-6503 • FAX: (603) 624-6528  
TTY: 1-800-713-2964

E-Mail: [kjoneil@manchesternh.gov](mailto:kjoneil@manchesternh.gov) • Website: [www.manchesternh.gov](http://www.manchesternh.gov)



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Granite United Way, (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 125 Airport Rd, Suite 3 Concord, NH 03301.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YYYY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$2,462,071.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-12, Young Adult Strategies Capital Area, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-12, Young Adult Strategies Capital Area, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B-32, Young Adult Strategies Carroll County, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-32, Young Adult Strategies Carroll County, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.
5. Modify Exhibit B-47, Young Adult Strategies South Central, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-47, Young Adult Strategies South Central, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

Granite United Way

Amendment #5

Contractor Initials



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/18/2020

Date

DocuSigned by:

*Lisa M. Morris*

D638D6E6C454A0

Name: Lisa M. Morris

Title: Director, Division of Public Health Svcs.

Granite United Way

11/18/2020

Date

DocuSigned by:

*Patrick Tufts*

475837A118D145F

Name: Patrick Tufts

Title: President

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

**OFFICE OF THE ATTORNEY GENERAL**

11/25/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "Catherine Pinos".

DSCAB002E32CAAE

Name: Catherine Pinos

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:

Vendor Name: Granite United Way  
Contract Name: Regional Public Health Network Services

## Region: Carroll County

Rate Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Medical Reserve Corps	Public Health Crisis Response	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Total
2019		\$ -	\$ -			\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00	\$ 11,200.00
2020		\$ 30,000.00	\$ 83,600.00	\$ 10,000.00	\$50,000	\$ 78,121.00	\$ 40,264.00	\$ 139,100.00	\$ 15,000.00	\$9,633	\$ 10,000.00	\$ 485,718.00
2021	\$10,000	\$ 30,000.00	\$ 83,600.00	\$ 10,000.00		\$ 78,121.00	\$ 40,264.00	\$ 90,000.00	\$ 15,000.00	\$ 6,167.00	\$ -	\$363,152

## Region: Capitol

Rate Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Medical Reserve Corps		Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Total
2019		\$ -	\$ -			\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00	\$ 11,200.00
2020		\$ 30,000.00	\$ 93,430.00	\$10,000	\$50,000	\$ 78,014.00	\$ 40,250.00	\$104,991	\$ 15,000.00	\$ 11,982.00	\$ 10,000.00	\$ 443,667.00
2021	\$10,000	\$ 30,000.00	\$ 93,430.00	\$10,000		\$ 78,014.00	\$ 40,250.00	\$ 90,000.00	\$ 15,000.00	\$ 8,018.00	\$ -	\$374,712

## Region: South Central

Rate Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Medical Reserve Corps		Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Total
2019		\$ -	\$ -			\$ -	\$ -	\$ -	not applicable	\$ 1,200.00	\$ 10,000.00	\$ 11,200.00
2020		\$ 30,000.00	\$ 94,360.00	\$ 10,000.00	\$50,000	\$ 78,375.00	\$ 40,137.00	\$ 99,678.00	not applicable	\$ 9,633.00	\$ 10,000.00	\$ 422,183.00
2021	\$10,000	\$ 30,000.00	\$ 94,360.00	\$ 10,000.00		\$ 78,375.00	\$ 40,137.00	\$ 90,000.00	not applicable	\$ 6,167.00	\$ -	\$359,039

\$ 2,462,071.00



## Exhibit B-12, Amendment # 5

New Hampshire Department of Health and Human Services			
Bidder/Program Name: Granite United Way, Capital Area Public Health			
Budget Request for: Young Adult Strategies			
Budget Period: FY21			
Line Item	Total Program Cost		
	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 15,000.00		\$ 15,000.00
2. Employee Benefits	\$ 4,200.00		\$ 4,200.00
3. Consultants			\$ -
4. Equipment:			\$ -
Rental			\$ -
Repair and Maintenance			\$ -
Purchase/Depreciation	\$ 1,000.00		\$ 1,000.00
5. Supplies:			\$ -
Educational	\$ 500.00		\$ 500.00
Lab			\$ -
Pharmacy			\$ -
Medical			\$ -
Office	\$ 500.00		\$ 500.00
6. Travel	\$ 800.00		\$ 800.00
7. Occupancy	\$ 500.00		\$ 500.00
8. Current Expenses			\$ -
Telephone	\$ 500.00		\$ 500.00
Postage			\$ -
Subscriptions			\$ -
Audit and Legal	\$ 1,500.00		\$ 1,500.00
Insurance			\$ -
Board Expenses	\$ 500.00		\$ 500.00
9. Software			\$ -
10. Marketing/Communications	\$ 500.00		\$ 500.00
11. Staff Education and Training	\$ 500.00		\$ 500.00
12. Subcontracts/Agreements	\$ 58,900.00	\$ 5,100.00	\$ 64,000.00
13. Other (specific details mandatory):			\$ -
Translator			\$ -
Indirect	\$ -		\$ -
<b>TOTAL</b>	<b>\$ 84,900.00</b>	<b>\$ 5,100.00</b>	<b>\$ 90,000.00</b>
Indirect As A Percent of Direct 6.0%			

Capital Area Public Health Network  
 SS-2019-DPHS-28-REGION-04-A05  
 Exhibit B-12, Amendment # 5

DS  
 PT  
 Vendor Initials

11/18/2020  
 Date

## Exhibit B-32, Amendment # 5

New Hampshire Department of Health and Human Services			
Bidder/Program Name: Granite United Way, Carroll County Public Health Network			
Budget Request for: Young Adult Strategies			
Budget Period: FY21			
Line Item	Total Program Cost		
	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 55,000.00		\$ 55,000.00
2. Employee Benefits	\$ 15,400.00		\$ 15,400.00
3. Consultants			\$ -
4. Equipment:			\$ -
Rental			\$ -
Repair and Maintenance			\$ -
Purchase/Depreciation	\$ 1,000.00		\$ 1,000.00
5. Supplies:			\$ -
Educational	\$ 500.00		\$ 500.00
Lab			\$ -
Pharmacy			\$ -
Medical			\$ -
Office	\$ 500.00		\$ 500.00
6. Travel	\$ 800.00		\$ 800.00
7. Occupancy	\$ 118.18		\$ 118.18
8. Current Expenses			\$ -
Telephone	\$ 500.00		\$ 500.00
Postage			\$ -
Subscriptions			\$ -
Audit and Legal	\$ 1,500.00		\$ 1,500.00
Insurance			\$ -
Board Expenses	\$ 500.00		\$ 500.00
9. Software			\$ -
10. Marketing/Communications	\$ 500.00		\$ 500.00
11. Staff Education and Training	\$ 500.00		\$ 500.00
12. Subcontracts/Agreements	\$ 5,000.00		\$ 5,000.00
13. Other (specific details mandatory):			\$ -
Indirect		\$ 8,181.82	\$ 8,181.82
<b>TOTAL</b>	<b>\$ 81,818.18</b>	<b>\$ 8,181.82</b>	<b>\$ 90,000.00</b>

Indirect As A Percent of Direct

10.0%

Carroll County Public Health Network  
 SS-2019-DPHS-28-REGION-04-A05  
 Exhibit B-32, Amendment # 5

Exhibit B-32

Page 1 of 1

Vendor Initials

Date 11/18/2020

## Exhibit B-47, Amendment # 5

New Hampshire Department of Health and Human Services			
Bidder/Program Name:	Granite United Way, South Central Public Health Network		
Budget Request for:	Young Adult Strategies		
Budget Period:	SFY 2021		
	Total Program Cost		
	Direct	Indirect	Total
Line Item	Incremental	Fixed	
1. Total Salary/Wages	\$ 10,000.00		\$ 10,000.00
2. Employee Benefits	\$ 2,800.00		\$ 2,800.00
3. Consultants			\$ -
4. Equipment:			\$ -
Rental			\$ -
Repair and Maintenance			\$ -
Purchase/Depreciation			\$ -
5. Supplies:			\$ -
Educational	\$ 500.00		\$ 500.00
Lab			\$ -
Pharmacy			\$ -
Medical			\$ -
Office	\$ 500.00		\$ 500.00
6. Travel	\$ 184.00		\$ 184.00
7. Occupancy	\$ 25.00		\$ 25.00
8. Current Expenses			\$ -
Telephone	\$ 21.00		\$ 21.00
Postage			\$ -
Subscriptions			\$ -
Audit and Legal	\$500		\$ 500.00
Insurance			\$ -
Board Expenses	\$ 500.00		\$ 500.00
9. Software			\$ -
10. Marketing/Communications	\$ 500.00		\$ 500.00
11. Staff Education and Training	\$ 500.00		\$ 500.00
12. Subcontracts/Agreements			\$ -
13. Other (specific details mandatory):	\$ 69,695.00		\$ 69,695.00
translator			\$ -
indirect		\$ 4,275.00	\$ 4,275.00
			\$ -
TOTAL	\$ 85,725.00	\$ 4,275.00	\$ 90,000.00
Indirect As A Percent of Direct			
5.0%			

South Central Region  
 SS-2019-DPHS-28-REGION-04-A05  
 Exhibit B-47, Amendment # 5

Vendor Initials PT  
 Date 11/18/2020

# State of New Hampshire

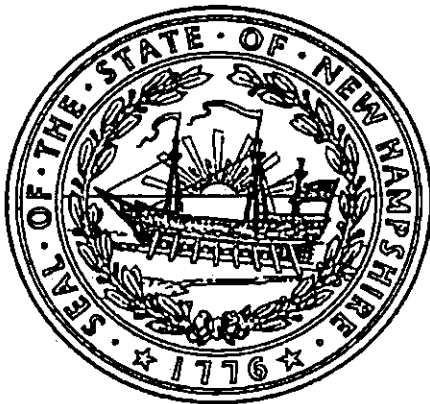
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GRANITE UNITED WAY is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on March 30, 1927. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 65650

Certificate Number: 0004893313



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 15th day of April A.D. 2020.

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

William M. Gardner  
Secretary of State

## CERTIFICATE OF AUTHORITY


I, Tony Speller hereby certify that:  
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Granite United Way.
2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on September 24, 2020, at which a quorum of the Directors/shareholders were present and voting.

**VOTED:** That Patrick Tufts, President & CEO, is duly authorized on behalf of Granite United Way to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30) days** from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 11/23/2020

  
Signature of Elected Officer  
Name: Tony Speller  
Title: Board Chair



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/3/2020

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).

<b>PRODUCER</b> <b>THE ROWLEY AGENCY INC.</b> 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	<b>CONTACT NAME:</b> Sarah Fifield <b>PHONE (A/C, No, Ext):</b> (603) 224-2562 <b>FAX (A/C, No):</b> (603) 224-8012 <b>E-MAIL ADDRESS:</b> sfifield@rowleyagency.com														
<b>INSURED</b> Granite United Way 22 Concord Street Floor 2 Manchester NH 03101	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: Hanover Ins - Bedford</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Hanover Ins - Bedford		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Hanover Ins - Bedford															
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

## COVERAGES

CERTIFICATE NUMBER: 20-21

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 INSD	SUBR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			ZHV900337108	1/1/2020	1/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 Professional Liability \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			ZHV900337108	1/1/2020	1/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0			URV9003210-09	1/1/2020	1/1/2021	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
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	N/A	3A States: NH NHV8996802-09	1/1/2020	1/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER 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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Covering operations of the named insured during the policy period.

## CERTIFICATE HOLDER

## CANCELLATION

NH DHHS 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 E Prindiville/ESP <i>Elizabeth Prindiville</i>
--	---

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## **Granite United Way Mission Statement**

**To improve the quality of people's lives by bringing together the  
caring power of communities.**

GRANITE UNITED WAY

FINANCIAL REPORT

MARCH 31, 2019



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**NATHAN WECHSLER & COMPANY**  
**PROFESSIONAL ASSOCIATION**  
**CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS ADVISORS**

**INDEPENDENT AUDITOR'S REPORT**

To the Board of Directors  
Granite United Way  
Manchester, New Hampshire 03101

***Report on the Financial Statements***

We have audited the accompanying financial statements of Granite United Way, which comprise the statement of financial position as of March 31, 2019, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

Page 1

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44 School Street  
Lebanon, NH 03766

v: 603-448-2650  
f: 603-448-2476

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### *Opinion*

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Granite United Way as of March 31, 2019, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### *Other Information*

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying Schedule of Expenditures of Federal Awards is presented for purposes of additional analysis as required by the audit requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the Schedule of Expenditures of Federal Awards is fairly stated in all material respects in relation to the financial statements as a whole.

### *Other Reporting Required by Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated August 15, 2019 on our consideration of Granite United Way's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Granite United Way's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Granite United Way's internal control over financial reporting and compliance.

### *Other Supplementary Information*

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary schedules of community impact awards to qualified partner agencies and emerging opportunity grants are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

***Report on Summarized Comparative Information***

We have previously audited Granite United Way's March 31, 2018 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated July 10, 2018. In our opinion, the summarized comparative information presented herein as of and for the year ended March 31, 2018 is consistent, in all material respects, with the audited financial statements from which it has been derived.

*Nathan Wechsler & Company*

Concord, New Hampshire  
August 15, 2019

## GRANITE UNITED WAY

## STATEMENT OF FINANCIAL POSITION

March 31, 2019 with comparative totals as of March 31, 2018

ASSETS	2019			2018
	Without Donor/ Time Restrictions	With Donor/ Time Restrictions	Total	Total
<b>CURRENT ASSETS</b>				
Cash	\$ -	\$ 419,438	\$ 419,438	\$ 687,722
Prepaid and reimbursable expenses	50,236	-	50,236	36,828
Investments	272,879	193,043	465,922	460,554
Accounts and rent receivable	9,982	-	9,982	14,323
Contributions and grants receivable, net of allowance for uncollectible contributions	-	3,575,081	3,575,081	3,619,219
2019 \$443,943; 2018 \$481,267	-	3,575,081	3,575,081	3,619,219
<i>Total current assets</i>	<u>333,097</u>	<u>4,187,562</u>	<u>4,520,659</u>	<u>4,818,646</u>
<b>OTHER ASSETS</b>				
Property and equipment, net	1,248,124	-	1,248,124	1,287,863
Investments - endowment	10,750	204,426	215,176	206,405
Beneficial interest in assets held by others	-	1,726,207	1,726,207	1,782,840
<i>Total other assets</i>	<u>1,258,874</u>	<u>1,930,633</u>	<u>3,189,507</u>	<u>3,277,108</u>
<i>Total assets</i>	<u>\$ 1,591,971</u>	<u>\$ 6,118,195</u>	<u>\$ 7,710,166</u>	<u>\$ 8,095,754</u>
<b>LIABILITIES AND NET ASSETS</b>				
<b>CURRENT LIABILITIES</b>				
Current maturities of long-term debt	\$ 12,843	\$ -	\$ 12,843	\$ 12,718
Allocations payable to partner agencies	1,483,094	-	1,483,094	1,888,376
Donor-designations payable	329,924	926,494	1,256,418	1,580,606
Accounts payable	78,726	-	78,726	115,575
Accrued expenses	160,097	-	160,097	130,522
Funds held for others	9,055	-	9,055	23,795
Deferred revenue - designation fees	86,362	-	86,362	48,450
<i>Total current liabilities</i>	<u>2,160,101</u>	<u>926,494</u>	<u>3,086,595</u>	<u>3,800,042</u>
<b>LONG-TERM DEBT, less current maturities</b>	<u>203,093</u>	<u>-</u>	<u>203,093</u>	<u>215,245</u>
<i>Total liabilities</i>	<u>2,363,194</u>	<u>926,494</u>	<u>3,289,688</u>	<u>4,015,287</u>
<b>COMMITMENTS (See Notes)</b>				
<b>NET ASSETS (DEFICIT):</b>				
Without donor/ time restrictions	(771,223)	-	(771,223)	(386,051)
With donor/ time restrictions (Note 9)	-	5,191,701	5,191,701	4,466,518
<i>Total net assets (deficit)</i>	<u>(771,223)</u>	<u>5,191,701</u>	<u>4,420,478</u>	<u>4,080,467</u>
<i>Total liabilities and net assets</i>	<u>\$ 1,591,971</u>	<u>\$ 6,118,195</u>	<u>\$ 7,710,166</u>	<u>\$ 8,095,754</u>

## GRANITE UNITED WAY

## STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS

Year ended March 31, 2019 with comparative totals for the year ended March 31, 2018

	2019			2018
	Without Donor/ Time Restrictions	With Donor/ Time Restrictions	Total	Total
Support and revenues:				
Campaign revenue:				
Total contributions pledged	\$ -	\$ 6,945,931	\$ 6,945,931	\$ 7,752,769
Less donor designations	-	(1,899,443)	(1,899,443)	(2,190,178)
Less provision for uncollectible pledges	-	(256,490)	(256,490)	(298,907)
Add prior years' excess provision for uncollectible pledges taken into income in current year	119,296	-	119,296	144,147
<i>Net campaign revenue</i>	119,296	4,789,998	4,909,294	5,407,831
Support:				
Grant revenue	-	1,230,089	1,230,089	1,201,326
Sponsors and other contributions	-	1,040,542	1,040,542	195,629
In-kind contributions	58,179	-	58,179	104,564
<i>Total support</i>	177,475	7,060,629	7,238,104	6,909,350
Other revenue:				
Rental income	73,548	-	73,548	87,535
Administrative fees	59,348	-	59,348	58,479
Miscellaneous income	3,871	-	3,871	569
Returned grants	69,110	-	69,110	86,667
<i>Total support and revenues</i>	383,352	7,060,629	7,443,981	7,142,600
Net assets released from restrictions:				
For satisfaction of time restrictions	4,250,661	(4,250,661)	-	-
For satisfaction of program restrictions	2,036,484	(2,036,484)	-	-
	6,670,497	773,484	7,443,981	7,142,600
Expenses:				
Program services	5,504,862	-	5,504,862	5,694,902
Support services:				
Management and general	773,240	-	773,240	586,313
Fundraising	867,290	-	867,290	959,177
<i>Total expenses</i>	7,145,392	-	7,145,392	7,240,392
<i>Increase (decrease) in net assets         before non-operating activities</i>	(474,895)	773,484	298,589	(97,792)
Non-operating activities:				
Change in value of beneficial interest in trusts, net of fees 2019 \$12,051; 2018 \$11,787	-	(56,633)	(56,633)	91,818
Realized and unrealized gains (losses) on investments	7,893	3,936	11,829	(5,677)
Investment income, net	81,830	4,396	86,226	94,176
<i>Total non-operating activities</i>	89,723	(48,301)	41,422	180,317
<i>Net increase (decrease) in net assets</i>	(385,172)	725,183	340,011	82,525
Net assets (deficit), beginning of year	(386,051)	4,466,518	4,080,467	3,997,942
<i>Net assets (deficit), end of year</i>	\$ (771,223)	\$ 5,191,701	\$ 4,420,478	\$ 4,080,467

## GRANITE UNITED WAY

## STATEMENT OF FUNCTIONAL EXPENSES

Year ended March 31, 2019 with comparative totals for the year ended March 31, 2018

	2019							
	Grants and awards	Salaries, employee benefits and taxes	Occupancy	Technology and telephone expenses	United Way Worldwide dues and other dues and subscriptions	Campaign, communications and printing	Professional services and subcontractors	de
Program services								
Community impact grants	\$ 1,568,039	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
Public Health Network	-	486,477	7,895	-	-	5,861	361,389	
211 New Hampshire	-	343,071	-	55,402	7,497	1,712	-	
Volunteer Income Tax Assistance	-	126,106	-	-	-	-	15,263	
Whole Village Family Resource Center	-	143,569	54,556	12,233	-	-	30,000	
Work United Program	-	176,763	-	-	-	-	-	
Other program services	-	1,069,157	105,573	73,007	61,512	28,851	350,449	
<i>Total program services</i>	<i>1,568,039</i>	<i>2,345,143</i>	<i>168,024</i>	<i>140,642</i>	<i>69,009</i>	<i>36,424</i>	<i>757,101</i>	
Supporting Services								
Management and general	-	615,513	27,709	19,162	16,145	-	45,508	
Fundraising	-	681,435	30,677	21,214	17,874	43,277	3,330	
<i>Total supporting services</i>	<i>-</i>	<i>1,296,948</i>	<i>58,386</i>	<i>40,376</i>	<i>34,019</i>	<i>43,277</i>	<i>48,838</i>	
<i>Total functional expenses</i>	<i>\$ 1,568,039</i>	<i>\$ 3,642,091</i>	<i>\$ 226,410</i>	<i>\$ 181,018</i>	<i>\$ 103,028</i>	<i>\$ 79,701</i>	<i>\$ 805,939</i>	

## GRANITE UNITED WAY

## STATEMENTS OF CASH FLOWS

Years Ended March 31, 2019 and 2018

	2019	2018
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Cash received from donors	\$ 7,984,041	\$ 7,858,294
Cash received from grantors	1,115,853	1,246,852
Administrative fees	58,555	62,683
Other cash received	150,870	171,469
Cash received from trusts	73,481	72,436
Designations paid	(2,223,631)	(2,093,989)
Net cash paid for funds held for others	(14,740)	(5,625)
Cash paid to agencies	(1,911,005)	(1,961,835)
Cash paid to suppliers, employees, and others	(5,468,487)	(5,010,079)
<i>Net cash provided by (used in) operating activities</i>	<u>(235,063)</u>	<u>340,206</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of property and equipment	(35,906)	(339,718)
Proceeds from sale of investments	14,712	13,345
Purchase of investments	-	(42,255)
<i>Net cash used in investing activities</i>	<u>(21,194)</u>	<u>(368,628)</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Repayments of long-term debt	(12,027)	(11,456)
<i>Net decrease in cash</i>	<u>(268,284)</u>	<u>(39,878)</u>
Cash, beginning of year	687,722	727,600
<i>Cash, end of year</i>	<u>\$ 419,438</u>	<u>\$ 687,722</u>
<b>SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION</b>		
Cash payments for:		
Interest expense	\$ 11,915	\$ 11,445



**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS*****Note 1. Nature of Activities***

Granite United Way is the result of six United Ways merging together to create a single, efficient organization that covers more than 80% of New Hampshire and Windsor County, Vermont. Granite United Way improve lives by mobilizing the caring power of their communities. More than fundraisers, Granite United Way is a partner in change, working with a broad range of people and organizations to identify and resolve pressing community issues. Granite United Way works closely with volunteer leadership to invest donor dollars to help the community learn, earn and be healthy. By focusing on these investment initiatives, Granite United Way is helping people in new and strategic ways.

Granite United Way conducts annual campaigns in the fall of each year to support hundreds of local programs, primarily in the subsequent year, while the State Employee Charitable Campaign, managed by Granite United Way, is conducted in May and June. Campaign contributions are used to support local health and human services programs, collaborations and to pay Granite United Way's operating expenses. Donors may designate their pledges to support a region of Granite United Way, a Community Impact area, other United Ways or to any health and human service organization having 501(c)(3) tax-exempt status. Amounts pledged to other United Ways or agencies are included in the total contributions pledged revenue and as designations expense. The related amounts receivable and payable are reported as an asset and liability in the statement of financial position. The net campaign results are reflected as with donor restrictions in the accompanying statement of activities and changes in net assets, as the amounts are to be collected in the following year. Prior year campaign results are reflected as net assets released from restrictions in the current year statement of activities and changes in net assets.

Granite United Way invests in the community through three different vehicles:

March 31,	2019	2018
Community Impact Awards to partner agencies	\$ 1,568,039	\$ 1,959,583
Donor designated gifts to Health and Human Service agencies	1,899,443	2,190,178
Granite United Way Program services	3,936,823	3,735,319
<i>Total</i>	<u>\$ 7,404,305</u>	<u>\$ 7,885,080</u>

***Note 2. Summary of Significant Accounting Policies***

**Basis of accounting:** The financial statements of Granite United Way (the "United Way") have been prepared on the accrual basis. Under the accrual basis, revenues and gains are recognized when earned and expenses and losses are recognized when incurred. The significant accounting policies followed are described below to enhance the usefulness of the financial statements to the reader.

**Estimates and assumptions:** The United Way prepares its financial statements in accordance with generally accepted accounting principles. Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenue and expenses. Accordingly, actual results could differ from those estimates.

(continued on next page)

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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**Cash and cash equivalents:** For purposes of reporting cash flows, the United Way considers all highly liquid debt instruments purchased with a maturity of three months or less to be cash equivalents. The United Way had no cash equivalents at March 31, 2019 and 2018.

**Net assets:** The United Way reports information regarding its financial position and activities according to two categories of net assets: net assets with donor restrictions and net assets without donor restrictions. Descriptions of these net asset categories are as follows:

*Net assets without donor/ time restrictions:* Net assets without donor restrictions are available for use at the discretion of the Board of Directors and/or management for general operating purposes. From time to time the Board of Directors designates a portion of these net assets for specific purposes which makes them unavailable for use at management's discretion. For example, the Board has designated a portion of net assets without donor restrictions as a quasi-endowment (an amount to be treated by management as if it were part of the donor restricted endowment) for the purpose of securing the United Way's long-term financial viability.

The United Way had designated net assets without donor restrictions of \$10,750 and \$10,311 for endowment at March 31, 2019 and 2018, respectively.

*Net assets with donor/ time restrictions:* Net assets with donor restrictions consist of assets whose use is limited by donor-imposed, time and/or purpose restrictions.

The United Way reports gifts of cash and other assets as revenue with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, the net assets are reclassified as net assets without donor restrictions and reported in the statement of activities and changes in net assets as net assets released from restrictions.

Some net assets with donor restrictions include a situation that assets provided be maintained permanently (perpetual in nature) while permitting the United Way to expend the income generated by the assets in accordance with the provisions of additional donor imposed stipulations or a Board approved spending policy.

See Notes 9 and 10 for more information on the composition of net assets with donor restrictions and the release of restrictions, respectively.

**Contributions receivable:** Campaign pledge contributions are generally paid within one year. The United Way provides an allowance for uncollectible pledges at the time campaign results are recorded. Provisions for uncollectible pledges have been recorded in the amount of \$256,490 and \$298,907 for the campaign years ended March 31, 2019 and 2018, respectively. The provision for uncollectible pledges was calculated at 4.5% of the total pledges for both years ended March 31, 2019 and 2018.

**Investments:** The United Way's investments in marketable equity securities and all debt securities are reported at their fair value based upon quoted market prices in the accompanying statement of financial position. Unrealized gains and losses are included in the changes in net assets in the accompanying statement of activities. The United Way's investments do not have a significant concentration of credit risk within any industry, geographic location, or specific location.

**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS**

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**Deferred revenue:** The United Way charged a 10% administrative fee on the State Campaign designations and 5% administrative fee on most other designations for both of the years ended March 31, 2019 and 2018.

These administrative fees are recognized in the post campaign years, as this is the year they are available to offset administrative expenses.

**Contributions:** The United Way recognizes contributions received and made, including unconditional promises to give, as revenue in the period received or made. Contributions received are reported as either revenues without donor restrictions or revenues with donor restrictions. Contributions with donor restrictions that are used for the purposes specified by the by the donor in the same year as the contribution is received are recognized as revenues with donor restrictions and are reclassified as net assets released from restrictions in the same year. Promises to contribute that stipulate conditions to be met before the contribution is made are not recorded until the conditions are met. There were no conditional promises to give for the years ended March 31, 2019 and 2018.

**Donated goods and services:** Contributed services are recognized when the services received would typically need to be purchased if they had not been provided by donation or require specialized skills and are provided by individuals possessing those skills. Various types of in-kind support, including services, call center space, gift certificates, materials and other items, amounting to \$58,179 and \$63,929 have been reflected at fair value in the financial statements for the years ended March 31, 2019 and 2018, respectively.

A substantial number of volunteers have donated significant amounts of their time in United Way's program services; however, the value of this contributed time is not reflected in the accompanying financial statements since the volunteers' time does not meet the criteria for recognition.

**Functional allocation of expenses:** The statements of functional expenses present expenses by function and natural classification. Expenses directly attributable to a specific functional area of the United Way are reported as expenses of those functional areas. A portion of general and administrative costs that benefit multiple functional areas (indirect costs) have been allocated across programs and other supporting services based on estimates of time and effort.

**Property and equipment:** Property and equipment are carried at cost if purchased and fair value if contributed. Maintenance, repairs and minor renewals are expensed as incurred, and major renewals and betterments are capitalized. The United Way capitalizes additions of property and equipment in excess of \$2,500.

Depreciation of property and equipment is computed using the straight-line method over the following useful lives:

	Years
Building and building improvements.....	5-31½
Leasehold improvements .....	15
Furniture and equipment .....	3-10

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## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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**Operating measure:** The United Way has presented the statement of activities and changes in net assets based on an intermediate measure of operations. The measure of operations includes all revenues and expenses that are an integral part of the United Way's programs and supporting activities and net assets released from restrictions to support operating activities. Non-operating activities are limited to resources outside of those program and services and are comprised of investment return, the changes in fair value of the beneficial interest in trusts, and gains and losses on sales and dispositions of assets.

**Concentrations of credit risk:** Financial instruments which potentially subject the United Way to concentrations of credit risk, consist primarily of contributions receivable, substantially all of which are from individuals, businesses, or not-for-profit organizations. Concentrations of credit risk are limited due to the large number of donors comprising the United Way's donor base. As a result, at March 31, 2019, the United Way does not consider itself to have any significant concentrations of credit risk with respect to contributions receivable.

In addition, the United Way maintains cash accounts with several financial institutions insured by the Federal Deposit Insurance Corporation up to \$250,000. At March 31, 2019, there was approximately \$141,200 included in cash in excess of federally insured limits.

**Income taxes:** The United Way is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. The United Way is also exempt from state income taxes by virtue of its ongoing exemption from federal income taxes. Accordingly, no provision for income taxes has been recorded in the accompanying financial statements.

The United Way has adopted the provisions of FASB ASC 740 Accounting for Uncertainty in Income Taxes. Accordingly, management has evaluated the United Way's tax positions and concluded the United Way had maintained its tax-exempt status, does not have any significant unrelated business income and had taken no uncertain tax positions that require adjustment or disclosure in the financial statements.

With few exceptions, the United Way is no longer subject to income tax examinations by the U.S. Federal or State tax authorities for tax years before 2016.

**Change in accounting principle:** In August 2016, the FASB issued ASU 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities* (Topic 958). The ASU amends the current reporting model for nonprofit organizations and enhances their required disclosures. The major changes include: (a) requiring the presentation of only two classes of net assets now entitled "net assets without donor restrictions" and "net assets with donor restrictions", (b) modifying the presentation of underwater endowment funds and related disclosures, (c) requiring the use of the placed in service approach to recognize the expiration of restrictions on gifts used to acquire or construct long-lived assets absent explicit donor stipulations otherwise, (d) requiring that all nonprofits present an analysis of expenses by function and nature and disclose a summary of the allocation methods used to allocate costs, (e) requiring the disclosure of quantitative and qualitative information regarding liquidity and availability of resources, (f) presenting investment return net of external and direct internal investment expenses, and (g) modifying other financial statement reporting requirements and disclosures intended to increase the usefulness of nonprofit financial statements.

(continued on next page)

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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The United Way has adopted this ASU for the year ended March 31, 2019 with retroactive application for the March 31, 2018 financial statements. As a result, the United Way changed its presentation of its net assets classes and expanded the footnote disclosures as required by the ASU. In addition, the investment expenses are netted against investment return in the statements of activities and changes in net assets. The United Way has opted to not disclose liquidity and availability information for March 31, 2018 as permitted under the ASU in the year of adoption.

**Recent accounting pronouncements:** In May 2014, the FASB issued, *Revenue from Contracts with Customers* (ASU 2014-09), which requires revenue to be recognized when promised goods or services are transferred to customers in amounts that reflect the consideration to which the United Way expects to be entitled in exchange for those goods and services. ASU 2014-09 will replace most existing revenue recognition guidance when it becomes effective on April 1, 2019. ASU 2014-09 permits the use of either the retrospective or cumulative effect transition method. Management is currently evaluating the impact this will have on its financial statements.

In February 2016, the FASB issued, *Leases, Topic 842* (ASU 2016-02), which will be effective for the United Way on April 1, 2020, with early adoption permitted. Under ASU 2016-02, at the commencement of a long-term lease, lessees will recognize a liability equivalent to the discounted payments due under the lease agreement, as well as an offsetting right-of-use asset. Lessees (for capital and operating leases) must apply a modified retrospective transition approach for leases existing at, or entered into after, the beginning of the earliest comparative period presented in the financial statements. The modified retrospective approach would not require any transition accounting for leases that expired before the earliest comparative period presented. Lessees may not apply a full retrospective transition approach. Management is currently evaluating the impact this will have on its financial statements.

#### **Note 3. Fair Value Measurements**

The Fair Value Measurements Topic of the FASB Accounting Standards Codification (FASB ASC 820-10) establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy are as follows:

- Level 1 - inputs are unadjusted, quoted prices in active markets for identical assets at the measurement date. The types of assets carried at Level 1 fair value generally are securities listed in active markets. The United Way has valued their investments listed on national exchanges at the last sales price as of the day of valuation.
- Level 2 - inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3 - inputs are generally unobservable and typically reflect management's estimates of assumptions that market participants would use in pricing the asset or liability. The fair values are therefore determined using model-based techniques that include option-pricing models, discounted cash flow models, and similar techniques.

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## GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS

Financial assets carried at fair value on a recurring basis consist of the following at March 31, 2019:

	Level 1	Level 2	Level 3
Money market funds	\$ 8,874	\$ 22,740	\$ -
Mutual funds:			
Domestic equity	66,002	-	-
Fixed income	248,672	-	-
Fixed income funds	171,086	7,207	-
Municipal bonds	-	10,200	-
Corporate bonds	-	146,380	-
Beneficial interest in assets held by others	-	-	1,726,207
<i>Total</i>	<u>\$ 494,634</u>	<u>\$ 186,527</u>	<u>\$ 1,726,207</u>

Financial assets carried at fair value on a recurring basis consist of the following at March 31, 2018:

	Level 1	Level 2	Level 3
Money market funds	\$ 132,068	\$ 22,280	\$ -
Mutual funds:			
Domestic equity	61,523	-	-
Fixed income	244,862	-	-
Fixed income funds	177,247	-	-
Municipal bonds	-	10,565	-
Corporate bonds	-	23,503	-
Beneficial interest in assets held by others	-	-	1,782,840
<i>Total</i>	<u>\$ 615,700</u>	<u>\$ 56,348</u>	<u>\$ 1,782,840</u>

	Beneficial interest in assets held by others
<i>Balance, April 1, 2017</i>	\$ 1,691,022
Total unrealized gains, net of fees, included in changes in net assets with donor restrictions	91,818
<i>Balance, March 31, 2018</i>	<u>\$ 1,782,840</u>
Total unrealized losses, net of fees, included in changes in net assets with donor restrictions	(56,633)
<i>Balance, March 31, 2019</i>	<u>\$ 1,726,207</u>
Amount of unrealized losses, net of fees, attributable to change in unrealized losses relating to assets still held at the reporting date included in the statement of activities and changes in net assets	<u>\$ (56,633)</u>

(continued on next page)

**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS**

All assets have been valued using a market approach, except for the beneficial interest in assets held by others, and have been consistently applied. The market approach uses prices and other relevant information generated by market transactions involving identical or comparable assets. Prices may be indicated by pricing guides, sales transactions, market trades, or other sources.

The beneficial interest in assets held by others is valued using the income approach. The value is determined by calculating the present value of future distributions expected to be received, which approximates the value of the trust's assets at March 31, 2019 and 2018.

GAAP requires disclosure of an estimate of fair value for certain financial instruments. The United Way's significant financial instruments include cash and other short-term assets and liabilities. For these financial instruments, carrying values approximate fair value.

***Note 4. Property and Equipment***

Property and equipment, at cost, at March 31,	2019	2018
Land, buildings and building improvements	\$ 1,424,521	\$ 1,403,441
Leasehold improvements	5,061	5,061
Furniture and equipment	452,679	437,854
<i>Total property and equipment</i>	<u>1,882,261</u>	<u>1,846,356</u>
Less accumulated depreciation	(634,137)	(558,493)
<i>Total property and equipment, net</i>	<u>\$ 1,248,124</u>	<u>\$ 1,287,863</u>

***Note 5. Endowment Funds Held by Others***

**Agency endowed funds:** The United Way is a beneficiary of various agency endowment funds at The New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing these funds, property contributed to The New Hampshire Charitable Foundation is held as separate funds designated for the benefit of the United Way.

In accordance with its spending policy, the Foundation may make distributions from the funds to the United Way. The distributions are approximately 4.0% of the market value of each fund per year.

The estimated value of the future distributions from the funds is included in these financial statements as required by FASB ASC 958-605, however, all property in the fund was contributed to The New Hampshire Charitable Foundation to be held and administered for the benefit of the United Way.

The United Way received \$69,042 and \$68,060 from the agency endowed funds during the years ended March 31, 2019 and 2018, respectively.

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## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

**Designated funds:** The United Way is also a beneficiary of two designated funds at The New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing these funds, property contributed to The New Hampshire Charitable Foundation is held as a separate fund designated for the benefit of the United Way. In accordance with its spending policy, the Foundation makes distributions from the funds to the United Way.

The distributions are approximately 4.0% of the market value of the fund per year. These funds are not included in these financial statements, since although all property in these funds was contributed to The New Hampshire Charitable Foundation to be held and administered for the benefit of the United Way, The New Hampshire Charitable Foundation may redirect funds to another organization.

The United Way received \$4,439 and \$4,376 from the designated funds during the year ended March 31, 2019 and 2018, respectively. The market value of these fund's assets amounted to approximately \$111,000 and \$114,600 as of March 31, 2019 and 2018, respectively.

#### Note 6. Long-term Debt

Long-term debt at March 31,	2019	2018
Mortgage financed with a local bank. Interest rate at the 5-year Federal Home Loan Classic Advance Rate plus 2.5% (4.82% at March 31, 2019). Due in monthly installments of principal and interest of \$1,908 through December, 2031. Collateralized by the United Way's building located in Plymouth, NH.	\$ 215,936	\$ 227,963
Less portion payable within one year	12,843	12,718
<i>Total long-term debt</i>	<u>\$ 203,093</u>	<u>\$ 215,245</u>

The scheduled maturities of long-term debt at March 31, 2019 were as follows:

<u>Year Ending March 31,</u>	
2020	\$ 12,843
2021	13,476
2022	14,140
2023	14,836
2024	15,568
Thereafter	145,073
<i>Total</i>	<u>\$ 215,936</u>

The mortgage note contains a financial covenant for debt service coverage, which is tested annually based on the year-end financial statements.

The United Way has a revolving line-of-credit with Citizen's Bank with a maximum borrowing limit of \$250,000. The line-of-credit is subject to annual review and renewal. The line-of-credit agreement bears interest equal to the Wall Street Journal prime rate plus 0.25% (5.75% as of March 31, 2019) and is secured by all assets of the United Way. At March 31, 2019, there were no amounts outstanding on this line-of-credit agreement.



**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS*****Note 7. Funds Held for Others***

The United Way held funds for others for the following projects:

March 31,	2019	2018
Sycamore Gardens Project	\$ -	\$ 15,814
Work United Loan Default Program	4,759	3,190
Concord Multicultural Festival	2,382	2,872
Get Moving Manchester	1,669	1,674
Better Together Lakes Region	245	245
<i>Total</i>	<u>\$ 9,055</u>	<u>\$ 23,795</u>

***Note 8. Endowment Funds***

The United Way's endowment consists of four individual funds established for youth programs, Whole Village Resource Center and general operating support. Its endowment includes both donor-restricted endowment funds and funds designated by the Board of Directors to function as endowments. As required by GAAP, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

*Interpretation of Relevant Law:* The United Way is subject to an enacted version of the Uniform Prudent Management of Institutional Funds Act (UPMIFA) and, thus, classifies amounts in its donor-restricted endowment funds as net assets with donor restrictions because those net assets are time restricted until the Board of Directors appropriates such amounts for expenditures. Most of those net assets are also subject to purpose restrictions that must be met before reclassifying those net assets to net assets without donor restrictions. The Board of Directors of the United Way has interpreted UPMIFA as not requiring the maintenance of purchasing power of the original gift amount contributed to an endowment fund, unless a donor stipulates the contrary.

As a result of this interpretation, when reviewing its donor-restricted endowment funds, the United Way considers a fund to be underwater if the fair value of the fund is less than the sum of (a) the original value of initial and subsequent gift amounts donated to the fund and (b) any accumulations to the fund that are required to be maintained in perpetuity in accordance with the direction of the applicable donor gift instrument. The United Way has interpreted UPMIFA to permit spending from underwater funds in accordance with the prudent measures required under the law. Additionally, in accordance with UPMIFA, the United Way considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the fund, (2) the purposes of the organization and the donor-restricted endowment fund, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of the organization, and (7) the investment policies of the United Way.

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## GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS

*Underwater Endowment Funds:* From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor or UPMIFA requires the United Way to retain as a fund of perpetual duration. The United Way did not have any funds with deficiencies for the years ended March 31, 2019 and 2018.

*Investment Return Objectives, Risk Parameters and Strategies:* The United Way has adopted investment policies, approved by the Board of Directors, for endowment assets for the long-term. The United Way seeks to achieve an after-cost total real rate of return, including investment income as well as capital appreciation, which exceeds the annual distribution with acceptable level of risk. Investment risk is measured in terms of the total endowment fund; investment assets and allocations between asset classes and strategies are managed to not expose the fund to unacceptable level of risk.

*Spending Policy:* The United Way does not currently have a spending policy for distributions each year as they strive to operate within a budget of their current Campaign's income. To date there have been no distributions from the endowment fund.

Endowment net asset composition by type of fund as of March 31, 2019 is as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Board-designated endowment	\$ 10,750	\$ -	\$ 10,750
Donor-restricted endowment funds:			
Original donor-restricted gift amount and amounts required to be maintained in perpetuity by donor	-	142,652	142,652
Accumulated investment gains	-	61,774	61,774
<i>Total funds</i>	<u>\$ 10,750</u>	<u>\$ 204,426</u>	<u>\$ 215,176</u>

Changes in the endowment net assets as of March 31, 2019 are as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Endowment net assets, March 31, 2018	\$ 10,311	\$ 196,094	\$ 206,405
Investment return, net	439	8,332	8,771
Endowment net assets, March 31, 2019	<u>\$ 10,750</u>	<u>\$ 204,426</u>	<u>\$ 215,176</u>

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**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS**

Endowment net asset composition by type of fund as of March 31, 2018 is as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Board-designated endowment	\$ 10,311	\$ -	\$ 10,311
Donor-restricted endowment funds:			
Original donor-restricted gift amount and amounts required to be maintained in perpetuity by donor	-	142,652	142,652
Accumulated investment gains	-	53,442	53,442
	<u>\$ 10,311</u>	<u>\$ 196,094</u>	<u>\$ 206,405</u>

Changes in the endowment net assets as of March 31, 2018 are as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Endowment net assets, March 31, 2017	\$ 9,792	\$ 146,083	\$ 155,875
Contributions	-	42,255	42,255
Investment return, net	519	7,756	8,275
Endowment net assets, March 31, 2018	<u>\$ 10,311</u>	<u>\$ 196,094</u>	<u>\$ 206,405</u>

***Note 9. Net Assets with Donor Restrictions***

Net assets with donor restrictions are restricted for the following purposes or periods:

March 31,	2019	2018
Subject to expenditure for specified time period:		
Contributions receivable related to campaigns	\$ 3,229,124	\$ 3,450,040
Designations payable to other agencies and United Ways	(926,494)	(1,159,651)
	<u>2,302,630</u>	<u>2,290,389</u>
Subject to expenditure for specified purpose:		
Manchester Proud	474,325	-
Public Health Network services	276,668	155,441
Leader in Me	172,500	-
L.E.A.D. Program	25,000	-
Work United	9,945	20,768
West Side Reads	-	19,413
Other programs	-	1,573
	<u>958,438</u>	<u>197,195</u>

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## GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS

March 31,	2019	2018
Endowments subject to the United Way's spending policy and appropriation:		
Investments in perpetuity (original amounts of \$142,652 in 2019 and 2018), which once appropriated, is expendable to support:		
General Operations	80,774	77,482
Youth Programs	24,636	23,632
Whole Village Resource Center	99,016	94,980
	<u>204,426</u>	<u>196,094</u>
Beneficial interest in assets held by others:		
Agency endowed funds at the New Hampshire Charitable Foundation	1,726,207	1,782,840
	<u>1,726,207</u>	<u>1,782,840</u>
<i>Total net assets with donor restrictions</i>	<u>\$ 5,191,701</u>	<u>\$ 4,466,518</u>

**Note 10. Net Assets Released from Donor Restrictions**

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by occurrence of the passage of time or other events specified by donors. The net assets released from restrictions are as follows:

March 31,	2019	2018
Purpose restrictions accomplished:		
Public Health Network services	\$ 964,089	\$ 1,094,084
211	363,894	273,160
Volunteer Income Tax Assistance	108,877	135,517
Manchester Proud	292,860	-
Work United	193,240	139,023
Bridge House and Whole Village Family Resource Center upgrades	-	267,822
Other program services	113,524	315,340
	<u>2,036,484</u>	<u>2,224,946</u>
Time restrictions expired	<u>4,250,661</u>	<u>4,832,648</u>
<i>Total net assets released from donor restrictions</i>	<u>\$ 6,287,145</u>	<u>\$ 7,057,594</u>

## GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS*Note 11. Liquidity and Availability of Resources*

The United Way's financial assets available within one year of the financial statements of financial position date for general expenditure are as follows:

March 31,	2019
Cash	\$ 419,438
Investments	681,098
Contributions receivable, net	3,575,081
Beneficial interest in trust	1,726,207
Accounts and rent receivable	9,982
<i>Total financial assets available within one year</i>	<u>6,411,806</u>
Less amounts unavailable for general expenditures within one year, due to:	
Restricted by donors with time or purpose restrictions	(958,438)
Subject to appropriation and satisfaction or donor restrictions	(204,426)
Agency endowed funds at the New Hampshire Charitable Foundation	(1,726,207)
<i>Total amounts unavailable for general expenditure within one year</i>	<u>(2,889,071)</u>
Amounts unavailable to management without Board's approval:	
Board designated endowment	(10,750)
<i>Total financial assets available to management for general expenditure within one year</i>	<u>\$ 3,511,985</u>

*Liquidity Management*

The United Way maintains a policy of structuring its financial assets to be available as its general expenditures, liabilities, and other obligations come due. To help manage unanticipated liquidity needs the United Way has committed a line of credit of \$250,000, which it could draw upon. Additionally, the United Way has board designated net assets without donor restrictions that, while the United Way does not intend to spend these for purposes other than those identified, the amounts could be made available for current operations, if necessary.

*Note 12. Pension Fund*

The United Way sponsors a tax-deferred annuity plan qualified under Section 403(b) of the Internal Revenue Code, whereby electing employees contribute a portion of their salaries to the plan. For the years ended March 31, 2019 and 2018, the United Way contributed \$92,128 and \$84,921, respectively, to employees participating in the plan.

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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#### *Note 13. Lease Commitments*

During the year ended March 31, 2018, the United Way entered into an operating lease agreement for a four year term commencing September 1, 2017 through August 31, 2021 for an office space in Concord, New Hampshire. The lease requires monthly payments of \$3,337 through August 31, 2018. The rent will then be increased by 3% annually on each anniversary date of the lease.

During the year ended March 31, 2017, the United Way entered into an operating lease agreement for a five year term commencing July 15, 2016 through June 30, 2021 for an office space in Manchester, New Hampshire. The lease requires monthly payments of \$5,905 through June 30, 2019. The rent will then be increased by 3% annually on each anniversary date of the lease.

During the year ended March 31, 2018, the United Way entered into an operating lease agreement for a one year term commencing January 15, 2018 through January 14, 2019 for an office space in Laconia, New Hampshire. The lease required monthly payments of \$425 through January 14, 2019. This lease was amended in January 2019 to extend the term until July 2019 and then terminate the lease.

During the year ended March 31, 2016, the United Way entered into an operating lease agreement for a three year term commencing September 1, 2015 through August 31, 2018 for an office space in West Lebanon, New Hampshire. The lease required monthly payments of \$1,425 through August 31, 2018.

During the year ended March 31, 2019, the United Way entered into an operating lease agreement for a five year term commencing on September 1, 2018 through August 31, 2023 for an office space in Lebanon, New Hampshire. The lease requires monthly payments of \$1,600 through August 31, 2019. The rent consists of two different payments, one for rent and another for common costs and charges. After August 31, 2019, the rent will increase each year depending on the consumer price index. After January 1, 2019, the common costs and charges increase each year depending on the United Way's proportionate share of these costs.

During the year ended March 31, 2019, the United Way entered into an operating lease agreement for a two year term commencing on January 1, 2019 through December 31, 2020 for an office space in Berlin, New Hampshire. The lease requires monthly payments of \$181 through December 31, 2019. After December 31, 2019, the monthly rent payment will increase to \$187 through December 31, 2020. The lease continues on a month to month basis after December 31, 2020.

Total rent expense for these leases amounted to approximately \$136,000 and \$143,000 for the years ended March 31, 2019 and 2018, respectively.

The United Way leases multiple copy machines under the terms of operating lease agreements. The monthly lease payments amount to \$2,044. The lease expenses amounted to approximately \$21,000 and \$2,000 for the years ended March 31, 2019 and 2018, respectively.

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**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS**

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The United Way's future minimum lease commitments are as follows:

<u>Year ending March, 31</u>	<u>Total</u>
2020	\$ 161,114
2021	161,234
2022	71,136
2023	33,420
2024	10,370
<i>Total</i>	<u>\$ 437,274</u>

***Note 14. Commitments.***

In Plymouth, the United Way rents space in a building which they own and occupy to twelve non-affiliated, non-profit organizations. The monthly lease payments range from \$125 to \$1,500 per month. For the years ended March 31, 2019 and 2018, the rental income amounted to \$73,548 and \$87,535, respectively.

***Note 15. Payment to Affiliated Organizations and Related Party***

The United Way paid dues to United Way of Worldwide. The United Way's dues paid to this affiliated organization aggregated \$86,779 and \$79,826 for the years ended March 31, 2019 and 2018, respectively.

***Note 16. Subsequent Events***

The United Way has evaluated subsequent events through August 15, 2019, the date which the financial statements were available to be issued and have not evaluated subsequent events after that date. Subsequent to year end, the United Way changed its fiscal year end to June 30. There were no other subsequent events that would require disclosure in financial statements for the year ended March 31, 2019.

