



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

Jeffrey A. Meyers
Commissioner

Lisa M. Morris
Director

29 HAZEN DRIVE, CONCORD, NH 03301
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August 29, 2019

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 retroactively exercise a renewal option to an existing sole source agreement with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, (Vendor #161611-B001) 501 South Street, 2nd Floor, Bow, NH 03304 to continue providing a broad range of support services across a number of public health programs by increasing the price limitation by \$2,266,254 from \$1,920,705 to \$4,186,959 and by extending the contract completion date from June 30, 2019 to June 30, 2021 effective retroactive to June 30, 2019 upon Governor and Executive Council approval. 81.61% Federal Funds, 12.54% General Funds, and 5.85% Other Funds.

The original contract was approved by the Governor and Executive Council on June 21, 2017 (Item #51), as amended (Amendment #1) and approved by the Governor and Executive Council on February 21, 2018 (Item #8) and as amended (Amendment #2) and approved by the Governor and Executive Council on April 17, 2019 (Item #19)

Funds to support this request are anticipated to be available in the following accounts for State Fiscal Years 2020 and 2021 upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust amounts within the price limitation and adjust encumbrances between state fiscal years through the Budget Office, if needed and justified.

FISCAL DETAILS ATTACHED

EXPLANATION

This request is **retroactive** because the Department experienced delays in sending the amendment to the Contractor for execution due to the extensive updates in the scope of services that were needed to ensure comprehensive delivery of services.

This request is **sole source** because Amendment #1 increased the total price limitation by more than ten percent (10%) of the original contract value

As referenced in the Request for Proposals and in the Exhibit C-1 of this contract, the Department may extend contract services for up to two (2) years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Executive Council. The Department is in agreement with renewing contracted services for two (2) years at this time.

In State Fiscal Year 2019 the vendor received funding to conduct a data-driven vulnerability assessment to identify communities most vulnerable to an infectious disease outbreak due to injection drug use. The findings will be utilized to allocate future resources for the prevention of infectious diseases

related to injection drug use: These are one-time funds from the Centers for Disease Control and Prevention, which will end on November 30, 2019. This vulnerability assessment is a requirement of the federal Public Health Crisis Response grant.

The Contractor will implement a broad range of public health professional services to increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens and ensure successful outcomes across nine (9) Division of Public Health programs and the Department's Emergency Services unit. These include transparent and informed community engagement and planning, needs assessments, and evaluation processes; supporting large conferences and training programs; and enhancing the knowledge and skills among community based agencies providing public health services.

The Contractor currently provides a broad range of public health professional support services including, but not limited to developing and implementing risk and needs assessments; training programs; developing educational materials; planning for large statewide conferences as well as smaller meetings and conferences; serving as a fiscal agent for the Department, including entering into subcontracts; providing technical assistance to local partners; and providing subject matter expertise.

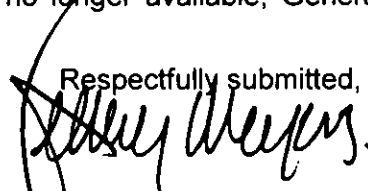
Should the Governor and Executive Council not authorize this request, the Department may lack the ability to strategically direct infectious disease prevention services to communities; offer large conferences, trainings, and consultation services to community-based agencies providing public health services; and conduct a needs assessment and evaluation process to improve services. The Department may not meet the key deliverables of this award if these funds are not made available to complete this project.

Area served: Statewide.

Source of Funds: Funds being added are 81.61% Federal (the Public Health Emergency Preparedness Program, the Hospital Preparedness Program, the Environmental Public Health Tracking Program, the Maternal, Infant and Early Childhood Home Visiting Grant Program, the Preventative Health and Services Block Grant Program, the HIV Integrated Prevention and Surveillance Program, and the Opioid Assessment Program), 12.54% General (the Public Health Emergency Preparedness Program), and 5.85% Other (Pharmaceutical Rebates).

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

Respectfully submitted,



Jeffrey A. Meyers
Commissioner

Public Health Professional Support Services
Fiscal Details

**05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY
PREPAREDNESS, 74% Federal, 26% General**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90077410	\$115,000	\$0	\$115,000
2019	102-500731	Contracts for Prog Svc	90077410	\$245,000	\$0	\$245,000
2020	102-500731	Contracts for Prog Svc	90077410	\$0	\$115,000	\$115,000
2021	102-500731	Contracts for Prog Svc	90077410	\$0	\$115,000	\$115,000
			Sub Total	\$360,000	\$230,000	\$590,000

**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**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90077700	\$70,000	\$0	\$70,000
2019	102-500731	Contracts for Prog Svc	90077700	\$70,000	\$0	\$70,000
2020	102-500731	Contracts for Prog Svc	90077700	\$0	\$20,000	\$20,000
2021	102-500731	Contracts for Prog Svc	90077700	\$0	\$20,000	\$20,000
			Sub Total	\$140,000	\$40,000	\$180,000

**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
PROGRAM, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90023320	\$65,000	\$0	\$65,000
2019	102-500731	Contracts for Prog Svc	90023320	\$65,000	\$0	\$65,000
2020	102-500731	Contracts for Prog Svc	90023320	\$0	\$95,000	\$95,000
2021	102-500731	Contracts for Prog Svc	90023320	\$0	\$95,000	\$95,000
			Sub Total	\$130,000	\$190,000	\$320,000

**05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PHARMACEUTICAL
REBATES, 100% Other**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90024600	\$183,800	\$0	\$183,800
2019	102-500731	Contracts for Prog Svc	90024600	\$133,800	\$0	\$133,800
2020	102-500731	Contracts for Prog Svc	90024600	\$0	\$250,000	\$250,000
2021	102-500731	Contracts for Prog Svc	90024600	\$0	\$200,000	\$200,000
			Sub Total	\$317,600	\$450,000	\$767,600

**05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD PROTECTION 37%
General, 63% Other**

SFY	Class / Account	Class Title	Job Number	Current/ Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90000022	\$18,000	\$0	\$18,000
2019	102-500731	Contracts for Prog Svc	90000022	\$18,000	\$0	\$18,000
2020	102-500731	Contracts for Prog Svc	90000022	\$0	\$15,000	\$15,000
2021	102-500731	Contracts for Prog Svc	90000022	\$0	\$15,000	\$15,000
			Sub Total	\$36,000	\$30,000	\$66,000

**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, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90041000	\$50,000	\$0	\$50,000
2019	102-500731	Contracts for Prog Svc	90041000	\$70,000	\$0	\$70,000
2020	102-500731	Contracts for Prog Svc	90041000	\$0	\$70,000	\$70,000
2021	102-500731	Contracts for Prog Svc	90041000	\$0	\$70,000	\$70,000
			Sub Total	\$120,000	\$140,000	\$260,000