**GRANITE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
MERRIMACK COUNTY REGION  
Year Ended March 31, 2019**

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	<b>Community Impact Awards</b>
Blueberry Express Day Care Center	\$ 30,000
Boys and Girls Clubs of Central New Hampshire:	
Broken Ground School Unit	5,000
Mill Brook School Unit	5,000
Concord Coalition to End Homelessness	18,000
Concord Family YMCA:	
Child Development Center	30,000
Kydstop-Camp	15,000
Easter Seals New Hampshire, Inc.	25,000
Merrimack Valley Day Care	90,000
NH Legal Assistance	50,000
NH Bar Association Pro Bono Referral Program	12,000
Penacook Community Center	12,396
Second Start:	
Second Start Alternative High School	10,000
Adult Education	10,000
The Friendly Kitchen	5,500
The Friends Program:	
Foster Grandparents	33,000
Emergency Housing	18,000
The Mayhew Program	10,000
The Pittsfield Youth Workshop	30,000
Tiny Twisters Child Care Center	7,500
Waypoint CFS Counseling Program	20,000
	<b>\$ 436,396</b>
	<b>Emerging Opportunity Grants</b>
Adverse Childhood Experiences Training	\$ 10,710
Boys and Girls Club of Central New Hampshire	55,000
Concord Cold Weather Shelter	10,000
	<b>\$ 75,710</b>



**GRANITE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
NORTH COUNTRY REGION  
Year Ended March 31, 2019**

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	<b>Community Impact Awards</b>
Adaptive Sports Partners of the North Country	\$ 6,500
Boys and Girls Club of the North Country	10,000
Copper Cannon Camp	6,000
Grafton County Senior Citizens:	
Accessible Transportation and Food	5,000
ServiceLink	3,700
Access to Enriching Environments for Older Adults	5,000
RSVP Bone Builders	5,191
NH Legal Assistance	5,000
Northern Human Services	5,000
The Family Resource Center	3,000
Tri-County Community Action Program:	
Support Center at Burch House	4,000
Tyler Blain House	5,000
Waypoint Parenting Transitional Living Program	5,000
	<u>\$ 68,391</u>
	<b>Emerging Opportunity Grants</b>
Organized Acts of Kindness	<u>\$ 2,271</u>

**GRANITE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
UPPER VALLEY REGION  
Year Ended March 31, 2019**

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	<b>Community Impact Awards</b>
Center on Rural Innovation	\$ 2,000
Child Care Center in Norwich	5,000
Copper Cannon Camp	1,000
Cover Home Repair	14,000
Dismas of Vermont	8,500
Global Campuses Foundation	4,500
Good Neighbor Health Care	
Good Neighbor Health Clinic	4,000
Red Logan Dental Clinic	6,000
Grafton County Senior Citizens Council	
Increasing Access to Enriching Environments for Older Adults	1,183
Meeting older adults' needs for accessible transportation and food	4,500
RSVP Bone Builders	4,000
ServiceLink	1,000
Green Mountain Children's Center	
Low to Moderate Income Scholarships	7,500
Work Force Development	3,500
Hartford Community Restorative Justice Center	
Restorative Justice Panel Program	8,300
Restorative Reentry Program	8,500
Headrest	5,000
HIV/HCV Resource Center	6,000
Mascoma Community Healthcare	8,000
Safeline	8,500
Second Wind Foundation	
Upper Valley Turning Point	8,000
Willow Grove	5,000
Senior Solutions (CASVT)	5,000
Southeastern Vermont Community Action	17,500
Special Needs Support Center of the Upper Valley	4,000

**GRANITE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
UPPER VALLEY REGION (CONTINUED)  
Year Ended March 31, 2019**

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	<b>Community Impact Awards (Continued)</b>
Springfield Family Center	\$ 3,215
Springfield Supported Housing Program	8,000
Stagecoach Transportation, a division of Tri-Valley Transit	1,000
The Children's Center of the Upper Valley	18,159
The Family Place	20,000
The Mayhew Program	4,000
TLC Family Resource Center	7,500
Twin Pines Housing Trust	
Expanding Supportive Services Program	9,000
SASH (Supports and Services at Home)	5,000
Upper Valley Haven	
Health/Food Services	10,000
Education/Shelter Services	8,500
Upper Valley Trails Alliance	1,000
Valley Court Diversion Programs	8,000
Visions for Creative Housing Solutions	6,387
Waypoint	
CFS Counseling Program-Upper Valley	6,887
Supervised Visitation and Exchange Program	8,500
West Central Behavioral Health	8,025
Willing Hands Enterprises	7,500
Windham & Windsor Housing Trust	9,000
Windsor Hospital Corporation	5,000
WISE	
Crisis and Advocacy Program	8,500
Emergency Shelter and Supportive Housing	2,104
Prevention and Education Program	7,500
Zack's Place Vermont	2,500
	<hr/>
	\$ 325,760

**GRANITE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
SOUTHERN REGION  
Year Ended March 31, 2019**

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	<b>Community Impact Awards</b>
Easter Seals New Hampshire, Inc.	\$ 22,000
Girls Incorporated of New Hampshire	10,000
Manchester Community Resource Center, Inc.	10,000
Manchester Neighborhood Health Improvement Strategy	325,000
New Hampshire Legal Assistance	15,000
NHBA Pro Bono Referral Program	12,000
Rockingham Nutrition and Meals on Wheels Program	12,000
St. Joseph Community Services, Inc.	25,461
The Mayhew Program	10,000
The Upper Room	
Adolescent Wellness Program	12,000
Greater Derry Juvenile Diversion Program	15,000
Waypoint	10,000
YWCA	22,000
	<u>\$ 500,461</u>

**GRANTE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
NORTHERN REGION  
Year Ended March 31, 2019**

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	<b>Community Impact Awards</b>
Bethany Christian Services	\$ 3,000
Coos County Family Health Services, Inc.	2,500
Copper Cannon Camp	2,500
Harvest Christian Fellowship:	
Community Café	3,936
Feeding Hope Food Pantry	4,000
Helping Hands North, Inc.	3,500
Memorial Hospital, Women's Health	2,500
North Conway Community Center	2,000
North Country Community Recreation Center	2,500
Northern Human Services	4,000
The Family Resource Center at Gorham	2,500
Tri-County Community Action Program	
Coos Service Link Resource Center	1,000
RSVP Program	1,000
Senior Meals of Coos County	1,000
	<u>\$ 35,936</u>
	<b>Emerging Opportunity Grants</b>
Coos County Family Health Services, Inc.	\$ 500
Harvest Christian Fellowship	500
UNH Cooperative Extension	464
	<u>\$ 1,464</u>

**GRANITE UNITED WAY**

**SUPPLEMENTARY SCHEDULE OF COMMUNITY IMPACT AWARDS TO QUALIFIED  
PARTNER AGENCIES AND EMERGING OPPORTUNITY GRANTS  
CENTRAL REGION  
Year Ended March 31, 2019**

---

	<b>Community Impact Awards</b>
Boys and Girls Clubs of Central New Hampshire	\$ 15,000
Health First Family Care Center	10,000
Kingswood Youth Center	4,500
Lakes Region Child Care Services	30,000
Lakes Region Community Developers	10,000
Lakes Region Community Services	10,900
Lakes Region Mental Health Center	20,000
New Beginnings Without Violence and Abuse	10,000
Pemi Youth Center	4,500
The Circle Program	6,750
	<hr/>
	<b>\$ 121,650</b>
	<hr/>

GRANTTE UNITED WAY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

Year Ended March 31, 2019

Federal Grantor Pass-through Grantor Program Title	Pass-through Entity Identifying Number	Federal CFDA Number	Federal Expenditures	Expenditures to Subrecipients
<b>Regional Public Health Network Services Cluster</b>				
<u><b>U.S. Department of Health and Human Services</b></u>				
State of N.H. Department of Health and Human Services - South Central Public Health Network				
Block Grants for Prevention and Treatment of Substance Abuse	05-95-92-920510-3380	93.959	\$ 86,813	\$ 73,733
Hospital Preparedness Program & Public Health Emergency Preparedness Aligned Coop Agreements	05-95-90-902510-7545	93.074	87,750	79,726
Preventive Health and Health Services Block Grant	05-95-90-901010-5362	93.758	25,243	25,243
Young Adult Leadership Program	05-95-92-920510-3395	93.243	20,919	12,000
Young Adult Substance Misuse Prevention Strategies	05-95-92-920510-3395	93.243	55,861	49,456
<i>Total State of N.H. Department of Health and Human Services - South Central Public Health Network</i>			276,586	240,158
State of N.H. Department of Health and Human Services - Capital Area Public Health Network				
Block Grants for Prevention and Treatment of Substance Abuse	05-95-92-920510-3380	93.959	88,236	-
Hospital Preparedness Program & Public Health Emergency Preparedness Aligned Coop Agreements	05-95-90-902510-7545	93.074	83,420	-
Preventive Health and Health Services Block Grant	05-95-90-901010-5362	93.758	27,671	-
Immunization Cooperative Agreements	05-95-90-902510-5178	93.268	9,730	1,411
Young Adult Leadership Program	05-95-92-920510-3395	93.243	18,901	12,000
Young Adult Substance Misuse Prevention Strategies	05-95-92-920510-3395	93.243	64,004	54,091
<i>Total State of N.H. Department of Health and Human Services - Capital Area Public Health Network</i>			291,962	67,502
State of N.H. Department of Health and Human Services - Carroll County Coalition for Public Health				
Block Grants for Prevention and Treatment of Substance Abuse	05-95-92-920510-3380	93.959	98,616	-
Hospital Preparedness Program & Public Health Emergency Preparedness Aligned Coop Agreements	05-95-90-902510-7545	93.074	72,264	-
Preventive Health and Health Services Block Grant	05-95-90-901010-5362	93.758	33,948	-
Immunization Cooperative Agreements	05-95-90-902510-5178	93.268	10,269	5,260
Young Adult Leadership Program	05-95-92-920510-3395	93.243	20,389	12,000
Young Adult Substance Misuse Prevention Strategies	05-95-92-920510-3395	93.243	31,931	-
<i>Total State of N.H. Department of Health and Human Services - Carroll County Coalition for Public Health</i>			267,417	17,260
<i>Total Regional Public Health Network Services Cluster</i>			835,965	324,920
<u><b>U.S. Internal Revenue Services</b></u>				
Department of the Treasury				
Volunteer Income Tax Assistance (VITA) Matching Grant Program		21.009	45,971	-
<u><b>U.S. Department of Health and Human Services</b></u>				
State of N.H. Division for Behavioral Health, Bureau of Drug and Alcohol Services				
State Opioid Response Grant		97.067	98,572	-
<i>Total Expenditures of Federal Awards</i>			\$ 980,508	\$ 324,920

The accompanying notes are an integral part of this schedule.

## GRANITE UNITED WAY

### NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

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#### ***Note 1. Basis of Presentation***

The Schedule of Expenditures of Federal Awards ("the Schedule") includes the federal grant activity of Granite United Way ("the United Way"), under programs of the federal government for the year ended March 31, 2019. The information in this schedule is presented in accordance with the requirements of the Office of Management and Budget (OMB) *Uniform Guidance*. Because the schedule presents only a selected portion of the operations of the United Way, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the United Way.

#### ***Note 2. Basis of Accounting***

This schedule is prepared on the same basis of accounting as the United Way's financial statements. The United Way uses the accrual basis of accounting. Expenditures represent only the federally funded portions of the program. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.

#### ***Note 3. Program Costs***

The amounts shown as current year expenditures represent only the federal grant portion of the program costs. Entire program costs could be more than shown. Such expenditures are recognized following, as applicable, either the cost principles in the OMB Circular A-122, Cost Principles for Non-Profit Organizations, or the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

#### ***Note 4. Major Programs***

In accordance with OMB Uniform Guidance, major programs are determined using a risk-based approach. Programs in the accompanying Schedule are determined by the independent auditor to be major programs.

#### ***Note 5. Indirect Cost Rate***

The amount expended includes \$44,026 claimed as an indirect cost recovery using an approved indirect cost rate of 5-percent. The United Way has not elected to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.





**NATHAN WECHSLER & COMPANY**  
**PROFESSIONAL ASSOCIATION**  
**CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS ADVISORS**

**REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON  
COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL  
STATEMENTS PERFORMED IN ACCORDANCE WITH  
GOVERNMENT AUDITING STANDARDS**

To the Board of Directors  
Granite United Way  
Manchester, New Hampshire 03101

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of Granite United Way as of and for the year ended March 31, 2019, and the related notes to the financial statements, which collectively comprise Granite United Way's basic financial statements, and have issued our report thereon dated August 15, 2019.

***Internal Control over Financial Reporting***

In planning and performing our audit of the financial statements, we considered Granite United Way's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Granite United Way's internal control. Accordingly, we do not express an opinion on the effectiveness of Granite United Way's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

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### *Compliance and Other Matters*

As part of obtaining reasonable assurance about whether Granite United Way's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion.

### *Purpose of this Report*

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Nathan Wechsler & Company*

Concord, New Hampshire  
August 15, 2019



**NATHAN WECHSLER & COMPANY**  
**PROFESSIONAL ASSOCIATION**  
**CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS ADVISORS**

**REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND REPORT ON  
INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM  
GUIDANCE**

**INDEPENDENT AUDITOR'S REPORT**

To the Board of Directors  
Granite United Way  
Manchester, New Hampshire 03101

***Report on Compliance for Each Major Federal Program***

We have audited Granite United Way's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Granite United Way's major federal programs for the year ended March 31, 2019. Granite United Way's major federal programs are identified in the summary of auditor's results section of the accompanying Schedule of Findings and Questioned Costs.

***Management's Responsibility***

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

***Auditor's Responsibility***

Our responsibility is to express an opinion on compliance for each of Granite United Way's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Granite United Way's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of Granite United Way's compliance.

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70 Commercial Street, 4th Floor  
Concord, NH 03301

v: 603-224-5357  
f: 603-224-3792

59 Emerald Street  
Keene, NH 03431

v: 603-357-7665  
f: 603-224-3792

44 School Street  
Lebanon, NH 03766

v: 603-448-2650  
f: 603-448-2476

### ***Opinion on Each Major Federal Program***

In our opinion, Granite United Way complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended March 31, 2019.

### ***Other Matters***

The results of our auditing procedures disclosed an instance of noncompliance which is required to be reported in accordance with the Uniform Guidance and which is described in the accompanying Schedule of Findings and Questioned Costs as item 2019-001. Our opinion of each major federal program is not modified with respect to this matter.

Granite United Way's response to the noncompliance finding identified in our audit is described in the accompanying Schedule of Findings and Questioned Costs. Granite United Way's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

### ***Report on Internal Control over Compliance***

Management of Granite United Way is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Granite United Way's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Granite United Way's internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, we identified a certain deficiency in internal control over compliance described in the accompanying Schedule of Findings and Questioned Costs as item 2019-001, which we consider to be a significant deficiency.

Granite United Way's response to the internal control over compliance finding identified in our audit is described in the accompanying Schedule of Findings and Questioned Costs. Granite United Way's

response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

*Nathan Wechsler, Company*

Concord, New Hampshire

August 15, 2019

**GRANITE UNITED WAY  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
(UNIFORM GUIDANCE)  
YEAR ENDED MARCH 31, 2019**

**Section I: Summary of Auditor's Results**

***Financial Statements***

Type of auditor's report issued: *unmodified*

Internal control over financial reporting:

Are any material weaknesses identified?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are any significant deficiencies identified?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> None Reported
Is any noncompliance material to financial statement noted?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

***Federal Awards***

Internal control over major federal programs:

Are any material weaknesses identified?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are any significant deficiencies identified?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> None Reported
Type of auditor's report issued on compliance for major federal programs:	<i>unmodified</i>	
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Identification of major federal programs:		
CFDA Numbers	Name of federal program or cluster	
	Regional Public Health Network Services Cluster	
93.959 - Block Grants for Prevention and Treatment of Substance Abuse		
93.074 - Hospital Preparedness Program and Public Health Emergency Preparedness Aligned Cooperative Agreements		
93.069- Public Health Emergency Preparedness		
93.758 - Preventive Health and Health Services Block Grant		
93.243 - Substance Abuse and Mental Health Services		
93.268 - Immunization Cooperative Agreements		
Dollar threshold used to distinguish between type A and type B programs:	\$750,000	
Auditee qualified as a low-risk auditee?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

**GRANITE UNITED WAY  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
(UNIFORM GUIDANCE)  
YEAR ENDED MARCH 31, 2019**

**Section II - Financial Statement Findings**

No financial statement findings noted.

**Section III - Federal Awards Findings**

**Finding 2019-001:**

*Information on the Federal Program*

Cluster: Regional Public Health Network Services Cluster

Pass-Through Entity: Various (see page 30)

Award Number: Various (see page 30)

Compliance Requirements: Subrecipient Monitoring

Type of Finding: Significant Deficiency - Noncompliance

*Criteria*

Program requirements state that expenditures by subrecipients must be reviewed and monitored by the grantee.

*Condition*

For the year ended March 31, 2019, we reviewed a selection of subrecipient expenditures and reimbursement requests and noted that supporting documentation was not being monitored by Granite United Way during the first half of the fiscal year.

*Questioned Costs*

None noted.

*Context*

Of the seven selections tested, four did not have evidence supporting the monitoring activities were taking place.

*Effect*

As a result, Granite United Way could not provide support that they were actively monitoring the expenditures and activities performed by the subrecipients.

*Cause*

Subrecipients provided summaries of expenses and would provide support if requested, however Granite United Way did not request supporting documentation until halfway through the fiscal year when they were made aware they needed to monitor subrecipients more closely.

*Recommendation*

We recommend management obtain detailed supporting documentation for each expenditure from subrecipients. We also recommend that management ensure they are in compliance with other subrecipient monitoring processes such as performing pre-award risk assessments at the time of each award, obtaining audit reports and audit communication letters and following up on any related audit findings or issues.

**GRANITE UNITED WAY  
SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
(UNIFORM GUIDANCE)  
YEAR ENDED MARCH 31, 2019**

*Responsible Officials Response and Corrective Action Planned*

Management implemented a process during the year in which they are collecting all required documentation from each subrecipient and closely monitoring their activities. Prior to the implementation of this procedure, the supporting documentation was available to management by request. Management was not aware they were required to review supporting documentation for each expenditure. Beginning during the second half of the year, management has been reviewing detailed documentation.

*Planned Implementation Date of Corrective Action*

Already implemented.

*Person Responsible for Corrective Action*

Shannon Bresaw



Granite United Way



## 2020 Board of Directors

BOARD MEMBER	ADDRESS	PHONE/ CELL / FAX / E-MAIL
Dr. Larissa Baia President, Regional College Dept.  Assistant: Liz Lawson	Lakes Region Community College 379 Belmont Road Laconia, NH 03246	[REDACTED]
Joseph Bator	Primary Bank 207 Route 101 Bedford, NH 03110	[REDACTED]
William D. Bedor, CPA (Bill)  <i>Secretary North Country Campaign Chair &amp; Community Impact Chair</i>	Creative Financial Strategies, Inc. PO Box 350 Littleton, NH 03561	[REDACTED]
Kathleen Bizarro-Thunberg (Kathy) Executive Vice President	NH Hospital Association 125 Airport Road Concord, NH 03301	[REDACTED]
Joseph Carelli President of NH and VT  Assistant: Mary Charron	Citizen's Bank 900 Elm Street, NE 1540 Manchester, NH 03101	[REDACTED]
Jason Cole General Counsel  Assistant: Lee Moriarty	Catholic Medical Center 100 McGregor Street Manchester, NH 03102	[REDACTED]
Michael Delahanty Superintendent of Schools  Assistant: Patty Scanlan	Salem School District 38 Geremonty Drive Salem, NH 03079	[REDACTED]
Doug deLara	Baker   Newman   Noyes 650 Elm Street Suite 302 Manchester, NH 03101	[REDACTED]

Granite United Way

LIVE UNITED



## 2020 Board of Directors

BOARD MEMBER	ADDRESS	PHONE/ CELL / FAX / E-MAIL
Patricia Donahue		
Chris Emond Executive Director	Boys & Girls Club of Central New Hampshire 876 No. Main St. Laconia, NH 03246	
Paul Falvey President  Assistant: Maggie Bartholomew	Bank of New Hampshire 62 Pleasant Street Laconia, NH 03246	
Marlene Hammond Underwriting Account Executive	Lincoln Financial Group One Granite Place Concord, NH 03301	
Charles Head (Charlie) President & CEO	Sanborn, Head & Associates, Inc. 20 Foundry Street Concord, NH 03301	
Joseph Kenney Senior Vice President, Commercial Lending Officer  Assistant: Linda O'Donnell	The Provident Bank 115 So. River Road Bedford, NH 03110	
Sally Kraft Vice President, Community Health, Population Health Management Div. Assistant: Brittany Goodwin	Dartmouth Hitchcock Medical Center 46 Centerra Parkway Lebanon, NH 03766	

Granite United Way

## 2020 Board of Directors



BOARD MEMBER	ADDRESS	PHONE/FAX/CELL/EMAIL
Christina Lachance Director of Early Childhood and Family Initiatives  Assistant: Hannah Robinson	NH Charitable Foundation 37 Pleasant Street Concord, NH 03301	[REDACTED]
Heather Staples Lavoie President <i>Chair</i>	Geneia 50 Commercial Street Manchester, NH 03101	[REDACTED]
Dr. Chuck Lloyd		[REDACTED]
Carolyn Maloney Treasurer	Hypertherm P.O. Box 5010 Hanover, NH 03755	[REDACTED]
Lawrence Major (Larry) Director of Government Relations	Pike Industries, Inc. 3 Eastgate Park Road Belmont, NH 03307	[REDACTED]
Paul Mertzic	Network 4 Health 401 Cypress Street Manchester, NH 03103	[REDACTED]
Nannu Nobis CEO	Nobis Engineering 18 Chenell Drive Concord, NH 03301	[REDACTED]

Granite United Way



## 2020 Board of Directors

BOARD MEMBER	ADDRESS	PHONE/FAX/CELL/EMAIL
<b>Sean Owen</b> President & CEO <i>Immediate Past Chair</i> <i>GUW Marketing Chair</i>  Assistant:	Wedü 20 Market Street Manchester, NH 03101	
<b>Joseph Purington (Joe)</b> Vice President NH Electric Field Operations  Assistant: Roxanne Parkhurst	Eversource Energy 780 No. Commercial Street Manchester, NH 03101	
<b>Beth Rattigan</b> Attorney  <i>Upper Valley CIC Chair</i>	Downs Rachlin Martin 67 Etna Road Lebanon, NH 03766	
<b>Peter Rayno</b> Executive Vice President/NH Banking & Lending Director	Enterprise Bank 130 Main Street Salem, NH 03079	
<b>Betsey Rhynhart</b> Vice President of Population Health	Concord Hospital 250 Pleasant Street Concord, NH 03301	
<b>Jeffery Savage (Jeff)</b> Community Volunteer	P.O. Box 2104 Concord, NH 03302	
<b>Bill Sherry</b> Chief Operating Officer  Assistant: Kathy Scanlon	Granite United Way 22 Concord Street Manchester, NH 03010	
<b>Anthony Speller (Tony)</b> Senior Vice President, Engineering and Technical Operations  <i>First Vice Chair</i>  Assistant: Robin Wright	Comcast 676 Island Pond Road Manchester, NH 03109	

Granite United Way

## 2020 Board of Directors

LIVE UNITED



BOARD MEMBER	ADDRESS	PHONE/FAX/CELL/EMAIL
Charla Stevens Attorney	McLane, Middleton Law Firm 900 Elm Street, Floor 10 Manchester, NH 03101	[REDACTED]
Rodney Tenney (Rod) Community Volunteer	8 Hillside Road Concord, NH 03301	[REDACTED]
Anna Thomas Public Health Director  <i>Southern Region CIC Chair</i>	Manchester Health Department 1528 Elm Street Manchester, NH 03101	[REDACTED]
Robert Tourigny Executive Director	NeighborWorks Southern NH 801 Elm Street, 2 <sup>nd</sup> Floor Manchester, NH 03101	[REDACTED]
Patrick Tufts President & CEO  Assistant: Jennifer Sabin	Granite United Way 22 Concord St, Floor 2 Manchester, NH 03101	[REDACTED]
Jeremy Veilleux Principal <i>Treasurer</i>	Baker   Newman   Noyes 650 Elm Street Suite 302 Manchester, NH 03101	[REDACTED]
Michael Wagner Chief Financial Officer  Assistant: Jen Hamilton	Dartmouth College 7 Lebanon Street, Suite 302 Hanover, NH 03755	[REDACTED]
Cass Walker (Catherine)  <i>Central Region CIC Chair</i>	LRGHealthcare 80 Highland Street Laconia, NH 03246	[REDACTED]

Updated: 1/21/2020



# SHANNON SWETT BRESAW, MSW

## EDUCATION

---

*Master of Social Work*

2002 – 2004

University of New Hampshire

Durham, NH

*Bachelor of Arts - Clinical Counseling Psychology*

1999 – 2002

Keene State College

Keene, NH

## EXPERIENCE

---




2007 - Present

Granite United Way

Concord, NH

*Vice President of Public Health*

### Accomplishments:

- Provides Program Director support for the NH Governor's Recovery Friendly Workplace initiative through program development, staff oversight, resource development, marketing/communications, and evaluation
  - Works to align and leverage Granite United Way investments and strategies with other statewide efforts to address public health, addiction, and social determinants of health
  - Provides content expertise and consultation in the areas of substance use disorders, public health, community development, contract management, grant writing, reporting, and evaluation
  - Develops and maintains strategic partnerships and relationships with key stakeholders across NH
  - Provides contract management and oversight to 3 out of the 13 Regional Public Health Networks in NH, including the Capital Area Public Health Network, the Carroll County Coalition for Public Health and the South Central Public Health Network
  - Provides direction and leadership towards achievement of each Network's philosophy, mission, strategic plans and goals, through: administration and support, program and service delivery, financial management, and community/public relations
  - Coordinates all aspects of federal, state, and local grants and contracts, including resource development/grant-writing, financial oversight and reporting
  - Develops community health improvement plans, evaluation plans, and other data-driven, research-informed strategic plans for the Networks
  - Works with community impact committees and volunteers through Granite 
- 
- 

2005 – 2007                      Community Response (CoRe) Coalition                      Belknap County, NH  
*Outreach Coordinator, Project Director*

**Accomplishments:**

- Provided leadership for a county-wide, regional alcohol, tobacco, and other drug abuse prevention coalition
- Strengthened capacity of coalition through outreach and collaboration, including partnerships with 10 community sectors, including government, schools, businesses, healthcare, and safety
- Coordinated all aspects of federal, state, and local grants, including financial oversight, progress reports, communications, and work plan goals, objectives, and activities
- Developed, coordinated, promoted, and implemented events, programs, and trainings for youth and adults
- Strengthened youth leadership and involvement in substance abuse prevention activities
- Supervised part-time staff, youth leaders, and volunteers

2004 – 2005                      Caring Community Network of the Twin Rivers (CCNTR)                      Franklin, NH  
*Community Program Specialist*

**Accomplishments:**

- Assisted in development of programming related to strengthening the public health infrastructure
- Recruited new participants to agency committees and projects
- Facilitated organizational collaboration, compiled research, and developed proposals to funding sources to address community needs
- Facilitated several ongoing committees
- Developed and maintained productive relationships with community and state leaders and agencies
- Participated in several trainings/seminars related to issues including substance abuse prevention, emergency preparedness, leadership, and public health infrastructure development
- Wrote numerous articles and press releases concerning community and public health

## **PROFESSIONAL ASSOCIATIONS**

---

- American Public Health Association: NH Affiliate Representative to the Governing Council 2018-Current
- NH Public Health Association: Board Member 2018-Current
- Prevention Task Force of the Governor's Commission (Co-Chair): 2017-Current
- NH Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery (Prevention Representative): 2016-2018
- NH Drug Overdose Fatality Review Committee (Prevention Representative): 2016-2018
- NH Alcohol and Other Drug Service Providers Association: Treasurer 2007-2011, 2014-2015
- NH Prevention Certification Board's Peer Review Committee: 2009-2011

**Mary Reed**

### **Professional Profile**

- Coalition Building
- Plan Development
- Resource Coordination
- Logistics
- Time management
- Budgeting
- Volunteer Management
- Grant/Proposal Writing
- Organization
- Leadership

### **Professional Accomplishments**

#### **Public Health**

- Provide direction and leadership towards achievement of the Public Health Regions' philosophy, mission, strategic plans and goals, through: administration and support, program and service delivery, financial management, human resource management, and community and public relations

#### **Regional Resource Coordination**

- Collected and disseminated data on available resources critical for response to public health emergency.
- Developed working relationship with stakeholders in Public Health Region.

#### **Public Health Coalition**

- Regional Public Health Emergency Response Annex development
- Resource Coordination and Development
- Healthcare Coalition Building
- Regional Partner Development
- Clinic Operation Development
- Medical reserve Corps Volunteer Management and Training
- Policy Development
- Team Building

#### **Captain of Operations**

- Developed staff and operational procedures for full time staff
  - Oversee Training Program
  - Facilitate QA/QI
  - Facilitated and maintained data entry system and procedures for all of Fire departments operations and patient tracking
  - Created Personnel Manual and operational guidelines
  - Secured grant funding
  - Volunteer Management
-



## Work History

Assistant Vice President of Public Health	Granite United Way	2018- present
Senior Director of Public Health	Granite United Way	2016 -2018
Public Health Region Emergency Preparedness Director	Capital Area Public Health Network / GUW Concord NH	2013 - 2016
Executive Director	Carroll County Coalition for Public Health, Ossipee NH	2011 - 2013
Preparedness Planner	Capital Area Public Health Network/Concord Hospital, Concord NH	2009 - 2011
Regional Resource Coordinator	New England Center for Emergency Preparedness/ Dartmouth College, Lebanon NH	2009
Captain of Operations	Barnstead Fire Rescue, Barnstead NH	2001-2010

## Certifications

- Institute for Local Public Health Practices
- Local Government Leadership Institute
- Antioch New England Institute
- DHHS Inventory Management System Training
- FEMA 29, 100, 120.a, 130, 200, 244, 250, 250.7, 300, 546.12, 547a, 700, 701, 702a, 704, 800.B, 806, 808
- Department of Homeland Security Exercise and Evaluation Program (HSEEP)
- CDC SNS/ Mass Dispensing Course, Atlanta GA
- ICS, WebEOC, SNS 101
- HAZMAT Awareness and Operations
- CPR, Blood borne Pathogens
- EMS Field Training Officer
- Fire Fighter C2F2
- Amateur Radio Operator – General Class
- STEP program instructor, Are You Ready instructor

**Granite United Way****Key Personnel**

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Shannon Bresaw	Vice President of Public Health	\$55.13/hr	0%	\$0
Mary Reed	Assistant Vice President of Public Health	\$41.05/hr	25%	\$20,011.88
Lauren McGinley	Sr. Director of Public Health	\$32.30/hr	15%	\$9,450.00

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Greater Seacoast Community Health, (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 311 Route 108 Somersworth, NH 03878.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YYYY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$818,300.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-13, Young Adult Strategies, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-13, Young Adult Strategies, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

Greater Seacoast Community Health

Amendment #5

Contractor Initials

DS  
N



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/19/2020

Date

DocuSigned by:

*Lisa M. Morris*

0838DBFB8CA54A0...

Name: Lisa M. Morris

Title: Director, Division of Public Health Svcs.

Greater Seacoast Community Health

DocuSigned by:

*Janet Laatsch*

487F476002C74E0...

Name: Janet Laatsch

Title: CEO

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

**OFFICE OF THE ATTORNEY GENERAL**

11/23/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "C. Pinos", enclosed within a rectangular box.

D5CA8202E32C4AE

Name: Catherine Pinos

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:

Vendor Name: Greater Seacoast Community Health  
Contract Name: Regional Public Health Network Services  
Region: Strafford County

Program Name and Funding Amounts

State Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps Activities	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00
2020		\$ 30,000.00	\$ 92,560.00	\$ 900,000.00	\$ 10,000.00	\$ 67,380.00	\$ 45,634.00	\$ 105,912.00	\$ 15,000.00	\$ 11,962.00	\$ 10,000.00
2021	\$10,000	\$ 30,000.00	\$ 92,560.00	\$ -	\$ 10,000.00	\$ 67,380.00	\$ 45,634.00	\$ 80,000.00	\$ 15,000.00	\$ 8,018.00	\$ -
Total											\$ 816,300.00

## Exhibit B-13 Budget - Amendment #5

New Hampshire Department of Health and Human Services									
Bidder/Program Name: Greater Seacoast Community Health									
Budget Request for: Young Adult Strategies									
Budget Period: July 1, 2020 to June 30, 2021									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 29,739.60	\$ -	\$ 29,739.60	\$ -	\$ -	\$ -	\$ 29,739.60	\$ -	\$ 29,739.60
2. Employee Benefits	\$ 5,650.52	\$ -	\$ 5,650.52	\$ -	\$ -	\$ -	\$ 5,650.52	\$ -	\$ 5,650.52
3. Consultants	\$ 6,500.00	\$ -	\$ 6,500.00	\$ -	\$ -	\$ -	\$ 6,500.00	\$ -	\$ 6,500.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ 7,000.00	\$ -	\$ 7,000.00	\$ -	\$ -	\$ -	\$ 7,000.00	\$ -	\$ 7,000.00
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1,831.32	\$ -	\$ 1,831.32	\$ -	\$ -	\$ -	\$ 1,831.32	\$ -	\$ 1,831.32
6. Travel	\$ 1,292.44	\$ -	\$ 1,292.44	\$ -	\$ -	\$ -	\$ 1,292.44	\$ -	\$ 1,292.44
7. Occupancy	\$ 606.12	\$ -	\$ 606.12	\$ -	\$ -	\$ -	\$ 606.12	\$ -	\$ 606.12
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 300.00	\$ -	\$ 300.00	\$ -	\$ -	\$ -	\$ 300.00	\$ -	\$ 300.00
Subscriptions	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 8,000.00	\$ -	\$ 8,000.00	\$ -	\$ -	\$ -	\$ 8,000.00	\$ -	\$ 8,000.00
11. Staff Education and Training	\$ 28,980.00	\$ -	\$ 28,980.00	\$ -	\$ -	\$ -	\$ 28,980.00	\$ -	\$ 28,980.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Translator	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 90,000.00</b>	<b>\$ -</b>	<b>\$ 90,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 90,000.00</b>	<b>\$ -</b>	<b>\$ 90,000.00</b>

Indirect As A Percent of Direct

0.0%

Exhibit B-13 Budget - Amendment #5  
 Greater Seacoast Community Health  
 SS-2019-DPHS-28-REGION-05-A05

Contractor Initials 

Date 11/19/2020

# State of New Hampshire

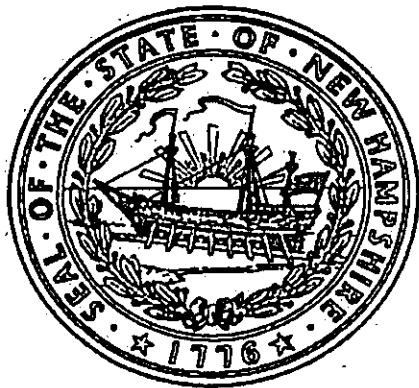
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GREATER SEACOAST COMMUNITY HEALTH is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on August 18, 1971. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 65587

Certificate Number: 0005024761



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 October A.D. 2020.

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

William M. Gardner  
Secretary of State



**CERTIFICATE OF VOTE**

I, Barbara Henry, of Greater Seacoast Community Health, do hereby certify that:

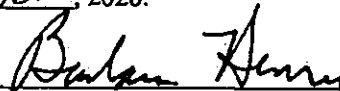
1. I am the duly elected Board Chair of Greater Seacoast Community Health;
2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of Greater Seacoast Community Health, duly held on January 27, 2020;

Resolved: That this corporation enter into a contract with the State of New Hampshire, acting through its Department of Health and Human Services for the provision of Public Health Services.

Resolved: That the Chief Executive Officer, Janet Laatsch, is hereby authorized on behalf of this Corporation to enter into the 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.

3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of Sept. 30<sup>th</sup>, 2020.


IN WITNESS WHEREOF, I have hereunto set my hand as the Board Chair of Greater Seacoast Community Health this 30<sup>th</sup> day of September, 2020.

  
Barbara Henry, Board Chair

STATE OF NH

COUNTY OF STRAFFORD

The foregoing instrument was acknowledged before me this 30 day of September, 2020 by Barbara Henry.

  
**JO ANN CLEMENT**  
NOTARY PUBLIC  
State of New Hampshire  
My Commission Expires  
June 19, 2024

Notary Public/Justice of the Peace

My Commission Expires: June 19, 2024

**CERTIFICATE OF VOTE**

I, Barbara Henry, of Greater Seacoast Community Health, do hereby certify that:

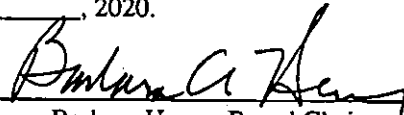
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3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of \_\_\_\_\_, 2020.

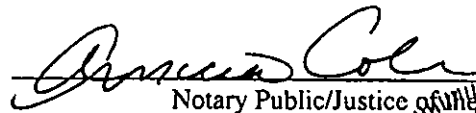
IN WITNESS WHEREOF, I have hereunto set my hand as the Board Chair of Greater Seacoast Community Health this \_\_\_\_\_ day of \_\_\_\_\_, 2020.

  
Barbara Henry, Board Chair

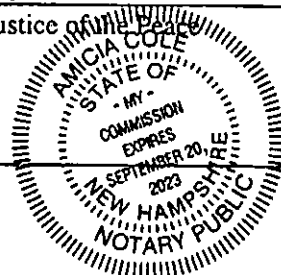
STATE OF NH

COUNTY OF STRAFFORD

The foregoing instrument was acknowledged before me this 2<sup>nd</sup> day of Nov., 2020 by Barbara Henry.

  
Notary Public/Justice of the Peace

My Commission Expires: \_\_\_\_\_



GOODCOM-01

JTHAMM



# CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)  
 1/10/2020

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b> License # AGR8150 Clark Insurance One Sundial Ave Suite 302N Manchester, NH 03103		<b>CONTACT</b> Bret Cote NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: bcote@clarkinsurance.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Tri-State Insurance Company of Minnesota	
		<b>INSURER B:</b> Acadia	
		<b>INSURER C:</b> Technology Insurance Company	
		<b>INSURER D:</b> AIX Specialty Insurance Co	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

**INSURED**  
 Greater Seacoast Community Health, Inc.  
 dba Goodwin Community Health, Families First  
 SOS Community Organization, Lilac City Pediatrics  
 311 Route 108  
 Somersworth, NH 03878

## 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	ADOL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			ADV5212020-16	1/1/2020	1/1/2021	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
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CAA5331599-12	1/1/2020	1/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			CUA5214125-15	1/1/2020	1/1/2021	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
C	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	TWC3844860	1/1/2020	1/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	FTCA GAP Liability			LIV-A671986-05	1/1/2020	1/1/2021	Each Occurrence 1,000,000
D	FTCA GAP Liability			LIV-A671986-05	1/1/2020	1/1/2021	Aggregate 3,000,000

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

## CERTIFICATE HOLDER

## CANCELLATION

NH Department of Health and Human Services  
 Contracts and Procurement Unit  
 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.

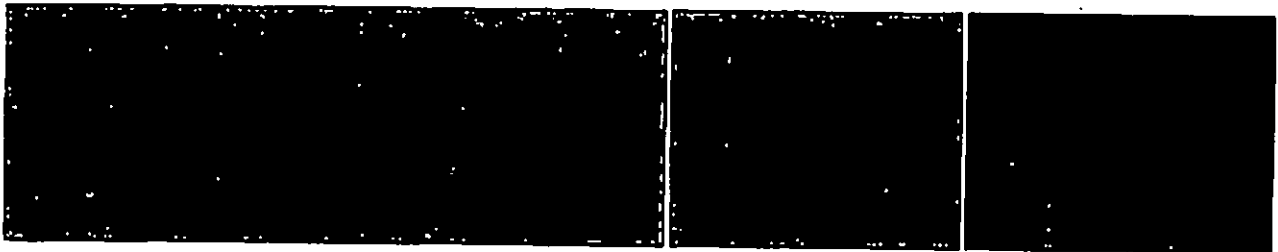
AUTHORIZED REPRESENTATIVE

# *Greater Seacoast Community Health*

## *Mission*

*"To deliver innovative, compassionate, integrated health services and support that are accessible to all in our community, regardless of ability to pay."*

Board Approved on 6-25-2018



GREATER SEACOAST COMMUNITY HEALTH



**FINANCIAL STATEMENTS**

**December 31, 2018**

**With Independent Auditor's Report**





## INDEPENDENT AUDITOR'S REPORT

Board of Directors  
Greater Seacoast Community Health

We have audited the accompanying financial statements of Greater Seacoast Community Health (the Organization), which comprise the balance sheet as of December 31, 2018, and the related statements of operations, changes in net assets, and cash flows for the year then ended, and the related notes to the financial statements.

### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these financial statements in accordance with U.S. generally accepted accounting principles; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### *Auditor's Responsibility*

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Board of Directors  
Greater Seacoast Community Health  
Page 2

***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Greater Seacoast Community Health as of December 31, 2018, and the results of its operations, changes in its net assets and its cash flows for the year then ended in accordance with U.S. generally accepted accounting principles.

***Emphasis-of-Matter***

As discussed in Note 1 to the financial statements under the sub-heading "Organization", Greater Seacoast Community Health was formed on January 1, 2018 as a result of the merger of Goodwin Community Health and Families First of the Greater Seacoast. Our opinion is not modified with respect to this matter.

*Berry Dunn McNeil & Parker, LLC*

Portland, Maine  
May 20, 2019

# GREATER SEACOAST COMMUNITY HEALTH

## Balance Sheet

December 31, 2018

### ASSETS

<b>Current assets</b>	
Cash and cash equivalents	\$ 3,896,813
Patient accounts receivable, less allowance for uncollectible accounts of \$422,413	1,560,698
Grants receivable	424,642
Inventory	143,250
Pledges receivable	263,557
Other current assets	<u>57,987</u>
<b>Total current assets</b>	<b>6,346,947</b>
<b>Investments</b>	<b>1,112,982</b>
Investment in limited liability company	98,201
Assets limited as to use	1,421,576
Property and equipment, net	<u>6,107,219</u>
<b>Total assets</b>	<b><u>\$15,026,925</u></b>

### LIABILITIES AND NET ASSETS

<b>Current liabilities</b>	
Accounts payable and accrued expenses	\$ 172,852
Accrued payroll and related expenses	1,075,463
Patient deposits	173,105
Deferred revenue	<u>7,269</u>
<b>Total current liabilities and total liabilities</b>	<b><u>1,428,689</u></b>
<b>Net assets</b>	
Without donor restrictions	11,824,495
With donor restrictions	<u>1,773,741</u>
<b>Total net assets</b>	<b><u>13,598,236</u></b>
<b>Total liabilities and net assets</b>	<b><u>\$15,026,925</u></b>

The accompanying notes are an integral part of these financial statements.



## GREATER SEACOAST COMMUNITY HEALTH

## Statement of Operations

Year Ended December 31, 2018

Operating revenue and support	
Patient service revenue	\$11,353,111
Provision for bad debts	<u>(651,700)</u>
Net patient service revenue	10,701,411
Grants, contracts, and contributions	7,713,908
Other operating revenue	388,017
Net assets released from restriction for operations	<u>634,931</u>
Total operating revenue and support	<u>19,418,267</u>
Operating expenses	
Salaries and benefits	14,715,120
Other operating expenses	4,446,874
Depreciation	<u>349,661</u>
Total operating expenses	<u>19,511,655</u>
Operating deficit	<u>(93,388)</u>
Other revenue and (losses)	
Investment income	48,204
Loss on disposal of assets	(6,874)
Change in fair value of investments	<u>(95,246)</u>
Total other revenue and (losses)	<u>(53,916)</u>
Deficiency of revenue over expenses and decrease in net assets without donor restrictions	<u>\$ (147,304)</u>

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The accompanying notes are an integral part of these financial statements.

**GREATER SEACOAST COMMUNITY HEALTH**

**Statement of Changes in Net Assets**

**Year Ended December 31, 2018**

Net assets without donor restrictions	
Deficiency of revenue over expenses and decrease in net assets without donor restrictions	<u>\$ (147,304)</u>
Net assets with donor restrictions:	
Contributions, net of uncollectible pledges	44,649
Investment income	37,790
Change in fair value of investments	(147,099)
Net assets released from restriction for operations	<u>(634,931)</u>
Decrease in net assets with donor restrictions	<u>(699,591)</u>
Change in net assets	(846,895)
Net assets, beginning of year	<u>14,445,131</u>
Net assets, end of year	<u><u>\$13,598,236</u></u>

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The accompanying notes are an integral part of these financial statements.

## GREATER SEACOAST COMMUNITY HEALTH

## Statement of Cash Flows

Year Ended December 31, 2018

Cash flows from operating activities	
Change in net assets	\$ (846,895)
Adjustments to reconcile change in net assets to net cash provided by operating activities	
Provision for bad debts	651,700
Depreciation	349,661
Equity in earnings of limited liability company	2,395
Change in fair value of investments	242,345
Loss on disposal of assets	6,874
(Increase) decrease in	
Patient accounts receivable	(971,354)
Grants receivable	304,713
Inventory	101,604
Pledges receivable	300,635
Other current assets	(1,155)
Increase (decrease) in	
Accounts payable and accrued expenses	(138,262)
Accrued salaries and related amounts	33,819
Deferred revenue	(2,117)
Patient deposits	6,780
Net cash provided by operating activities	<u>40,753</u>
Cash flows from investing activities	
Capital acquisitions	(21,463)
Proceeds from sale of investments	198,458
Purchase of investments	<u>(294,519)</u>
Net cash used by investing activities	<u>(117,524)</u>
Net decrease in cash and cash equivalents	(76,771)
Cash and cash equivalents, beginning of year	<u>3,973,584</u>
Cash and cash equivalents, end of year	<u>\$ 3,896,813</u>

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The accompanying notes are an integral part of these financial statements.

## GREATER SEACOAST COMMUNITY HEALTH

## Notes to Financial Statements

December 31, 2018

1. Summary of Significant Accounting PoliciesOrganization

Greater Seacoast Community Health (the Organization) is a non-stock, not-for-profit corporation organized in New Hampshire. The Organization is a Federally Qualified Health Center (FQHC) that provides fully integrated medical, behavioral, oral health, recovery services and social support for underserved populations.

On January 1, 2018, Goodwin Community Health (GCH) and Families First of the Greater Seacoast (FFGS) merged to become Greater Seacoast Community Health. GCH and FFGS were not-for-profit corporations organized in New Hampshire. GCH and FFGS were both FQHCs providing similar services in adjoining and overlapping service areas and have worked collaboratively in the provision of healthcare services in the greater Seacoast area for many years. Given the compatibility of their missions, the adjacency of their service areas and their shared charitable missions of providing healthcare services to individuals living within the greater Seacoast service area, GCH and FFGS came to the conclusion that the legal and operational integration of their respective organizations into one legal entity would result in a more effective means of providing healthcare services in their combined service area.

The following summarizes amounts recognized by entity as of January 1, 2018:

	<u>GCH</u>	<u>FFGS</u>	<u>Total</u>
<b>Assets</b>			
Cash and cash equivalents	\$ 3,379,361	\$ 594,223	\$ 3,973,584
Patient accounts receivable	906,747	334,297	1,241,044
Grants receivable	571,752	157,603	729,355
Inventory	244,854	-	244,854
Pledges receivable	-	564,192	564,192
Other current assets	33,159	23,673	56,832
Investments	1,085,684	18,019	1,103,703
Investment in limited liability company	20,298	20,298	40,596
Assets limited as to use	-	1,577,139	1,577,139
Property and equipment, net	<u>5,883,017</u>	<u>559,274</u>	<u>6,442,291</u>
<b>Total assets</b>	<b><u>\$ 12,124,872</u></b>	<b><u>\$ 3,848,718</u></b>	<b><u>\$ 15,973,590</u></b>
<b>Liabilities</b>			
Accounts payable and accrued expenses	\$ 125,513	\$ 185,601	\$ 311,114
Accrued payroll and related expenses	626,521	415,123	1,041,644
Patient deposits	87,632	78,683	166,315
Deferred revenue	<u>7,386</u>	<u>2,000</u>	<u>9,386</u>
<b>Total liabilities</b>	<b><u>\$ 847,052</u></b>	<b><u>\$ 681,407</u></b>	<b><u>\$ 1,528,459</u></b>
<b>Net assets</b>			
Without donor restrictions	11,277,820	693,979	11,971,799
With donor restrictions	<u>-</u>	<u>2,473,332</u>	<u>2,473,332</u>
<b>Total net assets</b>	<b><u>\$ 11,277,820</u></b>	<b><u>\$ 3,167,311</u></b>	<b><u>\$ 14,445,131</u></b>

There were no significant adjustments made to conform the individual accounting policies of the merging entities or to eliminate intra-entity balances.

## **GREATER SEACOAST COMMUNITY HEALTH**

### **Notes to Financial Statements**

**December 31, 2018**

#### **Acquisition of Lilac City Pediatrics, P.A.**

Effective July 1, 2018, the Organization entered into a business combination agreement with Lilac City Pediatrics, P.A. (LCP), a New Hampshire professional association providing quality pediatric healthcare services in the region served by the Organization. The agreement required the Organization to hire LCP employees, assume equipment and occupancy leases, and carry on the operations of LCP. The business combination provides the Organization's patients with additional and enhanced pediatric healthcare services, consistent with the Organization's mission. There was no consideration transferred as a result of the business combination and the assets acquired and liabilities assumed were not material.

#### **Basis of Presentation**

Net assets and revenues, expenses, gains, and losses are classified based on the existence or absence of donor-imposed restrictions in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 958, *Not-For-Profit Entities*, as described below. Under FASB ASC Topic 958 and FASB ASC Topic 954, *Health Care Entities*, all not-for-profit healthcare organizations are required to provide a balance sheet, a statement of operations, a statement of changes in net assets, and a statement of cash flows. FASB ASC Topic 954 requires reporting amounts for an organization's total assets, liabilities, and net assets in a balance sheet, reporting the change in an organization's net assets in statements of operations and changes in net assets, and reporting the change in its cash and cash equivalents in a statement of cash flows.

**Net assets without donor restrictions:** Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets may be used at the discretion of the Organization's management and the board of directors.

**Net assets with donor restrictions:** Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Donor restricted contributions are reported as increases in net assets with donor restrictions. When a restriction expires, net assets are reclassified from net assets with donor restrictions to net assets without donor restrictions in the statements of operations and changes in net assets.

#### **Recently Issued Accounting Pronouncement**

In August 2016, FASB issued Accounting Standards Update (ASU) No. 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities (Topic 958)*, which makes targeted changes to the not-for-profit financial reporting model. The new ASU marks the completion of the first phase of a larger project aimed at improving not-for-profit financial reporting. Under the new ASU, net asset reporting is streamlined and clarified. The existing three category classification of net assets is replaced with a simplified model that combines temporarily restricted and permanently restricted into a single category called "net assets with donor restrictions."

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2018

The guidance for classifying deficiencies in endowment funds and on accounting for the lapsing of restrictions on gifts to acquire property and equipment has also been simplified and clarified. New disclosures highlight restrictions on the use of resources that make otherwise liquid assets unavailable for meeting near-term financial requirements. The ASU also imposes several new requirements related to reporting expenses. The ASU is effective for the Organization for the year ended December 31, 2018.

#### Income Taxes

The Organization is a public charity under Section 501(c)(3) of the Internal Revenue Code (IRC). As a public charity, the Organization is exempt from state and federal income taxes on income earned in accordance with its tax-exempt purpose. Unrelated business income is subject to state and federal income tax. Management has evaluated the Organization's tax positions and concluded that the Organization has no unrelated business income or uncertain tax positions that require adjustment to the financial statements.

#### Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles (U.S. GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### Cash and Cash Equivalents

Cash and cash equivalents consist of demand deposits and petty cash funds.

#### Allowance for Uncollectible Accounts

Patient accounts receivable are stated at the amount management expects to collect from outstanding balances. Patient accounts receivable are reduced by an allowance for uncollectible accounts. In evaluating the collectability of patient accounts receivable, the Organization analyzes its past history and identifies trends for each funding source. In addition, patient balances receivable in excess of 90 days old are 100% reserved. Management regularly reviews data about revenue in evaluating the sufficiency of the allowance for uncollectible accounts. Amounts not collected after all reasonable collection efforts have been exhausted are applied against the allowance for uncollectible accounts.

A reconciliation of the allowance for uncollectible accounts at December 31, 2018 follows:

Balance, beginning of year	\$ 270,416
Provision	651,700
Write-offs	<u>(499,703)</u>
Balance, end of year	<u>\$ 422,413</u>

## **GREATER SEACOAST COMMUNITY HEALTH**

### **Notes to Financial Statements**

**December 31, 2018**

#### **Grants Receivable**

Grants receivable are stated at the amount management expects to collect from outstanding balances. All such amounts are considered collectible.

#### **Inventory**

Inventory consisting of pharmaceutical drugs is valued first-in, first-out method and is measured at the lower of cost or retail.

#### **Investments**

The Organization reports investments at fair value. Investments include donor endowment funds and assets held for long-term purposes. Accordingly, investments have been classified as non-current assets in the accompanying balance sheet regardless of maturity or liquidity. The Organization has established policies governing long-term investments, which are held within several investment accounts, based on the purposes for those investment accounts and their earnings.

The Organization has elected the fair value option for valuing its investments, which consolidates all investment performance activity within the other revenue and gains section of the statement of operations. The election was made because the Organization believes reporting the activity in a single performance indicator provides a clearer measure of the investment performance. Accordingly, investment income and the change in fair value are included in the deficiency of revenue over expenses, unless otherwise stipulated by the donor or State Law.

Investments, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility risks. As such, it is reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the balance sheet.

#### **Investment in Limited Liability Company**

The Organization is one of seven members of Primary Health Care Partners, LLC (PHCP). The Organization's investment in PHCP is reported using the equity method and the investment amounted to \$38,201 at December 31, 2018.

#### **Assets Limited As To Use**

Assets limited as to use include investments held for others and donor-restricted contributions to be held in perpetuity and earnings thereon, subject to the Organization's spending policy as further discussed in Note 6.

## **GREATER SEACOAST COMMUNITY HEALTH**

### **Notes to Financial Statements**

**December 31, 2018**

#### **Property and Equipment**

Property and equipment acquisitions are recorded at cost. Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed on the straight-line method.

Gifts of long-lived assets, such as land, buildings, or equipment, are reported as net assets without donor restrictions and excluded from the deficiency of revenue over expenses unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as net assets with donor restrictions. Absent explicit donor stipulations about how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

#### **Patient Deposits**

Patient deposits consist of payments made by patients in advance of significant dental work based on quotes for the work to be performed.

#### **Patient Service Revenue**

Patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

#### **340B Drug Pricing Program**

The Organization, as an FQHC, is eligible to participate in the 340B Drug Pricing Program. The program requires drug manufacturers to provide outpatient drugs to FQHC's and other identified entities at a reduced price. The Organization operates a pharmacy and also contracts with local pharmacies under this program. The local pharmacies dispense drugs to eligible patients of the Organization and bill Medicare and commercial insurances on behalf of the Organization. Reimbursement received by the contracted pharmacies is remitted to the Organization, less dispensing and administrative fees. Gross revenue generated from the program is included in patient service revenue. Contracted expenses and drug costs incurred related to the program are included in other operating expenses. Expenses related to the operation of the Organization's pharmacy are categorized in the applicable operating expense classifications.

#### **Donated Goods and Services**

Various program help and support for the daily operations of the Organization's programs were provided by the general public of the communities served by the Organization. Donated supplies and services are recorded at their estimated fair values on the date of receipt. Donated supplies and services amounted to \$41,119 for the year ended December 31, 2018.



## **GREATER SEACOAST COMMUNITY HEALTH**

### **Notes to Financial Statements**

**December 31, 2018**

#### **Donor-Restricted Gifts**

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received and the conditions are met. The gifts are reported as net assets with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of operations as "net assets released from restriction." Donor-restricted contributions whose restrictions are met in the same year as received are reflected as unrestricted contributions in the accompanying financial statements.

#### **Promises to Give**

Unconditional promises to give that are expected to be collected in future years are recorded at the present value of their estimated future cash flows. All pledges receivable are due within one year. Given the short-term nature of the Organization's pledges, they are not discounted and a reserve for uncollectible pledges has been established in the amount of \$2,000 at December 31, 2018. Conditional promises to give are not included as revenue until the conditions are substantially met.

#### **Deficiency of Revenue Over Expenses**

The statement of operations reflects the deficiency of revenue over expenses. Changes in net assets without donor restrictions which are excluded from the deficiency of revenue over expenses, consistent with industry practice, include contributions of long-lived assets (including assets acquired using contributions which, by donor restriction, were to be used for the purposes of acquiring such assets).

#### **Subsequent Events**

For purposes of the preparation of these financial statements, management has considered transactions or events occurring through May 20, 2019, the date that the financial statements were available to be issued. Management has not evaluated subsequent events after that date for inclusion in the financial statements.

#### **2. Availability and Liquidity of Financial Assets**

The Organization regularly monitors liquidity required to meet its operating needs and other contractual commitments, while also striving to optimize the investment of its available funds.

For purposes of analyzing resources available to meet general expenditures over a 12-month period, the Organization considers all expenditures related to its ongoing activities and general administration, as well as the conduct of services undertaken to support those activities to be general expenditures.

# GREATER SEACOAST COMMUNITY HEALTH

## Notes to Financial Statements

December 31, 2018

In addition to financial assets available to meet general expenditures over the next 12 months, the Organization operates with a balanced budget and anticipates collecting sufficient revenue to cover general expenditures not covered by donor-restricted resources.

The Organization had working capital of \$4,918,258 at December 31, 2018. The Organization had average days (based on normal expenditures) cash and cash equivalents on hand of 74 at December 31, 2018.

Financial assets and liquidity resources available within one year for general expenditure, such as operating expenses, were as follows as of December 31, 2018:

Cash and cash equivalents	\$ 3,896,813
Investments	1,112,982
Patient accounts receivable, net	1,560,698
Grants receivable	424,642
Pledges receivable	<u>263,557</u>
Financial assets available for current use	<u>\$ 7,258,692</u>

The Organization has certain long-term investments to use which are available for general expenditure within one year in the normal course of operations. Accordingly, these assets have been included in the information above. The Organization has other long-term investments and assets for restricted use, which are more fully described in Note 3, that are not available for general expenditure within the next year and are not reflected in the amount above.

### 3. Investments and Assets Limited as to Use

Investments, stated at fair value, consisted of the following:

Long-term investments	\$ 1,112,982
Assets limited as to use	<u>1,421,576</u>
- Total investments	<u>\$ 2,534,558</u>

Assets limited as to use are restricted for the following purposes:

Assets held in trust under Section 457(b) deferred compensation plans	\$ 26,763
Assets with donor restrictions	<u>1,394,813</u>
Total	<u>\$ 1,421,576</u>

## GREATER SEACOAST COMMUNITY HEALTH

## Notes to Financial Statements

December 31, 2018

**Fair Value of Financial Instruments**

FASB ASC Topic 820, *Fair Value Measurement*, defines fair value as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants and also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value.

The fair value hierarchy within ASC Topic 820 distinguishes three levels of inputs that may be utilized when measuring fair value:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the entity has the ability to access as of the measurement date.

Level 2: Significant observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect an entity's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

The following table sets forth by level, within the fair value hierarchy, the Organization's investments at fair value:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and cash equivalents	\$ 13,810	\$ -	\$ -	\$ 13,810
Municipal bonds	-	288,679	-	288,679
Exchange traded funds	411,147	-	-	411,147
Mutual funds	<u>1,820,922</u>	<u>-</u>	<u>-</u>	<u>1,820,922</u>
Total investments	<u>\$ 2,245,879</u>	<u>\$ 288,679</u>	<u>\$ -</u>	<u>\$ 2,534,558</u>

Municipal bonds are valued based on quoted market prices of similar assets.

**4. Property and Equipment**

Property and equipment consisted of the following at December 31, 2018:

Land	\$ 718,427
Building and improvements	5,857,428
Leasehold improvements	311,561
Furniture, fixtures, and equipment	<u>2,667,663</u>
Total cost	9,555,079
Less accumulated depreciation	<u>3,447,860</u>
Property and equipment, net	<u>\$ 6,107,219</u>

## GREATER SEACOAST COMMUNITY HEALTH

## Notes to Financial Statements

December 31, 2018

The Organization's facility was built and renovated with federal grant funding under the ARRA - Capital Improvement Program and ACA - Capital Development Program. In accordance with the grant agreements, a Notice of Federal Interest (NFI) was required to be filed in the appropriate official records of the jurisdiction in which the property is located. The NFI is designed to notify any prospective buyer or creditor that the Federal Government has a financial interest in the real property acquired under the aforementioned grant; that the property may not be used for any purpose inconsistent with that authorized by the grant program statute and applicable regulations; that the property may not be mortgaged or otherwise used as collateral without the written permission of the Associate Administrator of the Office of Federal Assistance Management (OFAM) and the Health Resources and Services Administration (HRSA); and that the property may not be sold or transferred to another party without the written permission of the Associate Administrator of OFAM and HRSA.

5. Net Assets with Donor Restrictions

Net assets with donor restrictions are available for the following purposes:

Specific purpose	
Program services	\$ 115,371
Passage of time	
Pledges receivable	263,557
Investments to be held in perpetuity, for which the income is without donor restrictions	<u>1,394,813</u>
Total	<u>\$ 1,773,741</u>

Net assets released from net assets with donor restrictions were as follows:

Satisfaction of purpose - program services	\$ 270,530
Passage of time - pledges receivable	291,384
Passage of time - endowment earnings	<u>73,017</u>
Total	<u>\$ 634,931</u>

6. EndowmentsInterpretation of Relevant Law

The Organization's endowments primarily consist of an investment portfolio managed by the Investment Sub-Committee. As required by U.S. GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

## **GREATER SEACOAST COMMUNITY HEALTH**

### **Notes to Financial Statements**

**December 31, 2018**

The Organization has interpreted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as a donor-restricted endowment (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent donor-restricted endowment gifts and (c) accumulations to the donor-restricted endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund, if any, is classified as net assets with donor restrictions until those amounts are appropriated for expenditure in a manner consistent with the standard of prudence prescribed by UPMIFA.

In accordance with UPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (1) The duration and preservation of the fund;
- (2) The purposes of the Organization and the donor-restricted endowment fund;
- (3) General economic conditions;
- (4) The possible effect of inflation and deflation;
- (5) The expected total return from income and the appreciation of investments;
- (6) Other resources of the Organization; and
- (7) The investment policies of the Organization.

#### **Spending Policy**

The Organization has a policy of appropriating for expenditure an amount equal to 5% of the endowment fund's average fair market value over the prior 20 quarters. The earnings on the endowment fund are to be used for operations.

#### **Funds with Deficiencies**

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor requires the Organization to retain as a fund of perpetual duration (underwater). In the event the endowment becomes underwater, it is the Organization's policy to not appropriate expenditures from the endowment assets until the endowment is no longer underwater. There were no such deficiencies as of December 31, 2018.

#### **Return Objectives and Risk Parameters**

The Organization has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets of donor-restricted funds that the Organization must hold in perpetuity. Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to produce results that exceed or meet designated benchmarks while incurring a reasonable and prudent level of investment risk.

# GREATER SEACOAST COMMUNITY HEALTH

## Notes to Financial Statements

December 31, 2018

### Strategies Employed for Achieving Objectives

To satisfy its long-term rate-of-return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Organization targets a diversified asset allocation that places a balanced emphasis on equity-based and income-based investments to achieve its long-term return objectives within prudent risk constraints.

### Endowment Net Asset Composition by Type of Fund

The Organization's endowment consists of assets with donor restrictions only and had the following related activities for the year ended December 31, 2018.

Endowments, beginning of year	\$ 1,577,139
Investment income	37,790
Change in fair value of investments	(147,099)
Spending policy appropriations	<u>(73,017)</u>
Endowments, end of year	<u>\$ 1,394,813</u>

### 7. Patient Service Revenue

Patient service revenue follows:

Medicare	\$ 1,173,771
Medicaid	4,107,002
Third-party payers and self pay	<u>4,753,946</u>
Total patient service revenue	10,034,719
Contracted pharmacy revenue	<u>1,318,392</u>
Total	<u>\$11,353,111</u>

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. The Organization believes that it is in compliance with all laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties and exclusion from the Medicare and Medicaid programs. Differences between amounts previously estimated and amounts subsequently determined to be recoverable or payable are included in patient service revenue in the year that such amounts become known.

## **GREATER SEACOAST COMMUNITY HEALTH**

### **Notes to Financial Statements**

**December 31, 2018**

A summary of the payment arrangements with major third-party payers follows:

#### **Medicare**

The Organization is reimbursed for the medical care of qualified patients on a prospective basis, with retroactive settlements related to vaccine costs only. The prospective payment is based on a geographically-adjusted rate determined by Federal guidelines. Overall, reimbursement is subject to a maximum allowable rate per visit. The Medicare cost reports for GCH and FFGS have been audited by the Medicare administrative contractor through June 30, 2018 and June 30, 2017, respectively.

#### **Medicaid and Other Payers**

The Organization also has entered into payment agreements with Medicaid and certain commercial insurance carriers, health maintenance organizations and preferred provider organizations. The basis for payment to the Organization under these agreements includes prospectively-determined rates per visit, discounts from established charges and capitated arrangements for primary care services on a per-member, per-month basis.

#### **Charity Care**

The Organization provides care to patients who meet certain criteria under its sliding fee discount policy without charge or at amounts less than its established rates. Because the Organization does not pursue collection of amounts determined to qualify for charity care, they are not reported as net patient service revenue. The Organization estimates the costs associated with providing charity care by calculating the ratio of total cost to total charges, and then multiplying that ratio by the gross uncompensated charges associated with providing care to patients eligible for the sliding fee discount. The estimated cost of providing services to patients under the Organization this policy amounted to \$1,756,052 for the year ended December 31, 2018.

The Organization is able to provide these services with a component of funds received through local community support and federal and state grants.

#### **8. Retirement Plans**

The Organization has a defined contribution plan under IRC Section 401(k) that covers substantially all employees. For the year ended December 31, 2018, the Organization contributed \$194,214 to the plan.

The Organization has established a unqualified deferred compensation plan under IRC Section 457(b) for certain key employees of the Organization. The Organization did not contribute to the plan during the year ended December 31, 2018. The balance of the deferred compensation plan amounted to \$26,763 at December 31, 2018.

## GREATER SEACOAST COMMUNITY HEALTH

## Notes to Financial Statements

December 31, 2018.

**9. Food Vouchers**

The Organization acts as a conduit for the State of New Hampshire's Special Supplemental Food Program for Women, Infants and Children (WIC). The value of food vouchers distributed by the Organization was \$1,136,875 for the year ended December 31, 2018. These amounts are not included in the accompanying financial statements as they are not part of the contract the Organization has with the State of New Hampshire for the WIC program.

**10. Concentration of Risk**

The Organization has cash deposits in major financial institutions which exceed federal depository insurance limits. The Organization has not experienced losses in such accounts and management believes the credit risk related to these deposits is minimal.

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payer agreements. At December 31, 2018, Medicaid represented 37% of gross accounts receivable. No other individual payer source exceeded 10% of the gross accounts receivable balance.

The Organization receives a significant amount of grants from the U.S. Department of Health and Human Services (DHHS). As with all government funding, these grants are subject to reduction or termination in future years. For the year ended December 31, 2018, grants from DHHS (including both direct awards and awards passed through other organizations) represented approximately 63% of grants, contracts, and contributions.

**11. Functional Expense**

The Organization provides various services to residents within its geographic location. Given the Organization is a service organization, expenses are allocated between healthcare services and administrative support based on the percentage of direct care wages to total wages, with the exception of program supplies which are 100% healthcare in nature. Expenses related to providing these services are as follows for the year ended December 31, 2018.

	<u>Healthcare Services</u>	<u>Administrative and Support Services</u>	<u>Fundraising Services</u>	<u>Total</u>
Salaries and benefits	\$ 12,688,419	\$ 1,459,660	\$ 568,041	\$ 14,715,120
Other operating expenses				
Contract services	925,980	144,869	15,112	1,085,961
Program supplies	1,217,994	-	-	1,217,994
Software maintenance	460,634	52,938	20,620	534,192
Occupancy	502,635	57,765	22,500	582,900
Other	862,256	88,360	75,211	1,025,827
Depreciation	301,513	34,651	13,497	349,661
<b>Total</b>	<b>\$ 16,959,431</b>	<b>\$ 1,837,243</b>	<b>\$ 714,981</b>	<b>\$ 19,511,655</b>



**GREATER SEACOAST COMMUNITY HEALTH****Notes to Financial Statements****December 31, 2018****12. Commitments and Contingencies****Medical Malpractice Insurance**

The Organization is protected from medical malpractice risk as an FQHC under the Federal Tort Claims Act (FTCA). The Organization has additional medical malpractice insurance, on a claims-made basis, for coverage outside the scope of the protection of the FTCA. As of the year ended December 31, 2018, there were no known malpractice claims outstanding which, in the opinion of management, will be settled for amounts in excess of both FTCA and additional medical malpractice insurance coverage, nor are there any unasserted claims or incidents which require loss accrual. The Organization intends to renew the additional medical malpractice insurance coverage on a claims-made basis and anticipates that such coverage will be available.

**Leases**

The Organization leases office space and certain other office equipment under noncancelable operating leases. Future minimum lease payments under these leases are as follows:

2019	\$ 289,273
2020	76,992
2021	<u>33,990</u>
Total	<u>\$ 400,255</u>

Rental expense amounted to \$258,695 for the year ended December 31, 2018.

## GREATER SEACOAST COMMUNITY HEALTH



**Board of Directors  
Calendar Year 2019**

<b>Name/Address</b>	<b>Phone/Email</b>	<b>Occupation</b>
<b><u>Chair</u></b> Barbara Henry [REDACTED]	[REDACTED]	Retired Newspaper Publisher
<b><u>Vice Chair</u></b> Valerie Goodwin [REDACTED]	[REDACTED]	Retired Business Consumer
<b><u>Board Treasurer</u></b> Dennis Veilleux [REDACTED]	[REDACTED]	Accounting Manager
<b><u>Board Secretary</u></b> Jennifer Glidden [REDACTED]	[REDACTED]	DHHS Admin. Supervisor Consumer
Karin Barndollar [REDACTED]	[REDACTED]	Export Manager Consumer
Mark Boulanger Raiche & Company [REDACTED]	[REDACTED]	CPA
Don Chick [REDACTED]	[REDACTED]	Photographer Consumer
Lisa Hall [REDACTED]	[REDACTED]	Retired Accountant
Jo Jordon [REDACTED]	[REDACTED]	Emergency Management
Abigail Sykas Karoutas [REDACTED]	[REDACTED]	Attorney Consumer
Allison Neal [REDACTED]	[REDACTED]	Education Consultant Consumer
John Pelletier [REDACTED]	[REDACTED]	Retired Truck Driver/Veteran Consumer
Yulia Rothenberg [REDACTED]	[REDACTED]	Education Consultant Consumer

**JANET M. LAATSCH**

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**Objective:** To utilize my leadership skills to create a dynamic, sustainable non-profit organization.

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**WORK EXPERIENCE:**

**Goodwin Community Health (GCH)**

**Somerset, NH**

**2001-Present**

**Chief Executive Officer**

**2005-Present**

**Accomplishments:**

- Successfully retained all Directors and Physicians
- Built relationships with donors, foundations, local and state representatives and other non-profit and for-profit organizations
- Retention of an active Board of Directors
- Improvement of patient outcomes
- Successfully implemented mental health integration program
- Successfully acquired a for-profit mental health organization
- Developed a new partnership with Noble High School
- Developed a new partnership with Southeastern NH Services
- Obtained new grant funding of over \$7.0 million
- Expansion of donor base
- Development of a corporate compliance program
- Merged the public health and safety council under AGCHC

**Responsibilities:**

- Oversight of operations, finance, personnel and fund development
- Grant writing and donor development
- New business development
- Compliance with all federal and state regulations
- Build relationships and partnerships locally and statewide
- Strategic planning
- Report directly to the Board of Directors

**Finance Director**

**2002-2005**

**Accomplishments:**

- Brought in over \$3.0 million in grant funds for the organization
- Obtained Federally Qualified Health Center status in 2004
- Designed and implemented a successful new dental program
- Achieved a financial surplus annually

**Responsibilities:**

- Responsible for all financial transactions, billing, collections, patient accounts
- Strategic planning as it relates to capital finding
- Budget development, cost/benefit analysis of existing programs and potential new programs
- Development and implementation of an annual development plan
- Research, write, submit and provide follow-up reports for grant funds

• Oversee human resource functions of the organization  
**Grant Writer/Per Diem Nurse** 2001-2002

**Grant Writing Services,  
N. Hampton, NH  
Sole Proprietor** 1999-2001

**Accomplishments:**

- Successfully researched and submitted grants for health and educational organizations totaling over \$150k

**Responsibilities:**

- Research private, industry, state and federal funds for non-profit organizations

**North Shore Medical Center (Partners Health Care)** 1991-1999  
**Salem, MA**

**Acting Chief Operations Officer for the  
North Shore Community Health Center** 1997-1999

**Accomplishments:**

- Successfully submitted their competitive Federal grant and other state grants
- Recruited a medical director and re-negotiated existing provider contracts to include productivity standards
- Re-designed operations to improve productivity
- Incorporated the hospital's medical residency program into the Health Center
- Achieved a financial surplus for the first time in five years
- Developed a quality improvement program and framework

**Responsibilities:**

- Placed at the Health Center by the North Shore Medical Center to revamp operations and improve the cash flow for the organization
- Reported directly to the Board of Directors

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**EDUCATION:**

**University of New Hampshire: M.B.A.**  
**Durham, N.H.** Concentration in Finance 1991

**Northern Michigan University: B.S.N.**  
**Marquette, M.I.** Minor in Biology 1981

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**LICENSES/CERTIFICATES:**

Real Estate Broker  
N.H. Nursing License

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**PROFESSIONAL:**

Member of the National Association of Community Health Centers  
Previous Board member of the United Way of the Greater Seacoast  
Treasurer for the Health and Safety Council of Strafford County  
Board member of the Community Health Network Access (CHAN)  
Board member of the Rochester Rotary, slotted for President in 2011

**Erin E. Ross**

**Objective**

Obtain a position in Health Care, which will continue to build knowledge and skills from both education and experiences gained.

**Qualifications**

Mature, energetic individual possessing management experience, organizational skills, multi-tasking abilities, good work initiative and communicates well with internal and external contacts. Proficient in computer skills with a strong background using all applications within Microsoft Office programs.

**Education**

September 1998 – May 2002

Bachelor of Science in Health Management & Policy  
University of New Hampshire  
Durham, New Hampshire 03824

**Related Experience**

August 2006 – Present

Service Expansion Director  
Avis Goodwin Community Health Center

- Responsible for the overall function of the Winter St location of Avis Goodwin Community Health Center.
- Maintain all clinical equipment and order all necessary supplies.
- Coordinate the scheduling of all clinical and administrative staff in the office.
- Assist with the continued integration of dental services and now mental health services to existing primary care services.
- Assist with the integration of private OB/GYN practice into Avis Goodwin Community Health Center.
- Organize patient outcome data collection and quality improvement measures to monitor multiple aspects and assure sustainability for Avis Goodwin Community Health Center.

May 2005 – August 2006

Site Manager, Dover Location  
Avis Goodwin Community Health Center

- Responsible for the overall function of the Dover location of Avis Goodwin Community Health Center.
- Maintain all clinical equipment and order all necessary supplies.
- Assist with the continued integration of dental services and now mental health services to existing primary care services.
- Coordinate the scheduling of all clinical and administrative staff in the office.
- Organize patient outcome data collection and quality improvement measures to monitor multiple aspects and assure sustainability for Avis Goodwin Community Health Center.

January 2005 – November 2005

Front Office Manager  
Avis Goodwin Community Health Center

- Supervise, hire and evaluate front office staff of both Avis Goodwin Community Health Center locations.
- Develop and implement policies and procedures for the smooth functioning of the front office.

May 2004 – Present

Dental Coordinator  
Avis Goodwin Community Health Center

- Supervise, hire and evaluate dental staff, including Dental Assistant and Hygienists.
- Acted as general contractor during construction and renovation of existing facility for 4 dental exam rooms.
- Responsible for the operations of the dental center, development of educational programs for providers and staff and supervision of the school-based dental program.
- Developed policy and procedure manual, including OSHA and Infection Control protocols.
- Organize patient outcome data collection and quality improvement measures to monitor dental program and assure sustainability.
- Maintain all dental equipment and order all dental supplies.
- Coordinate grant fund requirements to multiple agencies on a quarterly basis.

- Oversee all aspects of billing for dental services, including training existing billing department staff.

July 2003 – May 2004

**Administrative Assistant to Medical Director**  
Avis Goodwin Community Health Center

- Assist with Quality Improvement program by attending all meetings, generating monthly minutes documenting all aspects of the agenda and reporting quarterly data followed by the agency.
- Generate a monthly report reflecting provider productivity including number patients seen by each provider and no show and cancellation rates of appointments.
- Served as a liaison between patients and Chief Financial Officer to effectively handle all patient concerns and compliments.
- Established and re-created various forms and worksheets used by many departments.

December 2002 – May 2004

**Billing Associate**  
Avis Goodwin Community Health Center

- Organize and respond to correspondence, rejections and payments from multiple insurance companies.
- Created an Insurance Manual for Front Office Staff and Intake Specialists as an aide to educate patients on their insurance.
- Responsible for credentialing and Re-credentialing of providers, including physicians, nurse practitioners and physician assistants, within the agency and to multiple insurance companies.
- Apply knowledge of computer skills, including Microsoft Office, Logician, PCN and Centricity.
- Designed a statement to generate from an existing Microsoft Access database for patients on payment plans to receive monthly statements.
- Assist Front Office Staff during times of planned and unexpected staffing shortages.

June 2002 - December 2002

**Billing Associate**  
Automated Medical Systems  
Salem, New Hampshire 03079

- Communicate insurance benefits and explain payments and rejections to patients about their accounts.
- Responsible for organizing and responding to correspondence received for multiple doctor offices.
- Determine effective ways for rejected insurance claims to get paid through communicating with insurance companies and patients.
- Apply knowledge of computer skills, including Microsoft Office, Accuterm and Docstar.

## **Work Experience**

October 1998 – May 2002

**Building Manager**  
Memorial Union Building – UNH  
Durham, New Hampshire 03824

- Recognized as a Supervisor, May 2001-May 2002.
- Supervised Building Manager and Information Center staff.
- Responsible for managing and documenting department monetary transactions.
- Organized and led employee meetings on a weekly basis.
- Established policies and procedures for smooth functioning of daily events.
- Oversaw daily operations of student union building, including meetings and campus events.
- Served as a liaison between the University of New Hampshire, students, faculty and community.
- Organized and maintained a weekly list of rental properties available for students.
- Developed and administered new ideas for increased customer service efficiency.

## **References**

Available upon request

**Lara D. Willard**

**◆ PROFESSIONAL EXPERIENCE**

***Somersworth Main Street Inc., Somersworth, New Hampshire***

***Executive Director, August 2001 – 2004***

- Founded and Directed a 501(c)3 non profit organization dedicated to revitalizing a downtown commercial district
- Energized local planning, historic preservation, economic and real estate development
- Worked with public and private interests to achieve common downtown renewal goals
- Developed and implemented strategic marketing and public relations programs, fundraisers and public planning sessions
- Created and coordinated high visibility downtown events and beautification projects
- Responsible for budget management and all day to day program operations

***LDW Public Relations***

***Self-Employed Marketing/Communications Consultant, May 2000 – August 2001***

- Enhance creativity, professionalism and frequency of outbound marketing/communications and public relations efforts
- Organize mix of publicity, promotion, advertising and Internet presence for milestone company events such as venture capital funding, new store openings, web casts, direct marketing campaigns and celebrity endorsements.
- Drive brand awareness and message consistency through creation of unique and compelling copy for web sites, catalogs, executive speeches, press releases and direct marketing collateral.
- Significantly increase media exposure with key audiences resulting in a multitude of image enhancing feature news stories with leading media outlets like the Wall Street Journal, The Red Herring, The Associated Press and ESPN.
- Conduct media training with company executives
- Clients include 1800FACEOFF.Com and General Linen Service, Inc.
- Chairman of Somersworth Main Street Program communications committee

***Unisphere Networks, Inc., Westford, MA***

***Senior Public Relations Manager, April 2001 – November 2001***

- Responsible for managing and creating results-driven public relations programs for multiple product lines and business initiatives
- Successful development and execution of strategies that position the company and its spokespeople as thought leaders in trade and business communities
- Organize Industry events to leverage and maximize impact of corporate messaging with key audiences
- Manage outside agency to achieve public relations goals
- Consistently create and edit high-quality, influential materials like press releases, launch plans, abstracts and contributed articles
- Produce stellar coverage results in key media outlets

**LDW Public Relations****Self-Employed Marketing/Communications Consultant; May 2000 – August 2001**

- Enhance creativity, professionalism and frequency of outbound marketing/communications and public relations efforts
- Organize mix of publicity, promotion, advertising and Internet presence for milestone company events such as venture capital funding, new store openings, web casts, direct marketing campaigns and celebrity endorsements.
- Drive brand awareness and message consistency through creation of unique and compelling copy for web sites, catalogs, executive speeches, press releases and direct marketing collateral
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- Manage outside agency to achieve public relations goals
- Consistently create and edit high-quality, influential materials like press releases, launch plans, abstracts and contributed articles
- Produce stellar coverage results in key media outlets

**Cabletron Systems, Rochester, NH****Public Relations Manager; June 1998 – April 2000****Public Relations Specialist, July 1997 – June 1998**

- Oversee North American Public Relations program for software business unit
- Provide strategic counsel to marketing, engineering and top-level executives
- Guide launch team efforts to create, implement and evaluate corporate communications programs and product launches
- Write and edit press materials, speeches, scripts, messages and quotes for both technology and business audiences
- Consistently deliver excellent and measurable results with trade and business media as well as leading industry analysts
- Coordinate detailed media events, trade shows and press tours
- Manage searches for and relationships with outside agencies

**The Weber Group, Inc., Cambridge, MA****Assistant Account Executive; September 1996 – July 1997**

- Write and edit pitch letters, speaker abstracts, press kits, briefing binders and media releases under tight deadlines
- Management and supervision of interns and account coordinators
- Responsible for developing and maintaining editorial and speaking calendars to generate client exposure
- Create and pitch story angles to media
- All activity necessary to meet and surpass client expectations
- Clients included 3Com and DCI



***Cabletron Systems, Rochester, NH***

***Public Relations Manager; June 1998 – April 2000***

***Public Relations Specialist, July 1997 – June 1998***

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- Create and pitch story angles to media
- All activity necessary to meet and surpass client expectations
- Clients included 3Com and DCI

**◆ VOLUNTEER EXPERIENCE**

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***Somersworld Inc., Somersworth, New Hampshire,***

***Founding Board of Directors Member / Columnist; 2002-2004***

***Greater Somersworth Chamber of Commerce, Somersworth New Hampshire***

***Board of Directors Member, 2001 – 2004***

**◆ EDUCATIONAL EXPERIENCE**

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***Johnson & Wales University, Providence, Rhode Island***

- B.S. Advertising/Communications; 1994-Cum Laude
- A.S. Advertising/Public Relations; 1992-Cum Laude
- Trimester in The Hague; Development of the European Community

***Brown University, Providence, Rhode Island***

- Copywriting Internship; 95.5 WBRU

**◆ Imaginative ◆ Strategic ◆ Effective**

**Greater Seacoast Community Health**

**Regional Public Health Network**

**Key Personnel**

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Janet Laatsch	Chief Executive Officer	\$213,574	0%	\$0
Erin Ross	Chief Financial Officer	\$146,973	0%	\$0
Lara Willard	Director of Marketing & Public Relations	\$95,584	0%	\$0



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and the Partnership for Public Health, Inc. (d/b/a Lakes Region Partnership for Public Health), (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 67 Water St., Ste 105 Laconia, NH 03246.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YYYY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$792,716.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-17, Young Adult Strategies, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-17, Young Adult Strategies, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

Lakes Region Partnership for Public Health.

Amendment #5

Contractor Initials

DS  
TL

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/17/2020

Date

DocuSigned by:

*Lisa M. Morris*

00330B5F08CA64A0

Name: Lisa M. Morris

Title: Director, Division of Public Health Svcs.

Partnership for Public Health, Inc.

11/17/2020

Date

DocuSigned by:

*Tamera Carmichael*

269A7E90D4654C0

Name: Tamera Carmichael

Title: Executive Director

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

**OFFICE OF THE ATTORNEY GENERAL**

11/19/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "C. Pinos".

D5CA9202E12C4AE

Name: Catherine Pinos

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:

Vendor Name: Partnership for Public Health, Inc.  
Contract Name: Regional Public Health Network Services  
Region: Woodgrove/Ohio

Program Name and Funding Amounts											
State Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Public Health Emergency Preparedness -ASPR MRC	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies	School-Based Vaccination Clinics	Childhood Lead Paintscreening Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019		\$ -	\$ -			\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00
2020		\$ 20,000.00	\$ 69,780.00	\$ 20,000.00	\$ 10,000.00	\$ 69,367.00	\$ 44,641.00	\$ 60,000.00	\$ 15,000.00	\$ 11,992.00	\$ 10,000.00
2021	\$10,000	\$ 20,000.00	\$ 69,780.00		\$ 10,000.00	\$ 69,367.00	\$ 44,641.00	\$ 60,000.00	\$ 15,000.00	\$ 6,018.00	\$ -
Total											\$ 792,716

## Exhibit B-17, Amendment #5

New Hampshire Department of Health and Human Services									
Blidden/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. /In/a Lakes Region Partnership for Public Health, Inc.									
Budget Request for: Young Adult Strategies									
Budget Period: SFY 21 (7/1/20 - 6/30/21)									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 31,929.00	\$ 9,061.00	\$ 40,990.00				\$ 31,929.00	\$ 9,061.00	\$ 40,990.00
2. Employee Benefits	\$ 6,277.00	\$ 1,371.00	\$ 7,648.00				\$ 6,277.00	\$ 1,371.00	\$ 7,648.00
3. Consultants	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
4. Equipment:									
Rental	\$ 908.00		\$ 908.00				\$ 908.00		\$ 908.00
Repair and Maintenance	\$ 1,042.00		\$ 1,042.00				\$ 1,042.00		\$ 1,042.00
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 2,473.00		\$ 2,473.00				\$ 2,473.00		\$ 2,473.00
6. Travel	\$ 938.00		\$ 938.00				\$ 938.00		\$ 938.00
7. Occupancy	\$ 3,308.00		\$ 3,308.00				\$ 3,308.00		\$ 3,308.00
8. Current Expenses									
Telephone	\$ 1,174.00		\$ 1,174.00				\$ 1,174.00		\$ 1,174.00
Postage	\$ 168.00		\$ 168.00				\$ 168.00		\$ 168.00
Subscriptions	\$ 165.00		\$ 165.00				\$ 165.00		\$ 165.00
Audit and Legal	\$ 947.00		\$ 947.00				\$ 947.00		\$ 947.00
Insurance	\$ 911.00		\$ 911.00				\$ 911.00		\$ 911.00
Board Expenses									
9. Software	\$ 174.00		\$ 174.00				\$ 174.00		\$ 174.00
10. Marketing/Communications	\$ 8,614.00		\$ 8,614.00				\$ 8,614.00		\$ 8,614.00
11. Staff Education and Training	\$ 1,900.00		\$ 1,900.00				\$ 1,900.00		\$ 1,900.00
12. Subcontracts/Agreements	\$ 17,850.00		\$ 17,850.00				\$ 17,850.00		\$ 17,850.00
13. Other (specific details mandatory):									
translator									
indirect									
Meeting exp	\$ 700.00		\$ 700.00				\$ 700.00		\$ 700.00
<b>TOTAL</b>	<b>\$ 79,578.00</b>	<b>\$ 10,422.00</b>	<b>\$ 90,000.00</b>				<b>\$ 79,578.00</b>	<b>\$ 10,422.00</b>	<b>\$ 90,000.00</b>
Indirect As A Percent of Direct 13.1%									

DS  
 TC  
 Contractor Initials

11/17/2020  
 Date

# State of New Hampshire

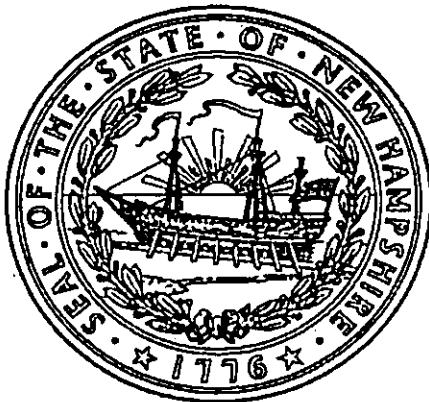
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that PARTNERSHIP FOR PUBLIC HEALTH, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 21, 2005. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 534847

Certificate Number : 0004903018



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 29th day of April A.D. 2020.

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

William M. Gardner  
Secretary of State



### CERTIFICATE OF AUTHORITY

I, Lisa Dupuis, hereby certify that:  
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Officer of Partnership for Public Health, Inc. (PPH)  
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on October 22, 2020, at which a quorum of the Directors/shareholders were present and voting.  
(Date)

**VOTED:** That Tamera Carmichael (may list more than one person)  
(Name and Title of Contract Signatory)

is duly authorized on behalf of Partnership for Public Health, Inc. to enter into contracts or agreements with the State

(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority remains valid for **thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10/30/2020



Signature of Elected Officer

Name: Lisa Dupuis

Title: Vice President, PPH Board of Directors



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/24/2020

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b> E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	<b>CONTACT NAME:</b> Eleanor Spinazzola <b>PHONE (A/C No. Exl):</b> (603) 293-2791 <b>FAX (A/C No.):</b> (603) 293-7188 <b>E-MAIL ADDRESS:</b> Eleanor.spinazzola@esinsurance.net
<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURER A:</b> Great American Insurance Group	
<b>INSURER B:</b> Twin City Fire Insurance Co	
<b>INSURER C:</b> United States Fire Insurance Co.	
<b>INSURER D:</b>	
<b>INSURER E:</b>	
<b>INSURER F:</b>	

**COVERAGES** **CERTIFICATE NUMBER:** 20-21 **REVISION NUMBER:**

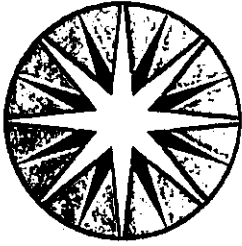
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 INSD	SUBR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			MAC3793453-14	03/10/2020	03/10/2021	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 \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 Professional Liability- \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			CAP1898681-10	03/10/2020	03/10/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist \$ 1,000,000
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			UMB3793454-15	03/10/2020	03/10/2021	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			04WECRJ0009	01/01/2020	01/01/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Accident/Health			US1275178	03/10/2020	03/10/2021	

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

<b>CERTIFICATE HOLDER</b>  NH Department of Human and Health Services 129 Pleasant St  Concord NH 03301	<b>CANCELLATION</b>  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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# PARTNERSHIP FOR PUBLIC HEALTH

CELEBRATING  
*10* Years

## *Mission Statement*

To improve the health and well being of the region  
through inter-organizational collaboration and  
community and public health improvement activities.



**Partnership for Public Health, Inc.  
Formerly known as Lakes Region Partnership for  
Public Health, Inc.**

**Financial Statements**

**June 30, 2019 and 2018**

**and**

**Independent Auditor's Report**

**PARNTERSHIP FOR PUBLIC HEALTH, INC.  
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH  
FINANCIAL STATEMENTS  
June 30, 2019 and 2018**

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**CERTIFIED PUBLIC ACCOUNTANTS**  
608 Chestnut Street • Manchester, New Hampshire 03104  
(603) 622-7070 • Fax: (603) 622-1452 • [www.vachonclukay.com](http://www.vachonclukay.com)

## **INDEPENDENT AUDITOR'S REPORT**

To the Board of Directors of  
Partnership for Public Health, Inc.  
Formerly known as Lakes Region Partnership for Public Health, Inc.

### **Report on the Financial Statements**

We have audited the accompanying financial statements of Partnership for Public Health, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2019 and 2018, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

*Opinion*

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Partnership for Public Health, Inc. as of June 30, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

*Vachon Clukay & Company PC*

Manchester, New Hampshire  
November 7, 2019

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statements of Financial Position**  
**June 30, 2019 and 2018**

<b>ASSETS</b>		
	<u>2019</u>	<u>2018</u> (restated)
<b>CURRENT ASSETS:</b>		
Cash	\$ 103,502	\$ 255,153
Cash, restricted	3,143,898	3,296,596
Contracts receivable	210,239	109,064
Prepaid expenses	<u>11,168</u>	<u>19,440</u>
<b>TOTAL CURRENT ASSETS</b>	<u><b>3,468,807</b></u>	<u><b>3,680,253</b></u>
<b>PROPERTY AND EQUIPMENT:</b>		
Leasehold improvements	4,561	4,561
Furniture and equipment	<u>14,510</u>	<u>14,510</u>
	19,071	19,071
Less accumulated depreciation	<u>(17,741)</u>	<u>(17,379)</u>
<b>PROPERTY AND EQUIPMENT, NET</b>	<u><b>1,330</b></u>	<u><b>1,692</b></u>
<b>OTHER NONCURRENT ASSETS:</b>		
Investments	102,528	100,717
Investments, restricted	305,362	300,211
Investment in LLC	1,334	639
Deposit	<u>2,981</u>	<u>3,236</u>
<b>TOTAL OTHER NONCURRENT ASSETS</b>	<u><b>412,205</b></u>	<u><b>404,803</b></u>
<b>TOTAL ASSETS</b>	<u><b>\$ 3,882,342</b></u>	<u><b>\$4,086,748</b></u>
<b>LIABILITIES AND NET ASSETS</b>		
<b>CURRENT LIABILITIES:</b>		
Accounts payable	\$ 360,403	\$ 278,821
Accrued payroll	41,533	37,961
Accrued compensated absences	30,763	19,537
Accrued other expenses	20,140	39,793
Refundable advances from contractors	2,981,016	3,273,829
Fiduciary funds	<u>3,253</u>	<u>9,842</u>
<b>TOTAL CURRENT LIABILITIES</b>	<u><b>3,437,108</b></u>	<u><b>3,659,783</b></u>
<b>TOTAL LIABILITIES</b>	<u><b>3,437,108</b></u>	<u><b>3,659,783</b></u>
<b>NET ASSETS:</b>		
Without donor restrictions:		
Undesignated	351,356	326,865
With donor restrictions:		
Purpose restrictions	<u>93,878</u>	<u>100,100</u>
<b>TOTAL NET ASSETS</b>	<u><b>445,234</b></u>	<u><b>426,965</b></u>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u><b>\$ 3,882,342</b></u>	<u><b>\$4,086,748</b></u>

*See notes to financial statements*



**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statements of Activities**  
**For the Years Ended June 30, 2019 and 2018**

	<u>2019</u>	<u>2018</u> (restated)
<b>CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS</b>		
<b>SUPPORT AND REVENUE</b>		
Contributions	\$ 10,682	\$ 8,408
In-kind support	53,195	41,606
Federal funds	1,674,127	1,202,368
State funds	1,267,823	799,768
Private grants and awards	32,963	17,878
Special events	2,494	2,294
Agent fees	142,698	174,465
Miscellaneous income	1,507	1,900
Interest income	40,388	12,138
Net assets released from donor restrictions	<u>91,369</u>	<u>95,666</u>
<b>TOTAL SUPPORT AND REVENUE</b>		
<b>WITHOUT DONOR RESTRICTIONS</b>	<u>3,317,246</u>	<u>2,356,491</u>
<b>EXPENSES:</b>		
Program services	3,062,731	2,096,284
Supporting services:		
Management and general	226,062	220,722
Fundraising and development	<u>3,962</u>	<u>1,153</u>
Total supporting services	<u>230,024</u>	<u>221,875</u>
<b>TOTAL EXPENSES</b>	<u>3,292,755</u>	<u>2,318,159</u>
<b>INCREASE IN NET ASSETS</b>		
<b>WITHOUT DONOR RESTRICTIONS</b>	<u>24,491</u>	<u>38,332</u>
<b>CHANGES IN NET ASSETS WITH DONOR RESTRICTIONS</b>		
Contributions	2,945	8,380
Private grants and awards	82,202	99,649
Net assets released from donor restrictions	<u>(91,369)</u>	<u>(95,666)</u>
<b>INCREASE (DECREASE) IN NET ASSETS</b>		
<b>WITH DONOR RESTRICTIONS</b>	<u>(6,222)</u>	<u>12,363</u>
<b>CHANGE IN NET ASSETS</b>	18,269	50,695
<b>NET ASSETS, JULY 1, AS RESTATED</b>	<u>426,965</u>	<u>376,270</u>
<b>NET ASSETS, JUNE 30</b>	<u>\$ 445,234</u>	<u>\$ 426,965</u>

See notes to financial statements

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**

Formerly known as Lakes Region Partnership for Public Health, Inc.

**Statement of Functional Expenses**

For the Year Ended June 30, 2019

	Program Services	Supporting Services Management and General	Fundraising	Total Supporting Services	Total Expenses
<b>SALARIES AND RELATED EXPENSES:</b>					
Salaries	\$ 821,401	\$ 176,855	\$ 3,282	\$ 180,137	\$ 1,001,538
Employee benefits	92,610	9,219	-	9,219	101,829
Payroll taxes	61,095	13,328	210	13,538	74,633
	<u>975,106</u>	<u>199,402</u>	<u>3,492</u>	<u>202,894</u>	<u>1,178,000</u>
<b>OTHER EXPENSES:</b>					
Contract services	63,790	14,107	-	14,107	77,897
Contract and grant subcontractors	1,767,075	-	-	-	1,767,075
Discretionary funds	6,000	-	-	-	6,000
Insurance	7,174	4,977	-	4,977	12,151
Fundraising	-	-	50	50	50
Occupancy	59,515	14	-	14	59,529
Operations	66,012	2,552	360	2,912	68,924
Supplies	31,908	608	-	608	32,516
Travel and meetings	84,728	2,240	-	2,240	86,968
Miscellaneous	1,423	1,800	60	1,860	3,283
Depreciation	-	362	-	362	362
Total	<u>\$ 3,062,731</u>	<u>\$ 226,062</u>	<u>\$ 3,962</u>	<u>\$ 230,024</u>	<u>\$ 3,292,755</u>

See notes to financial statements

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**

Formerly known as Lakes Region Partnership for Public Health, Inc.

**Statement of Functional Expenses**

For the Year Ended June 30, 2018

	<u>Program Services</u>	<u>Supporting Services</u>			
	<u>Program</u>	<u>Management</u>		<u>Total</u>	<u>Total</u>
	<u>Services</u>	<u>and</u>	<u>Fundraising</u>	<u>Supporting</u>	<u>Expenses</u>
		<u>General</u>		<u>Services</u>	
<b>SALARIES AND RELATED EXPENSES:</b>					
Salaries	\$ 763,954	\$ 179,039	\$ 876	\$ 179,915	\$ 943,869
Employee benefits	95,176	9,868	-	9,868	105,044
Payroll taxes	59,802	13,159	66	13,225	73,027
	<u>918,932</u>	<u>202,066</u>	<u>942</u>	<u>203,008</u>	<u>1,121,940</u>
<b>OTHER EXPENSES:</b>					
Contract services	70,507	8,982	-	8,982	79,489
Contract and grant subcontractors	880,367	-	-	-	880,367
Discretionary funds	6,080	-	-	-	6,080
Insurance	9,388	2,052	-	2,052	11,440
Fundraising	-	-	205	205	205
Occupancy	68,543	-	-	-	68,543
Operations	48,083	1,986	-	1,986	50,069
Supplies	46,946	338	-	338	47,284
Travel and meetings	46,771	3,020	-	3,020	49,791
Miscellaneous	667	1,975	6	1,981	2,648
Depreciation	-	303	-	303	303
Total	<u>\$ 2,096,284</u>	<u>\$ 220,722</u>	<u>\$ 1,153</u>	<u>\$ 221,875</u>	<u>\$ 2,318,159</u>

*See notes to financial statements*

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statements of Cash Flows**  
**For the Years Ended June 30, 2019 and 2018**

	<u>2019</u>	<u>2018</u> (restated)
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Change in net assets	\$ 18,269	\$ 50,695
Adjustments to Reconcile Increase in Net Assets to to Net Cash (Used) Provided by Operating Activities:		
Depreciation	362	303
Change in assets and liabilities:		
Contracts receivable	(101,175)	19,106
Prepaid expenses	8,272	(401)
Deposit	255	250
Accounts payable	81,582	250,434
Accrued liabilities	(4,855)	(41,493)
Refundable advances from contractors	(292,813)	744,758
Fiduciary passthrough	(6,589)	(370)
Net Cash (Used) Provided by Operating Activities	<u>(296,692)</u>	<u>1,023,282</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Purchase of investments	<u>(7,657)</u>	<u>(400,593)</u>
Net Cash Used by Investing Activities	<u>(7,657)</u>	<u>(400,593)</u>
Net (decrease) increase in cash	(304,349)	622,689
Cash, beginning of year	<u>3,551,749</u>	<u>2,929,060</u>
Cash, ending of year	<u>\$ 3,247,400</u>	<u>\$ 3,551,749</u>
<b>Supplemental Disclosures:</b>		
In-kind donations received	\$ 53,195	\$ 41,606
In-kind expenses	<u>(53,195)</u>	<u>(41,606)</u>
	<u>\$ -</u>	<u>\$ -</u>

*See notes to financial statements*

**PARTNERSHIP FOR PUBLIC HEALTH, INC.  
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.  
NOTES TO FINANCIAL STATEMENTS  
For the Years Ended June 30, 2019 and 2018**

**NOTE 1—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

***Organization and Purpose***

Partnership for Public Health, Inc., formerly known as Lakes Region Partnership for Public Health, Inc., (the Entity) was organized on May 21, 2005 to improve the health and well-being of the Lakes Region through inter-organizational collaboration and community and public health improvement activities.

***Accounting Policies***

The accounting policies of the Entity conform to accounting principles generally accepted in the United States of America as applicable to nonprofit entities, except as indicated hereafter. The following is a summary of significant accounting policies.

***Basis of Presentation***

The financial statements have been prepared in accordance with the reporting pronouncements pertaining to Not-for-Profit Entities included within the FASB Accounting Standards Codification. The Entity is required to report information regarding its financial position and activities according to the following net asset classifications:

*Net Assets Without Donor Restrictions* – Net assets available for use in general operations and not subject to donor or certain grantor restrictions. These net assets may be used at the discretion of management and the Entity's Board of Directors.

*Net Assets With Donor Restrictions* – Net assets subject to donor or certain grantor imposed restrictions. Some donor imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

***Recognition of Donor Restrictions***

Contributions are recognized when the donor makes a promise to give to the Entity that is, in substance, unconditional. The Entity reports contributions restricted by donors as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor restricted contributions are reported as increases in net assets with donor restrictions, depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

***Basis of Accounting***

The financial statements have been prepared on the accrual basis of accounting.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

Revenues from program services are recorded when earned. Other miscellaneous revenues are recorded upon receipt.

***Cash and Cash Equivalents***

Cash and cash equivalents include cash on hand and other cash accounts with a maturity of 90 days or less. For purposes of the Statements of Cash Flows, cash and cash equivalents consist of the following:

	<u>2019</u>	<u>2018</u>
As presented on the Statements of Financial Position -		
Cash and equivalents	\$ 103,502	\$ 255,153
Cash, restricted	<u>3,143,898</u>	<u>3,296,596</u>
	<u>\$ 3,247,400</u>	<u>\$ 3,551,749</u>

***Restricted Cash and Investments***

Restricted cash and investments consist of advanced funding received from the State of New Hampshire for the Integrated Delivery Network (IDN), donor restricted contributions and fiduciary funds.

***Investments***

Investments, which consist principally of certificates of deposit with terms of one to three years, are carried at their approximate market value at June 30, 2019.

***Property and Equipment***

Property and equipment are stated at cost. Donated property and equipment is recorded at fair value determined as of the date of the donation. The Entity's policy is to capitalize expenditures for equipment and major improvements and to charge to operations currently for expenditures which do not extend the lives of related assets in the period incurred. Depreciation is computed using the straight-line method at rates intended to amortize the cost of related assets over their estimated useful lives as follows:

	<u>Years</u>
Leasehold improvements	10-15
Furniture and equipment	5-15

Depreciation expense was \$362 and \$303 for the years ended June 30, 2019 and 2018, respectively.

***Compensated Absences***

Employees of the Entity working full-time and part-time employees working at least 20 hours per week are entitled to paid time off (PTO). PTO is earned from the first day of work. A maximum of 160 hours can be earned based on years of service while 80 hours can be carried over and accumulated to the next year. Accumulated PTO is payable upon termination of employment with proper notice. The Entity accrues accumulated PTO wages accordingly.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

***Donated Services, Materials and Facilities***

The Entity receives significant volunteer time and efforts. The value of these volunteer efforts, while critical to the success of its mission, is not reflected in the financial statements since it does not meet the criteria necessary for recognition according to generally accepted accounting principles. Donated facilities, supplies, equipment and staff support are recorded as "In-kind" contributions if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Entity. Donated goods and professional services are recorded as both revenues and expenses at estimated fair value, see Note 10.

***Functional Allocation of Expenses***

The costs of program and supporting services activities have been summarized on a functional basis in the statements of activities. The statement of functional expenses presents the natural classification detail of expenses by function.

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Accordingly, certain indirect costs have been allocated among the programs and supporting services benefited, based primarily on percentage allocations calculated based on hours worked (time and effort). The expenses that are allocated include salaries, payroll taxes, employee benefits, office supplies, fundraising, operations, and insurance, which are all allocated on the basis of time and effort, as noted previously. In addition, there are some indirect costs which are allocated based on square footage or as a percentage of total expenses.

***Bad Debts***

The Entity uses the reserve method for accounting for bad debts. No allowance has been recorded as of June 30, 2019 and 2018, because management of the Entity believes that all outstanding receivables are fully collectible.

***Estimates***

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

***Income Taxes***

The Entity is exempt from Federal income taxes under Section 501(c)(3) of the Internal Revenue Code and is also exempt from State of New Hampshire income taxes and, therefore, has made no provision for Federal or State income taxes. In addition, the Entity has been determined by the Internal Revenue Service not to be a "Private Foundation" within the meaning of Section 509(a) of the Code. The Entity is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS. FASB Accounting Standards Codification Topic 740 entitled *Accounting for Income Taxes* requires the Entity to report uncertain tax positions for financial reporting purposes. The Entity had no uncertain tax positions as of December 31, 2018 and, accordingly does not have any unrecognized tax benefits that need to be recognized or disclosed in the financial statements

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

***Fair Value of Financial Instruments***

Cash and equivalents, investments, contracts receivable, accounts payable and accrued expenses are carried in the financial statements at amounts which approximate fair value due to the inherently short-term nature of the transactions. The fair values determined for financial instruments are estimates, which for certain accounts may differ significantly from the amounts that could be realized upon immediate liquidation.