**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, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2020	102-500731	Contracts for Prog Svc	90007936	\$0	\$44,670	\$44,670
2021	102-500731	Contracts for Prog Svc	90007936	\$0	\$37,760	\$37,760
			Sub Total	\$0	\$82,430	\$82,430

**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 PROTECTION, 100%
Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90036000	\$36,000	\$0	\$36,000
	102-500731	Contracts for Prog Svc	90038000	\$50,000	\$0	\$50,000
			Sub Total	\$86,000	\$0	\$86,000
2019	102-500731	Contracts for Prog Svc	90036000	\$9,000	\$0	\$9,000
	102-500731	Contracts for Prog Svc	90038000	\$40,000	\$0	\$40,000
			Sub Total	\$49,000	\$0	\$49,000
2020	102-500731	Contracts for Prog Svc	90036000	\$0	\$155,190	\$155,190
2020	102-500731	Contracts for Prog Svc	90038000	\$0	\$40,000	\$40,000
			Sub Total	\$0	\$195,190	\$195,190
2021	102-500731	Contracts for Prog Svc	90036000	\$0	\$111,795	\$111,795
2021	102-500731	Contracts for Prog Svc	90038000	\$0	\$40,000	\$40,000
			Sub Total	\$0	\$151,795	\$151,795
			Sub Total	\$135,000	\$346,985	\$481,985

**05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, HOME VISITING
X10 FORMULA GRANT, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90083200	\$221,990	\$0	\$221,990
2019	102-500731	Contracts for Prog Svc	90083201	\$247,569	\$0	\$247,569
2020	102-500731	Contracts for Prog Svc	90083203	\$0	\$221,000	\$221,000
2021	102-500731	Contracts for Prog Svc	90083203	\$0	\$221,000	\$221,000
			Sub Total	\$469,559	\$442,000	\$911,559

**05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, MATERNAL -
CHILD HEALTH, 48% Federal/52% General**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90080001	\$24,000	\$0	\$24,000
2019	102-500731	Contracts for Prog Svc	90080001	\$24,000	\$0	\$24,000
2020	102-500731	Contracts for Prog Svc	90080001	\$0	\$24,000	\$24,000
2021	102-500731	Contracts for Prog Svc	90080001	\$0	\$24,000	\$24,000
			Sub Total	\$48,000	\$48,000	\$96,000

**05-95-90-903010-1835 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF LABORATORY SERVICES, EPIDEMIOLOGY LABORATORY
AND CAPACITY, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2020	102-500731	Contracts for Prog Svc	90183504	\$0	\$30,000	\$30,000
2021	102-500731	Contracts for Prog Svc	90183504	\$0	\$30,000	\$30,000
			Sub Total	\$0	\$60,000	\$60,000

**05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, RADIOLOGICAL
EMERGENCY RESPONSE, 100% Other**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90030000	9,000	\$0	\$9,000
2019	102-500731	Contracts for Prog Svc	90030000	9,000	\$0	\$9,000
2020	102-500731	Contracts for Prog Svc	90030000	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90030000	\$0	\$0	\$0
			Sub Total	\$18,000	\$0	\$18,000

**05-95-90-902510-7536 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, STD/HIV PREVENTION,
100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90024000	\$0	\$0	\$0
2019	102-500731	Contracts for Prog Svc	90024000	\$75,000	\$0	\$75,000
2020	102-500731	Contracts for Prog Svc	90024000	\$0	\$100,000	\$100,000
2021	102-500731	Contracts for Prog Svc	90024000	\$0	\$100,000	\$100,000
			Sub Total	\$75,000	\$200,000	\$275,000

**05-95-90-901010-5362 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH SYSTEMS, POLICY, AND PERFORMANCE,
100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90001022	\$0	\$0	\$0
2019	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2020	102-500731	Contracts for Prog Svc	90001022	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90001022	\$0	\$0	\$0
			Sub Total	\$15,000	\$0	\$15,000

**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, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90703903	\$0	\$0	\$0
2019	102-500731	Contracts for Prog Svc	90703903	\$56,546	\$0	\$56,546
2020	102-500731	Contracts for Prog Svc	90703903	\$0	\$6,839	\$6,839
2021	102-500731	Contracts for Prog Svc	90703903	\$0	\$0	\$0
			Sub Total	\$56,546	\$6,839	\$63,385
			TOTAL	\$1,920,705	\$2,266,254	\$4,186,959



State of New Hampshire
Department of Health and Human Services
Amendment #3 to the
Public Health Professional Support Services

This 3rd Amendment to the Public Health Professional Support Services contract (hereinafter referred to as "Amendment #3") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and JSI Research & Training Institute, Inc., (hereinafter referred to as "the Contractor"), a Massachusetts Nonprofit Corporation with a place of business at 501 South Street, 2nd Floor, Bow, NH 03304.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 21, 2017 (Item #51), as amended on February 21, 2018 (Item #8), and subsequently amended on April 17, 2019 (Item #19) the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the scope of work, payment schedules or terms and conditions of the contract; 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, and modify the scope of services to support continued delivery of these services; and

WHEREAS, all terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #3 remain in full force and effect; 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 1.7, Completion Date, to read:
June 30, 2021.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:
\$4,186,959.
3. Form P-37, General Provisions, Block 1.9, Contracting Officer for State Agency, to read:
Nathan D. White, Director.
4. Form P-37, General Provisions, Block 1.10, State Agency Telephone Number, to read:
603-271-9631.
5. Delete Exhibit A, Scope of Services in its entirety and replace with Exhibit A, Amendment #3, Scope of Services.
6. Add Exhibit B, Amendment #3, Methods and Conditions Precedent to Payment.
7. Add Budget for Public Health Professional Support Services – CDC Lead, SFY 2020 Amendment #3.
8. Add Budget for Public Health Professional Support Services – Climate and Health, SFY 2020 Amendment #3.
9. Add Budget for Public Health Professional Support Services – EPA Lead, SFY 2020 Amendment #3.