***Reclassifications***

Certain reclassifications of amounts previously reported have been made to the accompanying financial statements to maintain consistency between periods presented. The reclassifications had no impact on previously reported net assets.

***Change in Accounting Principle***

On August 18, 2016, FASB issued Accounting Standards Update (ASU) 2016-14, Not-for-Profit Entities (Topic 958) – *Presentation of Financial Statements of Not-for-Profit Entities*. The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The Entity has implemented ASU 2016-14 and has adjusted the presentation in these financial statements accordingly.

**NOTE 2—LIQUIDITY AND AVAILABILITY**

The Entity regularly monitors the availability of resources required to meet its operating needs and other contractual commitments. Cash reserves in excess of daily operational needs are invested in certificates of deposit to maximize investment return while maintaining safety and liquidity.

The following table reflects the Entity's financial assets as of June 30, 2019 and 2018, reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date because of donor restrictions.

Financial assets available for general expenditure, reduced by donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:



**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

	<u>2019</u>	<u>2018</u>
Cash	\$ 3,247,400	\$ 3,551,750
Investments	407,980	400,928
Contracts receivable	<u>210,239</u>	<u>109,064</u>
Total Financial Assets	3,865,619	4,061,742
Less:		
Obligations from contractor restricted funds	(371,033)	(287,252)
Net assets with donor restrictions	(93,878)	(100,100)
Refundable advances from contractors	(2,981,016)	(3,273,829)
Fiduciary funds	<u>(3,253)</u>	<u>(9,842)</u>
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year	<u>\$ 416,439</u>	<u>\$ 390,719</u>

In the event of an unanticipated liquidity need, the Entity also could draw upon \$125,000 of its available line of credit, as further discussed in Note 6.

**NOTE 3—CONCENTRATION OF CREDIT RISK**

The Entity maintains bank deposits at local financial institutions located in New Hampshire. The Entity's demand deposits are insured by the Federal Deposit Insurance Corporation (FDIC) up to a total of \$250,000. As of June 30, 2019, all of the Entity's bank deposits were fully insured and as of June 30, 2018, the balance in excess of federally insured limits was \$118,484.

**NOTE 4—INVESTMENT IN LLC**

In January 2016, the Entity became a member of a newly-established limited liability corporation, Community Health Services Network, LLC ("CHSN"), to support the enhancement of behavioral health services integration in the region. The Entity will provide financial and administrative services to CHSN.

**NOTE 5—REFUNDABLE ADVANCES FROM CONTRACTORS**

Refundable advances from contractors of \$2,981,016 and \$3,273,829 as of June 30, 2019 and 2018, respectively, represents unearned grant revenue on contracts from various funding agencies.

**NOTE 6—LINE OF CREDIT**

The Entity has a \$125,000 line of credit with Bank of New Hampshire. The interest rate for the credit line was 7.50% at June 30, 2019, and 7.00% at June 30, 2018. The interest rate is based on the Wall Street Journal Prime Rate as published in the Wall Street Journal. At June 30, 2019 and 2018, the balance of the line of credit was \$0.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

**NOTE 7—NET ASSETS WITH DONOR RESTRICTIONS**

Net assets with donor restrictions consist of the following donor restricted funding at June 30, 2019 and 2018:

	<u>2019</u>	<u>2018</u>
Family Caregivers Network	\$ 2,866	\$ 2,769
ServiceLink	7,749	8,550
Volunteer CERT	1,477	1,402
N4A	1,006	1,006
CERT	18,968	17,177
NH Charitable Foundation	12,185	8,461
Tufts Momentum	6,033	-
DSRIP Incentive	8,486	-
Endowment for Health	12,000	-
Other	23,108	60,735
Total Net Assets with Donor Restrictions	<u>\$ 93,878</u>	<u>\$ 100,100</u>

**NOTE 8—CONCENTRATION OF REVENUE RISK**

The Entity's primary source of revenues is fees and grants received from the State of New Hampshire and directly from the federal government. During the years ended June 30, 2019 and 2018, the Entity recognized revenue of \$2,941,950 (88.7%) and \$2,002,136 (85.2%), respectively, from fees and grants from governmental agencies. Revenue is usually recognized as earned under the terms of the grant contracts and is received on a cost reimbursement basis. However, in the years ended June 30, 2019 and June 30, 2018, the Entity received \$1.8 million and \$1.9 million, respectively, in capacity building funds on a five-year, \$12.8 million governmental contract waiver to enhance behavioral health integration in the region. This revenue is anticipated to be recognized over a five-year period through fiscal year 2021, dependent on the receipt of State matching funds, achievement of performance metrics and other criteria. Other support originates from other program services, contributions, in-kind donations, and other income.

**NOTE 9—LEASE COMMITMENTS**

The Entity entered into a lease for office space located in Tamworth, NH with monthly lease payments of \$1,134 through December 2018. The lease was renewed through June 30, 2020 with payments of \$1,008 through December 2019 and \$1,048 thereafter, through June 2020. Lease expense for the years ended June 30, 2019 and June 30, 2018 were \$12,483 and \$13,604, respectively.

The Entity also has two leases for office spaces in Laconia, NH. The first lease has monthly payments of \$2,089 through August 31, 2018. An updated agreement was entered into with required payments of \$2,147 through August 31, 2019. The second lease for additional office space was entered into on June 1, 2018. Under the terms of the agreement, monthly payments will be \$780 per month through May 2019. The updated agreement effective June 1, 2019 reflects payments of \$795 through May 2020. Lease expense for the years ended June 30, 2019 and June 30, 2018 for these two leases was \$35,013 and \$36,583, respectively.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

The following is a schedule, by years, of the future minimum payments for operating leases:

Year Ended <u>June 30,</u>	Annual <u>Lease Commitments</u>
2020	\$ 25,375
2021	6,288
	<u>\$ 31,663</u>

**NOTE 10—DONATED SERVICES, MATERIALS AND FACILITIES**

The Entity receives various donated services, materials and facilities. For the years ended June 30, 2019 and 2018, there has been \$53,195 and \$41,606, respectively, of in-kind donations recognized as revenue. The following amounts of these donations have been included as functional expenses in these financial statements:

	<u>2019</u>	<u>2018</u>
Supplies	\$ 2,241	\$ 1,820
Contract services	34,132	7,542
Occupancy	600	5,500
Travel and meetings	3,450	3,600
Operations	10,950	10,950
Contract and grant subcontractors	1,822	12,194
	<u>\$ 53,195</u>	<u>\$ 41,606</u>

**NOTE 11—CONTINGENCIES**

The Entity participates in a number of federally assisted grant programs. These programs are subject to financial and compliance audits by the grantors or their representatives. The amounts, if any, of additional expenses which may be disallowed by the granting agency cannot be determined at this time, although the Entity expects such amounts, if any, to be immaterial.

**NOTE 12—RESTATEMENT OF NET ASSETS**

During the year ended June 30, 2019, it was noted that refundable advances from contractors was overstated and net assets with donor restrictions was understated. The impact of this restatement on net assets as of July 1, 2017 and 2018 is as follows:

Net Assets - July 1, 2017, as previously reported	\$ 311,894
Amount of restatement due to:	
Overstatement of refundable advances from contractors	64,376
Net Assets - July 1, 2017, as restated	<u>\$ 376,270</u>
Net Assets - July 1, 2018, as previously reported	\$ 352,751
Amount of restatement due to:	
Overstatement of refundable advances from contractors	74,214
Net Assets - July 1, 2018, as restated	<u>\$ 426,965</u>

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2019 and 2018

**NOTE 13—SUBSEQUENT EVENTS**

Subsequent events have been evaluated through November 7, 2019, which is the date the financial statements were available to be issued.

Current Board List Feb 2020

1. Karin Salome, Pres.	LRGH Public Health Nurse
2. Sandi Moore- Beinoras, Secretary	Psychiatric Nurse -Private Practice
3 Rich Crocker	Retired CEO, Lakes Region Community Services
4. Trish Stafford, VP	HR Director - Town of Meredith
5 Maureen MacDonald	Public Health Nurse - DHHS
6 Brandon Archibald	Financial Manager - Ivy League Advisory Group
7. Susanne Chisholm	Attorney, Partner
8 Lisa Dupuis, treas.	CEO, Central NH VNA and Hospice
9. Brian Lamontagne	Branch Branch Manager FSB
10. Sarah Stanley	Public Information Veteran's Home

## **Shelley M. Carita, CFRE**

*Highly motivated leader with over 20 years successful leadership experience in individual and corporate fundraising, marketing, corporate, foundation and federal grant writing, program development, volunteer recruitment, strategic planning and organizational development.*

### **Professional Experience**

#### **EXECUTIVE DIRECTOR**

**Partnership for Public Health, Laconia, NH**

**Jan 2017 – Present**

Organization Leader for a regional public health agency serving New Hampshire's Lakes Region. Responsible for resource development, grants/contracts management, program development and implementation, strategic planning and community relations. Provides staff supervision and all human resource activities.

#### **VICE PRESIDENT FOR DEVELOPMENT**

**New Hampshire Association for the Blind Concord, NH**

**June 2006 – Jan 2017**

Fundraising and marketing leader for a statewide organization serving the blind and visually impaired. Develops and manages a comprehensive development program raising over \$1.2 million dollars annually. Works closely with Board of Directors and Regional Advisory Committees to organize fundraising and awareness events across the state. Identifies opportunities for foundation and corporate support. Cultivates and stewards major gift and planned giving prospects. Supervises professional fundraising and marketing staff.

##### ***Notable Accomplishments:***

- Created state-wide marketing and public education plan that provides broad outreach to service clubs, retirement communities, eye care professionals, the media, and the community at large.
- Created a sustainable revenue source for Agency by developing project introducing occupational therapy as a sustainable revenue source.
- Secured foundation grant funding of over \$500,000 annually including two awards in excess of \$100,000.
- Identified key major/planned giving donor prospects and initiated a successful donor cultivation strategy resulting in the receipt of significant gifts and gift expectancies.
- Recruited and motivated volunteers across the state to establish regional advisory committees in Manchester, Portsmouth, Concord and Lakes Region. Committees raise money in their respective regions through "Dinners in the Dark" and other third party fundraising events.

#### **EXECUTIVE DIRECTOR**

**DEVELOPMENT AND MARKETING DIRECTOR**

**2001-2006**

**American Red Cross**

**Laconia and Concord, New Hampshire**

Developed and managed a comprehensive fund development and marketing program for two merging Red Cross chapters. Coordinated all fund development programs including planned giving, direct mail, major gifts, special events, grant writing and marketing. Developed and monitored agency budget. Supervised staff and coordinated volunteers for disaster response as well as public relations and special event assignments.

**Notable Accomplishments:**

- Promoted to Executive Director from Fund Development Director.
- Decreased operating budget while expanding service delivery level.
- Doubled municipal revenue allocations by educating communities about Red Cross services.

**Summary of Prior Non-Profit Management Experience**

**Case Management Supervisor, (1998-2000)** Lakes Region Community Services Council, Laconia, NH - Provided training and supervision to case managers and family home providers serving adults with developmental disabilities. Worked closely with public guardians to ensure services were carried out according to ISP. Negotiated contracts with vendors.

**Director of Social Services, (1996-1998)** Dover Housing Authority, Dover, NH  
Developed and implemented all social service programs for seniors and families living in Dover's public housing community. Supervised program staff and volunteers. Negotiated contracts with service agencies. Raised over 1 million dollars in federal funding. Worked collaboratively with agencies throughout Strafford County.

**Manager of Housing Services, (1993-1996)** Strafford Guidance Center, Dover, NH  
Established intensive supported housing programs for adults with severe mental illness. Worked closely with doctors and treatment teams to ensure smooth transition from state hospital to community based model. Supervised department with over 30 direct service providers. Secured funding through federal grants and state Medicaid program. Served as HUD's administrator of federal homeless housing funds for Strafford County.

**Director of Family Services, (1991-1993)** Manchester Housing and Redevelopment Authority, Manchester, NH – Developed and managed all family empowerment and drug prevention programs in Manchester's 3 family public housing communities. Created State's first small business training program for public housing residents. Secured federal grant funding for all programs including a model after-school program.

**Education**

**Master of Business Administration (MBA) - 1996**

Southern New Hampshire University, Graduate School of Business Manchester, NH

**M.S. Community Economic Development - 1993**

Southern New Hampshire University, Graduate School of Business, Manchester, NH

**B.A. Marketing - 1984**

New Hampshire College, Manchester, NH

**Volunteer Activities/ Memberships**

- Certified Fundraising Executive -CFRE
- Reviewer, National Accreditation Council for Agencies Serving People with Blindness or Visual Impairment (NAC) - 2009 to present
- American Red Cross – Trainer - Lakes Region Disaster Action Team, 2006 to 2009
- Board of Directors - Lakes Region Partnership for Public Health 2005-2006
- Past President- Gilford Rotary Club, Paul Harris Fellow
- Past Officer, Horseshoe Pond Toastmasters International, Concord, NH
- PGNNE –Planned Giving Council of Northern New England
- Upper Valley Planned Giving Council

**Marie L. Tule. CPA, MSA**

**Educational Experience**

CPA –continuing professional education – 40 hours annually

Bentley University – MS in Accountancy

University of Vermont – BA degree

**Work Experience**

**Lakes Region Partnership for Public Health, Laconia, NH**      2013 – Current  
**Finance Director**

- Prepare and analyze monthly financial statements
- Develop budgets and forecasts, and manage cash flow
- Responsible for contract billing and reporting
- Responsible for annual financial statement and compliance audits
- Supervise accounting staff.

**Melanson Heath & Company, PC, Nashua, NH**      1994 – 2013  
**Manager**

- Planned, supervised, and prepared audited GAAP financial statements and compliance reports for nonprofit and commercial clients.
- Performed financial statement and data analytics, reconciled general ledger accounts, prepared audit schedules and adjusting entries.
- Documented accounting systems, evaluated client internal controls, and prepared management letters of recommendations.
- Proficient in Microsoft Excel, Word, PowerPoint, QuickBooks, and Fixed Asset software.
- Conducted presentations to Boards and audit committees of financial statements and compliance audit results.

**Price Waterhouse Coopers, LLP, Manchester, NH**      1989 – 1994  
**Senior Accountant**

- Planned, supervised, and performed audits, reviews, and compilations of financial statements.
- Clients included manufacturing, financial, and higher educational institutions.
- Performed Federal compliance (A-133) audits of sponsored research programs.

**The Donoghue Organization, Holliston, MA**      1986 – 1988  
**Controller/Financial Analyst**

- Prepared and analyzed monthly financial statements for newsletter publishing company.
- Supervised accounting staff including general ledger, accounts receivables, payroll, and accounts payables functions.



- Prepared budgets and forecasts, and managed cash flow.
- Responsible for human resource function.

**Dennison Computer Supplies, Waltham, MA** 1984 - 1986

Payroll Administrator

- Responsible for payroll function including filing monthly and quarterly tax reports (Forms 940,941)

Billing Coordinator

- Responsible for invoicing all shipments, rentals, and maintenance contracts. Filed sales & use tax returns.

Senior Accounts Payable

- Processed invoices and prepared vendor checks.

Accounts Receivable

- Applied cash receipts to AR ledger and researched discrepancies.

**Volunteer Experience**

NH Society of Certified Public Accountants  
Committee Chair May, 2010 – Present

Greater Nashua Mental Health Center – Treasurer  
Audit & Finance Committee Chair March, 2011 - Present

Various local nonprofits – Treasurer, Trustee 2001 – 2013

**References - Available upon request.**

## KELLEN GASPA

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### QUALIFICATION HIGHLIGHTS

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- Experienced in working with and advocating for at-risk populations
- Strict adherence with organization confidentiality policies
- Exceptional communication, interviewing and assessment skills
- Demonstrated excellence in community outreach and education
- Excellent organizational and time management skills
- Experienced in working with the Strategic Prevention Framework
- Accomplished public speaker

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### PROFESSIONAL EXPERIENCE

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#### Partnership for Public Health, Laconia, NH

Assistant Director/Director of Substance Use Disorder Systems Integration 11/2016-Present

- Support state & regional initiatives across the SUD continuum of care
- Develop and maintain regional assets & gaps analysis
- Promote evidence-based strategies for prevention, intervention, treatment & recovery
- Facilitate regional leadership team meetings
- Serve as a content expert on the Winnepesaukee Public Health Council
- Build capacity & expand service delivery in the Winnepesaukee Region of New Hampshire
- Increase awareness and access to SUD services
- Plan & facilitate quarterly regional Educator's Prevention Summits
- Maintain records and submit data for federal reporting
- Supervise Regional Substance Misuse Prevention Team

#### Regional Substance Misuse Prevention Coordinator

08/2015-11/2016

- Provide education, training & technical assistance to schools, organizations & local coalitions
- Facilitate Connect Suicide Prevention Trainings throughout the region
- Increase awareness of best practices in prevention, intervention, treatment & recovery
- Organize DEA Rx Drug Take Back and other various community events throughout the region
- Identify, build and maintain community partnerships in various sectors
- Support regional work across the Continuum of Care
- Advise Partners in Community Wellness Team
- Maintain records and submit data for federal reporting (PWITS)

#### Ascentria Care Alliance, Manchester, NH

Outreach/Employment Specialist, Health Profession Opportunity Project (HPOP)

2013-2015

- Recruitment and enrollment into the HPOP program
- Facilitate Information Sessions throughout New Hampshire
- Determine participant eligibility
- Assess participant need and provide links to relevant community resources
- Identify, build and maintain community partnerships
- Design and facilitate participant professional development training
- Assist in employment placement of trained participants
- Maintain records and submit data for federal reporting

#### Project EXTRA/LMS Pam, Laconia, NH

Site Director Pleasant Street School, Project EXTRA Program

2006-2013

- Manage daily operation of program
- Oversee curriculum links to Common Core Standards
- Supervise 12 lead staff, junior staff, volunteers and subcontractors
- Handle case sensitive information including disclosures of abuse and neglect
- Develop and implement behavior modification plans tailored to student needs

John J. Beland

## **SUMMARY**

- Proven professional with experience in all ranks of municipal fire department operations, administration, and community relations efforts.
- Proven participant in improving the quality of life for others through civic activities and service organizations.
- Dedicated team player with high code of conduct and integrity.

## **AREAS OF EXPERIENCE**

### **DEVELOPMENT**

- Develop and administration of 1.8-million-dollar municipal fire department budget.
- Plan, develop, execute, and direct all phases of fire department administration and operations including but not limited to, budget development and administration, delivery of high quality emergency services in a safe, efficient and effective manner, development and enforcement of Standard Operating Guidelines, Rules & Regulations and administration of town policy, provide training and educational opportunities for 15 career personnel and 30 call company personnel.
- Pursue local, state and federal grant opportunities to enhance response capabilities through equipment purchases, training and exercise delivery.

### **COMMUNITY RELATIONS**

- Build and maintain strong working relationships with internal/external customers, political/civic leaders.
- Leadership role to raise approximately \$30,000.00 to construct the Gilford Fire-Rescue Training Facility.
- Strong ability to build working relationships with various organizations, customers, community individuals and professionals.

## **WORK EXPERIENCE**

Partnership for Public Health  
Emergency Preparedness & Response Coordinator  
January 2018-Present  
67 Water St. Suite 105  
Laconia NH 03246

Lakes Region Mutual Fire Aid  
Deputy Coordinator  
October 2011-January 2018  
62 Communication Drive  
Laconia, New Hampshire 03246

Town of Gilford-Fire-Rescue Department  
June 1983-September 2011 (Retired)  
39 Cherry Valley Road  
Gilford, New Hampshire 03249  
Live-In Student, Career Firefighter, Lieutenant, Captain, Deputy Chief, Fire Chief

NH Fire Academy  
Senior Staff Instructor  
1987-Present

Lakes Region Mutual Fire Aid  
Training & Education Committee  
Late 1980's- 2018

NH Community College  
Laconia NH  
Adjunct Professor  
1993 - 2012

## **EDUCATION**

New Hampshire Technical College  
Laconia, NH  
A.S. Fire Protection  
1981-1983

Notre Dame College  
Manchester, NH  
92 Credits toward B.S. Degree  
in Elementary Education  
1999-2001

Certified Public Manager  
NH Bureau of Training & Education  
Concord NH  
2010 - 2011

**Position Relevant Certifications:**

IS-00800.b National Response Framework; ICS 402 Overview for Executives & Senior Officials; G775 EOC Management & Operations, Command & General Staff Functions for Local Incident Management Teams; IS-00703 NIMS Resource Management; IS-00700; National Incident Management System; Incident Command System-Instructor; National Fire Academy-Incident Command System; Emergency Management Institute-IS-00120.An introduction to Exercises; Homeland Security Exercise & Evaluation Program; Incident Management Symposium-Phoenix AZ  
Strategic National Stockpile - Center for Domestic Preparedness, Anniston AL  
L0489 Managing Spontaneous Volunteers - Homeland Security & Emergency Management

CERT, Train the Trainer; CERT Team Manager; Essentials of POD's, Train the Trainer; FEMA, Management of Volunteers

\*Certificates available upon request.

**PROFESSIONAL AFFILIATIONS**

Certified Public Managers Association  
2011 - Present

NH Fire Instructor and Officers Association  
Past Director, Past President

Leadership Lakes Region  
Board of Directors  
2006-Present

Gilford Rotary Club  
Board of Directors-Present  
President 7/2018 - 6/2019

Lakes Region Partnership for Public Health  
Board of Directors  
2011-2014

Lakes Region St. Baldrick's-Event Organizer  
Childhood Cancer Fundraiser  
Gilford NH/Monrovia, CA  
2004-Present

**AWARDS**

Gilford Fire Department Fire Officer of the Year  
John T Ayers-Fire Instructor of the Year Award  
NH Fire Academy Award  
Proclamation-John Beland Day, City of Laconia, Lakes Region Respite Project

NH Law Enforcement/Fire Service; Firefighter of the Year  
Knight of the Bald Table-St. Baldrick's Foundation, Childhood Cancer Treatment and  
Research  
Gilford Rotary Club-Paul Harris Fellow+1

## Tamera S. Carmichael

### SUMMARY

A Proven program administrator with 29 years of experience developing effective social support programs. Secured over \$1.4 million in program funding to rectify the social detriments of health for underserved families and individuals. Served on over 15 boards and coalitions to establish inter-organizational partnerships and foster community collaboration. Supervised 5 diverse programs with 25 team members to create and implement holistic public policies.

### EDUCATION

**University of South Florida**  
*Bachelor of Arts in Sociology*

Tampa, FL  
1988

**Saint Petersburg College**  
*Associate of Arts Degree*

Clearwater, FL  
1986

### PROFESSIONAL EXPERIENCE

**State of Florida Department of Health**  
*Program Development Administrator*

Gainesville, FL  
2008 – Present

- ✿ Responsible for development and management of 5 public health programs whose budgets exceed \$2 million
- ✿ Establish and monitor contracts for North Central Florida Health Department Consortium
- ✿ Effective management and development of 25 diverse employees, interns, and volunteers
- ✿ Over 8 years member of CHIP/CHA Steering Committee and Performance Management Council

**Bay Area Bail Bonds & Investigations, Inc.**  
*Owner/Operator*

Clearwater, FL  
2001 – 2008

- ✿ Qualified and wrote more than \$2 million monthly in commercial bail indemnities
- ✿ Managed 9 employees of diverse backgrounds as well as payroll, accounts receivable, and accounts payable.
- ✿ Served as Secretary of the Pinellas County Bail Bond Association
- ✿ Used investigation techniques and critical analytical skills to locate and retrieve delinquent sureties

**Mease Manor Inc.**  
*Social Services Director*

Dunedin, FL  
1998 – 2001

- ✿ Monitored compliance and documentation per State and Federal Regulations in a long-term care facility
- ✿ Established interdepartmental plans of care for residents and supervised multiple employees of diverse backgrounds and responsibilities
- ✿ Inaugural winner of the Florida Healthcare Association's Social Service Worker of the Year award
- ✿ Established family/caregiver support group
- ✿ Collaborated with community services to provide quality care and ensure psychosocial well-being of residents and responsible parties

**Highland Pines Nursing Manor**  
*Social Services Director*

Clearwater, FL  
1995 – 1998

- ✿ Monitored compliance and documentation per State and Federal Regulations in a long-term care facility
- ✿ Established interdepartmental plans of care for residents and supervised multiple employees of diverse backgrounds and responsibilities
- ✿ Coordinated quality care and psychosocial well-being for residents and responsible parties

**Suncoast Hospital**

*Patient Service Coordinator I*

Largo, FL  
1993 – 1995

- ✿ Monitored compliance and documentation per State and Federal Regulations in a skilled nursing and acute care facilities
- ✿ Provided individualized discharge planning and interdepartmental coordination for patients
- ✿ On-call rotation as Patient Service Coordinator for all hospital departments (surgery, Maternity, ICU, etc.)

**Family Resources, Inc.**

*Youth Care Worker III*

St. Petersburg, FL  
1990 – 1993

- ✿ Care and Supervision of children 9-18 years old in a crisis/runaway shelter, phone crisis counsel
- ✿ Supervised staff and volunteers, recruited and trained volunteers, marketing and fund raising
- ✿ Interfaced with law enforcement, child protective services, and victims' advocates
- ✿ Supervised visits with parents and children
- ✿ Completed necessary documentation for a non-profit organization per guidelines

---

**LICENSURE AND CERTIFICATIONS**

State of Florida Notary Public  
Florida Certified Contract Manager  
State Certified Contract Administrator

---

**SKILLS**

**Soft:** Program Development, Employee Recruitment and Empowerment, Community Collaboration, Effective Communication, Public Speaking, Strategic Planning, and Quality Improvement

**Hard:** Microsoft Office Suite, Proprietary Software, Database Management, Financial Management, Regulatory Compliance, Contract Administration, and Grant Writing



**PARTNERSHIP FOR PUBLIC HEALTH, INC.**

**Key Personnel**

**FY 2019 – FY 2021**

<b>Name</b>	<b>Job Title</b>	<b>Salary</b>	<b>% Paid from this Contract</b>	<b>Amount Paid from this Contract</b>
Shelley Carita/ Tamera Carmichael	Executive Director	\$ 80,000	37%	\$ 62,368
Marie Tule	Finance Director	\$ 74,641	16%	\$ 24,573
Kelley Gaspa/ Kimby Wade	Director of Behavior Health Initiatives, Substance Misuse & Suicide Prevention Mgr	\$ 50,000	97%	\$ 99,869
John Beland	Emergency Preparedness & Response Manager	\$ 63,000	100%	\$ 119,178



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Lamprey Health Care, Inc., (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 128 Route 27 Raymond, NH 03077.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YYYY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$856,467.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-11, Young Adult Strategies, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-11, Young Adult Strategies, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

Lamprey Health Care, Inc.

Amendment #5

Contractor Initials

OS  
GW



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/16/2020

Date

DocuSigned by:

*Lisa M. Morris*

DocuSign Envelope ID: D638D8E8BAC544A0

Name: Lisa M. Morris

Title: Director, Division of Public Health Svcs.

Lamprey Health Care, Inc.

11/13/2020

Date

DocuSigned by:

*Gregory White*

DocuSign Envelope ID: 7062388D197274DA

Name: Gregory White

Title: CEO

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

**OFFICE OF THE ATTORNEY GENERAL**

11/17/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "C. Pinos", enclosed within a rectangular box.

D5CA9202E32C4AE...

Name: Catherine Pinos

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:

Vendor Name: Lamproy Health Care, Inc.  
Contract Name: Regional Public Health Network Services  
Region: Seacoast

Program Name and Funding Amounts											
State Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corp.	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategic	Childhood Lead Poisoning Prevention Community Assessment	Climate and Health Adaptation	Hepatitis A Vaccination Clinics
2019		\$ -	\$ -			\$ -	\$ -	\$ -	\$ 1,200.00	\$ -	\$ 10,000.00
2020		\$ 30,000.00	\$94,857	\$50,000	\$10,000	\$ 73,849.00	\$ 42,900.00	\$105,912	\$ 9,633.00	\$ 40,000.00	\$ 10,000.00
2021	\$ 10,000.00	\$ 30,000.00	\$94,857		\$10,000	\$ 73,849.00	\$ 42,900.00	\$52,431	\$ 6,186.00	\$ 29,511.00	\$ -
											\$ 896,467.00

DS  
  
Contractor Initials: \_\_\_\_\_

Date: 11/13/2020

Exhibit B-11 Budget Sheet, Amendment # 5

New Hampshire Department of Health and Human Services COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD									
Bidder/Program Name: Lamprey Health Care/SPHN Budget Request for: Young Adult Strategies Budget Period: State Fiscal Year 2021									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHSB contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,500.00	\$ 500.00	\$ 6,000.00						
2. Employee Benefits	\$ 925.00	\$ 25.00	\$ 950.00						
3. Consultants									
4. Equipment									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 1,550.00	\$ 155.00	\$ 1,705.00						
6. Travel									
7. Occupancy	\$ 100.00	\$ 10.00	\$ 110.00						
8. Current Expenses									
Telephone									
Postage									
Subscriptions									
Audit and Legal									
Insurance									
Board Expenses									
9. Software									
10. Marketing/Communications	\$ 197.73	\$ 19.77	\$ 217.50						
11. Staff Education and Training	\$ 48,900.00	\$ 4,890.00	\$ 53,790.00						
12. Subcontracts/Agreements									
13. Other									
Indirect									
<b>TOTAL</b>	<b>\$ 56,902.73</b>	<b>\$ 5,825.77</b>	<b>\$ 62,728.50</b>						
Indirect As A Percent of Direct									
		10.0%							
			\$ (0.00)						
			\$ 61,823.00						

DS  
 CW  
 Contractor Initials

11/13/2020  
 Date

# State of New Hampshire

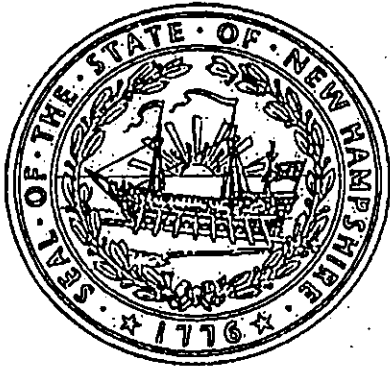
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that LAMPREY HEALTH CARE, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on August 16, 1971. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 66382

Certificate Number : 0004926074



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 28th day of May A.D. 2020.

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

William M. Gardner  
Secretary of State

**CERTIFICATE OF AUTHORITY**

I, Thomas Christopher Drew, hereby certify that:  
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Lamprey Health Care, Inc..  
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on March 25, 2020, at which a quorum of the Directors/shareholders were present and voting.  
(Date)

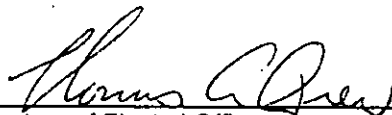
VOTED: That Gregory A. White (may list more than one person)  
(Name and Title of Contract Signatory)

is duly authorized on behalf of Lamprey Health Care, Inc. to enter into contracts or agreements with the State  
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30) days** from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: November 3, 2020

  
\_\_\_\_\_  
Signature of Elected Officer  
Name: Thomas Christopher Drew  
Title: Secretary, Board of Directors



LAMPHEA-01

ASTOBERT



# CERTIFICATE OF LIABILITY INSURANCE

 DATE (MM/DD/YYYY)  
 7/1/2020

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b> License # 1780862 HUB International New England 275 US Route 1 Cumberland Foreside, ME 04110	<b>CONTACT NAME:</b> <b>PHONE</b> (A/C, No, Ext): (207) 829-3450 <b>FAX</b> (A/C, No): (207) 829-6350 <b>E-MAIL ADDRESS:</b>														
<b>INSURED</b>  Lamprey Health Care, Inc. 207 South Main Street Newmarket, NH 03857	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Philadelphia Indemnity Insurance Company</td> <td>18058</td> </tr> <tr> <td>INSURER B: Atlantic Charter Insurance Company</td> <td>44326</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Philadelphia Indemnity Insurance Company	18058	INSURER B: Atlantic Charter Insurance Company	44326	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Philadelphia Indemnity Insurance Company	18058														
INSURER B: Atlantic Charter Insurance Company	44326														
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	ADOL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PHPK2149654	7/1/2020	7/1/2021	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 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
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	WCA00545408	7/1/2020	7/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Evidence of General Liability and Workers Compensation coverage.

## CERTIFICATE HOLDER

## CANCELLATION

NH DHHS 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 
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# LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

## Our Mission

**The mission of Lamprey Health Care is to provide high quality primary medical care and health related services, with an emphasis on prevention and lifestyle management, to all individuals regardless of ability to pay.**

- We seek to be a **leader in providing access** to medical and health services that improve the health status of the individuals and families in the communities we serve.
- Our mission is to **remove barriers that prevent access to care**; we strive to eliminate such barriers as language, cultural stereotyping, finances and/or lack of transportation.
- Lamprey Health Care's **commitment to the community** extends to providing and/or coordinating access to a full range of comprehensive services.
- Lamprey Health Care is committed to achieving the highest level of patient satisfaction through a personal and caring approach and **exceeding standards of excellence in quality and service.**

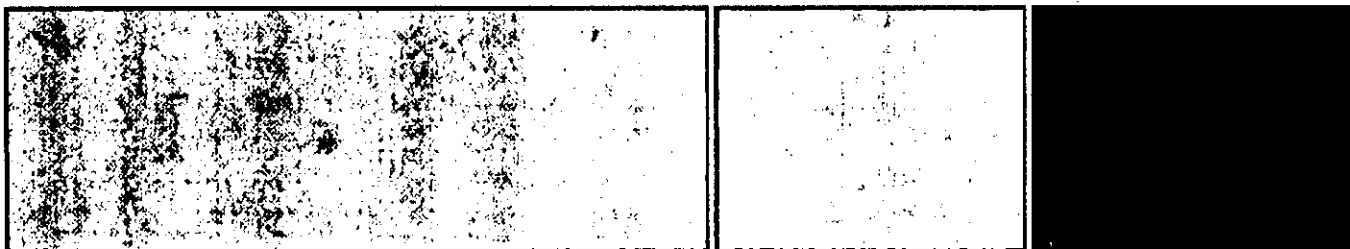
## Our Vision

- We will be the **outstanding primary care choice** for our patients, our communities and our service area, and the standard by which others are judged.
- We will continue as **pacesetter** in the use of new knowledge for lifestyle improvement, quality of life.
- We will be a **center of excellence** in service, quality and teaching.
- We will be **part of an integrated system** of care to ensure access to medical care for all individuals and families in our communities.
- We will be an **innovator** to foster development of the best primary care practices, adoption of the tools of technology and teaching.
- We will **establish partnerships**, linkages, networks and referrals with other organizations to provide access to a full range of services to meet our communities' needs.

## Our Values

- We exist to **serve the needs of our patients.**
- We value a positive **caring approach** in delivering patient services.
- We are committed to **improving the health** and total well-being of our communities.
- We are committed to **being proactive** in identifying and meeting our communities' health care needs.
- We provide a supportive environment for **the professional and personal growth, and healthy lifestyles of our employees.**
- We provide an **atmosphere of learning** and growth for both patients and employees as well as for those seeking training in primary care.
- We succeed by utilizing a **team approach** that values a positive, constructive commitment to Lamprey Health Care's mission.

Affirmed 12/18/2019



# LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

## CONSOLIDATED FINANCIAL STATEMENTS

and

## SUPPLEMENTARY INFORMATION

September 30, 2019 and 2018

With Independent Auditor's Report





## INDEPENDENT AUDITOR'S REPORT

Board of Directors  
Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc.

We have audited the accompanying consolidated financial statements of Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc., which comprise the consolidated balance sheets as of September 30, 2019 and 2018, and the related consolidated statements of operations, functional expenses, changes in net assets and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### ***Management's Responsibility for the Consolidated Financial Statements***

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with U.S. generally accepted accounting principles; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Board of Directors

Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc.

Page 2

### ***Opinion***

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc. as of September 30, 2019 and 2018, and the results of their operations, changes in their net assets and their cash flows for the years then ended, in accordance with U.S. generally accepted accounting principles.

### ***Change in Accounting Principles***

As discussed in Note 1 to the financial statements, in 2019 Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc. adopted new accounting guidance, Financial Accounting Standards Board Accounting Standards Updates No. 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities* (Topic 958) and No. 2016-18, *Restricted Cash* (Topic 230). Our opinion is not modified with respect to these matters.

### ***Other Matter***

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying consolidating balance sheets as of September 30, 2019 and 2018, and the related consolidating statements of operations and changes in net assets for the years then ended, are presented for purposes of additional analysis rather than to present the financial position and changes in net assets of the individual entities, and are not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audits of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with U.S. generally accepted auditing standards. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

*Berry Dunn McNeil & Parker, LLC*

Portland, Maine  
January 17, 2020

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Balance Sheets****September 30, 2019 and 2018****ASSETS**

	<u>2019</u>	<u>2018</u>
Current assets		
Cash and cash equivalents	\$ 1,422,407	\$ 1,341,015
Patient accounts receivable, net	1,237,130	1,330,670
Grants receivable	452,711	228,972
Other receivables	236,798	172,839
Inventory	81,484	72,219
Other current assets	<u>78,405</u>	<u>139,568</u>
Total current assets	3,508,935	3,285,283
Investment in limited liability company	19,101	22,590
Assets limited as to use	2,943,714	3,205,350
Fair value of interest rate swap	13,512	-
Property and equipment, net	<u>7,608,578</u>	<u>7,584,923</u>
Total assets	<u>\$14,093,840</u>	<u>\$14,098,146</u>

**LIABILITIES AND NET ASSETS**

Current liabilities		
Accounts payable and accrued expenses	\$ 641,818	\$ 438,830
Accrued payroll and related expenses	961,024	919,690
Deferred revenue	85,418	117,696
Current maturities of long-term debt	<u>106,190</u>	<u>102,014</u>
Total current liabilities	1,794,450	1,578,230
Long-term debt, less current maturities	2,031,076	2,134,337
Fair value of interest rate swap	<u>-</u>	<u>13,404</u>
Total liabilities	<u>3,825,526</u>	<u>3,725,971</u>
Net assets		
Without donor restrictions	9,732,208	10,061,029
With donor restrictions	<u>536,106</u>	<u>311,146</u>
Total net assets	<u>10,268,314</u>	<u>10,372,175</u>
Total liabilities and net assets	<u>\$14,093,840</u>	<u>\$14,098,146</u>

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The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statements of Operations****Years Ended September 30, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
Operating revenue		
Patient service revenue	\$ 9,143,768	\$ 9,426,185
Provision for bad debts	<u>(398,544)</u>	<u>(354,460)</u>
Net patient service revenue	8,745,224	9,071,725
Grants, contracts and contributions	6,104,270	5,538,925
Other operating revenue	1,637,578	769,240
Net assets released from restrictions for operations	<u>75,197</u>	<u>118,447</u>
Total operating revenue	<u>16,562,269</u>	<u>15,498,337</u>
Operating expenses		
Salaries and wages	10,584,157	9,941,188
Employee benefits	1,993,787	1,688,571
Supplies	646,774	715,862
Purchased services	1,731,988	1,569,327
Facilities	580,711	594,355
Other operating expenses	697,570	537,414
Insurance	145,114	143,338
Depreciation	461,062	459,716
Interest	<u>107,855</u>	<u>96,431</u>
Total operating expenses	<u>16,949,018</u>	<u>15,746,202</u>
Deficiency of revenue over expenses	(386,749)	(247,865)
Change in fair value of interest rate swap	26,916	365
Net assets released from restrictions for capital acquisition	<u>31,012</u>	<u>16,651</u>
Decrease in net assets without donor restrictions	<u>\$ (328,821)</u>	<u>\$ (230,849)</u>

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The accompanying notes are an integral part of these consolidated financial statements.

LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

Consolidated Statement of Functional Expenses

Year Ended September 30, 2019

	Healthcare Services	AHEC/PHN	Transportation	Total Healthcare Services	Administration and Support Services	Total
Salaries and wages	\$ 8,599,722	\$ 418,785	\$ 127,054	\$ 9,145,561	\$ 1,438,596	\$ 10,584,157
Employee benefits	1,531,182	76,015	23,346	1,630,543	363,244	1,993,787
Supplies	614,628	12,839	47	627,514	19,260	646,774
Purchased services	892,684	225,590	407	1,118,681	613,307	1,731,988
Facilities	4,020	477	23,155	27,652	553,059	580,711
Other	283,801	157,524	120	441,445	256,125	697,570
Insurance	-	-	8,922	8,922	136,192	145,114
Depreciation	-	-	27,509	27,509	433,553	461,062
Interest	-	-	-	-	107,855	107,855
Allocated program support	886,269	-	-	886,269	(886,269)	-
Allocated occupancy costs	714,331	34,319	4,531	753,181	(753,181)	-
Total	<u>\$ 13,526,637</u>	<u>\$ 925,549</u>	<u>\$ 215,091</u>	<u>\$ 14,667,277</u>	<u>\$ 2,281,741</u>	<u>\$ 16,949,018</u>

The accompanying notes are an integral part of these consolidated financial statements.



LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

Consolidated Statement of Functional Expenses

Year Ended September 30, 2018

	Healthcare Services	AHEC/PHN	Transportation	Total Healthcare Services	Administration and Support Services	Total
Salaries and wages	\$ 8,000,572	\$ 411,320	\$ 120,008	\$ 8,531,900	\$ 1,409,288	\$ 9,941,188
Employee benefits	1,315,582	70,805	20,049	1,406,436	282,135	1,688,571
Supplies	684,828	7,051	40	691,919	23,943	715,862
Purchased services	815,843	139,400	-	955,243	614,084	1,569,327
Facilities	4,402	480	20,945	25,827	568,528	594,355
Other	253,564	87,005	39	340,608	196,806	537,414
Insurance	-	-	8,696	8,696	134,642	143,338
Depreciation	-	-	28,093	28,093	431,623	459,716
Interest	-	-	-	-	96,431	96,431
Allocated program support	825,266	-	-	825,266	(825,266)	-
Allocated occupancy costs	930,169	36,593	4,831	971,593	(971,593)	-
Total	<u>\$ 12,830,226</u>	<u>\$ 752,654</u>	<u>\$ 202,701</u>	<u>\$ 13,785,581</u>	<u>\$ 1,960,621</u>	<u>\$ 15,746,202</u>

The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statements of Changes in Net Assets****Years Ended September 30, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
Net assets without donor restrictions		
Deficiency of revenue over expenses	\$ (386,749)	\$ (247,865)
Change in fair value of interest rate swap	26,916	365
Net assets released from restrictions for capital acquisition	<u>31,012</u>	<u>16,651</u>
Decrease in net assets without donor restrictions	<u>(328,821)</u>	<u>(230,849)</u>
Net assets with donor restrictions		
Contributions	205,027	71,205
Grants for capital acquisition	126,142	16,651
Net assets released from restrictions for operations	(75,197)	(118,447)
Net assets released from restrictions for capital acquisition	<u>(31,012)</u>	<u>(16,651)</u>
Increase (decrease) in net assets with donor restrictions	<u>224,960</u>	<u>(47,242)</u>
Change in net assets	(103,861)	(278,091)
Net assets, beginning of year	<u>10,372,175</u>	<u>10,650,266</u>
Net assets, end of year	<u>\$10,268,314</u>	<u>\$10,372,175</u>

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The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statements of Cash Flows****Years Ended September 30, 2019 and 2018**

	<u><b>2019</b></u>	<u><b>2018</b></u>
Cash flows from operating activities		
Change in net assets	\$ (103,861)	\$ (278,091)
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Provision for bad debts	398,544	354,460
Depreciation	461,062	459,716
Equity in earnings of limited liability company	3,489	(2,292)
Change in fair value of interest rate swap	(26,916)	(365)
Grants for capital acquisition	(126,142)	(16,651)
(Increase) decrease in the following assets:		
Patient accounts receivable	(305,004)	(614,015)
Grants receivable	(223,739)	247,179
Other receivable	(63,959)	(87,482)
Inventory	(9,265)	(8,640)
Other current assets	61,163	21,378
Increase (decrease) in the following liabilities:		
Accounts payable and accrued expenses	25,215	42,545
Accrued payroll and related expenses	41,334	39,213
Deferred revenue	<u>(32,278)</u>	<u>28,656</u>
Net cash provided by operating activities	<u>99,643</u>	<u>185,611</u>
Cash flows from investing activities		
Capital acquisitions	<u>(306,944)</u>	<u>(173,745)</u>
Cash flows from financing activities		
Grants for capital acquisition	126,142	16,651
Principal payments on long-term debt	<u>(99,085)</u>	<u>(104,489)</u>
Net cash provided (used) by financing activities	<u>27,057</u>	<u>(87,838)</u>
Net decrease in cash and cash equivalents and restricted cash	(180,244)	(75,972)
Cash and cash equivalents and restricted cash, beginning of year	<u>4,546,365</u>	<u>4,622,337</u>
Cash and cash equivalents and restricted cash, end of year	<u><u>\$ 4,366,121</u></u>	<u><u>\$ 4,546,365</u></u>
Breakdown of cash and cash equivalents and restricted cash, end of year		
Cash and cash equivalents	\$ 1,422,407	\$ 1,341,015
Assets limited as to use	<u>2,943,714</u>	<u>3,205,350</u>
	<u><u>\$ 4,366,121</u></u>	<u><u>\$ 4,546,365</u></u>
Supplemental disclosure of cash flow information		
Cash paid for interest	<u>\$ 107,855</u>	<u>\$ 96,431</u>
Capital expenditures included in accounts payable	<u>\$ 177,773</u>	<u>\$ -</u>

The accompanying notes are an integral part of these consolidated financial statements.

## **LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

### **Notes to Consolidated Financial Statements**

**September 30, 2019 and 2018**

#### **1. Summary of Significant Accounting Policies**

##### **Organization**

Lamprey Health Care, Inc. (LHC) is a not-for-profit corporation organized in the State of New Hampshire. LHC is a Federally Qualified Health Center (FQHC) whose primary purpose is to provide high quality family health, medical and behavioral health services to residents of southern New Hampshire without regard to the patient's ability to pay for these services.

##### **Subsidiary**

Friends of Lamprey Health Care, Inc. (FLHC) is a not-for-profit corporation organized in the State of New Hampshire. FLHC's primary purpose is to support LHC. FLHC is also the owner of the property occupied by LHC's administrative and program offices in Newmarket, New Hampshire. LHC is the sole member of FLHC.

##### **Principles of Consolidation**

The consolidated financial statements include the accounts of LHC and its subsidiary, FLHC (collectively, the Organization). All significant intercompany balances and transactions have been eliminated in consolidation.

##### **Recently Adopted Accounting Pronouncements**

In August 2016, the Financial Accounting Standards Board issued Accounting Standards Update (ASU) No. 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities* (Topic 958), which makes targeted changes to the not-for-profit financial reporting model. The ASU marks the completion of the first phase of a larger project aimed at improving not-for-profit financial reporting. Under the ASU, net asset reporting is streamlined and clarified. The existing three category classification of net assets was replaced with a simplified model that combines temporarily restricted and permanently restricted into a single category called "net assets with donor restrictions." The guidance on accounting for the lapsing of restrictions on gifts to acquire property and equipment has also been simplified and clarified. New disclosures highlight restrictions on the use of resources that make otherwise liquid assets unavailable for meeting near-term financial requirements. The ASU also imposes several new requirements related to reporting expenses which resulted in the expansion of the consolidated financial statements to include statements of functional expenses. The Organization has adjusted the presentation of these statements accordingly. The ASU has been applied retrospectively to 2018. The adoption had no effect on the Organization's total net assets, results of operations, changes in net assets or cash flows for the year ended September 30, 2019. The adoption did result in a reclassification of net assets previously reported as net assets with donor restrictions to net assets without donor restrictions. This related to gifts received and used to acquire property and equipment and the restrictions on these gifts were previously released over the useful life of the acquired assets. Previously reported net assets with donor restrictions of \$109,370 and \$115,620 at September 30, 2018 and 2017, respectively, have been reclassified as net assets without donor restrictions.

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

### Notes to Consolidated Financial Statements

September 30, 2019 and 2018

In November 2016, FASB issued ASU No. 2016-18, *Restricted Cash* (Topic 230), which requires that a statement of cash flows explain the change during the period in the total of cash, cash equivalents, and amounts generally described as restricted cash or restricted cash equivalents. Therefore, amounts generally described as restricted cash and restricted cash equivalents should be included with cash and cash equivalents when reconciling the beginning-of-period and end-of-period total amounts shown on the statement of cash flows. The ASU is effective for fiscal years beginning on or after December 15, 2018. The Organization adopted ASU No. 2016-18 in 2019, and restated its 2018 statement of cash flows to conform to the provisions thereof.

#### **Basis of Presentation**

The financial statements of the Organization have been prepared in accordance with U.S. generally accepted accounting principles (U.S. GAAP), which require the Organization to report information in the financial statements according to the following net asset classifications:

**Net assets without donor restrictions:** Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets may be used at the discretion of the Organization's management and the Board of Directors.

**Net assets with donor restrictions:** Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received, which is then treated as cost. The gifts are reported as net assets with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the statements of operations and changes in net assets as net assets released from restrictions. Donor-restricted contributions whose restrictions are met in the same year as received are reflected as contributions without donor restrictions in the accompanying financial statements.

Gifts of long-lived assets, such as land, buildings, or equipment, are reported as net assets without donor restrictions unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as net assets with donor restrictions. Absent explicit donor stipulations about how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2019 and 2018**

**Use of Estimates**

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**Income Taxes**

Both LHC and FLHC are public charities under Section 501(c)(3) of the Internal Revenue Code. As public charities, the entities are exempt from state and federal income taxes on income earned in accordance with their tax-exempt purposes. Unrelated business income is subject to state and federal income tax. Management has evaluated the Organization's tax positions and concluded that the Organization has no unrelated business income or uncertain tax positions that require adjustment to the consolidated financial statements.

**Cash and Cash Equivalents**

Cash and cash equivalents consist of business checking and savings accounts as well as petty cash funds.

The Organization maintains cash balances at several financial institutions. The balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At various times throughout the year, the Organization's cash balances may exceed FDIC insurance. The Organization has not experienced any losses in such accounts and management believes it is not exposed to any significant risk.

**Patient Accounts Receivable**

Patient accounts receivable are stated at the amount management expects to collect from outstanding balances. Patient accounts receivable are reduced by an allowance for uncollectible accounts. In evaluating the collectibility of patient accounts receivable, the Organization analyzes its past collection history and identifies trends for all funding sources in the aggregate. In addition, patient balances in excess of 120 days are 100% reserved. Management regularly reviews revenue and payer mix data in evaluating the sufficiency of the allowance for uncollectible accounts. Amounts not collected after all reasonable collection efforts have been exhausted are applied against the allowance for uncollectible accounts.

**Grants and Other Receivables**

Grants and other receivables are stated at the amount management expects to collect from outstanding balances. All such amounts are considered collectible.

## **LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

### **Notes to Consolidated Financial Statements**

**September 30, 2019 and 2018**

The Organization receives a significant amount of grants from the U.S. Department of Health and Human Services (DHHS). As with all government funding, these grants are subject to reduction or termination in future years. For the years ended September 30, 2019 and September 30, 2018, grants from DHHS (including both direct awards and awards passed through other organizations) represented approximately 76% and 76%, respectively, of grants, contracts and contributions revenue.

#### **Investment in Limited Liability Company**

The Organization is one of eight partners who each made a capital contribution of \$500 to Primary Health Care Partners (PHCP). The purposes of PHCP are: (i) to engage and contract directly with the payers of health care to influence the design and testing of emerging payment methodologies; (ii) to achieve the three part aim of better care for individuals, better health for populations and lower growth in expenditures in connection with both governmental and non-governmental payment systems; (iii) to undertake joint activities to offer access to high quality, cost effective medical, mental health, oral health, home care and other community-based services, based upon the medical home model of primary care delivery, that promote health and well-being by developing and implementing effective clinical and administrative systems in a manner that is aligned with the FQHC model; and to lead collaborative efforts to manage costs and improve the quality of primary care services delivered by health centers operated throughout the state of New Hampshire; and (iv) to engage in any and all lawful activities, including without limitation the negotiation of contracts, agreements and/or arrangements (with payers and other parties). The Organization's investment in PHCP is reported using the equity method and the investment amounted to \$19,101 and \$22,590 at September 30, 2019 and 2018, respectively.

#### **Assets Limited as To Use**

Assets limited as to use include cash and cash equivalents set aside under loan agreements for repairs and maintenance on the real property collateralizing the loan, assets designated by the Board of Directors for specific projects or purposes and donor-restricted contributions as discussed further in Note 7.

#### **Property and Equipment**

Property and equipment acquisitions are recorded at cost, less accumulated depreciation. Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed on the straight-line method.

#### **Patient Service Revenue**

Patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2019 and 2018**

**340B Drug Pricing Program**

LHC, as an FQHC, is eligible to participate in the 340B Drug Pricing Program. The program requires drug manufacturers to provide outpatient drugs to FQHCs and other identified entities at a reduced price. LHC contracts with local pharmacies under this program. The local pharmacies dispense drugs to eligible patients of LHC and bill insurances on behalf of LHC. Reimbursement received by the pharmacies is remitted to LHC net of dispensing and administrative fees. Revenue generated from the program is included in patient service revenue net of third-party allowances. The cost of drug replenishments and contracted expenses incurred related to the program are included in other operating expenses.

**Functional Expenses**

The financial statements report certain categories of expenses that are attributable to one or more programs or supporting functions of the Organization. Expenses which are allocated between program services and administrative support include employee benefits which are allocated based on direct wages, facilities and related costs which are allocated based upon square footage occupied by the program, and direct program support (billing and medical records) which is 100% attributable to healthcare services.

**Deficiency of Revenue Over Expenses**

The consolidated statements of operations reflect the deficiency of revenue over expenses. Changes in net assets without donor restriction which are excluded from this measure include contributions of long-lived assets (including assets acquired using contributions which, by donor restriction, were to be used for the purposes of acquiring such assets) and changes in fair value of an interest rate swap that qualifies for hedge accounting.

**Subsequent Events**

For purposes of the preparation of these financial statements, management has considered transactions or events occurring through January 17, 2020, the date that the financial statements were available to be issued. Management has not evaluated subsequent events after that date for inclusion in the financial statements.

**2. Availability and Liquidity of Financial Assets**

The Organization regularly monitors liquidity required to meet its operating needs and other contractual commitments. The Organization has various sources of liquidity at its disposal, including cash and cash equivalents and a line of credit.

The Organization had working capital of \$1,714,485 and \$1,707,053 at September 30, 2019 and 2018, respectively. The Organization had average days cash and cash equivalents on hand (based on normal expenditures) of 31 and 32 at September 30, 2019 and 2018, respectively.



**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2019 and 2018**

Financial assets available for general expenditure within one year as of September 30 were as follows:

	<u>2019</u>	<u>2018</u>
Cash and cash equivalents	\$ 1,422,407	\$ 1,341,015
Patient accounts receivable, net	1,237,130	1,330,670
Grants receivable	452,711	228,972
Other receivables	<u>236,798</u>	<u>172,839</u>
Financial assets available	<u>\$ 3,349,046</u>	<u>\$ 3,073,496</u>

The Organization has certain board-designated assets limited to use which are available for general expenditure within one year in the normal course of operations upon obtaining approval from the Board of Directors. Accordingly, these assets have not been included in the qualitative information above. The Organization has other assets limited to use for donor-restricted purposes, which are more fully described in Note 7, are not available for general expenditure within the next year and are not reflected in the amounts above.

The Organization's goal is generally to have, at the minimum, the Health Resources and Services Administration recommended days cash and cash equivalents on hand for operations of 30 days.

The Organization has a \$1,000,000 line of credit, as discussed in more detail in Note 5.

**3. Patient Accounts Receivable**

Patient accounts receivable consisted of the following:

	<u>2019</u>	<u>2018</u>
Patient accounts receivable	\$ 1,397,194	\$ 1,386,791
Contract 340B pharmacy program receivables	<u>75,586</u>	<u>197,976</u>
Total patient accounts receivable	1,472,780	1,584,767
Allowance for doubtful accounts	<u>(235,650)</u>	<u>(254,097)</u>
Patient accounts receivable, net	<u>\$ 1,237,130</u>	<u>\$ 1,330,670</u>

A reconciliation of the allowance for uncollectible accounts follows:

	<u>2019</u>	<u>2018</u>
Balance, beginning of year	\$ 254,097	\$ 233,455
Provision for bad debts	398,544	354,460
Write-offs	<u>(416,991)</u>	<u>(333,818)</u>
Balance, end of year	<u>\$ 235,650</u>	<u>\$ 254,097</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2019 and 2018**

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payer agreements. Primary payers representing 10% or more of the Organization's gross patient accounts receivable are as follows:

	<u>2019</u>	<u>2018</u>
Medicare	17 %	18 %
Medicaid	19 %	14 %
Anthem Blue Cross Blue Shield	*	13 %

\* less than 10%

**4. Property and Equipment**

Property and equipment consists of the following:

	<u>2019</u>	<u>2018</u>
Land and improvements	\$ 1,154,753	\$ 1,154,753
Building and improvements	11,048,899	10,943,714
Furniture, fixtures and equipment	<u>1,799,636</u>	<u>1,723,627</u>
Total cost	14,003,288	13,822,094
Less accumulated depreciation	<u>6,667,847</u>	<u>6,237,171</u>
	7,335,441	7,584,923
Construction in progress	<u>273,137</u>	-
Property and equipment, net	<u>\$ 7,608,578</u>	<u>\$ 7,584,923</u>

During 2019, the Organization began to make renovations to the clinical building in Newmarket, New Hampshire. The project is estimated to cost approximately \$780,000 and is expected to be completed and placed in service in December 2019. The project has been funded primarily through donor restricted contributions and debt.

The Organization has made renovations to certain buildings with federal grant funding. In accordance with the grant agreements, a Notice of Federal Interest (NFI) was filed in the appropriate official records of the jurisdiction in which the property is located. The NFI is designed to notify any prospective buyer or creditor that the Federal Government has a financial interest in the real property components acquired under the aforementioned grant; that the property may not be used for any purpose inconsistent with that authorized by the grant program statute and applicable regulations; that the property may not be mortgaged or otherwise used as collateral without the written permission of the Associate Administrator of the Office of Federal Assistance Management (OFAM), Health Resources and Services Administration (HRSA); and that the property may not be sold or transferred to another party without the written permission of the Associate Administrator of OFAM and HRSA.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2019 and 2018****5. Line of Credit**

The Organization has an available \$1,000,000 revolving line of credit from a local bank through May 31 2021, with an interest rate of 5.50%. The line of credit is collateralized by all business assets. There was no outstanding balance as of September 30, 2019 and 2018.

**6. Long-Term Debt**

Long-term debt consists of the following:

	<u>2019</u>	<u>2018</u>
Promissory note payable to local bank; see terms outlined below.	\$ 851,934	\$ 875,506
5.375% promissory note payable to United States Department of Agriculture, Rural Development (Rural Development), paid in monthly installments of \$4,949, which includes interest, through June 2026. The note is collateralized by all tangible property owned by the Organization. The note was paid off through refinancing that is effective in October 2019; see details below.	335,509	371,976
4.75% promissory note payable to Rural Development, paid in monthly installments of \$1,892, which includes interest, through November 2033. The note is collateralized by all tangible property owned by the Organization. The note was paid off through refinancing that is effective in October 2019; see details below.	231,091	242,438
4.375% promissory note payable to Rural Development, paid in monthly installments of \$5,000, which includes interest, through December 2036. The note is collateralized by all tangible property owned by the Organization. The note was paid off through refinancing that is effective in October 2019; see details below.	<u>718,732</u>	<u>746,431</u>
Total long-term debt	2,137,266	2,236,351
Less current maturities	<u>106,190</u>	<u>102,014</u>
Long-term debt, less current maturities	<u>\$ 2,031,076</u>	<u>\$ 2,134,337</u>

The Organization has a promissory note with a local bank which is a ten-year balloon note to be paid at the amortization rate of 30 years, with monthly principal payments of \$1,345 plus interest at 85% of the one-month LIBOR rate plus 2.125% through January 2022 when the balloon payment is due. The note is collateralized by the real estate. The Organization has an interest rate swap agreement for the ten-year period through 2022 that limits the potential interest rate fluctuation and essentially fixes the rate at 4.13%. The fair value of the interest rate swap agreement was an asset of \$13,512 and a liability of \$13,404 at September 30, 2019 and 2018, respectively.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2019 and 2018**

Effective October 2, 2019, the Organization obtained a \$2,100,000 note payable with a local bank, which repaid the notes payable due to Rural Development in the amount of \$1,285,332, and the additional financing was used to renovate the Organization's Newmarket clinical building as discussed in Note 4. The note has a ten-year balloon and is to be paid at the amortization rate of 30 years, with monthly principal payments plus interest at the greater of the Wall Street Journal Prime rate or the weighted average of the rate of overnight Federal funds with members of the Federal Reserve Bank of New York plus 0.5% through October 2029 when the balloon payment is due. The note is collateralized by the real estate. The Organization has an interest rate swap agreement for the ten-year period through 2029 that limits the potential interest rate fluctuation and essentially fixes the rate at 3.173%.

The Organization is required to meet certain administrative and financial covenants under various loan agreements included above. The Organization failed to meet one of those loan covenants at September 30, 2019 and has received a waiver of default from the bank.

Maturities of long-term debt for the next five years and thereafter (adjusted for the refinancing as discussed above) are as follows:

2020	\$ 106,190
2021	50,783
2022	832,321
2023	28,439
2024	29,264
Thereafter	<u>1,090,269</u>
Total	<u>\$ 2,137,266</u>

**7. Net Assets**

Net assets without donor restrictions are designated for the following purposes:

	<u>2019</u>	<u>2018</u>
Undesignated	\$ 7,019,181	\$ 7,377,112
Repairs and maintenance on the real property collateralizing Rural Development loans	142,092	142,092
Board-designated for		
Transportation	16,982	16,982
Working capital	1,391,947	1,391,947
Building improvements	<u>1,162,006</u>	<u>1,132,896</u>
Total	<u>\$ 9,732,208</u>	<u>\$10,061,029</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2019 and 2018**

Net assets with donor restrictions were restricted for the following specific purposes:

	<u>2019</u>	<u>2018</u>
Temporary in nature:		
Capital improvements	\$ 326,567	\$ 231,436
Community programs	181,151	54,643
Substance abuse prevention	<u>28,388</u>	<u>25,067</u>
Total	<u>\$ 536,106</u>	<u>\$ 311,146</u>

**8. Patient Service Revenue**

Patient service revenue was as follows for the years ended September 30:

	<u>2019</u>	<u>2018</u>
Gross charges	\$13,786,408	\$13,683,357
340B contract pharmacy revenue	<u>1,139,085</u>	<u>1,327,156</u>
Total gross revenue	14,925,493	15,010,513
Contractual adjustments	(4,793,060)	(4,534,268)
Sliding fee discounts	(964,485)	(1,030,666)
Other discounts	<u>(24,180)</u>	<u>(19,394)</u>
Total patient service revenue	<u>\$ 9,143,768</u>	<u>\$ 9,426,185</u>

The mix of gross patient service revenue from patients and third-party payers was as follows for the years ended September 30:

	<u>2019</u>	<u>2018</u>
Medicare	17 %	17 %
Medicaid	31 %	27 %
Blue Cross Blue Shield	17 %	18 %
Other payers	21 %	24 %
Self pay and sliding fee scale patients	<u>14 %</u>	<u>14 %</u>
	<u>100 %</u>	<u>100 %</u>

Laws and regulations governing the Medicare, Medicaid and 340B programs are complex and subject to interpretation. The Organization believes that it is in compliance with all laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties and exclusion from the Medicare, Medicaid and 340B programs. Differences between amounts previously estimated and amounts subsequently determined to be recoverable or payable are included in patient service revenue in the year that such amounts become known.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2019 and 2018**

A summary of the payment arrangements with major third-party payers follows:

**Medicare**

The Organization is reimbursed for the care of qualified patients on a prospective basis, with retroactive settlements related to vaccine costs only. The prospective payment is based on a geographically-adjusted rate determined by federal guidelines. Overall, reimbursement was and continues to be subject to a maximum allowable rate per visit. The Organization's Medicare cost reports have been audited by the Medicare administrative contractor through September 30, 2018.

**Medicaid and Other Payers**

The Organization is reimbursed by Medicaid for the care of qualified patients on a prospective basis. Overall, reimbursement is subject to a maximum allowable rate per visit. The Organization also has entered into payment agreements with certain commercial insurance carriers, health maintenance organizations and preferred provider organizations. Under these arrangements, the Organization is reimbursed based on contractually obligated payment rates which may be less than the Organization's public fee schedule.

**Charity Care**

The Organization provides care to patients who meet certain criteria under its sliding fee discount policy without charge or at amounts less than its established rates. Because the Organization does not pursue collection of amounts determined to qualify as charity care, they are not reported as net patient service revenue. The Organization estimates the costs associated with providing charity care by calculating the ratio of total cost to total charges, and then multiplying that ratio by the gross uncompensated charges associated with providing care to patients eligible for free care. The estimated cost amounted to approximately \$1,053,562 and \$1,041,596 for the years ended September 30, 2019 and 2018, respectively.

The Organization is able to provide these services with a component of funds received through local community support and federal and state grants.

**9. Retirement Plan**

The Organization has a defined contribution plan under Internal Revenue Code Section 403(b). The Organization contributed \$300,572 and \$157,605 for the years ended September 30, 2019 and 2018, respectively. The Organization's Board of Directors voted to suspend the employer contributions to the plan in April 2018 and resume contributions in January 2019 subsequent to the adoption of revisions to the employer contribution component of the plan documents.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2019 and 2018**

**10. Medical Malpractice**

The Organization is protected from medical malpractice risk as an FQHC under the Federal Tort Claims Act (FTCA). The Organization has additional medical malpractice insurance, on a claims-made basis, for coverage outside the scope of the protection of the FTCA. As of September 30, 2019, there were no known malpractice claims outstanding which, in the opinion of management, will be settled for amounts in excess of both FTCA and medical malpractice insurance coverage, nor are there any unasserted claims or incidents which require loss accrual. The Organization intends to renew medical malpractice insurance coverage on a claims-made basis and anticipates that such coverage will be available.

**11. Litigation**

From time-to-time certain complaints are filed against the Organization in the ordinary course of business. Management vigorously defends the Organization's actions in those cases and utilizes insurance to cover material losses. In the opinion of management, there are no matters that will materially affect the Organization's consolidated financial statements.

## **SUPPLEMENTARY INFORMATION**



**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Balance Sheet****September 30, 2019****ASSETS**

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	Eliminations	2019 Consolidated
<b>Current assets</b>				
Cash and cash equivalents	\$ 453,924	\$ 968,483	\$ -	\$ 1,422,407
Patient accounts receivable, net	1,237,130	-	-	1,237,130
Grants receivable	452,711	-	-	452,711
Other receivables	236,798	59,797	(59,797)	236,798
Inventory	81,484	-	-	81,484
Other current assets	<u>78,405</u>	<u>-</u>	<u>-</u>	<u>78,405</u>
<b>Total current assets</b>	<b>2,540,452</b>	<b>1,028,280</b>	<b>(59,797)</b>	<b>3,508,935</b>
Investment in limited liability company	19,101	-	-	19,101
Assets limited as to use	2,861,010	82,704	-	2,943,714
Fair value of interest rate swap	13,512	-	-	13,512
Property and equipment, net	<u>5,718,217</u>	<u>1,890,361</u>	<u>-</u>	<u>7,608,578</u>
<b>Total assets</b>	<b><u>\$11,152,292</u></b>	<b><u>\$ 3,001,345</u></b>	<b><u>\$ (59,797)</u></b>	<b><u>\$14,093,840</u></b>

**LIABILITIES AND NET ASSETS**

<b>Current liabilities</b>				
Accounts payable and accrued expenses	\$ 701,615	\$ -	\$ (59,797)	\$ 641,818
Accrued payroll and related expenses	961,024	-	-	961,024
Deferred revenue	85,418	-	-	85,418
Current maturities of long-term debt	<u>65,417</u>	<u>40,773</u>	<u>-</u>	<u>106,190</u>
<b>Total current liabilities</b>	<b>1,813,474</b>	<b>40,773</b>	<b>(59,797)</b>	<b>1,794,450</b>
Long-term debt, less current maturities	<u>1,122,027</u>	<u>909,049</u>	<u>-</u>	<u>2,031,076</u>
<b>Total liabilities</b>	<b><u>2,935,501</u></b>	<b><u>949,822</u></b>	<b><u>(59,797)</u></b>	<b><u>3,825,526</u></b>
<b>Net assets</b>				
Without donor restrictions	7,680,685	2,051,523	-	9,732,208
With donor restrictions	<u>536,106</u>	<u>-</u>	<u>-</u>	<u>536,106</u>
<b>Total net assets</b>	<b><u>8,216,791</u></b>	<b><u>2,051,523</u></b>	<b><u>-</u></b>	<b><u>10,268,314</u></b>
<b>Total liabilities and net assets</b>	<b><u>\$11,152,292</u></b>	<b><u>\$ 3,001,345</u></b>	<b><u>\$ (59,797)</u></b>	<b><u>\$14,093,840</u></b>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Balance Sheet****September 30, 2018****ASSETS**

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	2018 Consolidated
<b>Current assets</b>			
Cash and cash equivalents	\$ 656,379	\$ 684,636	\$ 1,341,015
Patient accounts receivable, net	1,330,670	-	1,330,670
Grants receivable	228,972	-	228,972
Other receivables	172,839	-	172,839
Inventory	72,219	-	72,219
Other current assets	<u>139,568</u>	<u>-</u>	<u>139,568</u>
<b>Total current assets</b>	<b>2,600,647</b>	<b>684,636</b>	<b>3,285,283</b>
Investment in limited liability company	22,590	-	22,590
Assets limited as to use	2,920,876	284,474	3,205,350
Property and equipment, net	<u>5,585,290</u>	<u>1,999,633</u>	<u>7,584,923</u>
<b>Total assets</b>	<b><u>\$11,129,403</u></b>	<b><u>\$ 2,968,743</u></b>	<b><u>\$14,098,146</u></b>

**LIABILITIES AND NET ASSETS**

<b>Current liabilities</b>			
Accounts payable and accrued expenses	\$ 438,830	\$ -	\$ 438,830
Accrued payroll and related expenses	919,690	-	919,690
Deferred revenue	117,696	-	117,696
Current maturities of long-term debt	<u>63,027</u>	<u>38,987</u>	<u>102,014</u>
<b>Total current liabilities</b>	<b>1,539,243</b>	<b>38,987</b>	<b>1,578,230</b>
Long-term debt, less current maturities	1,184,455	949,882	2,134,337
fair value of interest rate swap	<u>13,404</u>	<u>-</u>	<u>13,404</u>
<b>Total liabilities</b>	<b><u>2,737,102</u></b>	<b><u>988,869</u></b>	<b><u>3,725,971</u></b>
<b>Net assets</b>			
Without donor restrictions	8,081,155	1,979,874	10,061,029
With donor restrictions	<u>311,146</u>	<u>-</u>	<u>311,146</u>
<b>Total net assets</b>	<b><u>8,392,301</u></b>	<b><u>1,979,874</u></b>	<b><u>10,372,175</u></b>
<b>Total liabilities and net assets</b>	<b><u>\$11,129,403</u></b>	<b><u>\$ 2,968,743</u></b>	<b><u>\$14,098,146</u></b>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Statement of Operations****Year Ended September 30, 2019**

	<u>Lamprey Health Care Inc.</u>	<u>Friends of Lamprey Health Care, Inc.</u>	<u>Eliminations</u>	<u>2019 Consolidated</u>
Operating revenue				
Patient service revenue	\$ 9,143,768	\$ -	\$ -	\$ 9,143,768
Provision for bad debts	<u>(398,544)</u>	<u>-</u>	<u>-</u>	<u>(398,544)</u>
Net patient service revenue	8,745,224	-	-	8,745,224
Rental income	-	227,916	(227,916)	-
Grants, contracts and contributions	6,104,270	-	-	6,104,270
Other operating revenue	1,637,475	103	-	1,637,578
Net assets released from restrictions for operations	<u>75,197</u>	<u>-</u>	<u>-</u>	<u>75,197</u>
Total operating revenue	<u>16,562,166</u>	<u>228,019</u>	<u>(227,916)</u>	<u>16,562,269</u>
Operating expenses				
Salaries and wages	10,584,157	-	-	10,584,157
Employee benefits	1,993,787	-	-	1,993,787
Supplies	646,774	-	-	646,774
Purchased services	1,731,860	128	-	1,731,988
Facilities	808,327	300	(227,916)	580,711
Other operating expenses	694,558	3,012	-	697,570
Insurance	145,114	-	-	145,114
Depreciation	351,790	109,272	-	461,062
Interest expense	<u>64,197</u>	<u>43,658</u>	<u>-</u>	<u>107,855</u>
Total operating expenses	<u>17,020,564</u>	<u>156,370</u>	<u>(227,916)</u>	<u>16,949,018</u>
(Deficiency) excess of revenue over expenses	(458,398)	71,649	-	(386,749)
Change in fair value of interest rate swap	26,916	-	-	26,916
Net assets released from restrictions for capital acquisition	<u>31,012</u>	<u>-</u>	<u>-</u>	<u>31,012</u>
(Decrease) increase in net assets without donor restrictions	<u>\$ (400,470)</u>	<u>\$ 71,649</u>	<u>\$ -</u>	<u>\$ (328,821)</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Statement of Operations****Year Ended September 30, 2018**

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	Eliminations	2018 Consolidated
Operating revenue				
Patient service revenue	\$ 9,426,185	\$ -	\$ -	\$ 9,426,185
Provision for bad debts	<u>(354,460)</u>	<u>-</u>	<u>-</u>	<u>(354,460)</u>
Net patient service revenue	9,071,725	-	-	9,071,725
Rental income	-	227,916	(227,916)	-
Grants, contracts and contributions	5,538,925	-	-	5,538,925
Other operating revenue	769,148	92	-	769,240
Net assets released from restrictions for operations	<u>118,447</u>	<u>-</u>	<u>-</u>	<u>118,447</u>
Total operating revenue	<u>15,498,245</u>	<u>228,008</u>	<u>(227,916)</u>	<u>15,498,337</u>
Operating expenses				
Salaries and wages	9,941,188	-	-	9,941,188
Employee benefits	1,688,571	-	-	1,688,571
Supplies	715,784	78	-	715,862
Purchased services	1,569,171	156	-	1,569,327
Facilities	816,102	6,169	(227,916)	594,355
Other operating expenses	535,414	2,000	-	537,414
Insurance	143,338	-	-	143,338
Depreciation	353,293	106,423	-	459,716
Interest	<u>60,447</u>	<u>35,984</u>	<u>-</u>	<u>96,431</u>
Total operating expenses	<u>15,823,308</u>	<u>150,810</u>	<u>(227,916)</u>	<u>15,746,202</u>
(Deficiency) excess of revenue over expenses	(325,063)	77,198	-	(247,865)
Change in fair value of interest rate swap	365	-	-	365
Net assets released from restrictions for capital acquisition	<u>16,651</u>	<u>-</u>	<u>-</u>	<u>16,651</u>
(Decrease) increase in net assets without donor restrictions	<u>\$ (308,047)</u>	<u>\$ 77,198</u>	<u>\$ -</u>	<u>\$ (230,849)</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Statement of Changes in Net Assets****Year Ended September 30, 2019**

	<u>Lamprey Health Care, Inc.</u>	<u>Friends of Lamprey Health Care, Inc.</u>	<u>2019 Consolidated</u>
Net assets without donor restrictions			
(Deficiency) excess of revenue over expenses	\$ (458,398)	\$ 71,649	\$ (386,749)
Change in fair value of interest rate swap	26,916	-	26,916
Net assets released from restrictions for capital acquisition	<u>31,012</u>	<u>-</u>	<u>31,012</u>
(Decrease) increase in net assets without donor restrictions	<u>(400,470)</u>	<u>71,649</u>	<u>(328,821)</u>
Net assets with donor restrictions			
Contributions	205,027	-	205,027
Grants for capital acquisition	126,142	-	126,142
Net assets released from restrictions for operations	(75,197)	-	(75,197)
Net assets released from restrictions for capital acquisition	<u>(31,012)</u>	<u>-</u>	<u>(31,012)</u>
Increase in net assets with donor restrictions	<u>224,960</u>	<u>-</u>	<u>224,960</u>
Change in net assets	(175,510)	71,649	(103,861)
Net assets, beginning of year	<u>8,392,301</u>	<u>1,979,874</u>	<u>10,372,175</u>
Net assets, end of year	<u>\$ 8,216,791</u>	<u>\$ 2,051,523</u>	<u>\$10,268,314</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Statement of Changes in Net Assets****Year Ended September 30, 2018**

	<u>Lamprey Health Care, Inc.</u>	<u>Friends of Lamprey Health Care, Inc.</u>	<u>2018 Consolidated</u>
Net assets without donor restrictions			
(Deficiency) excess of revenue over expenses	\$ (325,063)	\$ 77,198	\$ (247,865)
Change in fair value of interest rate swap	365	-	365
Net assets released from restrictions for capital acquisition	<u>16,651</u>	<u>-</u>	<u>16,651</u>
(Decrease) increase in net assets without donor restrictions	<u>(308,047)</u>	<u>77,198</u>	<u>(230,849)</u>
Net assets with donor restrictions			
Contributions	71,205	-	71,205
Grants for capital acquisition	16,651	-	16,651
Net assets released from restrictions for operations	(118,447)	-	(118,447)
Net assets released from restrictions for capital acquisition	<u>(16,651)</u>	<u>-</u>	<u>(16,651)</u>
Decrease in net assets with donor restrictions	<u>(47,242)</u>	<u>-</u>	<u>(47,242)</u>
Change in net assets	(355,289)	77,198	(278,091)
Net assets, beginning of year	<u>8,747,590</u>	<u>1,902,676</u>	<u>10,650,266</u>
Net assets, end of year	<u>\$ 8,392,301</u>	<u>\$ 1,979,874</u>	<u>\$10,372,175</u>

# LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

## 2020 Board of Directors

**Frank Goodspeed (President/Chair)**



Term Ends 2020

**James Brewer**



Term Ends 2022

**Raymond Goodman, III (Vice President)**



Term ends 2021

**Michael Chouinard**



Term Ends 2022

**Arvind Ranade, (Treasurer)**



Term Ends 2021

**Elizabeth Crepeau**



Term ends 2021

**Thomas "Chris" Drew (Secretary)**



Term Ends 2022

**Robert Gilbert**



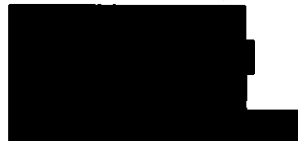
Term Ends 2020

**Audrey Ashton-Savage (Immediate Past Chair/President)**



Term Ends 2021

**Carol LaCross**



Term Ends 2021

**Michelle Boom**



Term Ends 2022

**Andrea Laskey**



Term Ends 2022

## MARIA REYES

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### PROFESSIONAL SUMMARY

Innovative senior level director with over 15 years of versatile non-profit management and social services experience. Demonstrated track record of managing financially sustainable federal, state and private foundation programs with measurable outcomes and community impact. Resourceful experience overseeing youth and adult community programs in a variety of settings including health, social services, public schools, libraries and other institutions. Over twenty years' experience of substance abuse and mental health counseling, case management, and community education in both inpatient/outpatient psychiatric and substance abuse treatment with diverse populations.

### Skills and knowledge include:

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- Health/cultural competency training
  - Strategic planning
  - Public Speaker/consultant
  - Community Outreach
  - Substance Abuse and Mental Health
  - Community mobilization
  - Government, state and private grant management
  - Outcome measurement
- 

### YWCA Tulsa

Tulsa, Oklahoma

Director of Immigrant and Refugee Center

2000-April 2015

Responsible for the direct oversight of a team of 25+ diverse professionals from over 10 countries and all operations. Diversified agency funding portfolio thru fee for service, augmented new foundation dollars thru solid community/donor relationships, and generated state/local government funding from \$450,000 to 1 million plus. Responsible for direct oversight of core program services: Immigration legal services, English Language classes to adult immigrants, refugee social services and numerous community projects/collaborations that provided health education and outreach to underserved communities. Forged solid partnerships and collaborations to implement community projects that address community health issues such as substance misuse/abuse, diabetes prevention, American Heart Association, Parenting skills, HIV/Aids, Alzheimer's awareness and others.

### Highlights:

- Instituted first medical Spanish elective course at Oklahoma State University Osteopathic College of Medicine for first and second year medical students.
- Reputation as skilled collaborator with strong partnerships-key member of community wide coalition that helped facilitate a one million dollar Robert Wood Johnson Foundation grant for Latino diabetes prevention health program.
- Spearheaded diabetes prevention academy of health for first generation Spanish speakers.
- Selected to participate and implement state wide Meth-360 program thru Drug Free America Campaign.

**Maria Reyes**



mtrhollylane55@gmail.com

**Tulsa Community College**

Adjunct Professor, Part-Time

Tulsa, Oklahoma

2003-2006

- Taught Chemical Dependency and Treatment Course to community college students.
- Community presenter on culture and mental health/substance abuse education to Tulsa's immigrant populations.

**Parkside Hospital,**

Oklahoma Certified Drug and Alcohol Counselor #226

Tulsa, Oklahoma

1990-2000

- First mental health professional in Tulsa to create and implement community depression screenings to limited English proficiency populations.
- Launched the first Spanish-speaking case management caseload in the hospital's history.
- Provided group and individual counseling, case management and education to adults in inpatient and outpatient treatment/aftercare.
- Vital member of multidisciplinary team that assisted with court order evaluations and treatment placement.

**CREDENTIALS**

**EDUCATION** Plymouth State University, Plymouth New Hampshire-B.A. Spanish, Latin American Studies  
University of Valencia Spain-Junior Year Abroad program

**CERTIFICATION** Certified Oklahoma Drug and Alcohol Counselor since 1990, (current) #226-Hospital based two year certification program  
(Maintain 20 CEU's yearly in addiction/mental health)  
Oklahoma Non-Profit Management Training

**SKILLS** Proficient in Microsoft products, bilingual in Spanish and English  
Public Speaking, Teaching

**ACHIEVEMENTS** YWCA Tulsa Community Outstanding Service Award-2015  
Tulsa Partners-Language Cultural Bank Volunteer of the Year 2011  
Tulsa Mental Health Association Education Award 2005  
Parkside Hospital Employee of the Year 1985  
Plymouth State University, New Hampshire- Foreign Language Award

**COMMUNITY** Vice President of Coalition of Hispanic Organizations  
Board member of Tulsa Mental Health Association  
Board member and Co-President of Tulsa Language Cultural Bank  
Appointed Commissioner for the Tulsa Mayor's Commission on the Status of Women

References available upon request

**MARY R. COOK, M.Ed, CHES**

**WORK EXPERIENCE:**

**July 2015 to Present**

**Public Health Emergency Preparedness Manager  
Seacoast Public Health Network/ a program of Lamprey  
Health Care Inc.**

- A. Responsible for the management and implementation of grant-funded work plans/scopes of services associated with the Public Health Network, Pandemic Planning, and related emergency response as well as public health grants, on schedule and within budget; serves as the conduit between funders and planning partners on plan requirements and ensures compliance with state and federal regulations as appropriate.
- B. Schedules, convenes and facilitates regular meetings of the Seacoast Emergency Preparedness Team. Prepares meeting minutes and provides follow-up. Responsible for the coordination of Point of Dispensing (PODs) in the seacoast region during a disease outbreak as a means to get medication to residents in the 23 town region.
- C. Provides requisite planning activity reports, budget submissions, and/or other required documentation for federal and state emergency response funding sources. Attends in-state meetings of grantors as appropriate.
- D. Engages community partners in public health improvement process; develops and implements communications plan for public health and emergency response preparation initiatives.
- E. Manages and Updates the Regional Public Health Emergency Annex to meet Centers for Disease Control planning guidelines and local standard operating guidelines.
- F. Prepares and manages an annual Medical Countermeasure Operational Readiness Review (MCM ORR) as required by the CDC Division of Strategic National Stockpile (DSNS). The MCM ORR outlines planning elements specific to managing, distributing and dispensing Strategic National Stockpile (SNS) materiel received from the CDC during a public health emergency. Revise and update the RPHEA, related appendices and attachments based on the findings from the MCM ORR.
- G. Supervises the Medical Reserve Corps Coordinator and the Medical Reserve Corps program of volunteers. Oversees other subcontractors as work dictates.
- H. Oversees the Climate Change funding and coordinates a community workgroup that establishes tick trainings for camp counselors at area camps. Oversees subcontracts for this initiative.

**May 1, 2011 to June 2015**

**Public Health Emergency Preparedness Coordinator  
Exeter Fire Department and the Seacoast Public Health  
Network**

- Responsible for providing Regional Public Health Preparedness, Response, and Recovery for the Seacoast Public Health region
- Medical Reserve Corps Director
- Seacoast Public Health Advisory Council co-facilitator

**December 2008 to April 2011**

**York Hospital and the Healthy Maine Partnerships  
District Tobacco Coordinator**

Provided support, guidance and trainings to the York District Healthy Maine Partnerships assuring that a comprehensive and evidence based approach to tobacco prevention and control is implemented throughout York County.

**February 2005 to  
December 2008**

**City of Portsmouth, NH  
Public Health Coordinator**

Provided coordination of the Greater Portsmouth Public Health Network that includes the towns of New Castle, Rye, Newington, Greenland and the City of Portsmouth in assessment, policy development, and assurance of the Ten Essential Services of Public Health. Responsible for development of All Health Hazard Community Response Plan, Pandemic Plan, Isolation and Quarantine, Point of Distribution, Risk Communication, Medical Surge and Volunteer plans for the Greater Portsmouth Emergency Planning Response Team. Designed, conducted, and evaluated a series of workshops, table tops and full scale exercises to test the region's communications, command and control, emergency operation center and response to all health hazards.

**June 2003-February 2005**

**American Red Cross Great Bay Chapter**

**Director of Health and Safety Services**

Provided coordinated planning, implementation, and evaluation of Health and Safety Services within the chapter's jurisdiction. Responsibilities included needs assessment, marketing, program and human resources development, managed a \$200,000 budget.

**November 2003-June 2003**

**American Red Cross Great Bay Chapter**

**Tobacco Prevention Director for The  
Rochester Tobacco Free Coalition:**

Developed and coordinated a coalition whose mission was to promote and advocate for a tobacco free lifestyle by providing education, awareness and support to youth and families in Rochester.

Supervised two youth coordinators who coordinated youth mentoring programs at the Rochester Middle School.

Established goals and objectives with coalition members.

**2000-November 2003**

**Dover Police Department, Dover, N.H.**

***Substance Abuse Prevention Coordinator:***

Youth Advisor for a 250-member coalition

Instructor for tobacco education classes

Coordinator of educational activities/programs related to substance abuse issues

Representative for state and local tobacco advisory committees

**1991-1999**

**Franklin Regional Hospital, Franklin, N.H.**

***Health Educator***

Safety and Wellness Instructor for adults and teens

Smoking Cessation Specialist

Women's Health Educator

Coordinated youth tobacco-free coalition

Coordinated annual Health and Safety Fairs

**EDUCATION:**

**Notre Dame College, Manchester, N.H.**

**Bachelor of Arts Degree in Business Education, 1984**

**Plymouth State College, Plymouth, N.H.**

**Master's Degree in Education/ Health Promotion and Wellness Management, 2002**

## LINDSEY MESSINA

Passionate young adult with over two years of experience on the ground in prevention and advocacy efforts. Can manage multiple tasks at hand while maintaining and working toward the mission and vision of an organization. Looking to be more hands on and involved in community prevention efforts in the seacoast and surrounding counties.

### Experience

#### **Substance Misuse Prevention Coordinator; Seacoast Public Health Network — 2019 Present**

- Works in every region of the state to promote effective population level substance misuse prevention policies, programs, and practices.

#### **Coordinator, Programs and Education; Addiction Policy Forum — 2018–Present**

- Jan 2018 - May 2018 National Coordinator for the northeast. Scheduled introductory phone calls, follow up emails and provided resources to families in crisis.
- Assisted CEO in creating eBooks and online toolkits for community educators, first responders and professionals in the field of addiction.
  - i.e. Addiction and the Brain, Rx Disposal Toolkit
- Assisted and traveled around the country with the Executive Vice President of Community Relations in partnership with NDAA to bring trainings to District Attorneys on addiction and criminal justice reform.
- Assisted the Chief of Staff in administrative efforts and communication with national partners i.e. NDAA, FAVOR, CADCA etc.
  - Kept organized online files and created work-plans in Excel, Word and PowerPoint.
- Create, schedule and coordinate social media content for current and future online advocacy.

#### **Volunteer Director; Austin17House — 2017-Present**

- Built a non-profit from the ground up including infrastructure, mission/vision and funding.
- Network with partners in the Seacoast and Rockingham County to collaborate on prevention, treatment, recovery and advocacy efforts.
- Wrote grants and other proposals to organizations to sustain current and future programs.
- Created and implemented extended learning opportunities and programs for youth two nights a week.
- Schedule and host educational community workshops for youth and parents. i.e. understanding teen depression, suicide prevention, drug and alcohol prevention.
- Create and schedule social media content for Facebook, Instagram and current website.
- Manage volunteers including scheduling, training and staff appreciation.

### Certifications

- Signs of Suicide (SOS) Train the Trainer Certification (12 hour)

- National Alliance on Mental Illness (NAMI) Train the Trainer for Young Adults (12 hours)
- American Foundation for Suicide Prevention Train the Trainer (2 hour)
- Youth Mental Health First Aid Certification (8 hours)
- Emotional CPR (eCPR) training by Dr. Fisher from National Empowerment Center (14 hours)
- Teen Empowerment Youth Development Training Certification Program (18 hours)
- New Hampshire Children's Behavioral Health Collaborative Advocacy Training
- National Wellness Institute Resilience and Thriving Train the Trainer Certification (6 hours)
- National Wellness Institute Empowered Health Consciousness Train the Trainer Certification (6 hours)

## **Education**

Great Bay Community College – 2013 to 2015

- Liberal Arts Business

**Southern New Hampshire University – 2015 to 2017**

- AS Marketing with High Honors (GPA: 3.818)
  - Introduction to Psychology
  - English Composition
  - Introduction to Humanities
  - Consumer Behavior
  - Financial Accounting
  - Services Marketing

## **Skills**

- Self-motivated leader
- High communication skills with the ability to speak in front of large groups of people
- Ability to facilitate and/or work on a team
- Generate flyers and marketing materials for events
- Proficient in Microsoft Office including Word, Excel and PowerPoint
- SEO Marketing

## **Awards and Acknowledgements**

### ***10 To Watch Awards 2019***

10 to Watch each year honors young professionals who make positive contributions to social and economic development in the Seacoast.

**Paula K. Smith, MBA, EdD**

**EDUCATION**

Rivier University, Nashua NH

Doctoral Program in Education, Leadership and Learning, May 2018

American Evaluation Association/Centers for Disease Control, Summer Institute, June 2012

The Dartmouth Institute of Health Policy and Clinical Practice, Coach the Coach: The Art of Coaching and Improving Quality, Microsystems Process Improvement Training, 2009

American Society of Training & Development, Professional Trainer Certificate Program, Concord, NH, 2002.

Cultural Competency; Training of Trainers Program, CCHCP Training Institute, Seattle, WA, 2000

University of Massachusetts, Boston, Harbor Campus, Boston, MA 02125  
Masters in Business Administration, 1991

Boston University School of Public Health, Boston, MA  
Negotiation and Conflict Resolution for Health Care Management  
(Training Program), 1991

University of New Hampshire, Durham, NH  
Bachelor of Science, Health Administration and Planning, 1985

**PROFESSIONAL EXPERIENCE**

**February 1998**

**Director, Southern New Hampshire Area Health Education Center (AHEC)**

**Present**

**Lamprey Health Care, Raymond, NH**

- Coordinates, plans and supervises the establishment and operation of a new AHEC center and programs designed to increase access to quality health care in southern NH.
- Partners with community-based providers and academic institutions to improve the supply and distribution of primary health care professionals and facilitates student placements in the community with an emphasis on medically underserved areas.
- Provides training opportunities for residents, nurse practitioners, social worker, physician assistant, nursing and medical students, as well as practicing providers.
- Develops and coordinates health care awareness programs for high school students with a focus on minority and disadvantaged populations.
- Coaches health center microteams in quality improvement initiatives.
- Oversees implementation of "Better Choices, Better Health" Chronic Disease Self-Management Program, including marketing, reporting, recruitment and management of leaders, and coordination of NH CDSMP Network, a learning community of leaders.

**October 1995 to**

**Regional Services Coordinator**

**February 1998**

**New England Community Health Center Association, Woburn, MA**

- Provided technical assistance, policy analysis, and other membership services to state primary care associations in New England and the community health centers they serve;
- Coordinated educational sessions for primary care clinicians and administrators on a variety of health care topics; assisted in developing program for two community health conferences a year, as well as one-day programs;
- Acted as liaison for members of MIS/Fiscal Directors and other regional committees;
- Wrote grants, including concept development, implementation plans and budget, for government and foundation proposals;
- Designed survey instruments, analyzed data, and wrote reports for region-wide surveys of community health centers, including compensation survey, needs assessment for locum tenens, survey on management information systems, and survey on productivity and staffing ratios;
- Acted as Project Director of Phase III of the Mammography Access Project;
- Wrote and distributed quarterly newsletter to health centers and public health organizations throughout New England.

**February 1992 to  
October 1995**  
**Paula K. Smith**  
**Page 2**

**Program Director**  
**Department of Medical Security, Boston, MA**

- Managed the Labor Shortage Initiative, a \$23 million state-wide program providing education and training opportunities in health care occupations; oversaw the allocation of funds to participating hospitals, colleges and universities, and community organizations; supervised the development of contracts; monitored program achievements.
- Developed, implemented, and managed the *Children's Medical Security Plan*, a health insurance program for uninsured children under the age of 13; negotiated and monitored contracts totaling nearly \$12 million with participating insurers; coordinated public relations and outreach activities related to the program; acted as a liaison with various advocacy groups.
- Managed *CenterCare*, a \$4 million managed care program providing services through contracts with 30 community health centers across the state; allocated resources to participating centers; developed and conducted training sessions on *CenterCare* program operations for health center staff; analyzed demographic and utilization data of participants.

**May 1990 to  
February 1992**

**Contract Manager**  
**Department of Medical Security, Boston, MA**

- Coordinated the procurement process for both *CenterCare* and the Labor Shortage Initiative, which included writing Requests for Proposals (RFPs), reviewing and analyzing proposals, monitoring the contracting and administration of funded proposals, and acting as a liaison between interested parties;
- Monitored *CenterCare* by coordinating payments to contractors, conducting site visits at participating community health centers, and reporting on program status; managed administrative procedures and acted as a liaison between agencies for all contracts in accordance with regulations.

**October 1988 to  
May 1990**

**Contract Specialist**  
**Office of the State Comptroller, Boston, MA**

- Assisted and instructed departments in the process of contract approval, as well as utilization of the state-wide automated accounting systems (MMARS);
- Developed policies in support of state regulations pertaining to contract approval.
- Supervised contract officers in the review and approval of statewide consultant contracts; created reports to monitor departmental activities; organized special projects.

**January 1988 to  
October 1988**

**Contract Officer**  
**Office of the State Comptroller, Boston, MA**

- Reviewed and approved transactions on MMARS submitted by departments throughout the Commonwealth;
- Managed Tax Exempt Lease Purchase program of all departments in the Commonwealth;
- Utilized word processing and spreadsheet programs.

**September 1985 to  
January 1988**

**Administrative Assistant**  
**Joseph M. Smith Community Health Center, Alston, MA**

- Provided assistance to the Executive Director in overall administration of health center,
- Assisted Finance Director in management of accounts, and prepared monthly invoices for all grant reimbursement, utilizing word processing and spreadsheet programs.
- Supervised the payroll system and managed personnel files for 60 employees;
- Acted as liaison between outside vendors and health center;
- Interviewed candidates for support staff positions.

#### **AFFILIATIONS**

Endowment for Health Board of Advisors, 2013-Present

Recipient of 2007 NH Office of Minority Health Women's Health Recognition Award

NH Leadership Board: American Lung Association, 2007-present

Recipient of 2006 National AHEC Center for Excellence Award in Community Programming

Leadership New Hampshire 2003 Associate

Member of National AHEC Organization

Organizational Recipient of 2002 Champions in Diversity Award for Education

References Available Upon Request

## Julia B. Meuse

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### Education

**University of New Hampshire, Durham, NH**

Bachelor of Science: Health Management and Policy

Dean's List: Spring 2017, Fall 2017, Spring 2018, Fall 2018, Spring 2019

**May 2019**

**GPA: 3.53**

### Experience

**Lamprey Health Care, Raymond, NH**

*Program Coordinator*

*Program Assistant*

*Intern*

**July 2019- Present**

**September 2018- July 2019**

**May 2018-August 2018**

- Assist in the process of developing and implementing a tickborne illness prevention project with the Seacoast Public Health Network
- Collaborated in planning programs for health professionals with the Southern New Hampshire Area Health Education Center
- Coordinate Lamprey Healthcare's Nurse Practitioner Fellowship Program

**Family Centered Counseling of New England, Nashua, NH**

*Remote Office Assistant*

**May 2017- August 2018**

- Demonstrated time management skills and self-motivation from working remotely
- Mastered insurance claim process
- Responsibly managed patient payments

**Pinnacle Rehabilitation Network, Multiple Locations**

*Office Coordinator*

- Exeter Sport and Spine Therapy, Exeter, NH
- Hampton Physical Therapy of Seabrook, Seabrook, NH

**May 2016- August 2016**

**June 2012- August 2015**

- Provided courteous and knowledgeable front-end assistance
- Was responsible for managing copays, scheduling appointments, completing insurance verifications, and data entry

### Certifications

**Community Health Worker Course**

**June 2018- July 2018**

Received certificate for completing Southern NH AHEC's 56 hour Community Health Worker training. Trained in healthcare service coordination, cultural effectiveness, community assessment skills, etc.

**Child and Infant CPR Certified**

**July 2018**

Completed objectives and skills in accordance with the American Heart Association CPR AED program for child and infant certification

### Campus Involvement

**Member of Student Organization for Health Leadership**

**September 2015-Present**

Attend meetings, healthcare panels, and network with Health Management and Policy alumni

### Volunteer Experience

**The Fabulous Find Resale Boutique**

**June 2017- Present**

Partnered with non-profit boutique to sell my original artwork and donate profits to local community charities. Currently maintain inventory and fill special orders



**CONTRACTOR NAME**

Key Personnel

<b>Name</b>	<b>Job Title</b>	<b>Salary</b>	<b>% Paid from this Contract</b>	<b>Amount Paid from this Contract</b>
Paula K. Smith	AHEC Director	\$110,055	11%	\$12,106
Maria Reyes	COC Facilitator	\$61,410	85.5%	\$54,121.53
Mary Cook	EP Manager	\$60,772	100%	\$60,772
Lindsey Messina	Substance Misuse Prevention Coordinator	\$46,800	85%	\$39,780
Julia Meuse	Program Coordinator	\$37,454.40	26.4%	\$9,900



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services Contract**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Mid-State Health Center, (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 101 Boulder Point Drive, Suite 1 Plymouth, NH 03264.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YYYY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$775,378.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-11, Young Adult Strategies, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-11, Young Adult Strategies, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

Mid-State Health Center

Amendment #5

Contractor Initials

DS  
PM



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

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All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/9/2020

\_\_\_\_\_  
Date

DocuSigned by:

*Lisa M. Morris*

—D938D9FB6CA54A0—

\_\_\_\_\_  
Name: Lisa Morris  
Title: Director

Mid-State Health Center

11/9/2020

\_\_\_\_\_  
Date

DocuSigned by:

*Robert MacLeod*

—0CA68BF6985A490—

\_\_\_\_\_  
Name: Robert MacLeod  
Title: CEO

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

**OFFICE OF THE ATTORNEY GENERAL**

11/10/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "C. Pinos", enclosed within a rectangular box.

D5CA8202E32C4AE

Name: Catherine Pinos

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:

Vendor Name: Mid-State Health Center  
Contract Name: Regional Public Health Network Services  
Region: Central NH

Program Name and Funding Amounts											
State Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps	Substance Abuse Prevention	Continuum of Care	Young Adult Substance Abuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00
2020		\$ 30,000.00	\$ 3,000.00	\$ 90,000.00	\$ 609.00	\$ 78,453.00	\$ 40,098.00	\$ 90,000.00	\$ 15,000.00	\$ 11,823.00	\$ 10,000.00
2021	\$ 10,000.00	\$ 30,000.00	\$ 3,000.00		\$ 609.00	\$ 78,453.00	\$ 40,098.00	\$ 90,000.00	\$ 13,087.00	\$ 9,018.00	\$ -
Total										\$ 778,378.00	

DS  
PM  
Contractor Initials: \_\_\_\_\_

11/9/2020  
Date: \_\_\_\_\_

## Exhibit B-11 Budget Sheet

New Hampshire Department of Health and Human Services				
Bidder/Program Name: Mid-State Health Center / Central NH PHN				
Budget Request for: Young Adult Strategies				
Budget Period: FY2021				
Line Item	Total Program Cost			Total
	Direct Incremental	Indirect Fixed		
1. Total Salary/Wages	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ -	\$ -	\$ -	\$ -
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	\$ 90,000.00	\$ -	\$ -	\$ 90,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -
Translator	\$ -	\$ -	\$ -	\$ -
Indirect	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 90,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 90,000.00</b>
Indirect As A Percent of Direct		0.0%		

DS  
 PM  
 Contractor Initials \_\_\_\_\_

# State of New Hampshire

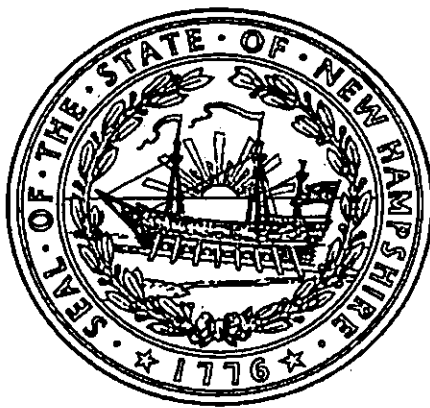
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that MID-STATE HEALTH CENTER is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on January 09, 1998. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 285492

Certificate Number: 0005024776



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 October A.D. 2020.

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

William M. Gardner  
Secretary of State

### CERTIFICATE OF AUTHORITY

I, Peter Laufenberg, hereby certify that:

(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Mid-State Health Center.  
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on September 22, 2020, at which a quorum of the Directors/shareholders were present and voting.  
(Date)

**VOTED:** That Robert MacLeod, CEO (may list more than one person)  
(Name and Title of Contract Signatory)

Is duly authorized on behalf of Mid-State Health Center to enter into contracts or agreements with the State  
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

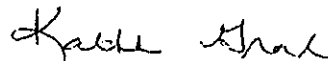
3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority remains valid for thirty (30) days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 10/9/20

  
Signature of Elected Officer

Name: Peter Laufenberg

Title: Vice-President



KATHLEEN GRAD, Notary Public  
State of New Hampshire  
My Commission Expires November 10, 2021



**CERTIFICATE OF LIABILITY INSURANCE****Date:**

09/10/20

**Administrator:**

New England Special Risks, Inc.  
60 Prospect St.  
Sherborn, Ma. 01770  
Phone: (508) 561-6111

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.

**INSURERS AFFORDING COVERAGE****Insured:**

Mid-State Health Center  
101 Boulder Point Dr.- Suite 1  
Plymouth, NH. 03264

Insurer A: Medical Protective Insurance Co.

Insurer B: AIM Mutual Insurance Co.

Insurer C:

Insurer D:

Insurer E:

**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 the 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.

INS. LTR.	TYPE OF INSURANCE	POLICY NUMBER	Policy Effective Date	Policy Expiration Date	LIMITS	
A	<b>General Liability</b>	HN 030313	10/1/2020	10/1/2021	Each Occurrence	\$ 1,000,000
	<input checked="" type="checkbox"/> Commercial General Liability				Fire Damage (Any one fire)	\$ 50,000
	<input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occurrence				Med Exp (Any one person)	\$ 5,000
	<input type="checkbox"/>				Personal & Adv Injury	\$ 1,000,000
	General Aggregate Limit Applies Per:				General Aggregate	\$ 3,000,000
	<input checked="" type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> Loc				Products - Comp/Op Agg	\$ 1,000,000
	<input type="checkbox"/>					
	<b>Automobile Liability</b>				Combined Single Limit (Each accident)	\$
	<input type="checkbox"/> Any Auto				Bodily Injury (Per person)	\$
	<input type="checkbox"/> All Owned Autos				Bodily Injury (Per accident)	\$
	<input type="checkbox"/> Scheduled Autos				Property Damage (Per accident)	\$
	<input type="checkbox"/> Hired Autos					
	<input type="checkbox"/>					
	<input type="checkbox"/>					
	<b>Garage Liability</b>				Auto Only - Ea. Accident	\$
	<input type="checkbox"/> Any Auto				Other Than Ea. Acc	\$
	<input type="checkbox"/>				Auto Only: Agg	\$
	<input type="checkbox"/>					
	<input type="checkbox"/>					
	<input type="checkbox"/>					
	<input type="checkbox"/>					
	<b>Excess Liability</b>				Each Occurrence	\$
	<input type="checkbox"/> Occurrence <input type="checkbox"/> Claims Made				Aggregate	\$
	<input type="checkbox"/>					\$
	<input type="checkbox"/> Deductible					\$
	<input type="checkbox"/> Retention \$					\$
	<input type="checkbox"/>					\$
	<input type="checkbox"/>					\$
B	<b>Workers Compensation and Employers' Liability</b>	ECC-4000079-2018A	10/1/2020	10/1/2021	<input checked="" type="checkbox"/> Statutory Limits <input type="checkbox"/> Other	
					E.L. Each Accident	\$ 500,000
					E.L. Disease-Ea. Employee	\$ 500,000
					E.L. Disease - Policy Limit	\$ 500,000
A	<b>Entity Healthcare Professional and Employed Physicians Professional Liability</b>	HN 030313	10/1/2020	10/1/2021	Per Incident	\$1,000,000
					Aggregate	\$3,000,000

Description of operations/vehicles/exclusions added by endorsement/special provision

Evidence of Current General, Healthcare Medical Professional Liability and Workers Compensation Insurance Coverage for the Insured.