JSI

**New Hampshire Department of Health and Human Services
Public Health Professional Support Services**



10. Add Budget for Public Health Professional Support Services – EPHT, SFY 2020 Amendment #3.
11. Add Budget for Public Health Professional Support Services – Food Safety, SFY 2020 Amendment #3.
12. Add Budget for Public Health Professional Support Services – Healthcare Acquired Infections, SFY 2020 Amendment #3.
13. Add Budget for Public Health Professional Support Services – HIV – CDC, SFY 2020 Amendment #3.
14. Add Budget for Public Health Professional Support Services – HIV – Rebates, SFY 2020 Amendment #3.
15. Add Budget for Public Health Professional Support Services – Home Visiting, SFY 2020 Amendment #3.
16. Add Budget for Public Health Professional Support Services – Home Visiting – MCH Block Grant, SFY 2020 Amendment #3.
17. Add Budget for Public Health Professional Support Services – Immunization Program, SFY 2020 Amendment #3.
18. Add Budget for Public Health Professional Support Services – Medical Reserve Corps Coordination (MRC), SFY 2020 Amendment #3.
19. Add Budget for Public Health Professional Support Services – Public Health Crisis Response, SFY 2020 Amendment #3.
20. Add Budget for Public Health Professional Support Services – Public Health Emergency Preparedness (PHEP), SFY 2020 Amendment #3.
21. Add Budget for Public Health Professional Support Services – CDC Lead, SFY 2021 Amendment #3.
22. Add Budget for Public Health Professional Support Services – Climate and Health, SFY 2021 Amendment #3.
23. Add Budget for Public Health Professional Support Services – EPA Lead, SFY 2021 Amendment #3.
24. Add Budget for Public Health Professional Support Services – EPHT, SFY 2021 Amendment #3.
25. Add Budget for Public Health Professional Support Services – Food Safety, SFY 2021 Amendment #3.
26. Add Budget for Public Health Professional Support Services – Healthcare Acquired Infections, SFY 2021 Amendment #3.
27. Add Budget for Public Health Professional Support Services – HIV – CDC, SFY 2021 Amendment #3.
28. Add Budget for Public Health Professional Support Services – HIV – Rebates; SFY 2021 Amendment #3.
29. Add Budget for Public Health Professional Support Services – Home Visiting, SFY 2021 Amendment #3.

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**New Hampshire Department of Health and Human Services
Public Health Professional Support Services**



30. Add Budget for Public Health Professional Support Services – Home Visiting – MCH Block Grant, SFY 2021 Amendment #3.
31. Add Budget for Public Health Professional Support Services – Immunization Program, SFY 2021 Amendment #3.
32. Add Budget for Public Health Professional Support Services – Medical Reserve Corps Coordination (MRC), SFY 2021 Amendment #3.
33. Add Budget for Public Health Professional Support Services – Public Health Emergency Preparedness (PHEP), SFY 2021 Amendment #3.
34. Add Exhibit K, DHHS Information Security Requirements.



This amendment shall be effective retroactive to June 30, 2019.

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

8/29/19
Date

Lisa Morris
Name: Lisa Morris
Title: Director

JSI Research & Training Institute, Inc.
d/b/a Community Health Institute

8/26/19
Date

Judith Stewart
Name: Judith Stewart
Title: Director

Acknowledgement of Contractor's signature:

State of New Hampshire, County of Merrimack on 8/26/19, before the undersigned officer, personally appeared the person identified directly above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

Courtney Castro
Signature of Notary Public or Justice of the Peace

Courtney Castro, Notary Public
Name and Title of Notary or Justice of the Peace

COURTNEY A. CASTRO, Notary Public
My Commission Expires November 8, 2022

My Commission Expires: _____

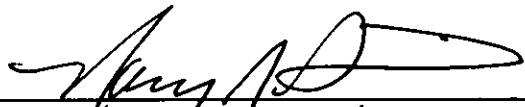
New Hampshire Department of Health and Human Services
Public Health Professional Support Services



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

OFFICE OF THE ATTORNEY GENERAL

9/3/19
Date


Name: Nancy G. Smith
Title: Sr. Assi. Atty. General.

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:



Exhibit A, Amendment #3

Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor will submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. The Contractor shall provide a broad range of public health professional support services including, but not limited to:
 - 1.3.1. Conducting needs assessments.
 - 1.3.2. Develop and implement prevention-focused training programs.
 - 1.3.3. Providing logistical support for conferences and meetings.
 - 1.3.4. Providing technical assistance ensuring subject matter experts are available to Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS) contractors.
 - 1.3.5. Developing educational materials.
 - 1.3.6. Developing and implementing evaluation plans.
 - 1.3.7. Assisting the Department with updating strategic plans.
 - 1.3.8. Maximizing the efficient use of resources.
 - 1.3.9. Overseeing programs as directed by the Department.
 - 1.3.10. Conducting HIV and Hepatitis Community Vulnerability Assessments.

2. Scope of Work

2.1. Develop and Implement Needs Assessments

2.1.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH)

2.1.1.1. In consultation with MIECHV/MCH staff, facilitate a training needs assessment for eleven (11) MIECHV contracted home visiting sites.

2.1.2. Infections Disease Prevention, Investigation & Care

2.1.2.1. The Contractor shall conduct a needs assessment to determine service needs among affected populations. The Contractor shall:

2.1.2.1.1. Gather information from People Living with HIV/AIDS (PLWHA) as well as from their families and caregivers in order to identify common themes and trends through qualitative data gathering

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8/26/19



Exhibit A, Amendment #3

processes that will yield:

- 2.1.2.1.1.1. Qualitative feedback for the needs assessment.
- 2.1.2.1.1.2. Survey questions to be utilized in a questionnaire that will be conducted to targeted statewide populations including, but not limited to individuals who:
 - 2.1.2.1.1.2.1. Are in or out of HIV medical care.
 - 2.1.2.1.1.2.2. Have co morbidities that may include but are not limited to Tuberculosis, Sexually Transmitted Diseases, Hepatitis C, Mental Illness, and/or substance use disorders.
- 2.1.2.1.2. Create statistical reports that reflect results of the survey.
- 2.1.2.1.3. Analyze the data to obtain information to generate recommendations.
- 2.1.2.1.4. Share preliminary results with the Bureau of Infectious Disease Prevention, Investigation and Care Services (ID-PICS) Section in order to obtain input for final recommendations that will be submitted to the Department.
- 2.1.2.1.5. Ensure that priority PLWHA populations are included in the Needs Assessment.
- 2.1.2.2. The Contractor shall identify the extent to which services identified in the inventory of resources are accessible, available, appropriate, affordable and acceptable to PLWHA. The Contractor shall:
 - 2.1.2.2.1. Estimate capacity of how much of each service can be provided.
 - 2.1.2.2.2. Assess capability of how well providers provide services, including expertise of agency staff and its accessibility.
 - 2.1.2.2.3. Develop and implement a provider survey, in collaboration with the BIDC ID-PICS Section as approved by the Department, to determine capacity and capability to deliver services identified in the resource inventory.
- 2.1.2.3. The Contractor shall assess service gaps/unmet needs of PLWHA and provide a written report that includes both quantitative and qualitative data on:
 - 2.1.2.3.1. Service needs.
 - 2.1.2.3.2. Resources.
 - 2.1.2.3.3. Barriers.
- 2.1.2.4. The Contractor shall conduct a thorough assessment of unmet needs for PLWHA who know their status but are not enrolled in primary care services.



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2.1.2.5. The Contractor shall make recommendations to the Department based on quantitative and qualitative data on service needs, resources and barriers to assist with setting priorities and allocating resources.