**Certificate Holder**

State Of New Hampshire  
Department of Health and Human Services  
129 Pleasant St.  
Concord, NH. 03301

Should any of the above policies be canceled 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



**Need more information on COVID-19?**

**CDC Live Updates**

(<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>)



**MID-STATE  
HEALTH CENTER**

*Where your care comes together.*

- Bristol Office (<https://goo.gl/maps/gmaKTNeNW1T2>)  
(603) 744-6200 (tel:(603)744-6200)  
100 Roble Road, Bristol, NH 03222 (<https://goo.gl/maps/gmaKTNeNW1T2>)  
Hours: M - W: 7:30AM - 5:30PM, Th & F: 8:00AM - 5:00PM  
Lab Hours: M - F: 7:30AM - 11:45AM, 1:15PM - 4:00PM

- Plymouth Office (<https://goo.gl/maps/LZQrg2u91wQ2>)

(S)

- (603) 536-4000 (tel:(603)536-4000)
- 101 Boulder Point Drive, Plymouth, NH 03264 (<https://goo.gl/maps/LZQrg2u91wQ2>)
- Hours: M - Th: 7:30AM - 5:30PM, F: 8:00AM - 5:00PM
- Hours (cont): Sat: 8:00AM - 12:00PM
- Lab Hours: M - F: 7:30AM - 11:45AM, 1:15PM - 4:00PM



Search site

## Planned Giving to Support Mid-State's Mission

# PLANNED GIVING TO SUPPORT OUR MISSION

As part of your estate plan, you can specify a gift to Mid-State Health Center in your will or trust.

When you include the Mid-State as part of your estate plans, you will become a member of our legacy society.

If you wish to name Mid-State Health Center in your will or estate plan, we should be named as:

Mid-State Health Center, a nonprofit corporation, organized and existing in the State of New Hampshire  
with principal business address of 101 Boulder Point Drive, Suite 1, Plymouth, NH 03264  
Our tax identification number is: 02-0487172

Making a gift to Mid-State Health through your will or revocable living trust is a way to support our mission.

If you have chosen to include Mid-State Health in your estate plans, please let us know so we can thank you!

For more information about planned giving and ways to support Mid-State and its mission, contact:

Wendy Williams, Grants and Programming Director

603-536-4000 Ext: 1009

[wwilliams@midstatehealth.org](mailto:wwilliams@midstatehealth.org) (mailto:wwilliams@midstatehealth.org)

Services (<https://www.midstatehealth.org/services/>) Meet Our Providers (<https://www.midstatehealth.org/meet-our-providers/>)

For Patients (<https://www.midstatehealth.org/become-a-patient-at-mid-state/>) Health & Wellness (<https://www.midstatehealth.org/health-wellness/>)

About Us (<https://www.midstatehealth.org/about-us/>) Careers (<https://www.midstatehealth.org/careers/>)

**MID-STATE HEALTH CENTER  
AND SUBSIDIARY**

**Consolidated Financial Statements**

As of and for the Years Ended  
June 30, 2019 and 2018

**Supplemental Schedule of Expenditures of Federal Awards**

For the Year Ended June 30, 2019

and

**Independent Auditors' Report**



# **MID-STATE HEALTH CENTER AND SUBSIDAIRY**

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TYLER, SIMMS & ST. SAUVEUR, CPAs, P.C.  
Certified Public Accountants & Business Consultants

## **Independent Auditors' Report**

To the Board of Trustees of  
Mid-State Health Center and Subsidiary:

### ***Report on the Consolidated Financial Statements***

We have audited the accompanying consolidated financial statements of Mid-State Health Center and Subsidiary, which comprise the consolidated statements of financial position as of June 30, 2019 and 2018, and the related consolidated statements of operations and changes in net assets, functional expenses and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### ***Management's Responsibility for the Consolidated Financial Statements***

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Organization's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

***Emphasis of Matter*****Changes in Accounting Principle**

As discussed in Note 1 to the consolidated financial statements, as of June 30, 2019, the Organization adopted Accounting Standards (ASU) 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities*. The update addresses the complexity and understandability of net asset classification, information about liquidity and availability of resources, methods used to allocate costs and direction for consistency about information provided about expenses and investment return. The adoption of the standard resulted in additional footnote disclosures and changes to the classification of net assets and disclosures related to net assets. Our opinion is not modified with respect to this matter.

***Opinion***

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Mid-State Health Center and Subsidiary as of June 30, 2019 and 2018, and the results of their operations, changes in net assets and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Other Matters******Supplementary Information***

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying Schedule of Expenditures of Federal Awards, as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. The consolidating information is also presented on pages 30-33 for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of the Organization's management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated November 19, 2019, on our consideration of the Organization's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control over financial reporting and compliance.

*Tyler, Leano and St. Severe, CPAs, P.C.*

Lebanon, New Hampshire  
November 19, 2019

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statements of Financial Position**  
**As of June 30, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
<b>Assets</b>		
<b>Current assets</b>		
Cash and cash equivalents	\$ 1,764,253	\$ 1,453,543
Restricted cash	69,659	53,419
Patient accounts receivable, net	570,448	683,199
Estimated third-party settlements	88,708	98,348
Contracts and grants receivable	475,746	291,932
Prepaid expenses and other receivables	379,974	357,533
<b>Total current assets</b>	<u>3,348,788</u>	<u>2,937,974</u>
<b>Long-term assets</b>		
Property and equipment, net	5,832,126	6,022,468
Other assets	18,263	-
<b>Total long-term assets</b>	<u>5,850,389</u>	<u>6,022,468</u>
<b>Total assets</b>	<u>\$ 9,199,177</u>	<u>\$ 8,960,442</u>
<b>Liabilities and net assets</b>		
<b>Current liabilities</b>		
Accounts payable	\$ 204,907	\$ 122,653
Accrued expenses and other current liabilities	66,462	71,462
Accrued payroll and related expenses	374,802	350,636
Accrued earned time	308,765	354,444
Current portion of long-term debt	160,374	160,342
Current portion of capital lease obligations	591	7,460
<b>Total current liabilities</b>	<u>1,115,901</u>	<u>1,066,997</u>
<b>Long-term liabilities</b>		
Long-term debt, less current portion	4,195,066	4,348,832
Capital lease obligations, less current portion	-	791
<b>Total long-term liabilities</b>	<u>4,195,066</u>	<u>4,349,623</u>
<b>Total liabilities</b>	<u>5,310,967</u>	<u>5,416,620</u>
Commitments and contingencies (See Notes)		
<b>Net assets without donor restrictions</b>	<u>3,888,210</u>	<u>3,543,822</u>
<b>Total liabilities and net assets</b>	<u>\$ 9,199,177</u>	<u>\$ 8,960,442</u>

The accompanying notes to financial statements are an integral part of these statements.



**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statements of Operations and Changes in Net Assets**  
**For the Years Ended June 30, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
<b>Changes in net assets without restrictions</b>		
Revenue, gains and other support		
Patient service revenue (net of contractual allowances and discounts)	\$ 6,721,349	\$ 7,064,450
Provision for uncollectible accounts	241,053	280,637
Net patient service revenue	<u>6,480,296</u>	<u>6,783,813</u>
Contracts and grants	2,464,156	2,260,034
Contributions	13,987	13,903
Other operating revenue	1,834,609	1,308,807
Net assets released from restrictions	-	11,958
Total revenue, gains and other support	<u>10,793,048</u>	<u>10,378,515</u>
Expenses		
Salaries and wages	6,115,133	6,490,478
Employee benefits	1,378,376	1,469,123
Insurance	33,090	137,116
Professional fees	939,846	563,056
Supplies and expenses	1,472,424	1,348,770
Depreciation and amortization	306,383	297,293
Interest expense	203,408	203,415
Total expenses	<u>10,448,660</u>	<u>10,509,251</u>
Change in net assets without donor restrictions	<u>344,388</u>	<u>(130,736)</u>
<b>Changes in net assets with donor restrictions</b>		
Net assets released from restrictions	-	(11,958)
Change in net assets with donor restrictions	<u>-</u>	<u>(11,958)</u>
Change in net assets	344,388	(142,694)
<b>Net assets, beginning of year</b>	<u>3,543,822</u>	<u>3,686,516</u>
<b>Net assets, end of year</b>	<u>\$ 3,888,210</u>	<u>\$ 3,543,822</u>

The accompanying notes to financial statements are an integral part of these statements.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statement of Functional Expenses**  
**For the Year Ended June 30, 2019**

	Program Services					Supporting Services		
	Medical	Dental	Behavioral Health	Emergency Prep.	Montessori Center	Total Program Service	Admin and General	Fundraising
Salaries and wages	\$ 3,573,331	\$ 396,792	\$ 756,610	\$ 60,951	\$ 169,102	\$ 4,956,786	\$ 1,138,041	\$ 20,307
Employee benefits	822,119	113,606	210,897	14,304	46,585	1,207,511	166,662	4,202
Insurance	14,794	288	1,909	4,000	977	21,968	11,123	-
Professional fees	525,174	48,356	68,799	216,416	-	858,745	81,101	-
Supplies and expenses	1,099,113	120,679	93,303	9,755	12,712	1,335,562	136,861	-
Depreciation and amortization	233,417	42,663	19,599	-	1,758	297,437	8,946	-
Interest expense	164,255	17,982	12,787	-	-	195,024	8,384	-
<b>Total expenses</b>	<b>\$ 6,432,203</b>	<b>\$ 740,366</b>	<b>\$ 1,163,904</b>	<b>\$ 305,426</b>	<b>\$ 231,134</b>	<b>\$ 8,873,033</b>	<b>\$ 1,551,118</b>	<b>\$ 24,509</b>
								<b>\$ 10,448,660</b>

The accompanying notes to financial statements are an integral part of these statements

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statement of Functional Expenses**  
**For the Year Ended June 30, 2018**

	Program Services						Supporting Services		Total Expenses
	Medical	Dental	Behavioral Health	Education and Outreach	Emergency Prep.	Montessori Center	Total Program Service	Admin and General	
Salaries and wages	\$ 3,989,689	\$ 433,697	\$ 756,546	\$ 149,122	\$ 60,620	\$ 157,192	\$ 5,546,866	\$ 926,864	\$ 6,490,478
Employee benefits	924,393	120,726	210,233	36,570	13,617	39,948	1,345,487	120,036	1,469,123
Insurance	113,359	984	-	-	-	1,002	115,345	21,771	137,116
Professional fees	214,588	19,579	26,438	-	233,623	-	494,228	60,298	554,526
Supplies and expenses	1,032,953	98,213	90,123	12,510	7,732	8,523	1,250,054	98,716	1,348,770
Depreciation and amortization	213,489	51,642	22,001	-	-	1,746	288,878	8,415	297,293
Interest expense	165,455	16,226	13,069	-	-	-	194,750	17,195	211,945
Total expenses	\$ 6,653,926	\$ 741,067	\$ 1,118,410	\$ 198,202	\$ 315,592	\$ 208,411	\$ 9,235,608	\$ 1,253,295	\$ 10,509,251

The accompanying notes to financial statements are an integral part of these statements

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Consolidated Statements of Cash Flows**

For the Years Ended June 30, 2019 and 2018

	<u>2019</u>	<u>2018</u>
<b>Cash flows from operating activities</b>		
Change in net assets	\$ 344,388	\$ (142,694)
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation and amortization	306,383	297,293
Amortization reflected as interest	2,668	2,667
Provision for uncollectible accounts	241,053	280,637
(Increase) decrease in the following assets:		
Patient accounts receivable	(128,302)	(294,199)
Estimated third-party settlements	9,640	(1,685)
Contracts and grants receivable	(183,814)	43,531
Prepaid expenses and other receivables	(22,441)	366,359
Other assets	(18,263)	-
Increase (decrease) in the following liabilities:		
Accounts payable	82,254	25,157
Accrued payroll and related expenses	24,166	21,907
Accrued earned time	(45,679)	11,178
Accrued other expenses	(5,000)	(258,431)
Net cash provided by operating activities	<u>607,053</u>	<u>351,720</u>
<b>Cash flows from investing activities</b>		
Purchases of property and equipment	<u>(116,041)</u>	<u>(36,228)</u>
Net cash used in investing activities	<u>(116,041)</u>	<u>(36,228)</u>
<b>Cash flows from financing activities</b>		
Payments on capital leases	(7,660)	(4,630)
Payments on long-term debt	<u>(156,402)</u>	<u>(195,444)</u>
Net cash used in financing activities	<u>(164,062)</u>	<u>(200,074)</u>
Net increase in cash, cash equivalents and restricted cash	326,950	115,418
Cash, cash equivalents and restricted cash, beginning of year	<u>1,506,962</u>	<u>1,391,544</u>
Cash, cash equivalents and restricted cash, end of year	<u>\$ 1,833,912</u>	<u>\$ 1,506,962</u>

Cash, cash equivalents and restricted cash consisted of the following as of June 30:

	<u>2019</u>	<u>2018</u>
Cash and cash equivalents	\$ 1,764,253	\$ 1,453,543
Restricted cash	<u>69,659</u>	<u>53,419</u>
	<u>\$ 1,833,912</u>	<u>\$ 1,506,962</u>

The accompanying notes to financial statements are an integral part of these statements.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statements of Cash Flows (continued)**  
**For the Years Ended June 30, 2019 and 2018**

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**Supplemental Disclosures of Cash Flow Information**

	<b><u>2019</u></b>	<b><u>2018</u></b>
Cash payments for:		
Interest	<b>\$ <u>200,740</u></b>	<b>\$ <u>200,748</u></b>

**Supplemental Disclosures of Non-Cash Transactions**

During 2018, the Organization entered into a capital lease agreement to acquire equipment totaling \$7,676.

The accompanying notes to financial statements are an integral part of these statements.

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

**As of and for the Years Ended June 30, 2019 and 2018**

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#### **1. Summary of Significant Accounting Policies:**

##### **Organization**

Mid-State Health Center ("MSHC") is a Federally Qualified Health Center (FQHC) which provides health care to a large number of Medicare, Medicaid and charity care patients on an outpatient basis. MSHC maintains facilities in Plymouth and Bristol, New Hampshire.

The consolidated financial statements include the accounts of Mid-State Community Development Corporation (MSCDC), collectively, "the Organization".

Effective September 23, 2010, the Organization was transferred a sole member interest in MSCDC, which owns the 19,500 square-foot operating facility that was developed to house the Organization, providing medical services to the underserved community in the Plymouth, New Hampshire region.

During the year ended June 30, 2012, after having participated in a pilot program with the New Hampshire Citizens Health Initiative (NHCHI), the Organization was officially recognized as a medical home.

##### **Basis of Statement Presentation**

The consolidated financial statements are presented on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. The consolidated financial statements have been prepared consistent with the American Institute of Certified Public Accountants *Audit and Accounting Guide, Health Care Organizations* (Audit Guide). All significant intercompany transactions between MSHC and MSCDC have been eliminated in consolidation.

Effective July 1, 2018, the Organization adopted Accounting Standards Update (ASU) 2016-14 *Not-for-Profit Entities* (Topic 958). The ASU amends the current reporting model for nonprofit organizations and enhances their required disclosures. The major changes include: (a) requiring the presentation of only two classes of net assets now entitled "net assets without donor restrictions" and "net assets with donor restrictions", (b) modifying the presentation of underwater endowment funds and related disclosures, (c) requiring the use of the places in service approach to recognize the expirations of restrictions on gifts used to acquire or construct long-lived assets absent explicit donor stipulations otherwise, (d) requiring that all nonprofits present an analysis of expenses by function and nature in either the statement of activities, a separate statement or in the notes and disclose a summary of the allocation methods used to allocate costs, (e) requiring the disclosure of quantitative and qualitative information regarding liquidity and availability of resources, (f) presenting investment return net of external and direct expenses, and (g) modifying other financial statement reporting requirements and disclosures intended to increase the usefulness of nonprofit financial statements.

Implementation of ASU 2016-14 did not require reclassification or restatement of any opening balances related to the periods presented. Net assets previously reported as unrestricted are now reported as net assets without donor restrictions. Net asset previously reported as temporarily restricted net assets are now reported as net asset with donor restrictions. A footnote on liquidity has been added (Note 16).

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

**As of and for the Years Ended June 30, 2019 and 2018**

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**1. Summary of Significant Accounting Policies (continued):**

**Classes of Net Assets**

The Organization reports information regarding its consolidated financial position and activities to two classes of net assets; net assets without donor restrictions and net assets with donor restrictions.

- (1) Net Assets without Donor Restrictions – represent those resources for which there are no restrictions by donors as to their use. They are reflected on the financial statements as without donor restrictions.
- (2) Net Assets with Donor Restrictions – represent those resources, the uses of which have been restricted by donors to specific purposes or the passage of time and/or must retain intact, in perpetuity. The release from restrictions results from the satisfaction of the restricted purposes specified by the donor.

**Estimates**

The Organization uses estimates and assumptions in preparing financial statements in accordance with accounting principles generally accepted in the United States of America. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities and the reported revenues and expenses. Actual results could differ from those estimates.

**Cash and Cash Equivalents**

Cash and cash equivalents include demand deposits, petty cash funds and investments with a maturity of three months or less, and exclude amounts whose use is limited by Board designation or other arrangements under trust agreements or with third-party payors.

**Cash in Excess of FDIC-Insured Limits**

The Organization maintains its cash in bank deposit accounts which, at times, may exceed federally insured limits. Accounts are generally guaranteed by the Federal Deposit Insurance Corporation (FDIC) up to certain limits. The Organization has not experienced any losses in such accounts.

**Receivables**

Patient receivables are carried at their estimated collectible amounts. Patient credit is generally extended on a short-term basis; thus, patient receivables do not bear interest.

Patient receivables are periodically evaluated for collectability based on credit history and current financial condition. The Organization uses the allowance method to account for uncollectible accounts receivable.

**Property and Equipment**

Property and equipment acquisitions are recorded at cost. Property and equipment donated for Organization operations are recorded at fair value at the date of receipt. Expenditures for repairs and maintenance are expensed when incurred and betterments are capitalized.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2019 and 2018

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#### 1. Summary of Significant Accounting Policies (continued):

Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed on the straight-line method. Equipment under capital leases is amortized on the straight-line method over the life of the capital lease. Such amortization is included in depreciation and amortization in the financial statements.

Estimated useful lives are as follows:

	<u>YEARS</u>
Buildings	5 - 40
Leasehold improvements	5
Equipment	3 - 7
Furniture and fixtures	5 - 15
Capital leases	3 - 15

The Organization reviews the carrying value of property and equipment for impairment whenever events and circumstances indicate that the carrying value of an asset may not be recoverable from the estimated future cash flows expected to result from its use and eventual disposition. In cases where undiscounted expected future cash flows are less than carrying value, an impairment loss is recognized equal to an amount by which the carrying value exceeds the fair value of assets. The factors considered by management in performing this assessment include current operating results, trends and prospects, as well as the effects of obsolescence, demand, competition and other economic factors.

#### Contractual Arrangements with Third-Party Payors

The Medicare and Medicaid programs pay the Organization for services at predetermined rates by treatment. The Organization is reimbursed for Medicare cost reimbursable items at a tentative rate with final settlement determined after the submission of annual cost reports and audits thereof by the Medicare fiscal intermediary. Changes in Medicare and Medicaid programs or reduction of funding levels for programs could have an adverse effect on future amounts recognized as net patient service revenue.

The laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

The Organization also enters into preferred provider agreements with certain commercial insurance carriers. Payment arrangements to the Organization under these agreements include discounted charges and fee schedule payments.

#### Net Patient Service Revenue

Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors.



## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

**As of and for the Years Ended June 30, 2019 and 2018**

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#### **1. Summary of Significant Accounting Policies (continued):**

##### **Grant Revenue**

The Organization recognizes support funded by grants determined to be exchange transactions as the Organization performs the contracted services or incurs outlays eligible for reimbursement under the grant agreements. Grant activities and outlays are subject to audit and acceptance by the granting agency and, as a result of such audit, adjustments could be required.

##### **Contributions**

Contributions are recognized at the earlier of when cash is received or at the time a pledge becomes unconditional in nature. Contributions are recorded in the net asset classes described earlier depending on the existence and/or nature of any donor restriction. When a restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restriction. Restricted contributions that are satisfied in the same reporting period are classified as net assets without donor restriction.

##### **Charity Care**

The Organization provides care to patients who meet certain criteria under its charity care policy with minimal charge or at amounts less than its established rates. Because the Organization does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

##### **Income Taxes**

MSHC and MSCDC are not-for-profit corporations as described in Section 501(c)(3) of the Internal Revenue Code (Code) and are exempt from Federal income taxes on related income pursuant to Section 501(a) of the Code.

The Organization accounts for its uncertain tax positions in accordance with the accounting methods under ASC Subtopic 740-10. The UTP rules prescribe a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken in an organization's tax return. The Organization believes that it has appropriate support for the tax positions taken and, as such, does not have any uncertain tax positions that might result in a material impact on the Organization's statements of financial position, activities and changes in net assets and cash flows. The Organization's management believes it is no longer subject to examinations for the years prior to 2015.

##### **Advertising**

Advertising costs are charged to operations when incurred. Total advertising expense for the years ended June 30, 2019 and 2018 was \$22,105 and \$23,034, respectively.

##### **Functional Allocation of Expenses**

Expenses that can be identified with specific program or supporting services are charged directly to the related program or supporting service. Expenses that are associated with more than one program or supporting service are allocated based on an evaluation by management utilizing measurements for time and effort, square footage and/or encounter based statistics.

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

**As of and for the Years Ended June 30, 2019 and 2018**

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**1. Summary of Significant Accounting Policies (continued):**

**Excess (Deficit) of Revenues over Expenses**

The consolidated statements of operations include excess (deficit) of revenues over expenses. Changes in net assets without restrictions which are excluded from excess (deficit) of revenues over expenses, consistent with industry practice, include contributions and grants of long-lived assets.

**Fair Value of Financial Instruments**

The carrying amount of cash, patient accounts receivable, accounts and notes payable and accrued expenses approximates fair value.

**Reclassifications**

Certain reclassifications have been made to the prior year's financial statements to conform to the current year presentation. These reclassifications have no effect on the previously reported change in net assets.

**Liquidity**

Assets are presented in the accompanying consolidated statements of financial position according to their nearness of conversion to cash and liabilities according to the nearness of their maturity and resulting use of cash.

**New Pronouncements**

The FASB issued ASU No. 2018-08, *Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. The ASU which becomes effective for the Organization's consolidated financial statements as of and for the year ending June 30, 2020, provides guidance on whether a receipt from a third-party resource provider should be accounted for as a contribution (nonreciprocal transaction) within the scope of Topic 958, *Not-for-Profit Entities*, or as an exchange (reciprocal) transaction.

The FASB issued ASU No. 2016-02, *Leases*. The ASU, which becomes effective for the Organization's consolidated financial statements as of and for the year ending June 30, 2021, requires the full obligation of long-term leases to be recorded as a liability with a corresponding right of use asset on the statement of financial position.

The Organization is evaluating the impact of these standards on its future financial statements.

**2. Charity Care:**

The Organization maintains records to identify and monitor the level of charity care they provide. These records include the amount of charges foregone for services and supplies furnished under their charity care policies. The total cost estimate is based on an overall cost-to-charge ratio applied against gross charity care charges. The net cost of charity care provided was approximately \$280,000 and \$337,000 for the years ended June 30, 2019 and 2018, respectively.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2019 and 2018

#### 2. Charity Care (continued):

In 2019 and 2018, 564 and 533 patients received charity care out of a total of 11,539 and 10,771 patients, respectively. The Organization provides health care services to residents of Plymouth, New Hampshire as well as Bristol, New Hampshire and their surrounding areas, without regard to the individual's ability to pay for their services.

Determination of eligibility for charity care is granted on a sliding fee basis:

For dental services, patients with family income less than 100% of the Community Services Administration Income Poverty Guidelines shall only be responsible for a nominal fee assessed by the Organization and not the balance of their account for services received. Those with family income at least equal to 101%, but not exceeding 125% of the Federal Poverty Guidelines, receive a 65% discount. Those with family income at least equal to 126%, but not exceeding 150% of the guidelines, receive a 55% discount. Those with family income at least equal to 151%, but not exceeding 200% of the guidelines, receive a 45% discount.

For all other services, patients with family income less than 100% of the Community Services Administration Income Poverty Guidelines shall only be responsible for a nominal fee assessed by the Organization and not the balance of their account for services received. Those with family income at least equal to 101%, but not exceeding 138% of the Federal Poverty Guidelines, shall be responsible for a \$20 fee for each encounter. Those with family income at least equal to 139%, but not exceeding 160% of the guidelines, will be responsible for a \$30 fee for each encounter. Those with family income at least equal to 161%, but not exceeding 180% of the guidelines, will be responsible for a \$40 fee for each encounter. Those with family income at least equal to 181%, but not exceeding 200% of the guidelines, will be responsible for a \$50 fee for each encounter.

#### 3. Patient Service Revenue and Patient Accounts Receivable:

Patient service revenue, net of contractual allowances and discounts (but before the provision for bad debts), recognized was as follows for the years ended June 30:

	2019			
	Gross Charges	Contractual Adjustments	Sliding Fee Adjustments	Patient Service Revenue
Medicare	\$ 3,168,938	\$ 736,684	\$ -	\$ 2,432,254
Medicaid	1,780,916	576,871	-	1,204,045
Blue Cross	1,943,516	681,502	-	1,262,014
Other third-party payors	2,212,431	754,360	-	1,458,071
Self-pay	621,569	-	256,604	364,965
Total	\$ 9,727,370	\$ 2,749,417	\$ 256,604	\$ 6,721,349

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Notes to Consolidated Financial Statements****As of and for the Years Ended June 30, 2019 and 2018****3. Patient Service Revenue and Patient Accounts Receivable (continued):**

	2018			
	Gross	Contractual	Sliding Fee	Patient Service
Medicare	\$ 3,056,284	\$ 760,522	\$ -	\$ 2,295,762
Medicaid	1,629,184	358,716	-	1,270,468
Blue Cross	2,012,056	587,538	-	1,424,518
Other third-party payors	2,491,465	781,926	-	1,709,539
Self-pay	733,202	-	369,039	364,163
Total	\$ 9,922,191	\$ 2,488,702	\$ 369,039	\$ 7,064,450

Patient accounts receivable is reported net of estimated contractual allowances and allowance for doubtful accounts, as follows, as of June 30:

	2019	2018
Patient accounts receivable	\$ 1,247,726	\$ 1,266,792
Less: Estimated contractual allowances and discounts	360,278	348,593
Less: Estimated allowance for uncollectible accounts	317,000	235,000
Patient accounts receivable, net	\$ 570,448	\$ 683,199

Patient accounts receivable are reduced by an allowance for doubtful accounts. In evaluating the collectability of accounts receivable, the Organization analyzes its past history and identifies trends for each of its major payor sources of revenue to estimate the appropriate allowance for doubtful accounts and provision for bad debts. Management regularly reviews data about these major payor sources of revenue in evaluating the sufficiency of the allowance for doubtful accounts. For receivables associated with service provided to patients who have third-party coverage, the Organization analyzes contractually due amounts and provides an allowance for doubtful accounts and a provision for bad debts, if necessary. For receivables associated with self-pay patients, including both patients without insurance and patients with deductible and copayment balances due for which third-party coverage exists for only part of the bill, the Organization records a significant provision for bad debts in the period of service on the basis of its past experience, which indicates that many patients are unable or unwilling to pay the portion of their bill for which they are financially responsible. The difference between the standard rates and the amounts actually collected after all reasonable collection efforts have been exhausted is charged off against the allowance for doubtful accounts.

**4. Estimated Third-Party Settlements:**

Provision has been made for estimated adjustments that may result from final settlement of reimbursable amounts as may be required upon completion and audit of related cost finding reports under terms of contracts with the Center for Medicare and Medicaid Services and the New Hampshire Division of Welfare (Medicaid). Differences between estimated adjustments and amounts determined to be recoverable or payable are accounted for as income or expense in the year that such amounts become known.

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Notes to Consolidated Financial Statements****As of and for the Years Ended June 30, 2019 and 2018****5. Grants and State Contracts:**

The Organization receives various reimbursement grants from the federal government, State of New Hampshire and other public and private agencies. The following is a summary of the grant activity for the years ended June 30:

	<u>Grant and State Contract Revenue</u>		<u>Outstanding Receivable</u>	
	<u>2019</u>	<u>2018</u>	<u>2019</u>	<u>2018</u>
HRSA 330 Grant - 2018-2022	\$ 1,585,879	\$ 1,500,224	\$ 284,968	\$ 141,281
Bi-State PCA Grant	154,332	8,238	105,528	-
NH Primary Care Contracts	153,293	150,146	25,550	38,324
Emergency Preparedness Grants	322,620	338,502	39,837	93,644
HRSA-IGNITE Grants	80,641	163,970	-	-
Other Grant and Contract Awards	167,391	98,934	19,863	18,683
	<u>\$ 2,464,156</u>	<u>\$ 2,260,034</u>	<u>\$ 475,746</u>	<u>\$ 291,932</u>

**6. Property and Equipment:**

Property and equipment consisted of the following as of June 30:

	<u>2019</u>	<u>2018</u>
Land	\$ 525,773	\$ 525,773
Buildings	6,346,118	6,346,118
Leasehold improvements	170,174	170,174
Furniture, fixtures and equipment	1,400,452	1,284,411
	<u>8,442,517</u>	<u>8,326,476</u>
Less: Accumulated depreciation	<u>2,610,391</u>	<u>2,304,008</u>
	<u>\$ 5,832,126</u>	<u>\$ 6,022,468</u>

Depreciation and amortization expense, including amortization expense on capital lease obligations, for the years ended June 30, 2019 and 2018 amounted to \$306,383 and \$297,293, respectively.

**7. Line of Credit:**

The Organization had an available line of credit with a maximum borrowing amount of \$150,000 and \$100,000 as of June 30, 2019 and 2018, respectively. The line carries an interest rate equal to 7% (prime plus 2%). The line is secured by all business assets. The line was not drawn upon as of June 30, 2019 and 2018.

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Notes to Consolidated Financial Statements**

As of and for the Years Ended June 30, 2019 and 2018

**8. Long-Term Debt:**

Long-term debt consisted of the following as of June 30:

	<u>2019</u>	<u>2018</u>
Woodsville Guarantee Savings Bank note payable, maturing August 2033, principal and interest payable in 240 monthly installments of \$18,194 through August 2033. Interest is charged at a rate of 5.25%.	\$ 2,178,682	\$ 2,279,730
Woodsville Guarantee Savings Bank note payable, maturing August 2018, principal and interest payable in 60 monthly installments of \$3,757. Interest is charged at a rate of 4%.	-	7,477
United States of America Department of Agriculture note payable, maturing April 2045, principal and interest payable in 360 monthly payments of \$10,904. Interest is charged at a rate of 3.5% (see Note 9a).	<u>2,216,849</u>	<u>2,264,725</u>
Total long-term debt	4,395,531	4,551,932
Less: unamortized deferred financing costs	<u>40,091</u>	<u>42,758</u>
Total long-term debt, net of unamortized deferred financing costs	4,355,440	4,509,174
Less: current portion	<u>160,374</u>	<u>160,342</u>
Long-term debt, less current portion	\$ <u>4,195,066</u>	\$ <u>4,348,832</u>

9a In September 2013, the Organization refinanced its then outstanding Woodsville Guarantee Savings Bank interim note payable with a construction loan. The new loan had an advancement amount of up to \$2,700,000 and called for interest only payments at a rate of 5% beginning October 2013, for 23 consecutive months, and 1 balloon payment of principal and accrued unpaid interest due September 2015. In April 2015, the Organization entered into a long-term debt arrangement with the United States of America Department of Agriculture ("USDA") totaling \$2,423,000. The proceeds from the loan were used to refinance the construction loan balance and unpaid accrued interest and to satisfy outstanding invoices related to the construction of the Bristol property. The loan is secured by the Organization's property located in Bristol, New Hampshire. The loan agreement requires the Organization to establish a reserve account which is to be funded in monthly installments of \$1,090 until the accumulated sum of reserve funding reaches \$130,848, after which no further funding is required except to replace withdrawals. As of June 30, 2019, the reserve account totaled \$69,659, reflected on the consolidated statement of financial position as restricted cash.

Future maturities of long-term debt are as follows as of June 30, 2019:

2020	\$ 160,374
2021	168,229
2022	176,256
2023	184,679
2024	193,328
Thereafter	<u>3,512,665</u>
	\$ <u>4,395,531</u>

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2019 and 2018

#### 9. Capital Lease Obligations:

As of June 30, 2019, the Organization had an outstanding capital lease obligation for a certain piece of equipment. The term of the lease agreement is for a period of 48 months expiring in 2019. Accordingly, the Organization has recorded the transaction as a capital lease obligation. For the years ended June 30, 2019 and 2018, amortization expense on the asset acquired through capital lease totaled \$2,000 and was included within depreciation and amortization expense on the consolidated statement of functional expenses. The cost basis of the equipment under capital lease as of June 30, 2019 was \$8,000. Accumulated amortization was \$7,667 and \$5,667 as of June 30, 2019 and 2018, respectively.

The following is a schedule, by year, of future minimum lease payments under the capital leases as of June 30:

2020	\$ 600
Total minimum lease payments	600
LESS: Amount representing interest	9
Present value of minimum lease payments	591
LESS: Current portion	591
Long-term capital lease obligation	\$ -

#### 10. Malpractice Insurance Coverage:

The U.S. Department of Health and Human Services deemed the Organization covered under the Federal Tort Claims Act (FTCA) for damage for personal injury, including death, resulting from the performance of medical, surgical, dental and related functions. FTCA coverage is comparable to an occurrence policy without a monetary cap. Prior to being deemed for coverage under the FTCA, the Organization purchased medical malpractice insurance under a claims-made policy on a fixed premium basis. The Organization purchases primary and excess liability malpractice insurance under occurrence policies for certain services and other portions of the Organization not covered under FTCA.

Claim liabilities are determined without consideration of insurance recoveries. Expected recoveries are presented separately. Management analyzes the need for an accrual of estimated losses of medical malpractice claims, including an estimate of the ultimate costs of both reported claims and claims incurred but not reported. In such cases, the expected recovery from the Organization's insurance provider is recorded within prepaid expenses and other receivables. As of June 30, 2019 and 2018, subsequent to management's assessment of potential reported and not yet reported claims, management determined that its exposure for potential unreported claims was immaterial and consequently did not provide for an accrual. It is possible that an event has occurred which will be the basis of a future material claim.

#### 11. Commitments and Contingencies:

**Real Estate Taxes** – The Organization and the Town of Plymouth, NH agreed to a payment in lieu of real estate taxes for a period of 10 years. The agreement identified real estate taxes previously paid by the Organization to the Town that the Organization was not required to pay as a result of its tax-exempt status. The sum of the overpayments will be applied evenly on an installment basis over the 10-year period, totaling \$50,000. The Organization remains subject to its requirement to timely file its application for tax exemption with the Town on an annual basis.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2019 and 2018

#### 11. Commitments and Contingencies (continued):

**340B Revenue** – The Organization participates in the 340B Drug Discount Program (the 340B Program) which enables qualifying health care providers to purchase drugs from pharmaceutical suppliers at a substantial discount as a Covered Entity. The 340B Program is managed by the Health Resources and Services Administration (HRSA) Office of Pharmacy Affairs. The Organization is required to undergo a self-audit process to determine compliance with 340B Program guidelines. The 340B statutes also explicitly authorize HRSA to audit Covered Entities to ensure they are compliant with the 340B Program. All Covered Entities are also required to recertify compliance with the 340B Program on an annual basis, including an attestation to full compliance with the 340B Program. The Organization earns revenue under the 340B Program by purchasing pharmaceuticals at a reduced cost to fill prescriptions to qualified patients. The Organization contracts with certain third-party pharmacies that dispense the pharmaceuticals to its patients. 340B revenue is included in other operating revenue within the consolidated statements of operations and totaled \$1,476,030 and \$1,062,379 for the years ended June 30, 2019 and 2018, respectively. The cost of pharmaceuticals, dispensing fees to the pharmacies, consulting fees and other costs associated with the 340B Program are included in operating expenses in the consolidated statements of operations and totaled \$512,776 and \$353,521 for the years ended June 30, 2019 and 2018, respectively.

#### 12. Concentration of Credit Risk:

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors was as follows at June 30:

	2019	2018
Medicare	11.7%	15.4%
Medicaid	22.2%	20.9%
Blue Cross	15.7%	18.6%
Patients	22.7%	14.9%
Other third-party payors	27.7%	30.2%
	<u>100.0%</u>	<u>100.0%</u>

#### 13. Other Operating Revenue:

The following summarizes components of other operating revenue for the years ended June 30:

	2019	2018
Other operating revenue:		
Pharmacy income - 340B	\$ 1,476,030	\$ 1,062,379
Anthem shared savings	83,807	28,835
Montessori Center	155,676	164,008
Other operating revenue	<u>119,096</u>	<u>53,585</u>
	<u>\$ 1,834,609</u>	<u>\$ 1,308,807</u>



## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2019 and 2018

#### 14. Retirement Program:

During 2007, the Organization adopted a tax-sheltered annuity plan under 403(b) of the Code for eligible employees. Eligible employees are specified as those who normally work more than 20 hours per week and are not classified as independent contractors. The Organization provides for matching of employee contributions, 50% of the first 6% contributed. Contributions to the plan for the years ended June 30, 2019 and 2018 were \$144,309 and \$154,961, respectively.

#### 15. Health Insurance:

Prior to the fiscal year ended June 30, 2019, the Organization offered health insurance benefits to all employees under available Health Maintenance Organization (HMO) and Preferred Provider Organization (PPO) plans.

During the year ended June 30, 2019, the Organization began participation in a captive health insurance plan (Captive Plan). The Organization is subject to a stop-loss limit of \$50,000 per participant in the Plan before additional coverage through the captive arrangement will commence coverage of claims. Claims submitted to the Captive Plan for reimbursement after the end of the fiscal year with service dates on or prior to June 30 are required to be recognized as a loss in the period in which they occurred. As such, the Organization has provided for a liability for unpaid claims with service dates as of or before June 30 which had not yet been reported totaling \$28,500, included under the caption "accrued expenses and other current liabilities".

Deductible requirements under the Captive Plan range from \$2,000 to \$4,000, depending on the coverage selected, before the Organization, under its' health reimbursement arrangement, is obligated to pay up to \$500 per participant.

The Organization provides for an accrual based on the aggregate amount of the liability for reported claims and an estimated liability for claims incurred but not yet reported. At June 30, 2019 and 2018, "accrued expenses and other current liabilities" include an accrued liability related to these plans of \$20,000 and \$819, respectively.

#### 16. Liquidity:

Financial assets available for general expenditures within one year of the balance sheet date consist of the following as of June 30:

	<u>2019</u>	<u>2018</u>
Cash and cash equivalents	\$ 1,764,253	\$ 1,453,543
Patient accounts receivable, net	570,448	683,199
Estimated third-party settlements	88,708	98,348
Contracts and grant receivable	475,746	291,932
Other receivables	<u>263,318</u>	<u>206,716</u>
	<u>\$ 3,162,473</u>	<u>\$ 2,733,738</u>

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

**As of and for the Years Ended June 30, 2019 and 2018**

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**16. Liquidity (continued):**

As part of its liquidity management strategy, the Organization structures its financial assets to be available as its general expenditures, liabilities and other obligations as they come due. The Organization has certain restricted cash balances totaling \$69,659 and \$53,419 as of June 30, 2019 and 2018, respectively, representing funds required to be set aside as a building maintenance reserve for the Organization's Bristol, New Hampshire location. These balances have not been included in the Organization financial assets available for general expenditure within one year.

**17. Subsequent Events:**

The Organization has reviewed events occurring after June 30, 2019 through November 19, 2019, the date the board of trustees accepted the final draft of the consolidated financial statements and made them available to be issued. The Organization has not identified other events requiring disclosure that have occurred between the period of June 30, 2019 and the report date, November 19, 2019. The Organization has not reviewed events occurring after the report date for their potential impact on the information contained in these consolidated financial statements.

**MID-STATE HEALTH CENTER**  
**Schedule of Expenditures of Federal Awards**  
**For the Year Ended June 30, 2019**

<u>Federal Grantor/Pass-Through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Pass-through Entity or Award Identifying Number</u>	<u>Federal Expenditures</u>	<u>Passed through to Subrecipients</u>
U.S. Department of Health and Human Services:				
Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless and Public Housing Primary Care)	93.224		\$ 1,585,879	\$ -
Rural Health Care Services Outreach, Rural Health Network Development and Small Health Care Provider Quality Improvement Program	93.912		80,641	-
Passed through Bi-State Primary Care Association, Inc.:				
Grants to States to Support Oral Health Workforce Activities	93.236	T12HP30316	154,322	-
Total passed through Bi-State Primary Care Association, Inc.			154,322	-
Passed through N.H. Department of Health and Human Services:				
Block Grants for Prevention and Treatment of Substance Abuse	93.959	FAIN T1010035	110,382	-
Immunization Cooperative Agreements	93.268	FAIN H23IP000757	10,300	-
Preventive Health and Health Services Block Grant Funded Solely with Prevention and Public Health Funds (PPHF)	93.758	FAIN B01OT009037	5,767	-
Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements	93.074 Comprised of 93.889 & 93.069	FAIN U90TP000335	49,492	-
Maternal and Child Health Services Block Grant to the States	93.994	Unknown	39,854	-
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	FAIN SP020796	110,000	-
Total passed through N.H. Department of Health and Human Services			325,795	-
Total U.S. Department of Health and Human Services			2,146,637	-
<b>TOTAL EXPENDITURES OF FEDERAL AWARDS</b>			<b>\$ 2,146,637</b>	<b>\$ -</b>

The accompanying notes to financial statements are an integral part of this schedule.

**MID-STATE HEALTH CENTER**  
**Notes to Schedule of Expenditures of Federal Awards**  
**For the Year Ended June 30, 2019**

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**1. Basis of Presentation:**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of MSHC under programs of the federal government for the year ended June 30, 2019. The information in the schedule is presented in accordance with the requirements of Title 2 US. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Since the schedule presents only a selected portion of the operations of MSHC, it is not intended to and does not present the statement of financial position, statement of operations and changes in net assets or cash flows of MSHC.

**2. Significant Accounting Policies:**

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. The Schedule includes Catalog of Federal Domestic Assistance (CFDA) and pass-through award numbers when available.

**3. Indirect Cost Rate:**

MSHC elected to use the 10% de minimis indirect cost rate.



TYLER, SIMMS & ST. SAUVEUR, CPAs, P.C.  
Certified Public Accountants & Business Consultants

Report I

**Independent Auditors' Report on Internal Control over Financial Reporting  
and on Compliance and Other Matters Based on an Audit of Financial  
Statements Performed in Accordance with *Government Auditing Standards***

To the Board of Trustees of  
Mid-State Health Center:

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Mid-State Health Center ("MSHC") (a nonprofit organization), which comprise the statement of financial position as of June 30, 2019, and the related statements of operations and changes in net assets and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 19, 2019.

***Internal Control Over Financial Reporting***

In planning and performing our audit of the financial statements, we considered MSHC's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of MSHC's internal control. Accordingly, we do not express an opinion on the effectiveness of MSHC's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

**Independent Auditors' Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards* (continued)**

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

***Compliance and Other Matters***

As part of obtaining reasonable assurance about whether MSHC's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

***Purpose of This Report***

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Tyler, Seniors and St. Severeur, CPAs, P.C.*

Lebanon, New Hampshire  
November 19, 2019



TYLER, SIMMS & ST. SAUVEUR, CPAs, P.C.  
Certified Public Accountants & Business Consultants

Report 2

## **Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance**

To the Board of Trustees of  
Mid-State Health Center:

### ***Report on Compliance for Each Major Federal Program***

We have audited Mid-State Health Center's ("MSHC") compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of MSHC's major federal programs for the year ended June 30, 2019. MSHC's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

### ***Management's Responsibility***

Management is responsible for compliance with federal statutes, regulations and the terms and conditions of its federal awards applicable to its federal programs.

### ***Auditors' Responsibility***

Our responsibility is to express an opinion on compliance for each of MSHC's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about MSHC's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of MSHC's compliance.

**Independent Auditors' Report on Compliance for Each Major Program and on  
Internal Control Over Compliance Required by the Uniform Guidance  
(continued)**

***Opinion on Each Major Federal Program***

In our opinion, MSHC complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2019.

***Report on Internal Control Over Compliance***

Management of MSHC is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered MSHC's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of MSHC's internal control over compliance.

*A deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

*Tyler, Lemus and St. Laurent, CPAs, P.C.*

Lebanon, New Hampshire  
November 19, 2019



**MID-STATE HEALTH CENTER**  
**Schedule of Findings and Questioned Costs**  
**As of and For the Year Ended June 30, 2019**

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**SECTION I - SUMMARY OF AUDITORS' RESULTS**

**Financial Statements**

Type of auditors' report issued

*Unmodified*

Internal control over financial reporting:

Material weakness identified

\_\_\_ Yes X No

Significant deficiencies identified that are not considered  
to be material weaknesses

\_\_\_ Yes X None reported

Non-compliance material to financial statements noted

\_\_\_ Yes X No

**Federal Awards**

Internal control over major programs:

Material weakness identified

\_\_\_ Yes X No

Significant deficiencies identified that are not considered  
to be material weaknesses

\_\_\_ Yes X None reported

Type of auditors' report issued on compliance for major programs

*Unmodified*

Any audit findings disclosed that are required to be reported in  
accordance with Section 200.516(a) of the Uniform Guidance

\_\_\_ Yes X No

Identification of major programs:

Federal CFDA Number

Name of Federal/Local Program

93.224

Health Center Program

Dollar threshold used to distinguish between Type A and Type B programs

\$750,000

Auditee qualified as low-risk auditee?

X Yes \_\_\_ No

**SECTION II - FINANCIAL STATEMENT FINDINGS**

There were no findings related to the financial statements which are required to be reported in accordance with generally accepted Government Auditing Standards (GAGAS).

**SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS**

There were no findings or questioned costs for Federal awards (as defined in Section 200.516(a) of the Uniform Guidance) that are required to be reported.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidating Statement of Financial Position – Schedule I**  
**As of June 30, 2019**

	MSHC	MSCDC	ELIMINATIONS	TOTAL
<b>Assets</b>				
Current assets				
Cash and cash equivalents	\$ 1,273,179	\$ 491,074	\$ -	\$ 1,764,253
Restricted cash	69,659	-	-	69,659
Patient accounts receivable, net	570,448	-	-	570,448
Estimated third-party settlements	88,708	-	-	88,708
Contracts and grants receivable	475,746	-	-	475,746
Prepaid expenses and other receivables	417,584	-	(37,610)	379,974
Total current assets	<u>2,895,324</u>	<u>491,074</u>	<u>(37,610)</u>	<u>3,348,788</u>
Long-term assets				
Property and equipment, net	2,547,312	3,284,814	-	5,832,126
Other assets	139,882	-	(121,619)	18,263
Total long-term assets	<u>2,687,194</u>	<u>3,284,814</u>	<u>(121,619)</u>	<u>5,850,389</u>
Total assets	<u>\$ 5,582,518</u>	<u>\$ 3,775,888</u>	<u>\$ (159,229)</u>	<u>\$ 9,199,177</u>
<b>Liabilities and net assets</b>				
Current liabilities				
Accounts payable	\$ 204,907	\$ 37,610	\$ (37,610)	\$ 204,907
Accrued expenses and other current liabilities	51,001	15,461	-	66,462
Accrued payroll and related expenses	374,802	-	-	374,802
Accrued earned time	308,765	-	-	308,765
Current portion of long-term debt	53,891	106,483	-	160,374
Current portion of capital lease obligations	591	-	-	591
Total current liabilities	<u>993,957</u>	<u>159,554</u>	<u>(37,610)</u>	<u>1,115,901</u>
Long-term liabilities				
Lease deposits	-	121,619	(121,619)	-
Long-term debt, less current portion	2,157,382	2,037,684	-	4,195,066
Capital lease obligations, less current portion	-	-	-	-
Total long-term liabilities	<u>2,157,382</u>	<u>2,159,303</u>	<u>(121,619)</u>	<u>4,195,066</u>
Total liabilities	<u>3,151,339</u>	<u>2,318,857</u>	<u>(159,229)</u>	<u>5,310,967</u>
Net assets without donor restrictions	<u>2,431,179</u>	<u>1,457,031</u>	<u>-</u>	<u>3,888,210</u>
Total liabilities and net assets	<u>\$ 5,582,518</u>	<u>\$ 3,775,888</u>	<u>\$ (159,229)</u>	<u>\$ 9,199,177</u>

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidating Statement of Operations and Changes in Net Assets – Schedule 2**  
**For the Year Ended June 30, 2019**

	MSHC	MSCDC	ELIMINATIONS	TOTAL
<b>Changes in net assets without donor restrictions</b>				
Revenue, gains and other support				
Patient service revenue (net of contractual allowances and discounts)	\$ 6,721,349	\$ -	\$ -	\$ 6,721,349
Provision for uncollectible accounts	241,053	-	-	241,053
Net patient service revenue	6,480,296	-	-	6,480,296
Contracts and grants	2,464,156	-	-	2,464,156
Contributions	13,987	-	-	13,987
Other operating revenue	1,913,520	310,149	(389,060)	1,834,609
Net assets released from restrictions	-	-	-	-
Total revenue, gains and other support	10,871,959	310,149	(389,060)	10,793,048
Expenses				
Salaries and wages	6,115,133	-	-	6,115,133
Employee benefits	1,378,376	-	-	1,378,376
Insurance	33,090	-	-	33,090
Professional fees	901,493	119,202	(80,849)	939,846
Supplies and expenses	1,779,867	768	(308,211)	1,472,424
Depreciation and amortization	187,743	118,640	-	306,383
Interest expense	83,642	119,766	-	203,408
Total expenses	10,479,344	358,376	(389,060)	10,448,660
Change in net assets without donor restrictions	392,615	(48,227)	-	344,388
Net assets, beginning of year	2,038,564	1,505,258	-	3,543,822
Net assets, end of year	\$ 2,431,179	\$ 1,457,031	\$ -	\$ 3,888,210

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidating Statement of Financial Position – Schedule J**  
**As of June 30, 2018**

	<u>MSHC</u>	<u>MSCDC</u>	<u>ELIMINATION</u>	<u>TOTAL</u>
<b>Assets</b>				
<b>Current assets</b>				
Cash and cash equivalents	\$ 946,166	\$ 507,377	\$ -	\$ 1,453,543
Restricted cash	53,419	-	-	53,419
Patient accounts receivable, net	683,199	-	-	683,199
Estimated third-party settlements	98,348	-	-	98,348
Contracts and grants receivable	291,932	-	-	291,932
Prepaid expenses and other receivables	375,333	-	(17,800)	357,533
Total current assets	<u>2,448,397</u>	<u>507,377</u>	<u>(17,800)</u>	<u>2,937,974</u>
<b>Long-term assets</b>				
Property and equipment, net	2,619,014	3,403,454	-	6,022,468
Deposits and other assets	121,376	-	(121,376)	-
Total long-term assets	<u>2,740,390</u>	<u>3,403,454</u>	<u>(121,376)</u>	<u>6,022,468</u>
Total assets	<u>\$ 5,188,787</u>	<u>\$ 3,910,831</u>	<u>\$ (139,176)</u>	<u>\$ 8,960,442</u>
<b>Liabilities and net assets</b>				
<b>Current liabilities</b>				
Accounts payable	\$ 122,653	\$ 17,800	\$ (17,800)	\$ 122,653
Accrued expenses and other current liabilities	55,306	16,156	-	71,462
Accrued payroll and related expenses	350,636	-	-	350,636
Accrued earned time	354,444	-	-	354,444
Current portion of long-term debt	51,817	108,525	-	160,342
Current portion of capital lease obligations	7,460	-	-	7,460
Total current liabilities	<u>942,316</u>	<u>142,481</u>	<u>(17,800)</u>	<u>1,066,997</u>
<b>Long-term liabilities</b>				
Lease deposits	-	121,376	(121,376)	-
Long-term debt, less current portion	2,207,116	2,141,716	-	4,348,832
Capital lease obligations, less current portion	791	-	-	791
Total long-term liabilities	<u>2,207,907</u>	<u>2,263,092</u>	<u>(121,376)</u>	<u>4,349,623</u>
Total liabilities	<u>3,150,223</u>	<u>2,405,573</u>	<u>(139,176)</u>	<u>5,416,620</u>
<b>Net assets without donor restrictions</b>	<u>2,038,564</u>	<u>1,505,258</u>	<u>-</u>	<u>3,543,822</u>
Total liabilities and net assets	<u>\$ 5,188,787</u>	<u>\$ 3,910,831</u>	<u>\$ (139,176)</u>	<u>\$ 8,960,442</u>

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidating Statement of Operations and Changes in Net Assets – Schedule 2**  
**For the Year Ended June 30, 2018**

	MSHC	MSCDC	ELIMINATIONS	TOTAL
<b>Changes in net assets without donor restrictions</b>				
Revenue, gains and other support				
Patient service revenue (net of contractual allowances and discounts)	\$ 7,064,450	\$ -	\$ -	\$ 7,064,450
Provision for uncollectible accounts	280,637	-	-	280,637
Net patient service revenue	6,783,813	-	-	6,783,813
Contracts and grants	2,260,034	-	-	2,260,034
Contributions	13,903	-	-	13,903
Other operating revenue	1,308,265	308,753	(308,211)	1,308,807
Net assets released from restrictions	11,958	-	-	11,958
Total revenue, gains and other support	10,377,973	308,753	(308,211)	10,378,515
Expenses				
Salaries and wages	6,490,478	-	-	6,490,478
Employee benefits	1,469,123	-	-	1,469,123
Insurance	137,116	-	-	137,116
Professional fees	554,526	8,530	-	563,056
Supplies and expenses	1,645,044	11,937	(308,211)	1,348,770
Depreciation and amortization	178,653	118,640	-	297,293
Interest expense	77,275	126,140	-	203,415
Total expenses	10,552,215	265,247	(308,211)	10,509,251
Change in net assets without donor restrictions	(174,242)	43,506	-	(130,736)
<b>Changes in net assets with donor restrictions</b>				
Net assets released from restrictions	(11,958)	-	-	(11,958)
Change in net assets with donor restrictions	(11,958)	-	-	(11,958)
Change in net assets	(186,200)	43,506	-	(142,694)
Net assets, beginning of year	2,224,764	1,461,752	-	3,686,516
Net assets, end of year	\$ 2,038,564	\$ 1,505,258	\$ -	\$ 3,543,822



— BOARD OF DIRECTORS CONTACT LIST —

**BOARD OFFICERS (4)**

Timothy Naro, President  
Term Exp: 6/30/20

Peter Laufenberg, Vice President  
Term Exp: 6/30/20

Audrey Goudie, Secretary  
Term Exp: 6/30/22

Todd Bickford, Treasurer  
Term Exp: 6/30/20

**BOARD MEMBERS, ACTIVE (9)**

Carol Bears, Director  
Term Exp: 6/30/21

Sunshine Fisk, Director  
Term Exp: 6/30/21

Joseph Monti, Director  
Term Exp: 6/30/22

Nicholas Coates, Director  
Term Exp: 6/30/21

Lee Freeman, Director  
Term Exp: 6/30/22

Carina Park, Director  
Term Exp: 6/30/22

Isaac Davis, Director  
Term Exp: 6/30/22

Mike Long, Director  
Term Exp: 6/30/22

Cynthia Standing, Director  
Term Exp: 6/30/21

**BOARD MEMBERS, HONORARY (2)**

Ann Blair, Director  
Term Exp: 6/30/21

James Dalley, Director  
Term Exp: 6/30/19

## Angel Ekstrom, EdD

101 Boulder Point Dr. Ste. 1, Plymouth, NH 03264  
(603)238-3582 • aekstrom@midstatehealth.org

### EDUCATION

Doctor of Education - Curriculum and Instruction, Argosy University, Sarasota, Florida, 2008

Certificate of Advanced Graduate Studies - Educational Leadership Plymouth State University, Plymouth, New Hampshire, 2004

Master of Science - Recreation Administration, University of Nebraska at Omaha, Omaha, Nebraska, 1998

Bachelor of Science - Interdisciplinary, Physical Education and Health, Southwest State University, Marshall, Minnesota, 1996

Associate of Arts - Anoka Ramsey Community College, Anoka, Minnesota, 1993

### SELECTED PROFESSIONAL EXPERIENCE

2002- June 2014 Skills Application Teacher - 90% time split position between Academic Affairs and Student Affairs

Plymouth State University, Plymouth, NH

Manage the challenge course. 2002-2008

Health and Human Performance Department - Adventure Education (2002-2009)

Outdoor Center Coordinator

1998- 1999 Lead Wilderness Counselor, Lathrop Park Experiential Program, Walsenburg, CO

1991 - 1996 Activities Coordinator / Counselor, Robert E. Miller (REM), Inc. - Minneapolis and Bloomington, MN and Marshall, MN

### UNIVERSITY SERVICE

#### PAT Committees:

Athletic Council, 2004-2008, 2011, 2012

PAT Observer to Student Senate, 2005-2006

#### Health & Human Performance (HHP) Department Committees:

Adventure Education Risk Management committee member, 2006-

present Faculty search committee, 2012

Center for Active Living & Wellness Case Statement subcommittee member, 2006-2008

New Majors Orientation committee member, 2004-

2006 Open House Committee member, 2003-2006

#### Student Scholarship Committees,

Brennan Hart Scholarship committee member, 2003-2014

Outdoor Center Student Scholarships committee chair, 2007-2011

#### Leadership Effectiveness and Development Series (L.E.A.D.S.) Presenter

PE Center Planning committee member, 2006-2008

Center for Rural Partnerships; Rural Health and Wellness Working Group member, 2006

## PROFESSIONAL SERVICE

Association of Outdoor Recreation and Education (AORE)

Board of Directors (BOD) member, 2004-2007

Executive Council of AORE (treasurer), 2005-2007

Environmental Stewardship Committee BOD Liaison of AORE, 2006-2007

Northeast Regional Representative, 2005-2006

## COMMUNITY OUTREACH, SERVICE, and CONSULTION

Center for Young Children and Families (Plymouth, NH) guest presenter: Bear Hang with Pulley System: How to Keep Food from Bears and Other Wildlife, December 2013

20<sup>th</sup> Anniversary for Rivers Management and Protection Programs (Plymouth, NH) August 2013

FAST Squad volunteer (Rumney, NH) 2005-2007

Fire Department volunteer (Rumney, NH) 2005-2007

Plymouth-Area Renewable Energy Initiative (PAREI) member & volunteer for local energy raisers, 2005-present • Search and Rescue Lake County volunteer (Leadville, CO) 1999-2001 • Lake County Parks & Recreation (Leadville, CO) o board member 1998-2000 o Vice President 1998-2000

Leadership Leadville participant (Leadville, CO) 2000-2001

Challenge Course Facilitator Training & Local Operating Procedure Consulting o

University of Wisconsin, Stout o Mississippi Gulf Coast Community College

### SELECTED TRAININGS

Suicide, Postvention Suicide, and Suicide Postvention Train the Trainer (April 2015)

Voices Against Violence 30 hour Training (Feb./March 2015)

Leave No Trace Master Educator (Leave No Trace Center for Outdoor Ethics and National Outdoor Leadership School), 2009

Trip Leader Training (American Canoe Association), 2008

High 5 Adventure Learning Center Adventure Practitioners Symposium (Brattleboro, VT), 2007

Instructor Course (National Outdoor Leadership School 35 day training), 2000

Advanced Skills and Standards Workshop (Project Adventure 4 day training), 2002

Horse Packing Seminar (National Outdoor Leadership School), 2000

Women's Rock Seminar (National Outdoor Leadership School), 2000

Juvenile Detention Services training program (MN Department of Corrections), 1996

Time, Stress, and management training (Southwest Technical College, MN), 1996

## RECOGNITIONS

Patricia A. Storer Award nominee (Plymouth State University) 2012

Distinguished Adjunct Teaching Award nominee (Plymouth State University, Office of the Provost and Vice President for Academic Affairs) 2007

Leave No Trace Master Educator Course Scholarship recipient (Association of Outdoor Education and Recreation) 2008

Instructor Course Scholarship recipient (National Outdoor Leadership School) 2000

Certificate of Appreciation 1998 (U.S. Department of the Interior National Park Service, Great Sand Dunes National Monument) 1998

Recognition for Research (NWBA/PVA National Basketball Camp) 1997

Most Valuable Player (University of NE at Omaha Wheelchair Basketball Team) 1997



## **DR. ROBERT J. MACLEOD, DHA**

**Acute General Medical Rural Health Care, Long Term Care, and Behavioral Health Care Executive with documented success developing managed care strategies, integrating delivery systems, program and policy development, and improving quality and utilization management programs**

### **SUMMARY OF QUALIFICATIONS**

- Healthcare Executive with strengths in policy setting, project management, budget control, vendor negotiations, HR, process improvements, program development, community outreach, and facility expansion.
- Expert in staff training, development, and performance management to meet operating and financial goals with extensive experience in workforce diversity, team building, and group leadership.
- Process designer with extensive experience creating strategy and policy with stakeholders contributing through a collaborative approach, cutting through departmental, industry and cultural differences.
- Health Services Strategist using LEAN Framework steering any business challenge into a process, strategy and resource capabilities decision process with measurable objectives outcome.

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### **PROFESSIONAL EXPERIENCE**

**MID-STATE HEALTH CENTER, PLYMOUTH, NH      JUNE 2018 –  
PRESENT**

#### **CHIEF EXECUTIVE OFFICER**

**OCT 1 -**

- Oversees the recruitment, development, performance evaluation of employees
- Oversees the business and financial affairs of the clinic and fiscal management.
- Enhances operational effectiveness, emphasizing cost containment without jeopardizing important innovation or quality of care.
- Ensures clinic compliance with all regulatory agencies governing health care delivery and the rules of accrediting bodies.
- Encourages clinic integration within the community through effective communication. Represents the clinic in its relationships with other health organizations, government agencies, and third party payers.
- Provides leadership in developing, planning, and implementing the clinic's business plans.
- Serves as a non-voting member of the governing board and responsible for developing and implementing the clinic's mission and strategic plan, assists the board in developing and implementing strategic plans to support the clinic's philosophy & goals, informs board about trends, problems and medical activities to facilitate policy making.

#### **CHIEF PROJECTS OFFICER**

**JUNE - OCT 1**

Oversees a wide variety of projects within the organization and identifies issues, provides solutions, delegate tasks and monitor progress to stay on schedule and on budget.

**STATE OF NEW HAMPSHIRE, *Concord, NH*** **October 2002 - 2018**

**ADMINISTRATOR, GLENCLIFF HOME (LTCF- DEPARTMENT OF HEALTH AND SERVICES**  
**JUNE 2017 – 2018**

Advisory responsibilities to the Administrator of the Glencliff Home including policy review, regulatory requirements, and CMS and USDOJ compliance.

- Established various policies and procedures necessary to meet CMS and OCR compliance
- Liaison for the State and USDOJ regarding Olmstead settlement to discharge residents to a less restrictive venue.
- Collaborate with clinical staff improve the delivery of services to residents by using LEAN methodology.
- Collaborate with senior management identifying strategies to maintain productive employee and union relations.
- Assisting the Nursing Director to establish a LPN program partnering with an existing accredited NH educational institution.
- Meet with residents to identify their needs and develop a plan for discharge to a community setting.
- Collaborate with activities staff identifying programs that are skill based.

**2**

**CEO, NEW HAMPSHIRE HOSPITAL (DEPARTMENT OF HEALTH AND HUMAN SERVICES)**  
**JUNE 2017** **JANUARY 2011-**

Responsible for overall operations including policy administration, regulatory compliance, and legislative interaction for behavioral health serving patients in all geographical regions of the state. New Hampshire Hospital is a Joint Commission accredited 168-bed inpatient psychiatric facility with 2500 admissions and discharges per year, a \$70M operating budget, and 630 employees and a 35 member medical staff.

- Reduced operating budget by \$8.5M in one year by consolidating support services and outsourcing the management of transitional services.
- Increased third-party reimbursement by facilitating timely authorizations and appeals, and using an IPPS coding methodology.
- Created a research infrastructure in collaboration with the Geisel School of Medicine at Dartmouth.
- Initiated study to determine the percentage of patients admitted with substance use issues
- Oversight of a project to facilitate the use of tele-psychiatry for underserved areas of the state with a focus on child psychiatry- (Implementation ongoing).
- Implemented a re-engineered post discharge program (Project Red). The first public-sector behavioral hospital to do so in the country.
- Implemented a patient-centered approach for the treatment of children and adolescents. Programming addresses mental health and behavioral issues.
- Enhanced co-occurring services for adolescent adult patients
- Implemented Peer Support services
- Collaborative agreement with Systemic-Therapeutic-Assessment-Respite-Treatment Program (START)
- Negotiated managed care contracts
- Electronic Health Record (EHR), and Computerized Physician Order Entry (CPOE)-(Implementation ongoing)

- Participating in NHDHHS Health Information Exchange Implementation Project
- Established 10-bed inpatient stabilization unit

**DIRECTOR OF MEDICAL & FORENSIC SERVICES (NH DEPARTMENT OF CORRECTIONS)** **OCTOBER 2002-2011**

Direct the overall policy administration, regulatory compliance, and legislative lobbying for health and behavioral services for 4 state correctional facilities and 1 secured psychiatric facility (forensic hospital) with administrative oversight of 175 employees and \$20M

**SPEARE MEMORIAL HOSPITAL, Plymouth, NH (CAH)** **January 1982 – October 2002**

**EXECUTIVE VICE PRESIDENT & CHIEF OPERATING OFFICER** **February 2000 – October 2002**

Senior Operating Executive with full strategic planning and P&L management responsibility of \$20M in operating expenses accountable for all clinical, philanthropy, administrative, and support functions reporting to the CEO.

- Delivered unprecedented revenue for the Physician-Hospital Organization through building relationships and leading negotiations with managed care organizations driving \$7.5M managed care operating revenues and \$600K net revenues.
- Chaired Organizational-wide Strategic Planning Committee strategically mapping and implementing tactical action plans addressing financial, operational, and community program goals.
- Authored and achieved a \$34K School Dental Program Health Care Grant enabling prophylaxis and reconstructive dental care for children in pre-school to high school.
- Spearheaded a \$147K vocational grant process partnering with Plymouth Regional High School achieving a vocational program to introduce and prepare students for careers in the health profession.
- Initiated and established Infirmary services with the local university directly increasing Emergency, Radiology, and Laboratory services revenues by 5%.
- Directed the full-scale design and development of 2 new physician office buildings on time and under budget.
- Chaired and Member of hospital committees including Pharmacy and Therapeutic, Infection Control, Board of Trustees, Safety, Quality Improvement, and Leadership.

**ASSOCIATE ADMINISTRATOR** **September 1995 – February 2000**  
Directed the daily operations and strategic planning of programs for the Nursing Department, Social Services, Pharmacy, Materials Management, Facility Services, Food and Nutritional Services, Public Relations, and Community Wellness.

**DIRECTOR, SUPPORT SERVICES** **January 1982 – September 1995**

**ADDITIONAL EXPERIENCE**

**PLYMOUTH STATE UNIVERSITY, PLYMOUTH, NH** **1999 -**  
**ADJUNCT PROFESSOR**  
**GEISEL (DARTMOUTH) SCHOOL OF MEDICINE** **2014 -**  
**ADJUNCT PROFESSOR**

## ACADEMIC EXPERIENCE

### **DHA, DOCTOR OF HEALTH ADMINISTRATION & POLICY (2003)**

MEDICAL UNIVERSITY OF SOUTH CAROLINA

Charleston, SC

*Doctoral Project: Perspective of Hospital Chief Executive or Chief Operating Officers Regarding the Hospital Accreditation and Certification Process*

*Honors Society*

### **MASTERS – BUSINESS ADMINISTRATION (1996)**

PLYMOUTH STATE COLLEGE

Plymouth, NH

### **BS, INTERDISCIPLINARY DEGREE – POLITICAL SCIENCE & BUSINESS MANAGEMENT (1994)**

PLYMOUTH STATE COLLEGE

Plymouth, NH

*Summa Cum Laude*

### **ASSOCIATES IN ARTS – ACCOUNTING (1986)**

NORTH SHORE COMMUNITY COLLEGE

Beverly, MA

## ASSOCIATIONS

4

- President, Board of Directors, Mid-State Health Clinic (FQHC)
- Fellow, American College of Health Care Executives
- Former Member, Governor's Task Force on Certificate of Need Reform
- Past Chair and Member, Town of Thornton School Board
- Past Vice-Chair and Member, Pemi-Baker Regional High School Board
- Member, Waterville Valley Chamber of Commerce and Plymouth Chamber of Commerce
- Member, New Hampshire Charitable Foundation.
- Member, New Hampshire Mental Health Commission and New Hampshire Suicide Council.

101 Boulder Point Drive, Suite 1  
Plymouth, NH 03264  
(603) 536-4000

# William Sweeney

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- Objective** Seeking a challenging and rewarding job in finance and accounting within a medical office context.
- Education**
- 5/1997 Plymouth State College Plymouth, NH  
**Bachelor's of Science in Accounting**
- Graduated Cum Laude with a 3.33 GPA on a 4.0 scale.
  - Minor in Mathematics
- 8/2013 Plymouth State University Plymouth, NH  
**Master's Degree in Business Administration**
- Graduate Certificate in Health Care Administration
- Professional experience**
- 1/1997-Present Mid-State Health Center Plymouth, NH  
**Chief Financial Officer**
- Prepare financial statements, budgets, grant management, reconcile bank account and compile clinician productivity which is used to calculate their salary. Experience with billing office and hospital charges for PCP office, management of employees, use of MS Office and MSSQL
- Chief Information Officer**
- Supervise IT staff and work with contracted IT Company to make sure system is up-to-date, performing as needed and current hardware and software are working. Collaborate on future goals and needs as well as IT/IS projects.
- References** Available upon request.

## WENDY LASCH-WILLIAMS

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### Executive Profile

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Dynamic advancement professional with extensive project management experience from concept to implementation in the health care and non-profit environments. A highly-committed project leader with an energetic personality, collaborative nature, the proven ability to positively inspire others. Talents include identifying opportunities for growth; fund development; and implementing strategies to attain organization goals.

### Skills Highlight

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- Fund Development
- Change Management
- Community Engagement
- Marketing & Brand Development
- Team-oriented Leadership
- Skilled Facilitator

### Professional Experience

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#### **DIRECTOR OF ADVANCEMENT & COMMUNICATIONS** **Mid-State Health Center**

**10/2010 to Current**  
**Plymouth, NH**

- Established goals, objectives, and plans for advancement initiatives resulting in funding awards from private foundations, the State of New Hampshire, and Health Resources Services Administration and other funders.
- Lead and implement key initiatives at the local, state and national level which result in new revenue streams.
- Initiate and implement key communication strategies to improve public image and patient relations.
- Executed successful branding and marketing strategies.
- Resolved internal and external organizational communication challenges
- Facilitated the Patient Expert Advisory Team to ensure the patient perspective is considered as part of the organization's decision-making process
- Cultivated relationships with Board of Directors, funders, legislative representatives and community partners to further the mission of the organization.
- Managed annual fund reporting for private foundations and state and federal grants totaling over a \$1 million dollars each year.
- Created a tool to analyze and assess the alignment of potential funding opportunities with the mission of the organization.
- Prepared submissions for major grant funding opportunities with a high rate of funding success.
- Established several strategies to improve organizational culture.
- Played a key role in the opening of a new facility including planning, proposal for funding, purchasing and launch.

#### **ADVANCEMENT & OUTREACH COORDINATOR** **Communities for Alcohol and Drug-free Youth, Inc.**

**10/2010 to 07/2011**  
**Plymouth, NH**

- Provided contracted advancement and outreach support to CADY, Inc.
- Conducted community-based outreach efforts as well as marketing and promotion of programs and activities.
- Launched a highly-successful fundraising event which is now an annual event for the organization.
- Conducted development activities including grant research and writing resulting in new funding opportunities.

#### **ASSISTANT COORDINATOR** **Greater Plymouth Public Health Network**

**10/2008 to 08/2010**  
**Plymouth, NH**

- Developed and supported implementation of a community outreach strategy for the regional public health emergency activities related to H1N1 which laid the foundation for future public health initiatives.
- Coordinated, promoted and implemented vaccination clinics in the Region.
- Engaged regional municipalities, health organizations, and other stakeholders to ensure successful implementation of the project.
- This public health outreach project required a high level of stakeholder engagement in a short amount of time. The region's efforts were identified as one of the most successful in the State.

**ASSISTANT DIRECTOR****10/2007 to 03/2009****Belknap County Core Coalition****Meredith, NH**

- Successfully developed and implemented a variety of public relations and multi-media marketing initiatives
- to expand Coalition membership and increase member collaboration and participation.
- Facilitated, coordinated and led youth activities related to Coalition initiatives.

**PRINCIPAL/OWNER****06/2006 to 10/2010****All That Matters, LLC****Bristol, NH**

- Provided fundraising and administrative support for area non-profit organization.
- Guided local municipality in the development of their Local Emergency Operations Plan.
- Conducted contracted family and marital mediation and court-appointed Guardian ad Litem services.

**PROGRAM YOUTH SPECIALIST****10/2004 to 06/2007****Franklin High School****Franklin, NH**

- Implemented the School-to-Work curriculum, teaching employment skills, practical math and reading skills, self-awareness skills, and life skills to high school students.
- Coordinated support services, leadership events, community service projects, job shadowing, and work-based learning opportunities.

**TUTOR/PROGRAM ASSISTANT****08/2003 to 09/2004****Laconia Out of School Youth Program****Laconia, NH**

- Implemented the national Jobs for America's Graduates curriculum, teaching employment skills, self-awareness skills, and life skills to out of school youth.
- Assisted in the planning and implementation of leadership activities, community service projects, and field trips.

**ASSISTANT TO THE SUPERINTENDENT - Finance****03/2000 to 06/2001****Newfound Area School District****Bristol, NH**

- Acted as liaison to the Superintendent in special projects such as capital improvement projects, equipment purchasing, annual maintenance contracts and building maintenance projects.
- Monitored and managed general ledger entries for \$14 million budget to ensure fiscal responsibility across the organization.
- Managed and implemented a successful conversion to new accounting software.
- Processed bi-weekly payroll for 300+ employees and accounts payable for 150+ vendors.
- Started with the organization in 1997 as administrative support and was promoted to Assistant to the Superintendent.

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**Education****MBA: Healthcare Administration, 2014****Plymouth State University, Plymouth, NH****Bachelor of Science: Human Services Administration, 2010****Granite State College, Concord, NH****Certificate Program: Mediation and Conflict Management, 2002****Woodbury College, Montpelier, VT****Associate of Science: Business Management, 1990****Champlain College, Burlington, VT**

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**Interests**

Stand-up paddle boarding, running and reading.

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**Professional Affiliations****Member & President (2015-16), Bristol Rotary Club (2011 - present)****Member, Medical Group Management Association of NH (2011 - present)****Member, Medical Group Management Association (2011 - present)**

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**Additional Information**

Active member of the Tappley-Thompson Community Center Board and NH Marathon committee. Instrumental in the addition of a children's race as part of the NH Marathon. Co-hosted a regionally popular public access television production to highlight interesting activities in the Newfound community for two seasons (12 +/- episodes).

# SAMANTHA HOOPER|

## Objective

Efficient Business Administration major currently studying at Plymouth State University with six years of work experience. Aiming to leverage a proven knowledge of assisted living and acute care skills to fulfill a healthcare management role.

## Education

*B.S. Business Administration and Professional Communications*

Plymouth State University Plymouth, NH 03264

Expected Graduation Date: May 2020

## Experience

*Public Health Advisory Council and Communications Coordinator • Mid-State Health Center • 08/2019-Current*

- Develop, implement, and monitor PHAC workplans in alignment with state goals; assist council in completing contract and grant deliverables; develop relationships with key community stakeholders

*Executive Intern • Meredith Bay Colony Club • 06/2019 – 10/2019*

- Electronic medical record conversion; senior housing focused marketing; onboarding nursing for electronic medication charting; organizing and filing; supporting senior management team with day-to-day operations

*Activities Assistant • Meredith Bay Colony Club • 02/2019 – 10/2019*

- Organize, lead, and promote recreational activities; Confer with management to discuss patient complaints; Maintain attendance forms and inventory lists

*Life Skills Facilitator • Rose Meadow Group • 10/2015 - 02/2019*

- Provide physical support to assist patients to perform daily living activities; Communicate with patients to ascertain feelings or need for assistance and emotional support

## Key Skills

<i>Interpersonal Communications</i>	<i>Time Management</i>	<i>Sales</i>	<i>Microsoft Office</i>	<i>Organization</i>
<i>Planning</i>	<i>Problem Solving</i>		<i>Adobe Acrobat</i>	

## Awards and Acknowledgements

- |  |                                 |
|--|---------------------------------|
| • <i>Member of Phi Kappa Phi Honor Society</i>   | <i>May 2019-May 2020</i>        |
| • <i>Member of Delta Mu Delta Honor Society</i>  | <i>May 2019-May 2020</i>        |
| • <i>Citizenship Award</i>   | <i>June 2016</i>                |
| • <i>President of National Honor Society</i>   | <i>September 2014-June 2016</i> |
| • <i>Recipient of Rebecca Parish Memorial Scholarship for excellence in Business</i>             | <i>May 2018</i>                 |
| • <i>Future Business Leader of the Year presented by the Souhegan Valley Chamber of Commerce</i> | <i>June 2015</i>                |



**KEY ADMINISTRATIVE PERSONNEL****NH Department of Health and Human Services****Contractor Name:** Mld-State Health Center**Name of Program:** Regional Public Health Network Services

<b>BUDGET PERIOD:</b> SFY 20				
<b>NAME</b>	<b>JOB TITLE</b>	<b>SALARY</b>	<b>PERCENT PAID FROM THIS CONTRACT</b>	<b>AMOUNT PAID FROM THIS CONTRACT</b>
Angel Ekstrom	PHN Coordinator	\$62,558	100.00%	\$62,558.00
Robert MacLeod	CEO	\$180,000	0.50%	\$900.00
Bill Sweeney	CFO	\$138,739	1.75%	\$2,392.93
Wendy Lasch-Williams	Grants & Programming Director	\$88,400	1.00%	\$884.00
Samantha Hooper	PHAC Coordinator	\$25,000	100.00%	\$25,000.00
		\$0	0.00%	\$0.00
<b>TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)</b>				<b>\$91,734.93</b>

<b>BUDGET PERIOD:</b> SFY 21				
<b>NAME</b>	<b>JOB TITLE</b>	<b>SALARY</b>	<b>PERCENT PAID FROM THIS CONTRACT</b>	<b>AMOUNT PAID FROM THIS CONTRACT</b>
Angel Ekstrom	PHN Coordinator	\$64,435	100.00%	\$64,435.00
Robert MacLeod	CEO	\$185,400	0.05%	\$92.70
Bill Sweeney	CFO	\$140,841	1.75%	\$2,464.72
Wendy Lasch-Williams	Grants & Programming Director	\$91,052	1.00%	\$910.52
Samantha Hooper	PHAC Coordinator	\$25,000	100.00%	\$25,000.00
		\$0	0.00%	\$0.00
<b>TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)</b>				<b>\$92,902.94</b>



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**State of New Hampshire  
Department of Health and Human Services  
Amendment #5 to the Regional Public Health Network Services Contract**

This 5<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #5") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and North County Health Consortium (hereinafter referred to as "the Contractor"), a nonprofit, with a place of business at 262 Cottage St, Suite 230 Littleton, NH 03561.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as approved by the Governor on July 10, 2020, as presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as approved by the Governor on MM/DD/YYYY, which will be presented to the Executive Council as an Informational Item, 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, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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 to amend as follows:

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$809,637.
2. Modify Exhibit B-1, Program Funding, Amendment #4 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #5, which is attached hereto and incorporated by reference herein.
3. Modify Exhibit B-13, Young Adult Strategies, SFY 2021, Amendment #1, by replacing it in its entirety with Exhibit B-13, Young Adult Strategies, SFY 2021, Amendment #5, which is attached hereto and incorporated by reference herein.

North County Health Consortium

Amendment #5

Contractor Initials

DS  
BM

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #5 remain in full force and effect. This amendment shall be retroactively effective to October 1, 2020 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

11/12/2020

Date

DocuSigned by:

*Lisa M. Morris*

D938DBF86CA54A0...

Name: Lisa Morris  
Title: Director

North County Health Consortium

11/12/2020

Date

DocuSigned by:

*Becky McEnany*

2384D4C7F8AD48D...

Name: Becky McEnany  
Title: Interim CEO

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

**OFFICE OF THE ATTORNEY GENERAL**

11/13/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "C. Pinos", enclosed in a rectangular box.

DSCA8202E32C4AE

Name: Catherine Pinos

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:

Vendor Name: North Country Health Consortium  
 Contract Name: Regional Public Health Network Services  
 Region: North Country

Program Name and Funding Amounts											
State Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps.	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00
2020		\$ 30,000.00	\$ 88,550.00	\$ 50,000.00	\$ 10,000.00	\$ 77,488.00	\$ 40,581.00	\$ 90,000.00	\$ 15,000.00	\$ 14,892.00	\$ 10,000.00
2021	\$ 10,000.00	\$ 30,000.00	\$ 88,550.00		\$ 10,000.00	\$ 77,488.00	\$ 40,580.00	\$ 90,000.00	\$ 15,000.00	\$ 10,308	\$ -
Total										\$ 809,637.00	

DS  
 BM

Contractor Initials: \_\_\_\_\_  
 11/12/2020  
 Contractor: \_\_\_\_\_

## Exhibit B-13, Amendment # 5

New Hampshire Department of Health and Human Services									
Contractor Name: North Country Health Consortium									
Budget Request for: Young Adult Strategies									
Budget Period: SFY 2021									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 55,787.95	\$ 9,762.89	\$ 65,550.84	\$ -	\$ -	\$ -	\$ 55,787.95	\$ 9,762.89	\$ 65,550.84
2. Employee Benefits	\$ 12,831.23	\$ 2,245.48	\$ 15,076.71	\$ -	\$ -	\$ -	\$ 12,831.23	\$ 2,245.48	\$ 15,076.71
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rent	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchases/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 3,454.20	\$ 604.48	\$ 4,058.68	\$ -	\$ -	\$ -	\$ 3,454.20	\$ 604.48	\$ 4,058.68
6. Travel	\$ 1,398.01	\$ 244.65	\$ 1,642.66	\$ -	\$ -	\$ -	\$ 1,398.01	\$ 244.65	\$ 1,642.66
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 475.48	\$ 83.21	\$ 558.69	\$ -	\$ -	\$ -	\$ 475.48	\$ 83.21	\$ 558.69
Postage	\$ 104.77	\$ 18.33	\$ 123.10	\$ -	\$ -	\$ -	\$ 104.77	\$ 18.33	\$ 123.10
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ 848.74	\$ 148.53	\$ 997.27	\$ -	\$ -	\$ -	\$ 848.74	\$ 148.53	\$ 997.27
Insurance	\$ 258.55	\$ 78.50	\$ 337.05	\$ -	\$ -	\$ -	\$ 258.55	\$ 78.50	\$ 337.05
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ 1,236.82	\$ 218.79	\$ 1,455.61	\$ -	\$ -	\$ -	\$ 1,236.82	\$ 218.79	\$ 1,455.61
10. Meeting/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontract/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details monthly)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 78,585.74</b>	<b>\$ 13,454.28</b>	<b>\$ 92,040.02</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 78,585.74</b>	<b>\$ 13,454.28</b>	<b>\$ 92,040.02</b>
Indirect As A Percent of Direct - 17.3%									

# 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 NORTH COUNTRY HEALTH CONSORTIUM is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on October 05, 1998. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 301456

Certificate Number: 0004879131



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. 2020.

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

William M. Gardner  
Secretary of State

### CERTIFICATE OF AUTHORITY

I, Michael Lee; hereby certify that:


1. I am a duly elected Officer of North Country Health Consortium.
2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on April 10, 2020, at which a quorum of the Directors/shareholders were present and voting.

**VOTED:** That the Chief Executive Officer and/or Board President is duly authorized on behalf of North Country Health Consortium to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

Becky McEnany is the duly appointed Interim Chief Executive Officer of North Country Health Consortium.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30) days** from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 11/2/20

  
\_\_\_\_\_  
Signature of Elected Officer  
Name: Michael Lee  
Title: Board President





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/24/2020

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b> Geo M Stevens & Son Co 149 Main Street  Lancaster NH 03584	<b>CONTACT NAME:</b> Patricia Bigelow-Emerly <b>PHONE (A/C, No, Ext):</b> (603) 788-2555 <b>FAX (A/C, No):</b> (603) 788-3901 <b>E-MAIL ADDRESS:</b> pemery@gms-ins.com														
<b>INSURED</b> North Country Health Consortium Inc 262 Cottage Street, Suite 230  Littleton NH 03581	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: Philadelphia Insurance Co</td> <td></td> </tr> <tr> <td>INSURER B: United Financial Casualty Co.</td> <td>11770</td> </tr> <tr> <td>INSURER C: Eastern Alliance Insurance Company</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Philadelphia Insurance Co		INSURER B: United Financial Casualty Co.	11770	INSURER C: Eastern Alliance Insurance Company		INSURER D:		INSURER E:		INSURER F:	
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INSURER C: Eastern Alliance Insurance Company															
INSURER D:															
INSURER E:															
INSURER F:															

## COVERAGES

CERTIFICATE NUMBER: CL201211815

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 INSD	YVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PHPK2057544	01/01/2020	01/01/2021	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
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY			00263832-1	01/01/2020	01/01/2021	GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COM/PROP AGG \$ 2,000,000
							Professional Liability \$ 2,000,000
							COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			PHUB699475	01/01/2020	01/01/2021	BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							Uninsured motorist \$ 1,000,000
C	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		01-0000114897-02	01/01/2020	01/01/2021	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
							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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Health Consortium

NH Workers Compensation--excluded officers are Michael Lee, Edward Shanshala II, Karen Woods

## CERTIFICATE HOLDER

## CANCELLATION

NH Dept of Health & Human Services Office of the Commissioner 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 
--	---

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North Country Health Consortium Mission Statement:

***"To lead innovative collaboration to improve the health status of the region."***

The North Country Health Consortium (NCHC) is a non-profit 501(c)3 rural health network, created in 1997, as a vehicle for addressing common issues through collaboration among health and human service providers serving Northern New Hampshire.

NCHC is engaged in activities for:

- Solving common problems and facilitating regional solutions
- Creating and facilitating services and programs to improve population health status
- Health professional training, continuing education and management services to encourage sustainability of the health care infrastructure
- Increasing capacity for local public health essential services
- Increasing access to health care for underserved and uninsured residents of Northern New Hampshire.

262 Cottage Street, Suite 230, Littleton, NH 03561

Phone: 603-259-3700; Fax: 603-444-0945

[www.nchcnh.org](http://www.nchcnh.org) • [nchc@nchcnh.org](mailto:nchc@nchcnh.org)



**NORTH COUNTRY HEALTH  
CONSORTIUM, INC. AND SUBSIDIARY**

**CONSOLIDATED FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2018 AND 2017**



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CERTIFIED PUBLIC ACCOUNTANTS  
& BUSINESS CONSULTANTS

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of  
North Country Health Consortium, Inc. and Subsidiary  
Littleton, New Hampshire

### **Report on the Financial Statements**

We have audited the accompanying consolidated financial statements of North Country Health Consortium, Inc. (a nonprofit organization) and Subsidiary, which comprise the consolidated statements of financial position as of September 30, 2018 and 2017, and the related consolidated statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

- 1 -

401 Water Tower Circle  
Suite 302  
Colchester, VT 05446  
(802) 654-7255

27 Center Street  
P. O. Box 326  
Rutland, VT 05702  
(802) 773-2721

30 Congress Street  
Suite 201  
St. Albans, VT 05478  
(802) 527-0505

1020 Memorial Drive  
St. Johnsbury, VT 05819  
(802) 748-5654

24 Airport Road, Suite 402  
West Lebanon, NH 03784  
(603) 306-0100

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

***Opinion***

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of North Country Health Consortium, Inc. and Subsidiary as of September 30, 2018 and 2017, and the changes in its net assets, functional expenses, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Other Matters***

***Other Information***

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the consolidated financial statements as a whole.

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated March 26, 2019 on our consideration of North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting and compliance.

St. Albans, Vermont  
March 26, 2019  
VT Reg. No. 92-0000102

*A.M. Peisch & Company, LLP*

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENTS OF FINANCIAL POSITION**  
**SEPTEMBER 30, 2018 AND 2017**

	2018	2017
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	\$ 687,847	\$ 1,075,410
Accounts receivable, net		
Grants and contracts	966,962	548,391
Dental services	898	864
Certificates of deposit	126,065	125,540
Prepaid expenses	21,356	9,960
Restricted cash - IDN	1,987,216	1,021,388
Total current assets	<u>3,790,344</u>	<u>2,781,553</u>
Property and equipment:		
Computers and equipment	147,392	147,392
Dental equipment	32,808	32,808
Furnitures and fixtures	30,045	30,045
Vehicles	18,677	18,677
Accumulated depreciation	(170,735)	(137,253)
Property and equipment, net	<u>58,187</u>	<u>91,669</u>
Other assets		
Restricted cash - IDN	800,000	1,200,000
Total other assets	<u>800,000</u>	<u>1,200,000</u>
Total assets	<u>\$ 4,648,531</u>	<u>\$ 4,073,222</u>
<b>LIABILITIES AND NET ASSETS</b>		
Current liabilities		
Accounts payable	\$ 396,039	\$ 105,345
Accrued expenses	8,983	6,921
Accrued wages and related liabilities	265,717	154,454
Deferred revenue	1,854,420	1,185,265
Total current liabilities	<u>2,525,159</u>	<u>1,451,985</u>
Long-term liabilities		
Deferred revenue - Long term portion	800,000	1,200,000
Total long-term liabilities	<u>800,000</u>	<u>1,200,000</u>
Total liabilities	<u>3,325,159</u>	<u>2,651,985</u>
Net assets		
Unrestricted	1,323,372	1,421,237
Total net assets	<u>1,323,372</u>	<u>1,421,237</u>
Total liabilities and net assets	<u>\$ 4,648,531</u>	<u>\$ 4,073,222</u>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS**  
**FOR THE YEARS ENDED SEPTEMBER 30, 2018 AND 2017**

	2018	2017
Support:		
Grant and contract revenue	<u>\$ 5,017,825</u>	<u>\$ 3,493,136</u>
Revenue:		
Dental patient revenue	101,092	121,784
Fees for programs and services	1,455,860	100,602
Interest income	6,085	5,554
Other income	12,766	2,594
Total revenue	<u>1,575,803</u>	<u>230,534</u>
Total support and revenue	<u>6,593,628</u>	<u>3,723,670</u>
Program expenses:		
Workforce	3,263,756	2,011,463
Public health	198,719	165,268
Molar	219,335	279,213
CSAP	<u>2,524,655</u>	<u>772,056</u>
Total program expenses	<u>6,206,465</u>	<u>3,228,000</u>
Management and general	<u>485,028</u>	<u>275,938</u>
Total expenses	<u>6,691,493</u>	<u>3,503,938</u>
Gain (loss) on sale of property and equipment	<u>-</u>	<u>(1,146)</u>
Change in net assets	(97,865)	218,586
NET ASSETS, beginning of the year	<u>1,421,237</u>	<u>1,202,651</u>
NET ASSETS, end of the year	<u><u>\$ 1,323,372</u></u>	<u><u>\$ 1,421,237</u></u>

See accompanying notes.



NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY  
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES  
FOR THE YEAR ENDED SEPTEMBER 30, 2018

	Workforce	Public Health	Molar	CSAP	Total Program	Management & General	Total
<b>Personnel:</b>							
Salaries	\$ 987,365	\$ 115,572	\$ 112,796	\$ 1,480,317	\$ 2,696,050	\$ 281,983	\$ 2,978,033
Payroll taxes and employee benefits	185,492	20,750	21,938	261,323	489,503	48,518	538,021
Subtotal	1,172,857	136,322	134,734	1,741,640	3,185,553	330,501	3,516,054
<b>Site expenses:</b>							
Computer fees	16,218	1,186	3,392	18,846	39,642	3,161	42,803
Medical and pharmacy supplies, MOA	1,610,212	36,431	55,217	327,270	2,029,130	4,967	2,034,097
Office supplies	17,314	2,634	448	64,899	85,295	30,617	115,912
Food	-	-	-	58,405	58,405	-	58,405
Subtotal	1,643,744	40,251	59,057	469,420	2,212,472	38,745	2,251,217
<b>General:</b>							
Bad debts	-	-	-	12,847	12,847	-	12,847
Depreciation	-	-	6,869	-	6,869	26,613	33,482
Dues and memberships	203,919	59	76	4,877	208,931	8,658	217,589
Education and training	2,108	-	140	1,050	3,298	45	3,343
Equipment and maintenance	22,299	-	544	3,787	26,630	2,420	29,050
Rent and occupancy	51,842	5,628	6,099	115,769	179,338	20,556	199,894
Insurance	5,364	972	1,173	7,156	14,665	5,016	19,681
Miscellaneous	-	-	219	7,732	7,951	-	7,951
Payroll processing fees	150	50	-	694	894	9,105	9,999
Postage	1,646	168	178	1,635	3,627	313	3,940
Printing	4,208	366	1,175	4,330	10,079	1,756	11,835
Professional fees	26,047	1,000	2,797	38,573	68,417	19,353	87,770
Training fees and supplies	53,602	914	1,000	20,548	76,064	4,758	80,822
Travel	47,224	2,806	1,475	54,798	106,303	8,423	114,726
Telephone	10,222	1,116	501	12,348	24,187	1,327	25,514
Vehicle expense	-	-	3,298	31	3,329	497	3,826
Event facility fees	18,524	9,067	-	27,420	55,011	6,942	61,953
Subtotal	447,155	22,146	25,544	313,595	808,440	115,782	924,222
<b>Total expenses</b>	<b>\$ 3,263,756</b>	<b>\$ 198,719</b>	<b>\$ 219,335</b>	<b>\$ 2,524,655</b>	<b>\$ 6,206,465</b>	<b>\$ 485,028</b>	<b>\$ 6,691,493</b>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED SEPTEMBER 30, 2017**

	Workforce	Public Health	Molar	CSAP	Total Program	Management & General	Total
<b>Personnel:</b>							
Salaries	\$ 902,285	\$ 72,003	\$ 141,659	\$ 271,561	\$ 1,387,508	\$ 131,822	\$ 1,519,330
Payroll taxes and employee benefits	158,395	12,821	26,335	46,652	244,203	19,635	263,838
Subtotal	<u>1,060,680</u>	<u>84,824</u>	<u>167,994</u>	<u>318,213</u>	<u>1,631,711</u>	<u>151,457</u>	<u>1,783,168</u>
<b>Site expenses:</b>							
Computer fees	17,098	1,570	5,135	4,920	28,723	1,698	30,421
Medical and pharmacy supplies, MOA	673,678	61,473	70,399	354,919	1,160,469	2,212	1,162,681
Office supplies	17,744	2,588	1,407	9,570	31,309	15,415	46,724
Subtotal	<u>708,520</u>	<u>65,631</u>	<u>76,941</u>	<u>369,409</u>	<u>1,220,501</u>	<u>19,325</u>	<u>1,239,826</u>
<b>General:</b>							
Depreciation	-	-	7,095	-	7,095	23,114	30,209
Dues and memberships	5,185	35	9	9,871	15,100	8,547	23,647
Education and training	4,635	150	1,514	1,730	8,029	8,558	16,587
Equipment and maintenance	270	-	468	-	738	1,727	2,465
Rent and occupancy	39,647	3,279	6,881	11,180	60,987	4,709	65,696
Insurance	5,712	944	1,601	1,609	9,866	582	10,448
Miscellaneous	-	-	-	-	-	5,817	5,817
Payroll processing fees	-	-	-	592	592	5,717	6,309
Postage	2,007	146	348	722	3,223	606	3,829
Printing	3,805	671	1,506	5,276	11,258	426	11,684
Professional fees	27,639	1,601	4,872	11,890	46,002	28,039	74,041
Training fees and supplies	84,505	667	407	9,694	95,273	1,462	96,735
Travel	48,119	3,885	3,585	27,635	83,224	8,979	92,203
Telephone	10,398	1,040	975	2,105	14,518	623	15,141
Vehicle expense	-	-	5,017	800	5,817	-	5,817
Event facility fees	10,341	2,395	-	1,330	14,066	6,250	20,316
Subtotal	<u>242,263</u>	<u>14,813</u>	<u>34,278</u>	<u>84,434</u>	<u>375,783</u>	<u>105,156</u>	<u>480,944</u>
<b>Total expenses</b>	<u>\$ 2,011,463</u>	<u>\$ 165,268</u>	<u>\$ 279,213</u>	<u>\$ 772,056</u>	<u>\$ 3,228,000</u>	<u>\$ 275,938</u>	<u>\$ 3,503,938</u>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENTS OF CASH FLOWS**  
**FOR THE YEARS ENDED SEPTEMBER 30, 2018 AND 2017**

	2018	2017
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Change in net assets	\$ (97,865)	\$ 218,586
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	33,482	30,209
(Gain)/loss on sale of property and equipment	-	1,146
(Increase) decrease in operating assets:		
Accounts receivable - Grants and contracts	(418,571)	(207,861)
Accounts receivable - Dental services	(34)	8,420
Prepaid expenses	(11,396)	25,366
Restricted cash - IDN	(565,828)	191,847
Increase (decrease) in operating liabilities:		
Accounts payable	290,694	42,240
Accrued expenses	2,062	(987)
Accrued wages and related liabilities	111,263	57,073
Deferred revenue	269,155	(194,604)
Net cash provided (used) by operating activities	<u>(374,191)</u>	<u>171,435</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Reinvestment of certificates of deposit interest	(525)	(520)
Purchases of property and equipment	-	(81,350)
Net cash used by investing activities	<u>(525)</u>	<u>(81,870)</u>
Net increase (decrease) in cash and cash equivalents	(374,716)	89,565
Beginning cash and cash equivalents	<u>1,075,410</u>	<u>985,845</u>
Ending cash and cash equivalents	<u>\$ 700,694</u>	<u>\$ 1,075,410</u>

See accompanying notes.

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

### Note 1. Nature of Activities and Summary of Significant Accounting Policies

#### Nature of activities

North Country Health Consortium, Inc. and Subsidiary (NCHC) (the Organization) is a not-for-profit health center chartered under the laws of the State of New Hampshire. The Organization's mission is to lead innovative collaboration to improve the health status of the region. NCHC is engaged in promoting and facilitating access to services and programs that improve the health status of the area population, provide health training and educational opportunities for healthcare purposes, and provide region-wide dental services for an underserved and uninsured residents.

Effective October 1, 2017, the Organization assumed the operations of Friendship House, an outpatient drug and alcohol treatment facility and program from Tri County Community Action Program.

The Organization's wholly owned subsidiary, North Country ACO (the ACO), is a non-profit 501(c)(3) charitable corporation formed in December 2011. This entity was formed as an accountable care organization (ACO) with its purpose to support the programs and activities of the ACO participants to improve the overall health of their respective populations and communities. A nominal cash balance remains and activities have ceased.

The Organization's primary programs are as follows:

*Network and Workforce Activities* – To provide workforce education programs and promote oral health initiatives for the Organization's dental services.

*Public Health and CSAP* – To conduct community substance abuse prevention activities, coordination of public health networks, and promote community emergency response plan.

*Dental Services and Molar* – To sustain a program offering oral health services for children and low income adults in northern New Hampshire.

Following is a summary of the significant accounting policies used in the preparation of these consolidated financial statements.

#### Basis of accounting

Basis of accounting refers to when revenues and expenses are recognized in the accounts and reported in the financial statements. Basis of accounting relates to the timing of the measurements made, regardless of the measurement focus applied.

The Organization uses the accrual basis of accounting. Under the accrual basis of accounting, revenues are recorded when susceptible to accrual, i.e., measurable and earned. Measurable refers to the ability to quantify in monetary terms the amount of the revenue and receivable. Expenses are recognized when they become liable for payment.

#### Principles of consolidation

The accompanying consolidated financial statements include the accounts of North Country Health Consortium, Inc. and its wholly owned subsidiary, North Country ACO. All inter-company transactions and balances have been eliminated in consolidation.

## **Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

### **Use of estimates**

In preparing the consolidated financial statements in conformity with accounting principles generally accepted in the United States of America, management is required to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### **Concentration of risk**

The Organization's operations are affected by various risk factors, including credit risk and risk from geographic concentration and concentrations of funding sources. Management attempts to manage risk by obtaining and maintaining revenue funding from a variety of sources. A substantial portion of the Organization's activities are funded through grants and contracts with private, federal, and state agencies. As a result, the Organization may be vulnerable to the consequences of change in the availability of funding sources and economic policies at the agency level. The Organization generally does not require collateral to secure its receivables.

### **Revenue recognition**

Below are the revenue recognition policies of the Organization:

#### *Dental Patient Revenue*

Dental services are recorded as revenue within the fiscal year related to the service period.

#### *Grant and Contract Revenue*

Grants and contracts are recorded as revenue in the period they are earned by satisfaction of grant or contract requirements.

#### *Fees for Programs and Services*

Fees for programs and services are recorded as revenue in the period the related services were performed.

### **Cash and cash equivalents**

For purposes of the statement of cash flows, the Organization considers all highly liquid investments with an original maturity of three months or less to be cash equivalents.

### **Restricted cash - IDN**

Restricted cash – IDN consists of advanced funding received from The State of New Hampshire Department of Health and Human Services for the Integrated Delivery Network program (IDN). The original advance of funds of \$2,000,000 is to be used to fund the Organization's cost of administering the IDN over a period of five years, beginning in fiscal year 2017. The remaining balance is to be distributed to participants.

**Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

For the years ending September 30, 2018 and 2017, these amounts were restricted as follows:

	2018	2017
Administration fee to the Organization	\$ 1,200,000	\$ 1,600,000
Distributions to participants	1,587,216	621,388
	<u>\$ 2,787,216</u>	<u>\$ 2,221,388</u>

**Accounts receivable**

The Organization has receivable balances due from dental services provided to individuals and from grants and contracts received from federal, state, and private agencies. Management reviews the receivable balances for collectability and records an allowance for doubtful accounts based on historical information, estimated contractual adjustments, and current economic trends. Management considers the individual circumstances when determining the collectability of past due amounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to earnings and a credit to accounts receivable. Any collection fees or related costs are expensed in the year incurred. The Organization recorded an allowance for doubtful accounts for estimated contractual adjustments for dental service of \$598 and \$7,776 as of September 30, 2018 and 2017, respectively, and an allowance for doubtful accounts for grants and contracts of \$12,847 and \$0 as of September 30, 2018 and 2017, respectively. The Organization does not charge interest on its past due accounts, and collateral is generally not required.

**Certificates of deposit**

The Organization has three certificates of deposit that may be withdrawn without penalty with one financial institution. These certificates carry original terms of 12 months to 24 months, have interest rates ranging from .40% to .55%, and mature at various dates through February 2020.

**Property and equipment**

Property and equipment is stated at cost less accumulated depreciation. The Organization generally capitalizes property and equipment with an estimated useful life in excess of one year and installed costs over \$2,500. Lesser amounts are generally expensed. Purchased property and equipment is capitalized at cost.

Property and equipment are depreciated using the straight-line method using the following ranges of estimated useful lives:

Computers and equipment	3-7 years
Dental equipment	5-7 years
Furniture and fixtures	5-7 years
Vehicles	5 years

Depreciation expense totaled \$33,482 and \$30,209 for the years ended September 30, 2018 and 2017, respectively.

## **Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

### **Deferred revenue**

Deferred revenue is related to advance payments on grants or advance billings relative to anticipated expenses or events in future periods. The revenue is realized when the expenses are incurred or as services are provided in the period earned.