2.1.3. HIV Comprehensive Needs Assessment (HIV-CAN)

2.1.3.1. The Contractor shall conduct an HIV Comprehensive Needs Assessment (HIV-CAN) that is in compliance with the rules, regulations and policies outlined by U.S. Health Resources Services Administration (HRSA, the Centers for Disease Control and Prevention (CDC) and the Department.

2.1.3.2. The Contractor shall comply with all applicable responsibilities outlined in the HRSA National Monitoring Standards, as instructed by the Department.

2.1.3.3. The Contractor shall ensure the HIV-CAN process is compliant with needs assessment principles and strategies outlined in the Ryan White HIV/AIDS Program Part B Manual and by the Department.

2.1.3.4. The Contract shall ensure the HIV-CAN includes all specific components as outlined and detailed by HRSA, CDC and the Department including but not limited to:

- 2.1.3.4.1. Epidemiologic Overview
- 2.1.3.4.2. HIV Care Continuum
- 2.1.3.4.3. Financial and Human Resources Inventory.
- 2.1.3.4.4. Assessment of Needs, Gaps and Barriers.
- 2.1.3.4.5. Data Access, Sources and Systems.

2.1.3.5. The Contractor shall produce a document that includes all five (5) components outlined above.

2.1.4. Epidemiological Profile

2.1.4.1. The Contractor shall maintain regular contact with the Department throughout the life of the contract through:

- 2.1.4.1.1. Quarterly in-person meetings with Department staff;
- 2.1.4.1.2. Weekly emails and/or telephone calls.

2.1.4.2. The Contractor shall review HIV surveillance data, as provided by the BIDC, and create an epidemiological profile report for Department review.

2.1.4.3. The Contractor shall ensure the epidemiological profile report:

- 2.1.4.3.1. Summarizes pertinent information including but not limited to prevalence, incidence, and unmet need data by:
 - 2.1.4.3.1.1. Age.
 - 2.1.4.3.1.2. Gender.
 - 2.1.4.3.1.3. Race/ethnicity.
 - 2.1.4.3.1.4. Transmission mode.

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- 2.1.4.3.1.5. Geographic area.
- 2.1.4.3.2. Identifies descriptive trends in HIV and associated co-morbidities since case reporting by name began in 2005.
- 2.1.4.4. The Contractor shall create a profile that projects the status of the HIV epidemic, statewide, over the next three (3) to five (5) years, and includes and co morbidities, which may include, but is not limited to:
 - 2.1.4.4.1. Sexually Transmitted Diseases (STDs).
 - 2.1.4.4.2. Tuberculosis (TB).
 - 2.1.4.4.3. Hepatitis associated with the HIV/AIDS epidemic in NH.
- 2.1.4.5. The Contractor shall provide community population estimates, in writing, to the Department that include, but are not limited to:
 - 2.1.4.5.1. The number of individuals diagnosed and living with HIV/AIDS within each Public Health Region (PHR).
 - 2.1.4.5.2. A comparison of the rates and percentages for the state.
 - 2.1.4.5.3. A description of individuals at-risk for HIV infection based on rates of sexually transmitted diseases.
- 2.1.4.6. The Contractor shall provide a draft report of an epidemiological profile to the Department in an electronic format acceptable to the Department for review and approval no later than January of 2020.
- 2.1.4.7. The Contractor shall publish the epidemiological profile in compliance with state and federal security and confidentiality guidelines and DPHS Data Release Policy, ensuring clients cannot be identified as a result of the published data.
- 2.1.4.8. The Contractor shall provide an assessment of service needs in an electronic format that is acceptable to the Department for review and approval no later than April of 2020.
- 2.1.4.9. The Contractor shall present options for meeting service needs by:
 - 2.1.4.9.1. Maximizing identified resources.
 - 2.1.4.9.2. Identifying barriers to resources.
 - 2.1.4.9.3. Overcoming identified barriers, including coordinating Ryan White and HIV prevention services with other health care delivery systems.
- 2.1.4.10. The Contractor shall present recommendations for improving service delivery, bridging gaps and reducing duplicative services within the Ryan White and HIV Prevention service delivery system, as appropriate. The Contractor shall:
 - 2.1.4.10.1. Provide a written assessment of service gaps and unmet needs in an electronic format acceptable to the Department for Department review and approval no later than October of 2020.



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2.1.4.11. The Contractor shall make recommendations for future gap analysis with emphasis on perceived and unmet needs statewide. The Contractor shall:

2.1.4.11.1. Develop a strategy for meeting training, education and capacity needs of HIV providers, as identified by the assessment of service gaps/unmet needs.

2.1.4.11.2. Provide a written strategy for meeting the needs of HIV providers, as identified by the assessment of service gaps and unmet needs, in an electronic format acceptable to the Department for review and approval no later than May of 2020.

2.1.4.12. The Contractor shall make an in-person presentation on the final Epidemiological Profile report to the Department no later than June of 2020.

2.2. Develop and Implement Prevention-Focused Training Programs

2.2.1. General Training Requirements

2.2.1.1. The Contractor shall consult with Department subject matter experts to develop and/or implement program-specific training programs.

2.2.1.2. The Contractor shall ensure training programs are based on adult learning theories utilizing various training modalities in order to maximize reach.

2.2.1.3. The Contractor shall ensure training modalities include, but are not limited to:

2.2.1.3.1. In-classroom sessions.

2.2.1.3.2. Web-based training.

2.2.1.3.3. Train-the-trainer sessions.

2.2.2. Food Protection Section (FPS)

2.2.2.1. The Contractor, in consultation with the FPS staff, shall develop training curricula for FPS staff and Food Service Establishment (FSE) inspectors in municipalities that are classified as self-inspecting.

2.2.2.2. The Contractor, in consultation with FPS staff, shall develop training curricula for staff from state agencies that conduct food safety inspections as one component of a more comprehensive operational inspection, which includes, but is not limited to:

2.2.2.2.1. The Department of Environmental Services Youth Camp inspection staff.

2.2.2.2.2. The Department of Health and Human Services Health Facilities Licensing staff who inspect child care centers, nursing homes and assisted living facilities.

2.2.2.3. The Contractor, in consultation with FPS staff, shall develop training curricula for Food Service Workers including, but not limited to individuals who work in or for:

2.2.2.3.1. Restaurants.

2.2.2.3.2. Retail food stores.

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2.2.2.3.3. Schools.

2.2.2.3.4. Caterers.

2.2.3. Public Health Emergency Preparedness

2.2.3.1. The Contractor shall develop and implement training programs for RPHN emergency preparedness coordinators

2.2.3.2. The Contractor shall develop and implement training programs for individuals who are engaged in regional PHEP planning and response, including but not limited to:

2.2.3.2.1. Local municipal officials.

2.2.3.2.2. Healthcare preparedness personnel.

2.2.3.2.3. Volunteers.

2.2.3.3. The Contractor shall participate in the State Training and Exercise Program (STEP) workgroup that is convened by the Department.

2.2.4. Healthy Homes and Lead Poisoning Prevention Program

2.2.4.1. The Contractor shall plan and implement 1-day Renovation, Repair and Painting Training programs in New Hampshire's highest risk communities utilizing the US Environmental Protection Agency curriculum.

2.2.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH)

2.2.5.1. The Contractor shall develop and implement an annual training plan that includes, but is not limited to"

2.2.5.1.1. Site-specific training plans.

2.2.5.1.2. Pre- and Post-evaluations of trainings.

2.2.5.1.3. A minimum of ten (10) training opportunities are offered to MIECHV-funded home visiting sites per year.

2.2.6. Environmental Public Health Tracking (EPHT)

2.2.6.1. The Contractor shall provide logistical support to host a maximum of ten (10) meetings with Regional Public Health Networks to gather feedback on the EPHT Data Portal.

2.2.6.2. The Contractor shall provide logistical support to a maximum of five (5) focus groups conducting user research of EPHT data and projects.

2.2.6.3. The Contract shall utilize current train-the-trainer curriculum for tick-safe practices when providing training sessions to target audiences in two (2) regions of the State, ensuring each session has a maximum duration of three (3) hours. The Contractor shall:

2.2.6.3.1. Develop and apply a set of adult learning principles to ensure target audiences understand information.

2.2.6.3.2. Utilize an array of delivery techniques for different learning styles

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and processing skill sets.

- 2.2.6.3.3. Set up classrooms in a manner conducive to adult learning.
- 2.2.6.3.4. Meet participant needs, as appropriate.
- 2.2.6.3.5. Provide learners with opportunities for feedback.
- 2.2.6.3.6. Provide learners with a variety of coaching skills to utilize for future trainings.
- 2.2.6.3.7. Adapt existing educational materials, as approved by the Department, from Tick Free NH, the Department, the Centers for Disease Control (CDC), or other sources in order to meet the learning needs of target audiences.
- 2.2.6.3.8. Evaluate all training programs to measure competencies of participants.

2.2.7. Climate and Health Adaption

- 2.2.7.1. The Contractor shall ensure subject matter experts consult with local community partners, in collaboration with Department leads, to develop evidence-based public health plans and interventions to reduce the health impacts of extreme weather events , which may include;
 - 2.2.7.1.1. Extreme heat.
 - 2.2.7.1.2. Cold temperatures.
 - 2.2.7.1.3. Seasonal storms.
 - 2.2.7.1.4. Other changing climate conditions that may result in individual injury, illness or death.
- 2.2.7.2. The Contractor shall develop a white paper, in collaboration with the Department, utilizing subject matter experts on measures of community resilience to natural disasters. The Contractor shall ensure measures are:
 - 2.2.7.2.1. Viable metrics for self-reliance and emergency preparedness.
 - 2.2.7.2.2. Feasible to collect at the town or regional level
 - 2.2.7.2.3. Based on national standards for population vulnerability and resilience.

2.3. Provide Logistical Support for Conferences, Meetings and Planning Groups

2.3.1. General Logistical Support for Conferences

- 2.3.1.1. The Contractor shall provide logistical support, as approved by the Department, for conferences that may include, but is not limited to:
 - 2.3.1.1.1. Convening, facilitating, and documenting meetings of each conference planning team.
 - 2.3.1.1.2. Developing the conference agenda in coordination with planning teams.

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- 2.3.1.1.3. Compiling e-mail lists to promote conferences using addresses supplied by members of the planning team.
- 2.3.1.1.4. Designing and electronically publishing conference brochures, "Save the Date" announcements and other marketing materials as funding allows.
- 2.3.1.1.5. Designing the layout and printing materials for conference attendees.
- 2.3.1.1.6. Coordinating logistics with speakers.
- 2.3.1.1.7. Coordinating logistics with vendors and supporting their logistical needs during conferences.
- 2.3.1.1.8. Providing operations support during conferences, including but not limited to:
 - 2.3.1.1.8.1. Registering attendees.
 - 2.3.1.1.8.2. Coordinating IT needs.
 - 2.3.1.1.8.3. Coordinating with the conference site staff.
 - 2.3.1.1.8.4. Conducting other activities typically associated with conference support.
- 2.3.1.1.9. Compiling data from evaluation forms completed by attendees, analyze data and provide written reports to programs.
- 2.3.1.1.10. Receiving payment from vendors, which shall be utilized for supporting conferences with any additional funding to be utilized for activities funded by the program sponsoring the conference.
- 2.3.1.1.11. Facilitating reservations and logistics of each conference site.
- 2.3.1.1.12. Reporting all costs and income generated for each conference to the program funding the conference.

2.3.2. General Logistical Support for Committees and Planning Groups

- 2.3.2.1. The Contractor shall provide logistical support, as approved by the Department, for conferences committees and planning groups that may include, but is not limited to:
 - 2.3.2.1.1. Convening, facilitating, and documenting meetings, including those of subcommittees, work groups or similar bodies.
 - 2.3.2.1.2. Developing meeting agendas in coordination with Department staff.
 - 2.3.2.1.3. Disseminating announcements of meetings to members and posting publicly, as requested by the Department.
 - 2.3.2.1.4. Maintaining contact information for all members of committee/planning groups, including subcommittees, workgroups or similar bodies.



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- 2.3.2.1.5. Maintaining existing websites to inform members and the public of the purpose, membership and activities of planning groups and committees.
- 2.3.2.1.6. Coordinating logistics with speakers.
- 2.3.2.1.7. Coordinating logistics with vendors and supporting their logistical needs during conferences.
- 2.3.2.1.8. Providing operations support during meetings, including but not limited to:
 - 2.3.2.1.8.1. Registering attendees.
 - 2.3.2.1.8.2. Coordinating IT needs.
 - 2.3.2.1.8.3. Coordinating with site staff.
 - 2.3.2.1.8.4. Publishing minutes.
 - 2.3.2.1.8.5. Conducting other activities typically associated with meeting support.
- 2.3.2.1.9. Compiling data from evaluation forms completed by attendees analyze data and provide written reports to programs.

2.3.3. Healthcare Acquired Infections

- 2.3.3.1. The Contractor shall provide logistical support for up to eleven (11) meeting per year of the Antimicrobial Resistance Advisory Workgroup (ARAW).
- 2.3.3.2. The Contractor shall provide logistical and planning support for the annual Antimicrobial Stewardship Symposium for up to 400 attendees, which includes, but is not limited to providing continuing education credits.

2.3.4. Healthy Homes and Lead Poisoning Prevention Program

- 2.3.4.1. The Contractor shall provide logistical support to the New England Lead Coordinating Committee (NELCC), which includes, but is not limited to:
 - 2.3.4.1.1. No more than (12) regular meetings of the full NELCC.
 - 2.3.4.1.2. No more than two (2) committee/ workgroup meetings per year.
- 2.3.4.2. The Contractor shall provide logistical and planning support for the Healthy Homes annual conference for up to 300 attendees.
- 2.3.4.3. The Contractor shall provide logistical and planning support for a minimum of four (4) regional dinner meetings each of which shall have capacity for 120 attendees.