### **Net assets**

The Organization is required to report information regarding its financial position and activity according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

*Unrestricted net assets* – consist of unrestricted amounts that are available for use in carrying out the mission of the Organization.

*Temporarily restricted net assets* – consist of those amounts that are donor restricted for a specific purpose. When a donor restriction expires, either by the passage of a stipulated time restriction or by the accomplishment of a specific purpose restriction, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The Organization has elected, however, to show those restricted contributions whose restrictions are met in the same reporting period as they are received as unrestricted support. The Organization had no temporarily restricted net assets at September 30, 2018 and 2017.

*Permanently restricted net assets* – result from contributions from donors who place restrictions on the use of donated funds mandating that the original principal remain invested in perpetuity. The Organization had no permanently restricted net assets at September 30, 2018 and 2017.

### **Income taxes**

The Organization and the ACO are exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and are not classified as private foundations. However, income from certain activities not directly related to the Organization's tax-exempt purpose is subject to taxation as unrelated business income. The Organization had no unrelated business income activity subject to taxation for the year ended September 30, 2018.

The Organization had adopted the provisions of FASB ASC 740-10. FASB ASC 740-10 prescribes a recognition threshold and measurement attributable for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return, and provides guidance on derecognition, classification, interest and penalties, accounting in interim periods, disclosure, and transition. Based on management's evaluation, management has concluded that there were no significant uncertain tax positions requiring recognition in the financial statements at September 30, 2018.

Although the Organization is not currently the subject of a tax examination by the Internal Revenue Service or the State of New Hampshire, the Organization's tax years ended September 30, 2015 through September 30, 2018 are open to examination by the taxing authorities under the applicable statute of limitations.

## **Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

### **Functional expenses**

The costs of providing the various programs and activities have been summarized on a functional basis in the Statement of Activities. Expenses are charged to programs based on direct expenses incurred and certain costs, including salaries and fringe benefits, are allocated to the programs and supporting services based upon related utilization and benefit.

### **Implementation of new accounting pronouncements**

Management is reviewing the following Accounting Standards Updates (ASU) issued by the Financial Accounting Standards Board, which are effective for future years, for possible implementation and to determine their effect on the Organization's financial reporting.

ASU No. 2015-14, *Revenue from Contracts with Customers*. This ASU includes new revenue measurement and recognition guidance, as well as required additional disclosures. The ASU is effective for annual reporting beginning after December 15, 2018, and interim reporting periods within annual reporting beginning after December 15, 2019. The effect of this ASU has not been quantified.

ASU No. 2016-02, *Leases (Topic 842)*. This ASU requires lessees to recognize the following for all leases (with the exception of short-term leases) at the commencement date; (1) a lease liability, which is the lessee's obligation to make lease payments arising from a lease, measured on a discounted basis; and (2) a right-of-use asset which is an asset that represents the lessee's right to use, or control the use of, a specified asset for the lease term. For short-term leases (term of twelve months or less), a lessee is permitted to make an accounting policy election by class of underlying asset not to recognize lease assets and lease liabilities. If a lessee makes the election, it should recognize lease expense for such leases generally on a straight-line basis over the lease term. The ASU is effective for annual periods, and interim reporting periods within those annual periods, beginning after December 15, 2019. The effect of this ASU has not been quantified.

ASU No. 2016-14, *Not-For-Profit Entities: Presentation of Financial Statements of Not-for-Profit Entities*. The ASU was issued to improve reporting by not-for-profit entities in the areas of net asset classifications and information provided about liquidity. This ASU is effective for fiscal years beginning after December 15, 2017, and interim periods within fiscal years beginning after December 15, 2018. This ASU will increase disclosures in the Organization's financial statements.

ASU No. 2016-18, *Statement of Cash Flows: Restricted Cash*. This ASU clarifies how to report restricted cash in the statement of cash flows. This ASU is effective for fiscal years beginning after December 15, 2018, and interim periods within fiscal years beginning after December 15, 2019. This ASU will have minimal effect on the Organization's financial statements.



**Note 2. Cash Concentrations**

The Organization maintains cash balances at two financial institutions. Their bank accounts at the institutions are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 per financial institution. The Organization's cash balances exceeded federally insured limits by \$14,600 at September 30, 2018. The Organization has not experienced any losses with these accounts. Management believes the Organization is not exposed to any significant credit risk on cash as of September 30, 2018.

The Organization attempts to manage credit risk relative to cash concentrations by utilizing "sweep" accounts. The Organization maintains ICS Sweep accounts that invest cash balances in other financial institutions at amounts that do not exceed FDIC insurable limits. All cash at these institutions is held in interest-bearing money market accounts. Interest rates on these balances ranged from .10% to .15% as of September 30, 2018.

**Note 3. Operating Leases**

The Organization leases office space in Littleton, NH under a three year operating lease that expires in October 2020. The Organization has the option to renew the lease for two additional years.

In October 2017, the Organization assumed the operations of Friendship House, an outpatient drug and alcohol treatment facility and program. The Organization leases the premises under a five-year operating lease that expires March 2023, with monthly rent and CAM fee payments of \$19,582. The CAM fee portion is to be adjusted annually. Since the inception of the lease, the agreement has been verbally and mutually amended to allow the Organization to pay actual expenses, such as utilities, repairs, mortgage, CAM, etc., in lieu of the \$19,582 monthly payment.

In addition, the Organization leases satellite offices in Berlin, NH, Tamworth, NH, Woodsville, NH, North Conway, NH, and Conway, NH under month-to-month operating lease agreements.

Future minimum rental payments under lease commitments are as follows:

Year Ended September 30,	
2019	\$ 160,297
2020	163,411
2021	65,431
2022	56,500
2023	28,250
Thereafter	-
	<u>\$ 473,889</u>

Lease expense for the aforementioned leases was \$132,746 and \$62,100 for the years ended September 30, 2018 and 2017, respectively.

**Note 4. Deferred Revenue**

The summary of the components of deferred revenue as of September 30, are as follows:

	2018	2017
Deferred Revenue- IDN	\$ 2,387,744	\$ 2,215,782
Deferred Revenue- Other	<u>266,676</u>	<u>169,483</u>
Total	<u>\$ 2,654,420</u>	<u>\$ 2,385,265</u>

**Deferred revenue - IDN**

Under the terms of an agreement between the Centers for Medicare and Medicaid Services (CMS) and the State of New Hampshire Department of Health and Human Services, various Integrated Delivery Networks (IDN) are to be established within geographic regions across the state to develop programs to transform New Hampshire's behavioral health delivery system by strengthening community-based mental health and substance use disorder services and programs to combat the opioid crisis. The Organization has been designated to be the administrative lead of one of these IDNs.

In September 2016, the Organization was awarded a five-year demonstration project from the CMS, passed through the State of New Hampshire Department of Health and Human Services. At that date, the Organization was advanced \$2,413,256 upon fulfillment of the condition of successful submission and state approval of an IDN Project Plan. Of that amount, \$2,000,000 will be retained by the Organization as administrative fees for five years and the remaining funds will be disbursed to participants. For years two through five, the IDNs will continue to earn performance-based incentive funding by achieving defined targets and any funds received will be passed through to the participants.

**Note 5. Related Party Transactions**

A majority of the Organization's members and the Organization are also members of a Limited Liability Company. There were no transactions between the Limited Liability Company and the Organization's members in 2018 and 2017.

The Organization contracts various services from other organizations of which members of management of these other organizations may also be board members of North Country Health Consortium, Inc. and Subsidiary. Amounts paid to these organizations were \$898,736 and \$348,668 for the years ended September 30, 2018 and 2017, respectively. Outstanding amounts due to these organizations as of September 30, 2018 and 2017 amounted to \$33,214 and \$37,950, respectively. Outstanding amounts due from these organizations as of September 30, 2018 and 2017 amounted to \$5,210 and \$0, respectively.

**Note 6. Retirement Plan**

The Organization offers a defined contribution savings and investment plan (the Plan) under section 403(b) of the Internal Revenue Code. The Plan is available to all employees who are 21 years of age or older. There is no service requirement to participate in the Plan. Employee contributions are permitted and are subject to IRS limitations. Monthly employer contributions are \$50 for each part-time employee and \$100 for each full-time employee. Employer contributions for the years ended September 30, 2018 and 2017 were \$61,990 and \$26,291, respectively.

**Note 7. Commitment and Contingencies**

The Organization receives a significant portion of its support from various funding sources. Expenditure of these funds requires compliance with terms and conditions specified in the related contracts and agreements. These expenditures are subject to audit by the contracting agencies. Any disallowed expenditures would become a liability of the Organization requiring repayment to the funding sources. Liabilities resulting from these audits, if any, will be recorded in the period in which the liability is ascertained. Management estimates that any potential liability related to such audits will be immaterial.

**Note 8. Federal Reports**

Additional reports, required by *Government Auditing Standards* and Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, including the Schedule of Expenditures of Federal Awards, are included in the supplements to this report.

**Note 9. Reclassifications**

Certain reclassifications have been made to the financial statements for the year ended September 30, 2017 to conform with the current year presentation.

**Note 10. Subsequent Events**

Subsequent to year end, the Organization entered into a line of credit agreement with a local bank. The Organization has \$500,000 of available borrowing capacity under this line of credit. The line of credit bears interest at the Wall Street Journal Prime Rate plus .50% and is secured by all assets of the Organization. The line of credit is due on demand and matures February 2020.

The Organization has evaluated subsequent events through March 26, 2019, the date the financial statements were available to be issued.



**NORTH COUNTRY HEALTH  
CONSORTIUM, INC. AND SUBSIDIARY**

**ADDITIONAL REQUIRED REPORTS**

**SEPTEMBER 30, 2018**



## NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
YEAR ENDED SEPTEMBER 30, 2018

Federal Grantor/Pass through Grantor/Program Title	Federal CFDA Number	Grant No.	Pass-through Grantor's Subgrant No.	Federal Expenditures
<b>U.S Department of Health and Human Services</b>				
<i>Direct Programs:</i>				
Rural Health Care Services Outreach Program (Oral Health)	93.912	D04RH28387		\$ 106,595
Network Development	93.912	D06RH28031		254,067
Rural Health Care Services Outreach Program (Opioid)	93.912	D04RH31641		5,813
				<u>366,475</u>
Health Careers Opportunity	93.329	G06HP27887		<u>102,222</u>
Drug-Free Communities (SAMHSA)	93.276	1H79SP021539-01		<u>151,252</u>
<i>Total direct programs:</i>				<u>619,949</u>
<i>Passed through the State of New Hampshire:</i>				
Public Health Emergency Preparedness	93.074		U90TP000535	66,566
Disaster Behavioral Health Response Teams	93.074		U90TP000535	62,542
				<u>129,108</u>
SAP - 2 Schools	93.243		SP020796	77,695
SAP - WMCC	93.243		SP020796	119,728
Young Adult Strategies	93.243		SP020796	96,490
Young Adult Leadership	93.243		SP020796	19,547
				<u>313,460</u>
School-Based Immunization	93.268		H23IP0007757	<u>8,689</u>
Continuum of Care	93.959		TI010035-14	23,666
Student Assistance Program Federal Block Grant	93.959		158557-B001	856
SAP - 5 Schools	93.959		TI010035-16	68,584
Substance Use Disorder (Friendship House)	93.959		TI010035-14	210,900
Substance Misuse Prevention	93.959		TI010035-14	69,687
				<u>373,693</u>
Community Health Workers	93.757		NU58DP004821	12,867
Community Health Workers (Chronic Disease)	93.757		NU58DP004821	29,992
Community Health Workers (Heart Disease)	93.757		NU58DP004821	49,985
				<u>92,844</u>
Community Health Workers (Cancer)	93.898		NU58DP003930	<u>24,942</u>
Public Health Advisory Council	93.758		B010T00937	<u>42,025</u>
<i>Total passed through the State of New Hampshire:</i>				<u>984,761</u>
<i>Passed through the University of Dartmouth Area Health Education Center:</i>				
Area Health Education Centers	93.107		U77HP03627-09-01	<u>76,099</u>
<i>Passed through the University of New Hampshire:</i>				
Practice Transformation Network	93.638		Agreement #16-039	<u>517,138</u>
<b>Total Expenditures of Federal Awards</b>				<u>\$ 2,197,947</u>

See accompanying notes to schedule of expenditures of federal awards.

**NORTH COUNTRY HEALTH CONSORTIUM, INC.  
AND SUBSIDIARY**

**Notes to Schedule of Expenditures of Federal Awards  
for the Year Ended September 30, 2018**

**Note 1. Basis of Presentation**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of North Country Health Consortium, Inc. and Subsidiary (the Organization) under programs of the federal government for the year ended September 30, 2018. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Organization, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

**Note 2. Summary of Significant Accounting Policies**

- (1) Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance whereby certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Pass-through entity identifying numbers are presented where available.
- (3) The Organization did not elect to use the 10% de minimus indirect cost rate allowed under the Uniform Guidance.



CERTIFIED PUBLIC ACCOUNTANTS  
& BUSINESS CONSULTANTS

**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL  
REPORTING AND ON COMPLIANCE AND OTHER MATTERS  
BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED  
IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS***

To the Board of Directors of  
North Country Health Consortium, Inc. and Subsidiary  
Littleton, New Hampshire

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary (the Organization) (a New Hampshire nonprofit organization), which comprise the consolidated statements of financial position as of September 30, 2018, and the related consolidated statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated March 26, 2019.

**Internal Control over Financial Reporting**

In planning and performing our audit of the consolidated financial statements, we considered North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of North Country Health Consortium, Inc. and Subsidiary's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

*A deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. *A material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. *A significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

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401 Water Tower Circle  
Suite 302  
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(802) 654-7255

27 Center Street  
P. O. Box 326  
Rutland, VT 05702  
(802) 773-2721

30 Congress Street  
Suite 201  
St. Albans, VT 05478  
(802) 527-0505

1020 Memorial Drive  
St. Johnsbury, VT 05819  
(802) 748-5654

24 Airport Road, Suite 402  
West Lebanon, NH 03784  
(603) 306-0100

### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether North Country Health Consortium, Inc. and Subsidiary's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

St. Albans, Vermont  
March 26, 2019  
VT Reg. No. 92-0000102

*A.M. Peisch & Company, LLP*





CERTIFIED PUBLIC ACCOUNTANTS  
& BUSINESS CONSULTANTS

**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR  
EACH MAJOR PROGRAM AND ON INTERNAL CONTROL  
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

To the Board of Directors of  
North Country Health Consortium, Inc. and Subsidiary  
Littleton, New Hampshire

**Report on Compliance for Each Major Federal Program**

We have audited North Country Health Consortium, Inc. and Subsidiary's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of North Country Health Consortium, Inc. and Subsidiary's major federal programs for the year ended September 30, 2018. North Country Health Consortium, Inc. and Subsidiary's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

***Management's Responsibility***

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

***Auditor's Responsibility***

Our responsibility is to express an opinion on compliance for each of North Country Health Consortium, Inc. and Subsidiary's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about North Country Health Consortium, Inc. and Subsidiary's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of North Country Health Consortium, Inc. and Subsidiary's compliance.

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***Opinion on Each Major Federal Program***

In our opinion, North Country Health Consortium, Inc. and Subsidiary complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2018.

**Report on Internal Control Over Compliance**

Management of North Country Health Consortium, Inc. and Subsidiary is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered North Country Health Consortium, Inc. and Subsidiary's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of North Country Health Consortium, Inc. and Subsidiary's internal control over compliance.

*A deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

St. Albans, Vermont  
March 26, 2019  
VT Reg. No. 92-0000102

*A.M. Peirce & Company, LLP*

**NORTH COUNTRY HEALTH CONSORTIUM, INC.  
AND SUBSIDIARY**

**Schedule of Findings and Questioned Costs  
Year Ended September 30, 2018**

**A. SUMMARY OF AUDITOR'S RESULTS**

1. The independent auditor's report expresses an unmodified opinion on whether the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary were prepared in accordance with GAAP.
2. No material weakness or significant deficiencies relating to the audit of the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary are reported in the Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of the Financial Statements Performed in Accordance with *Governmental Auditing Standards*.
3. No instances of noncompliance material to the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary, which would be required to be reported in accordance with *Government Auditing Standards*, were disclosed during the audit.
4. No material weakness or significant deficiencies relating to internal control over compliance for major federal award programs are reported in the Independent Auditor's Report on Compliance for Each Major Program and on Internal Control over Compliance Required by the Uniform Guidance.
5. The auditor's report on compliance for the major federal award programs for North Country Health Consortium, Inc. and Subsidiary expresses an unmodified opinion on the major federal program.
6. There were no audit findings that are required to be reported in this schedule in accordance with 2 CFR Section 200.516(a).
7. The program tested as a major program was U.S. Department of Health and Human Services – ACA – Transforming Clinical Practice Initiative: Practice Transformation Networks (CFDA Number 93.638).
8. The threshold for distinguishing Types A and B programs was \$750,000.
9. North Country Health Consortium, Inc. and Subsidiary was determined to be a low-risk auditee.

**B. FINDINGS – FINANCIAL STATEMENT AUDIT**

There were no reported findings related to the audit of the consolidated financial statements for the year ended September 30, 2018.

**C. FINDINGS AND QUESTIONED COSTS – MAJOR FEDERAL AWARD PROGRAM AUDIT**

There were no reported findings related to the audit of the federal program for the year ended September 30, 2018.

**NORTH COUNTRY HEALTH CONSORTIUM, INC.  
AND SUBSIDIARY**

**Summary Schedule of Prior Audit Findings  
Year Ended September 30, 2018**

**2017 and 2016 FINDINGS AND QUESTIONED COSTS – AUDIT OF MAJOR FEDERAL  
AWARD PROGRAMS**

**2017 Finding:**

There were no reported findings related to the audit of the major federal program for the year ended September 30, 2017.

**2016 Finding:**

There were no reported findings related to the audit of the major federal program for the year ended September 30, 2016.

# NCHC Board

**President (O)**

**Michael Lee**

*President, Weeks Medical Center*

**Vice President (O)**

**Rev. Curtis Metzger**

*All Saints' Episcopal Church*

**Treasurer (O)**

**Michael Counter**

*Executive Director, North Country Home Health & Hospice Agency*

**Secretary (O)**

**Karen Woods**

*Administrative Director, Cottage Hospital*

**Scott Colby**

*President & CEO, Upper Connecticut Valley Hospital*

**Ed Duffy**

*Executive Vice President, Littleton Regional Healthcare*

**Suzanne Gaetjens-Oleson**

*Regional Mental Health Administrator, Northern Human Services*

**Ken Gordon**

*CEO, Coos County Family Health Services*

**Gregory Culley, MD**

*Interim CEO, Indian Stream Health Center*

**Tara MacKillop**

*Executive Director, Androscoggin Valley Home Care Services*

**Lars Nielson, MD**

*Community SUD Provider*

**Jeanne Robillard**

*CEO, Tri-County Community Action Program*

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**EXPERIENCE**

**2019 – PRESENT**

**PUBLIC HEALTH PROGRAM MANAGER**

**NORTH COUNTRY HEALTH CONSORTIUM**

- Management of multi-initiative program
- Coordination of School Based Immunization Program
- Participant in community activities that promote and disseminate public health information and program activities
- Collaboration with project staff to assure continuation of project activities through development of business and healthcare agency relationships, and through grant development
- Public health program liaison with regional schools and business community
- Outreach services to businesses in the North Country area with workplace wellness and emergency preparedness information
- Assists with Public Health Program Implementation

**2016 – PRESENT**

**PROGRAM MANAGER**

**NORTH COUNTRY HEALTH CONSORTIUM**

- Management of program administration, delivery of clinical services for public health dental clinic
- Responsible for integrating oral health outreach initiatives as part of Community Health Improvement Plan such as workplace wellness and community oral health presentations
- Development and retention of working relationships with school staff, administrators, and nursing home administrators to sustain service delivery of public health dental program
- Coordination of schedule, daily operations of dental practice, maintenance of budget, data management, comprehensive grant reporting, program communications; compliance with state, federal and organizational policy guidelines, patient care coordination

**2012 – 2016**

**CERTIFIED PUBLIC HEALTH DENTAL HYGIENIST**

**NORTH COUNTRY HEALTH CONSORTIUM**

- Direct patient care delivery, patient care coordination
- Creation and presentation of oral health education training sessions for community health workers, health careers summer camp students, nursing home staff and community members

**2010 – 2012**

**REGISTERED DENTAL HYGIENIST/PROGRAM COORDINATOR**

**DHHS SUBCONTRACTOR WITH TRI-COUNTY HEAD START, BERLIN, NH**

**2009 – 2011**

**MEDICAL EDITOR**

**TRANSCEND MEDICAL, BURLINGTON, MA**

**2008 – 2009**

**REGISTERED DENTAL HYGIENIST/1-YR GRANT-FUNDED CONTRACTUAL POSITION**

**NH DEPARTMENT OF HEALTH AND HUMAN SERVICES, CONCORD, NH**

**2005 – 2008**  
**MEDICAL EDITOR**  
MEDQUIST, MOUNT LAUREL, NJ

**2002 – 2004**  
**REGISTERED DENTAL HYGIENIST**  
GORHAM FAMILY DENTISTRY

**1995 – 2002**  
**REGISTERED DENTAL HYGIENIST**  
DR. BERKLEY PEMBERTON, DDS

#### **EDUCATION**

**2018**  
**MASTER OF SCIENCE IN MANAGEMENT, GRANITE STATE COLLEGE**

**2015**  
**BACHELOR OF SCIENCE HEALTHCARE MANAGEMENT, SUMMA CUM LAUDE, GRANITE STATE COLLEGE**

**1995**  
**ASSOCIATE OF SCIENCE IN DENTAL HYGIENE, NH TECHNICAL INSTITUTE**

#### **CERTIFICATIONS**

**2015**  
**MOTIVATIONAL INTERVIEWING, HEALTH EDUCATION & TRAINING INSTITUTE**

**2014-2016**  
**CERTIFIED APPLICATIONS COUNSELOR, NH FEDERALLY FACILITATED MARKETPLACE**

**2014**  
**CERTIFIED PUBLIC HEALTH DENTAL HYGIENIST, NH TECHNICAL INSTITUTE**

#### **TECHNICAL SKILLS**

- Proficient with Microsoft Office Suite, Softdent, Eaglesoft, Dentrix, Adobe, and social media platforms
- Experienced public health speaker/presenter

#### **ACTIVITIES/VOLUNTEER EXPERIENCE**

- Volunteer provider at north country school athletic mouth guard fabrication annual clinics
- Member of CASA New Hampshire Advisory Board
- Community Health Worker Coalition member
- New Hampshire DHHS Senior Survey for Oral Health volunteer screener
- Head Start Health Advisory Committee member
- Androscoggin Chamber of Commerce volunteer

## **Summary**

Over 8 years of increasing management experience for the North Country Health Consortium as both a Program Manager and Director for the Northern New Hampshire Area Health Education Center, Integrated Delivery Network, and Public Health Network. 18 years of pharmacist experience in the local community and hospital environments, 13 of which were in a supervisory management level. Direct experience as owner and sole proprietor of an independent pharmacy and a gift shop.

## **Experience**

### **Director of Programs, North Country Health Consortium, Littleton, NH October 2019-current**

Responsible for program oversight of the North Country Public Health Network, Executive Director of the Region 7 Integrated Delivery Network, and Center Director for the Northern New Hampshire Area Health Education Center. Additional responsibilities include monitoring for grant funding opportunities, grant writing, coordinating grant submissions; Oversight activities include monitoring program budgets, reviewing of workplans and progress reports to ensure program deliverables are met; supervision of Public Health Program Manager, Public Health Emergency Preparedness Coordinator, Substance Misuse Prevention Senior Program Manager, and NCHC Senior Program Manager; and member of NCHC Senior Leadership Team

### **Director of Workforce Integration & Training, North Country Health Consortium, Littleton, NH**

#### **October 2018-October 2019**

Responsible for program oversight of the Region 7 Integrated Delivery Network (IDN), the Northern New Hampshire Area Health Education Center (NNH AHEC), North Country Public Health Network, and North Country Health Consortium Substance Misuse Prevention Programs, including Drug Free Communities. Oversight activities include supervising program staff; working with local and state government to secure funding sources necessary to support project-based deliverables; providing direction in the administration of contracts and associated subcontracts to ensure achievement of performance metrics and project deliverables; grant writing, fostering collaborative relationships, including cross-program opportunities; and identifying new program development options.

### **Integrated Delivery Network Program Manager, North Country Health Consortium, Littleton, NH**

#### **July 2016-October 2018**

Responsible for overall program management activities to support successful achievement of project outcomes for Region 7 Integrated Delivery Network. Activities included supervision of IDN program staff; creating processes and procedures to accomplish IDN program objectives, metrics, and deliverables; monitoring project activities to ensure continuity and alignment with Region 7 IDN program goals and IDN Statewide initiatives; coordination and implementation of IDN projects activities to ensure regional effectiveness and efficiency of the IDN program; monitoring budgeted program expenditures; managing contracts with community partners; ensuring compliance to fidelity; creating performance reports, analyses, and program reports.



**Owner, Newfound Nook Gifts & More, Bristol, NH**

**January 2016-September 2016**

Retail Business Owner/Operator. Created gift shop business from the ground up. Responsible for all aspects of the business, including inventory control and maintaining finances.

**Pharmacy Manager, Indian Stream Health Center Pharmacy, Colebrook, NH**

**April 2013-December 2015**

Provision and supervision of pharmaceutical care that is patient-centered and outcomes oriented. Responsibilities included preparing and dispensing medications pursuant to provider prescriptions; working in concert with the patient and the patient's other health care providers to promote health, to prevent disease, and to assess, monitor, initiate, and modify medication use to assure that drug therapy regimens are safe and effective; inventory management; and ensuring 340B program regulations were followed and in compliance; supervising the Prescription Assistance Program; and supervising pharmacy staff.

**Workforce Development Director/Grants Administrator, North Country Health Consortium/Northern New Hampshire Area Health Education Center, Littleton, NH**

**April 2012-March 2013**

Worked as the Workforce Development Director for a rural health network.

Responsibilities included overseeing the development and implementation of a variety of community-based health professions education programs with particular emphasis on programs designed to support access to quality health care in Northern New Hampshire; collaborating with community partners to complete community health needs assessments; providing oversight for the Workforce Development Program; preparing and managing Workforce Development program budget; completing and submitting reports to funding agencies and monitoring work of subcontractors as assigned.

Additional responsibilities included grants administration for all programs of the North Country Health Consortium.

**Workforce Education & Development Program Manager, North Country Health Consortium/Northern New Hampshire Area Health Education Center, Littleton, NH**

**November 2009-April 2012**

Worked as the Northern NH Area Health Education Center (NNH AHEC) Program Manager. Responsibilities included planning and coordinating continuing education programs for healthcare professionals; promoting health career awareness; managing multiple funding sources; and providing oversight to staff involved with health careers and community-based education programs.

**Health Careers Counselor, North Country Health Consortium, Whitefield, NH**

**January 2009-November 2009**

Worked in Coos and Grafton County to recruit students into health career occupations and provide support for students interested in health professions training programs. Responsibilities included developing programs to promote health careers and "hands on" learning experiences; creating student tracking mechanisms to show progression of education; and developing and implementing a successful Health Careers Summer Camp program.

**Pharmacist, LaPerle's IGA Pharmacy, Colebrook, NH**

**May 2008-December 2008**

Worked as a community pharmacist at a 340B qualified pharmacy. Responsibilities included prescription verification; Drug Utilization Reviews; following Federal and State rules; providing clinical support to physicians and patients; and supervising pharmacy technicians.

**Pharmacist, Upper Connecticut Valley Hospital, Colebrook NH**

**March 2006-March 2008**

Worked as a hospital pharmacist performing drug utilization reviews; dispensing medication for in-patient use; processing prescriptions for employees; teaching community members about diabetes medications; supervising pharmacy technicians; following Federal and State rules; and working with nurses and physicians to ensure quality patient care.

**Pharmacist, Rite Aid Corporation, Lancaster, NH**

**December 2005-June 2006**

Responsibilities included prescription verification; Drug Utilization Reviews; providing clinical support to physicians and patients; following Federal and State rules; and supervising pharmacy technicians.

**Pharmacy owner, Pharmacist, Groveton Pharmacy, Groveton, NH**

**April 2002-December 2005**

Responsibilities included all pharmacist roles. Additional responsibilities included complying with Federal and State regulations; record keeping; inventory management; payroll; deposits; accounts payable; accounts receivable; budgets; and human resources.

**Pharmacist-in-Charge, Groveton Pharmacy, Groveton, NH**

**March 1995-March 2002**

Provided prescribed medications for adequate patient care; managed control substances inventory; counseled public on prescription and non-prescription medications ensured compliance with State and Federal rules and regulations; supervised pharmacy technicians; ensured adequate control and documentation of all controlled substance records; participated in disease state management; and monitored drug therapy in collaboration with physicians and/or other health professionals.

**Pharmacist, Rite Aid, Derby, VT**

**March 1993-March 1995**

Ensured that every customer received friendly, knowledgeable, and efficient service. Checked all work done by pharmacy technician prior to dispensing medications. Upheld service standards for counseling, dispensing, and pricing of prescriptions.

**Education:**

Massachusetts College of Pharmacy, Boston, MA

B.S. Pharmacy 1992

**References:** Available upon request

# CATHY ROY

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## SUMMARY

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Astute professional with 15 plus years of experience in accounting and management within non-profit health education/substance abuse, academic research administration, resort & hospitality and manufacturing settings. Demonstrated expertise in both front and back of house systems, accounting and financial reporting systems.

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## EXPERIENCE

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### North Country Health Consortium, Littleton, NH

#### Director of Finance

03/2020 to present

- Oversee all finance department activities including budgeting, financial forecasting, financial reporting requirements, and cash flow for administration, existing programs, and proposed new programs and services.
- Review and approve preparation and finalization of monthly and annual financial reporting materials and metrics for CEO and Board of Directors.
- Coordinate all activities for financial, federal, state and worker's compensation audits.
- Partner with CEO on the organization's financial, budgeting, and administrative processes.
- Supervise Finance Team and serve as liaison between finance team and CEO.
- Monitor insurance coverages.
- Monitor clinical service insurance claim billing and collections.
- Assist with payroll and benefit oversight.
- Collaborate with senior leadership to review and update Financial Policies and Procedures.

#### Financial Controller

01/2019 to 03/2020

- Direct supervision of Finance staff (Payroll/Benefits Admin, Accounts Payable, Accounts Receivable, Purchasing)
- Preparation and oversight of all finance related audits in collaboration with CFO.
- Monthly financial reports to CFO, provide direct oversight to Finance team to adhere to monthly schedule to produce timely and accurate reporting.
- Assist with oversight of clinical service insurance claim billing and collections.
- Collaborate with CFO in preparation of monthly, quarterly and annual reporting requirements by funders.
- Responsible for the application of all NCHC Policies, including the Finance Procedures Manual and applicable State and Federal guidelines.
- Assist with the creation of budgets for new, existing and potential revenue streams from outside funders. Assist with the annual organization wide budget preparation in coordination with Finance Team input including managing the timeline.

### ARC MECHANICAL CONTRACTORS, Bradford, VT

#### Controller

04/2018 to 08/2018

- Manage weekly cash flow to correspond with business levels utilizing line of credit vs receivables.
- Process month end including payroll - produce financial statements – income statement, cash flow, balance sheet for submission to funding representatives.
- Produce reports associated with percent of completion on all open HVAC projects – job cost monitoring.
- Oversee contract billing – communication with project managers to assess amount to bill and forecast completion for work in process reports.
- Collection efforts for delinquent Accounts Receivable.

### DARTMOUTH COLLEGE, Hanover, NH

#### Operations Director - Biomedical Data Science Department

07/2015 to 03/2018

- Financial Planning & Budgeting - develop plan for group/research team's financial goals working with departmental and division senior leadership. Working with the Dean's Office, the Office of Sponsored Projects,

Office of Finance to implement processes and procedures for successfully monitoring and streamlining the research objectives.

- Analyze on-going and planned research, available funding, anticipated fluctuations in funding, staffing and other resources to project current and long-term financial needs.
- Grant administration including budget development, creating the financial components of faculty grant applications for submission to federal, state and private agencies with a focus on large multi-center \$12 to \$18 million federal projects. Manage the departmental portfolio of approximately \$48m (over a 5-year span).
- Translate research plans into scope of work; identify areas in which costs will be incurred and develop estimates for such costs, manpower, equipment, supplies, communications, travel, etc.
- Manage the work of administrative and research staff in preparing and submitting grant applications. Ensure that all components are accurately and properly prepared and submitted timely.
- Develop recruitment packages and act as the department contact for potential recruits. Oversee recruitment of research personnel as required by principal investigators. Work in conjunction with the Dean's office on the promotion timeline and submission of faculty promotion package.

**Administrative Officer - CFMED - Section of Biostatistics/Epidemiology**

**10/2013 -07/2015**

- Oversee staff that prepare and process payables, deposits, journal transfers and labor distribution updates. Supervise the reconciliation of monthly financial reports and the resolution of discrepancies.
- Pre-award administration responsibilities include developing research proposals, negotiating and executing grants and contracts, working directly with faculty and staff to submit proposals, and educating faculty on best practices and compliance of sponsored research.
- Post-award administration duties include grant and contract compliance, reviewing financial reports, monitoring time and effort certifications, completing RPPR reports, and grant budget preparation.

**BURKE MOUNTAIN, East Burke, VT**

**Controller/HR Manager**

**08/2007 to 07/2013**

- Executive management team member responsible for guiding the resort's resources and personnel towards the goals and initiatives set by the Development Company.
- Preparation of annual business plan along with direction of budget process with upper management and their direct reports.
- Educate staff on use of budget templates along with labor schedule tools to produce accurate budgets and forecasts.
- Develop and distribute trend analysis to management to assist in budgeting and forecasts.
- Responsible for all payroll management, including hiring, training, and orientation.
- Direct staff on use of system including report analysis.
- Negotiation of benefit package along with administration of all facets including workers compensation.
- Development of forecasting tool in conjunction with sql contractor to be used by management to monitor daily/weekly/month to date business levels compared to prior year(s) and budget.
- Cash flow preparation for both operations and development requirements reflecting the actual revenue.

**ATTITASH SKI RESORT Bartlett, NH**

**Financial Controller**

**02/2006 to 08/2007**

- Direct and manage all accounting, reporting, budgeting and forecasting for ski resort and hotel.
- Monitor business trends to ensure optimum yield for products.
- Insure that the systems of internal control are in place, upgraded as needed and utilized resort wide.
- Direct accounting staff in all daily/weekly/monthly accounting function and analyze resulting weekly/monthly financial results compared to budget/history.
- Manage staff of 4 accountants, ticket manager and 2 payroll clerks.
- Preparation of annual business plan for both ski resort & hotel working closely with department heads and general managers of both resort & hotel.

- Annual preparation of budget for Grand Summit Unit Owners Association - a quarter share condominium Association.

#### Financial Reporting/Budget Manager

01/2003 to 02/2006

- Preparation of weekly/monthly/quarterly financial statements.
- Provide variance commentary to management team members on budget to actual performance variances.
- Manage annual budget process - weekly line item budgeting - coordinate Department managers to develop their annual budget.
- Balance Sheet, P&L analysis; preparation of trial balance account schedules for SEC reporting.
- Manage flow of information from A/R, A/P, and payroll personnel in a timely fashion to consolidate the financial reporting process.

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#### EDUCATION

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B.S: MANAGEMENT PERSONNEL ADMINISTRATION

Keene State College, Keene, NH

Granite State College (formerly CLL) – Required coursework for B.S.Accounting

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#### AFFILIATIONS

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- International Society of Research Administrators (SRA)
- National Council of University Research Administrators (NCURA)
- Society for Human Resource Management (SHRM)
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#### SOFTWARE

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- ComputerEase
- Oracle Business Intelligence
- Hyperion Reporting
- CODA Financials
- Timberline
- AccPac/Normaling fixed assets
- ADP Payroll
- Kronos Timekeeping
- EPay Business Solutions
- AccuFund
- Paychex Flex

**Becky McEnany, MA**

**Professional Experience**

Over 30 years in healthcare and public health with the last 14 years serving NH non-profits with specific focus on Grafton, Coos, and Carroll Counties. Responsibilities include: senior leadership; operations; organizational and program policy development; emergency operations systems development; accreditation and regulation compliance; program management and supervision; grant writing and grant management; team leading and coalition building; training and education; quality improvement; and marketing. Significant medical and behavioral health care senior leadership experience in both New Hampshire and Washington DC area.

**Professional History**

**North Country Health Consortium, Littleton, NH**

***Interim Chief Executive Officer, May 2020-Present***

***Director of Quality and Operations, October 2018-Present***

- Serve on Senior Leadership Team for past five years.
- Supervise operations and office management at all NCHC locations.
- Responsible for all quality improvement efforts including identification of areas for improvement, data collection, data analysis, quarterly and annual reports, and performance improvement plan.
- Led CARF accreditation of Residential, Intensive Outpatient, and Outpatient Programs resulting in 3 year accreditation.
- Serve as point-person for all NCHC organizational and clinical program policies and procedures, emergency operations procedures, and compliance with CARF and NH Bureau of Drug and Alcohol Services requirements.
- Responsible for all CARF NCHC Organizational annual plans and reports.
- Provide Motivational Interviewing training.

***Program Director, March 2015-September 2018***

- Responsible for NCHC's Healthcare Quality Improvement Programs and Practice Transformation Network, NCHC's only statewide initiative. Supervise statewide remote team of practice facilitators to support 119 healthcare practices in their transition to value-based care including: program management; staff recruitment, training, and supervision; budgeting, data collection and analysis, and reporting to funders; and collaboration with local, regional, and national partners. Serve on both New Hampshire and New England leadership teams.

***Program Coordinator, January 2014-February 2015***

- Managed Northern NH Chronic Disease Self-Management Program including support to local leaders, workshop promotion, data collection and analysis, and membership on the New Hampshire Chronic Disease Self-Management leadership team.
- Responsible for supervision and implementation of federally funded obesity reduction initiative with participating North Country Federally Qualified Health Centers.

**National Alliance on Mental Illness, Concord, NH**

***Community Educator and Prevention Specialist, Connect Suicide Prevention Program, August 2006-January 2014***

- Member of Connect Suicide Prevention and Connect Postvention training teams.
- Provided national best practice suicide prevention and postvention training throughout the United States to coalitions, state organizations, schools and college campuses, and community partners.
- Developed National Best Practice two-day speaking program, *SurvivorVoices*.
- Implemented *SurvivorVoices* across the United States, including training American Indian/Alaskan Native facilitators to bring program back to tribal communities.
- Developed resources and coordinated the NH Survivor of Suicide Loss network, support group development, speaker training, statewide teleconference coordination, and statewide printed annual survivor newsletter and monthly E-news.
- Served on NH State Suicide Prevention Council Communications Committee promoting responsible reporting. Duties included teaching responsible reporting to UNH advanced journalism students, film screenings and panel discussions, writing news stories, and contact with all NH media outlets.
- Developed program materials. Wrote social media content and press releases, pitched and wrote radio stories, responded to media inquiries.
- Wrote and implemented federal and local grants.

**Self Employed**

***Managed Care Consultant, 1998- 2002***

- Trained medical and behavioral health practices in recruitment strategies, marketing, managed care requirements, billing, and effective communication with referral sources.

**Concentra Managed Care, Bedford, NH**

***Marketing Specialist/ Medical Case Manager, 1994- 1998 and 1987-1989***

- Responsible for forty major accounts specializing in workers' compensation managed care and long-term disability clinical case management; coordinated team services including counseling, medical case management, vocational placement, and coordination of independent medical evaluations; provided employer training on managed care requirements and workplace safety.

**Center for Occupational Medicine, Greater Washington Rehabilitation Center Silver Spring, MD**

***Director, 1991- 1994***

- Developed and managed out-patient rehabilitation facility from the ground up including budget, staffing, policy and procedure development, and supervision and training of multidisciplinary treatment team.
- Awarded the first CARF accredited work hardening and pain management programs in the Washington DC area. Received the highest level of accreditation with no recommendations for improvement given and specific acknowledgment for excellence in administrative leadership..

**Pain Rehabilitation Center, HCA Portsmouth Regional Hospital, Portsmouth, NH**

***Clinical Coordinator, 1989 -1991***

- Coordinated treatment team, patient recruitment and education, and case management of injured workers, including multidisciplinary counseling and therapies.
- Developed and implemented marketing and CARF accreditation strategy.

**Region 10 Client Management, Plaistow, NH**

***Vocational Supervisor, 1986-1987***

- Supported clients with developmental disabilities in vocational placements.

**Education**

Plymouth State University, Plymouth, NH

MA, Personal and Organizational Wellness, 2014

Bates College, Lewiston, ME

BA, Psychology, 1985

Honors, Phi Beta Kappa, Bates Key, President's Prize (1984, 1985)

Milton Academy, Milton, MA

Diploma, 1981

**Current Board and Volunteer Service**

- Board Member, Northern Human Services, 2016-Present
- Secretary, Executive Committee, Northern Human Services, 2018-Present
- Certified Dog Therapy Team, Helping Paws, 2015-Present

**Awards**

- Citation from NH Governor John Lynch in recognition of commitment to improve suicide prevention efforts in NH, 2009.
- Individually recognized by the Commission on the Accreditation of Rehabilitation Facilities for excellence in leadership and rehabilitation program management, 1994.

**Public Speaking**

- Numerous trainings on mental illness, suicide prevention, teamwork, and motivational interviewing.
- Speaking engagements and workshops at local and regional conferences.

**Publications**

- Nigro, G.N. and Roak, R.M. (1987). Memory for Spatial Location in Retarded and Non-Retarded Adults. American Journal of Mental Deficiency.
- Surviving The Loss of a Loved One to Suicide (booklet created for NH survivors of suicide loss)
- Annual Survivor of Suicide Loss Newsletter, 2006-2014, and contributions to many local and national publications on suicide prevention, postvention, and survivor of suicide loss support.



**Certifications**

- MINT Member, Motivational Interviewing Network of Trainers, International, 2016
- Trainer, Motivational Interviewing, Health education and Training Institute, 2016
- Coach, Motivational Interviewing, Health education and Training Institute, 2016
- Master Trainer, TeamSTEPPS, 2015
- Clinical Microsystems Coach-the-Coach Certification, The Dartmouth Institute, 2014
- Leader Certification, Stanford Chronic Disease Self-Management Program, 2014
- Master Trainer, Connect Suicide Prevention/Postvention Programs, NAMI, 2006

**Technology Skills:** Outlook, Word, Excel, PowerPoint, Publisher, Share Point, Visio, Grasshopper, Go-To-Meeting, Zoom, Moodle

# Kristen G. van Bergen-Buteau, CPHQ

## OBJECTIVE

To serve as a leader within the community, with a focus on improving the quality of healthcare and education for North Country residents.

## EDUCATION

- 2020 – Present University of New Hampshire, Master of Arts, Community Development Policy & Practice
- 2016 – Present Neil & Louise Tillotson Fund's Community Practitioners' Network
- 1997 – 2000 USNH College for Lifelong Learning, Bachelor of Science, Behavioral Science
- 1998 – 1999 International 4-H Youth Exchange Delegate to the Netherlands (June 1998 - March 1999)
- 1994 – 1997 University of New Hampshire Bachelor of Science general studies
- 1991 – 1994 WMRHS Graduate, Salutatorian

## CERTIFICATIONS

- 2008 – Present Certified Professional in Healthcare Quality (CPHQ)
- 2015 – Present American Heart Association BLS certification

## WORK EXPERIENCE

- 2019 – Present Senior Program Manager, North Country Health Consortium
  - Overall program management for the Integrated Delivery Network (IDN), Northern NH Area Health Education Center (NNH AHEC), and North Country Public Health Network (NC PHN) programs, including budgets, funding process, development and submission of all required program reports, and partner agreements to ensure program deliverables are completed
  - Supervise IDN, NNH AHEC and NC PHN program staff and participate in NCHC leadership meetings
  - Evaluate and assess program strengths, identify areas for improvement and implement interventions to ensure that program goals are achieved
  - Operationalize project plan to ensure timely achievement of deliverables and milestones
  - Foster partner engagement to build upon the successful innovative collaboration to improve the health status of the region
  - Build positive relations within the team and external parties by keeping all stakeholders up-to-date with relevant project information, communicating to ensure maximum efficiency and participating as a team member to complete program deliverables
  - Coordinate with staff from other NCHC program areas to ensure collaborative opportunities are identified and regional progress is reflected in program reports
- 2009 – 2019 Assistant Director, Quality Services, Littleton Regional Healthcare
  - Provided day-to-day operational oversight for the Quality Services Department, including budgeting, management of personnel and delegation of tasks
  - Oversaw and coordinated facility programs for Risk Management, Corporate Compliance, Patient Safety, Quality Improvement, Patient Relations, Customer Service, survey readiness activities for state and federal licensing activities
  - Chair, Ethics Committee
  - Coordinator, LRH Family Support Team
  - Facilitated North Country Transitions in Care team monthly meetings
  - Represented LRH at North Country Healthcare workgroups for Quality, Compliance, Risk Management and Privacy
  - Served as facility point of contact for population health initiatives, including Accountable Care

- Organization, Integrated Delivery Network and Community Care Organization work
- Assisted in the implementation of leadership and cultural development programs
- Provided orientation to LRH culture to all new hires for the organization
- 2005 – 2009      Data Specialist & Executive Administrative Support, Quality Services, Littleton Regional Hospital
  - Provided executive support to the Chief Administrative Officer/Chief Nursing Officer and CEO
  - Assisted in coordination, development, implementation, continuation and follow-up of projects developed by Quality Services and Department Leaders, including the coordination of data collection, analysis and reporting for identified quality improvement initiatives
- 2003 – 2005      Training and QA Staff Coordinator, Patient Access Services, Littleton Regional Hospital
- 2002 – 2003      Emergency Department Registrar, Littleton Regional Hospital
- 1999 – 2000      Clinical Lab Clerk, Weeks Medical Center
- 1997 – 1999      Cashier, Rite Aid Corporation
  - Junior Level Management (Key Cashier) promotion 12/97
- 1995 – 1997      Resident Advisor, UNH Department of Residential Life, Durham, NH,
  - Training in the areas of behavior, academic success, leadership, and personal support systems
  - Student referrals to services on campus
  - Regular contact with the public as a UNH representative
- 1992 – 1997      McDonald's Restaurant, Lancaster, NH
  - Member of the Customer Service Committee 1993 - 1994

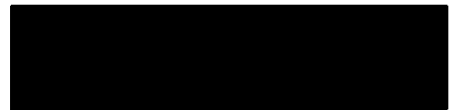
## VOLUNTEER/COMMUNITY SERVICE EXPERIENCE

- 2018 – Present    SAU 36 School Board Member, Lancaster Representative
  - Educational Programming & Curriculum Committee
  - Personnel Committee
  - Policy Committee
- 2019 – Present    Parent Volunteer, Girl Scouts USA Troop 30356
- 2017 – Present    Scouting BSA Troop 219, Lancaster NH
  - Troop Committee Member
  - Advancement Coordinator
  - Merit Badge Counselor
- 2015 – 2016      Member, SAU 36 Ad Hoc Strategic Planning Committee
- 2012 – 2017      Hospice volunteer for North Country Home Health & Hospice Agency
- 2009 – Present    Member, Littleton Regional Healthcare Family Support Team
- 2007 – Present    Member, Weeks Medical Center Family Support Team
- Spring 1996      UNH Alternative Break Challenge, Habitat for Humanity, Zanesville, OH
- 1990 – 2010      Toys for Tots delivery, John W. Weeks VFW Post 3041
- 1999 – 2000      Staff, Lancaster Kids Count Program

## REFERENCES

Available upon request

# Bob Thompson



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## Objective

Continue pursuing a career in the education, substance misuse prevention, and behavioral health fields that improves the lives of others, provides professional fulfillment, and is compatible with personal lifestyle interests.

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## Experience

### Senior Program Manager

North Country Health Consortium

Littleton, NH

September 2019 - Present

Responsible for all management and oversight responsibilities associated with the Consortium's Substance Misuse Prevention portfolio.

### Director, Office of Student Wellness

Berlin Public Schools

Berlin, NH

April 2015 - September 2019

Manage SAMHSA funded Project AWARE, Systems of Care Wraparound Services, and Restorative Justice grant programs. Direct all Office of Student Wellness related activities.

### Program Manager

North Country Health Consortium

Littleton, NH

March 2007 - April 2015

Responsible for all management level responsibilities associated with the Consortium's Substance Misuse Prevention portfolio.

### Programs Manager

Tri-County Community Action Programs  
Alcohol and Other Drug Division

Berlin, NH

October-1997 - March-2007

Managed all Impaired Driver Intervention Programs; developed and managed *Adolescent Substance Abuse Prevention (ASAP)* program in Carroll, Coos, and northern Grafton County district courts.

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## Education

### Bachelor of Science

San Diego State University - 1979

Major: Geography/Environmental Studies  
Minor: Biology/Conservation

### Master of Science

Granite State College - 2014

Leadership/Project Management

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## Skills and Credentials

Certified Prevention Specialist, 2012 - present; Positive Behavioral Interventions and Supports Trained Trainer Program at University of Connecticut, 2016-17; Board Certified Behavioral Analyst education program, Florida Institute of Technology 2017; Selectman, Town of Jackson, 2012 - 2019.

# Gregory Williams

## EXPERIENCE:

**North Country Health Consortium | Littleton, New Hampshire | March 2017 - Present**  
*North Country Regional Prevention Network Coordinator*

- Coordinates strategies designed to reduce substance misuse in the North Country of New Hampshire
- Works closely with NCHC Senior Program Manager to ensure effective allocation of resources and maximize strategy effectiveness.

**North Country Charter Academy | Lancaster, New Hampshire | August 2014 - March 2017**

*High School Teacher*

- Help reduce the dropout rate by working with at risk and disadvantaged youth that can not successfully navigate through a traditional high school. Individualize and personalize each student's online high school experience to promote success.

**Kaze Martial Arts | Lancaster, New Hampshire | October 2005 - Present**

*Martial Arts Instructor*

- Owner and operator of one of the most successful martial arts schools in the North Country. Giving youth and adults a healthy alternative to substance abuse by mentoring and believing in them. I have interacted with hundreds of individuals in the past 11 years at Kaze Dojo.

**Jerry Jam | Bath, New Hampshire | July 2013 - Present**

*Head of Security*

- Keep the peace and help keep safe, the 5 thousand attendees of the Jerry Jam music festival. Hire a staff of 10 peacekeepers to report any problems to the local authorities. Be the liaison between the organizers and the police in Bath and neighboring towns. Because of my reputation and work with law enforcement, I was asked to make sure that both organizers and local municipalities work together to hold a successful event. So far, the past 3 years have been very successful!

**Schillings | Littleton, New Hampshire | October 2013 - Present**

*Event Security Agent*

- Make sure patrons are in compliance with NH State liquor laws. Hired to work larger events such as Oktoberfest and New Years.

## EDUCATION:

**State University of New York at Stony Brook | Stony Brook, New York | August 2015**  
*Bachelor's Degree-Studio Art*

## SKILLS:

- Black Belt in 6 different Martial Arts.
- Working artist, currently doing shows in the North Country.

## LANGUAGES:

Spanish

REFERENCES: *References are available upon request.*

**KEY ADMINISTRATIVE PERSONNEL****NH Department of Health and Human Services****Contractor Name:** North Country Health Consortium**Name of Contract:** Regional Public Health Network- Amendment #3 - COVID-19 Response

<b>BUDGET PERIOD:</b> SFY 21				
<b>NAME</b>	<b>JOB TITLE</b>	<b>SALARY</b>	<b>PERCENT PAID FROM THIS CONTRACT</b>	<b>AMOUNT PAID FROM THIS CONTRACT</b>
April Mottram	Director of Programs	\$88,262	5.00%	\$4,413.10
Nicole Woods	Public Health Emergency Preparedness Coordinator	\$63,187	10.00%	\$6,318.70
Kris van Bergen-Buteau	NCHC Senior Program Manager	\$73,715	7.50%	\$5,528.63
<b>TOTAL SALARIES</b>				<b>\$16,260</b>

**CONTRACTOR NAME**Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Becky McEnany	Interim CEO	\$112,475	.05%	\$562.38
Cathy Roy	Director of Finance	\$86,922.32	.05	\$434.61
April Mottram	Director of Programs (PH)	\$88,262.20	2.0	\$1,765.24
Kris van Bergen-Buteau	Program Manager	\$73,714.89	.05	\$368.57
Robert Thompson	Sr. Program Manager	\$77,415.52	40.0	\$30,966.21
Annette Cole	Program Manager	\$74,438.00	21.3	\$15,855.29
Gregory Williams	Program Coordinator	\$68,568.03	2.0	\$1,371.36