2.3.5. Climate and Health Adaption

- 2.3.5.1. The Contractor shall provide logistical support for a minimum of two (2) half-day meetings, each having a minimum duration of four (4) hours, for state-level partners that are members of the Climate and Health Advisory Council.
- 2.3.5.2. The Contractor shall implement and maintain a web-based collaboration portal accessible to Advisory Council members that includes all materials relevant to



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council meetings and work products.

2.3.6. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH)

2.3.6.1. The Contractor shall provide logistical support on a quarterly basis for the Home Visiting Task Force, the MIECHV Advisory Group, which includes but is not limited to collaborating partners, who have an interest and background in home visiting.

2.3.6.2. The Contractor shall participate in Data Systems; Strategic Planning; and Communications workgroup meetings.

2.3.6.3. The Contractor shall provide logistical and planning support, including evaluation, to semi-annual conferences-learning exchanges for up to 55 staff at MIECHV contracted sites. The Contractor shall ensure:

2.3.6.3.1. The spring 2018 training focuses on Healthy Families America required content training for continued certification.

2.3.6.3.2. The fall training 2018 is based on findings from the needs assessment.

2.3.6.4. The Contractor shall provide logistical and planning support a minimum of (2) two in-person statewide and/or regional trainings.

2.3.7. Infectious Disease Prevention, Investigation & Care Services Section

2.3.7.1. The Contractor shall provide logistical support to the NH HIV Planning Group (HPG), which includes, but is not limited to:

2.3.7.1.1. A maximum of six (6) regular meetings of the full HPG.

2.3.7.1.2. A maximum of (30) committee/workgroup meetings per year.

2.3.7.2. The Contractor shall provide logistical and planning support, which includes providing continuing education credits to attendees, for the bi-annual NH STD, HIV, Hepatitis, TB conference for up to 250 attendees.

2.3.8. Immunization Program

2.3.8.1. The Contractor shall provide logistical support for the annual Immunization Conference for approximately 400 attendees.

2.3.9. Public Health Emergency Preparedness

2.3.9.1. The Contractor shall provide logistical and planning support for the annual NH Statewide Preparedness conference for up to 800 attendees.

2.4. Provide Technical Assistance

2.4.1. Public Health Emergency Preparedness

2.4.1.1. The Contractor, in consultation with Department subject matter experts, shall provide technical assistance to three (3) discrete groups directed toward meeting national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (March 2011)

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and subsequent editions:

- 2.4.1.1.1. DPHS/Emergency Services Unit (ESU) preparedness staff.
- 2.4.1.1.2. Public health preparedness coordinators at the 13 organizations providing Regional Public Health Network services. TA will be available to both individuals and as a group.
- 2.4.1.1.3. Medical Reserve Corps units recognized by the registered with the U.S. Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps, to support recruitment, training and deployment of the MRC volunteers.

2.4.2. Infectious Disease Prevention, Investigation & Care Services Section

- 2.4.2.1. The Contractor, in consultation with Department subject matter experts, shall identify and coordinate the availability of technical assistance providers to DPHS contractors and service provider agencies.

2.4.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section

- 2.4.3.1. The Contractor shall provide Continuous Quality Improvement technical assistance through site visits and phone consultations to support local implementing agencies funded by DPHS that seek accreditation from the Healthy Families America accreditation board.

2.5. Develop and Produce Educational Materials

2.5.1. General Standards for Educational Materials

- 2.5.1.1. The Contractor shall, in consultation with Department subject matter experts, develop and/or produce educational materials on topics identified by DPHS staff.
- 2.5.1.2. The Contractor shall obtain Department approval prior to distribution of any produced materials and ensure all materials produced give credit to the funding source utilized to create the materials.
- 2.5.1.3. The Contractor shall ensure all materials are developed in accordance with CDC recommendations specified in Simply Put: Guide to Developing Easy-To-Understand Materials, CDC July 2010.

2.5.2. Environmental Public Health Tracking Program (EPHT)

- 2.5.2.1. The Contractor shall develop educational materials that:
 - 2.5.2.1.1. Include information that increases knowledge and understanding of the EPHT program at the state and local levels.
 - 2.5.2.1.2. Target public health professionals, emergency preparedness officials, and local partners.

2.5.3. Healthy Homes and Lead Poisoning Prevention Program (HHLPPP)

- 2.5.3.1. The Contractor shall develop educational materials, in collaboration with the HHLPPP, that:



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- 2.5.3.1.1. Include information that increases knowledge and understanding of:
 - 2.5.3.1.1.1. Best practices relative to Screening and Management Guidelines.
 - 2.5.3.1.1.2. Lead-safe work practices.
 - 2.5.3.1.1.3. Keeping children safe from lead hazards.
- 2.5.3.1.2. Target clinicians, contractors, and families.

2.5.4. Infectious Disease Prevention, Investigation & Care Services Section

- 2.5.4.1. The Contractor shall, in consultation with the Department, maintain and update the NH HIV Planning Group (HPG) website.

2.6. Develop and Implement Evaluation Plans

- 2.6.1.1. In consultation with DPHS subject matter experts, develop evaluation plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.

2.6.2. Environmental Public Health Tracking Program (EPHT)

- 2.6.2.1. The Contractor shall, in consultation with Department subject matter experts:
 - 2.6.2.1.1. Develop and implement a plan that clearly outlines goals, objectives, activities, outputs, outcomes, and performance measures in order to evaluate ongoing EPHT projects to ensure they meet criteria outlined by the CDC and fulfill federal requirements.
 - 2.6.2.1.2. Develop and implement a plan to evaluate previously funded HHLPPP projects that addressed dissemination techniques and understanding of the 2015 Lead Surveillance Report and the Childhood Lead Screening and Management Guidelines.

2.6.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH)

- 2.6.3.1. The Contractor shall monitor implementation of the current MIECHV Continuous Quality Improvement Plan
- 2.6.3.2. The Contractor shall participate in updating the MIECHV Continuous Quality Improvement Plan.

2.7. Update Strategic Plans

2.7.1. General Assistance with Strategic Plans

- 2.7.1.1. The Contractor shall, in consultation with Department subject matter experts, assist the Department with:
 - 2.7.1.1.1. Updating pre-existing strategic plans.
 - 2.7.1.1.2. Outlining goals, objectives, activities, outputs, outcomes, and



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performance measures for various programs.

2.7.1.1.3. Updating the 2010 MIECHV Strategic State Plan.

2.8. Maximize the Efficient Use of Resources

2.8.1. Environmental Public Health Tracking Program (EPHTP)

2.8.1.1. The Contractor shall work with Department vendors and grant recipients that provide Regional Public Health Network services to increase the amount of funding and amend work plans.

2.8.2. Infectious Disease Prevention, Investigation & Care Services (IDPICSS)

2.8.2.1. The Contractor shall facilitate reimbursements of costs incurred by approximately five (5) public members of the HPG to attend out-of-state conferences identified by the Department as well as mileage costs to attend in-state meetings.

2.8.2.2. The Contractor shall procure and supply prevention supplies as determined by the IDPICSS to a minimum of six (6) clinics funded by the IDPICSS to provide testing and treatment for sexually transmitted infections and human immunodeficiency virus.

2.8.3. Public Health Preparedness

2.8.3.1. The Contractor shall provide E-Studio, a web-based collaboration system currently in use by the Department.

2.8.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH)

2.8.4.1. The Contractor shall support a minimum of two (2) MIECHV-funded home visiting agency staff selected by the Department to attend the annual MIECHV grantee conference.

2.8.4.2. The Contractor shall research and identify methods to increase utilization of postpartum visits by home visiting families.

2.9. Conduct HIV and Hepatitis Community Vulnerability Assessments

2.9.1. Methodology & Data Assembly

2.9.1.1. The Contractor shall design methodology that includes but is not limited to:

2.9.1.1.1. Working with the Department's Bureau of Infectious Disease Control (BICD) to organize and engage a stakeholder group to provide input on the vulnerability assessment design, methods, expected output and outcomes.

2.9.1.1.2. Reviewing current literature that describes similar Vulnerability Assessments in order to inform the study design.

2.9.1.1.3. Working with the BICD to coordinate technical assistance available from the Center for Disease Control and Prevention for

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study design and interpretation of results.

2.9.1.2. The Contractor shall assemble data, which includes, but is not limited to:

- 2.9.1.2.1. Working with the BICD to develop data use agreements, as applicable, to obtain data for the assessment to include data on:
- 2.9.1.2.2. Overdose mortality and morbidity.
- 2.9.1.2.3. Emergency medical service and emergency department utilization.
- 2.9.1.2.4. Incidence of blood borne infections associated with non-sterile drug injection.
- 2.9.1.2.5. Demographic data, Medication Assisted Treatment capacity.
- 2.9.1.2.6. Other substance-use related treatment capacity.
- 2.9.1.2.7. Controlled drug prescription rates.
- 2.9.1.2.8. Public safety data;

2.9.1.3. The Contractor shall conduct an analysis to facility resource targeting with geographical context, to the extent such data is available.

2.9.1.4. The Contractor shall ensure any work performed complies with all state rules, and state and federal laws, as required, to safeguard the confidentiality of the information, and to comply with 42 CFR part 2, as applicable.

2.9.2. Conduct and Apply Findings of Vulnerability Assessments

2.9.2.1. The Contractor shall conduct analyses for the Vulnerability Assessment, which includes, but is not limited to:

- 2.9.2.1.1. Completing statistical analyses following design and modeling procedures as defined in collaboration with the Stakeholder Group.
- 2.9.2.1.2. Working with the BICD and the Stakeholder Group to review interim findings.
- 2.9.2.1.3. Refining the analysis, as necessary and possible, with additional data, methodological variations or innovations;
- 2.9.2.1.4. Completing the analysis for different sub-geographies of the state as determined in conjunction with BICD and the Stakeholder Group.

2.9.2.2. The Contractor shall disseminate and apply findings of the Vulnerability Assessment by:

- 2.9.2.2.1. Producing jurisdictional maps identifying high-risk areas identified through the assessment process.
- 2.9.2.2.2. Distributing findings to key stakeholders in formats that support action.
- 2.9.2.2.3. Presenting at public health and healthcare provider meetings.

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- 2.9.2.2.4. Creating fact sheets or report cards for geographic sub-regions of New Hampshire.
- 2.9.2.2.5. Publishing findings in professional journals.
- 2.9.2.2.6. Use the findings from the assessment to assist the Department in the development of plans that strategically allocate prevention and intervention services.

3. Performance Measures & Deliverables

3.1. Performance Measures

- 3.1.1. The Contractor shall meet or exceed performance measures for Section 2.2, Develop and Implement Prevention-Focused Training Programs, as follows:
 - 3.1.1.1. A minimum of 85% of participants rate training programs as not less than 'Very Good' in evaluation surveys.
- 3.1.2. The Contractor shall meet or exceed performance measures for Section 2.3, Logistical Support for Conferences, Meetings and Planning Groups as follows:
 - 3.1.2.1. A minimum of 85% of conference planning committee members rate conference logistical support for conferences as not less than 'Very Good' in evaluation surveys.
 - 3.1.2.2. A minimum of 85% of conference participants rate the elements pertaining to conference logistics as not less than 'Very Good' in evaluation surveys.
 - 3.1.2.3. A minimum of 85% of workgroup participants rate elements pertaining to workgroup logistics as not less than 'Very Good' in evaluation surveys.
 - 3.1.2.4. A minimum of 85% of planning group members rate meeting logistics as not less than 'Very Good' in evaluation surveys.
- 3.1.3. The Contractor shall meet or exceed performance measures for Section 2.4, Provide Technical Assistance, as follows:
 - 3.1.3.1. A minimum of 90% of all requests for high-priority consultation services are responded to within twenty-four (24) hours.
 - 3.1.3.2. A minimum of 90% of all requests for high-priority technical assistance are responded to within twenty-four (24) hours.
- 3.1.4. The Contractor shall identify barriers to meeting performance measures on a semi-annual basis and provide a corrective action plan that:
 - 3.1.4.1. Identifies barriers to success.
 - 3.1.4.2. Includes a work plan for mitigating barriers.
 - 3.1.4.3. Includes a timeline in which compliance with performance measures will

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Exhibit A, Amendment #3

be met.

3.2. Deliverables

3.2.1. Needs Assessments

- 3.2.1.1. The Contractor shall conduct training needs assessments for eleven (11) MIECHV home visiting sites.
- 3.2.1.2. The Contractor shall provide a written report to the Department no later than June 1, 2021 of recommendations that result from the needs assessment conducted to determine service needs for PLWHA.
- 3.2.1.3. The Contractor shall provide the HIV-CAN to the Department no later than March 30, 2021.
- 3.2.1.4. The Contractor shall participate in quarterly in-person meetings with Department staff.
- 3.2.1.5. The Contractor shall maintain ongoing communication with the Department by weekly e-mail or telephone contact from the contract effective date through the contract completion date.
- 3.2.1.6. The Contractor shall provide a draft report of the epidemiological profile to the Department for review and approval no later than January 31, 2020.
- 3.2.1.7. The Contractor shall provide a written assessment of service gaps and unmet needs with the Ryan White and HIV Prevention service delivery system to the Department for review and approval no later than October 31, 2020.
- 3.2.1.8. The Contractor shall provide a written strategy for meeting the needs of HIV providers as identified by the assessment of service gaps and unmet needs no later than May 31, 2020.
- 3.2.1.9. The Contractor shall make an in-person presentation of the final Epidemiological Profile report to the Department no later than June 30, 2020.

3.2.2. Prevention-Focused Training Programs

- 3.2.2.1. The Contractor shall facilitate two (2) 1-day Renovation, Repair and Painting Training programs in New Hampshire's high-risk communities.
- 3.2.2.2. The Contractor shall ensure a minimum of ten (10) training opportunities are offered to MIECHV-funded home visiting sites per year.
- 3.2.2.3. The Contractor shall provide logistical support to five (5) focus groups conducting user research of EPHT data and projects.
- 3.2.2.4. The Contractor shall conduct a minimum of two (2) training sessions on tick-safe practices that target audiences in different regions of the state, ensuring each session has a maximum duration of three (3) hours.

3.2.3. Logistical Support for Conferences, Meetings and Planning Groups



8/26/19



Exhibit A, Amendment #3

- 3.2.3.1. The Contractor shall provide logistical support for eleven (11) meetings per year of the ARAW.
- 3.2.3.2. The Contractor shall provide logistical support for twelve (12) meetings of the NELCC.
- 3.2.3.3. The Contractor shall provide logistical support for two (2) NELCC committee workgroup meetings.
- 3.2.3.4. The Contractor shall provide logistical and planning support at the Health Homes annual conference for 300 attendees.
- 3.2.3.5. The Contractor shall provide logistical and planning support for a minimum of four (4) regional dinner meetings of the Healthy Homes and Lead Poisoning Prevention Program, each of which have capacity for 120 attendees.
- 3.2.3.6. The Contractor shall provide logistical support for a minimum of two (2) half-day meetings each having a minimum duration of four (4) hours for state-level partners that are members of the Climate and Health Advisory Council.
- 3.2.3.7. The Contractor shall provide logistical support on a quarterly basis for the Home Visiting Task Force.
- 3.2.3.8. The Contractor shall provide logistical and planning support for semi-annual conferences – learning exchanges for up to fifty-five (55) staff at MIECHV contracted sites.
- 3.2.3.9. The Contractor shall provide logistical and planning support for two (2) in-person statewide or regional trainings of staff at MIECHV contracted sites.
- 3.2.3.10. The Contractor shall provide logistical support for six (6) regular meetings of the full HPG per year.
- 3.2.3.11. The Contractor shall provide logistical support for thirty (30) HPG committee workgroup meetings per year.
- 3.2.3.12. The Contractor shall provide logistical and planning support for the bi-annual NH STD, HIV, Hepatitis, TB conference, each of which has capacity for up to 250 attendees.
- 3.2.3.13. The Contractor shall provide logistical support for the annual Immunization Conference, which has capacity for 400 attendees.
- 3.2.3.14. The Contractor shall provide logistical support for the annual NH Statewide Preparedness Conference for up to 800.
- 3.2.4. Conduct and Apply Findings of Vulnerability Assessments
 - 3.2.4.1. The Contractor shall conduct an analyses for the Vulnerability Assessment no later than November 28, 2019.



Exhibit A, Amendment #3

- 3.2.4.2. The Contractor shall produce jurisdictional maps identifying high-risk areas and distribute findings to key stakeholders in formats that support action no later than November 28, 2019.
- 3.2.4.3. The Contractor shall present findings at two (2) public health and healthcare provider meetings.
- 3.2.4.4. The Contractor shall create fact sheets or report cards that summarize the vulnerability assessment information no later than November 28, 2019.

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8/26/18



Exhibit B, Amendment #3

Method and Conditions Precedent to Payment

1. The State shall pay the contractor an amount not to exceed the Form P-37, Block 1.8, Price Limitation for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
2. The Contractor agrees to provide the services in Exhibit A, Amendment #3, Scope of Service in compliance with funding requirements. Failure to meet the scope of services may jeopardize the funded contractor's current and/or future funding.
3. This contract is funded with Funds from:
 - 3.1. US Centers for Disease Control and Prevention, TP19-1901 Public Health Emergency Preparedness (PHEP) Program, Catalog of Federal Domestic Assistance (CFDA) # 93.069; Federal Award Identification Number (FAIN) # NU90TP922018,
 - 3.2. US Assistant Secretary for Preparedness & Response, TP19-1901 Hospital Preparedness Program (HPP), Catalog of Federal Domestic Assistance (CFDA) # 93.889, Federal Award Identification Number (FAIN) # U3REP190580,
 - 3.3. US Centers for Disease Control and Prevention, Immunization Cooperative Agreements, Immunization and Vaccines for Children, Catalog of Federal Domestic Assistance (CFDA) # 93.268, Federal Award Identification Number (FAIN) # NH23IP922595,
 - 3.4. US Centers for Disease Control and Prevention, Environmental Public Health Tracking Program - Network Implementation, Catalog of Federal Domestic Assistance (CFDA) # 93.070, Federal Award Identification Number (FAIN) # NU1EH001357,
 - 3.5. US Centers for Disease Control and Prevention, Climate and Health Adaptation and Monitoring Program (CHAMP), Catalog of Federal Domestic Assistance (CFDA) # 93.070, Federal Award Identification Number (FAIN) # NUE1EH001332;
 - 3.6. US Centers for Disease Control and Prevention, NH – Reduce the Burden of Lead Poisoning in Young Children in High Risk Communities and Populations, Catalog of Federal Domestic Assistance (CFDA) # 93.197, Federal Award Identification Number (FAIN) # NUE2EH001408.
 - 3.7. US Environmental Protection Agency, Lead 404(g) Training and Certification, Catalog of Federal Domestic Assistance (CFDA) # 66.707, Federal Award Identification Number (FAIN) # 99151216.
 - 3.8. US Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal, Infant and Early Childhood Home Visiting Grant Program, Catalog of Federal Domestic Assistance (CFDA) # 93.870, Federal Award Identification Number (FAIN) # X10MC32206.
 - 3.9. US Department of Health and Human Services, Health Resources and Services Administration, Maternal, and Child Health Services, Catalog of Federal Domestic Assistance (CFDA) # 93.994, Federal Award Identification Number (FAIN) # B04MC32557.
 - 3.10. US Centers for Disease Control and Prevention, Preventative Health and Health Services Block Grant, Catalog of Federal Domestic Assistance (CFDA) # 93.991, Federal Award Identification Number (FAIN) # NB01OT009205.
 - 3.11. US Centers for Disease Control and Prevention, Public Health Crisis Response, Catalog of Federal Domestic Assistance (CFDA) # 93.354, Federal Award Identification Number (FAIN) #U90TP921693.
 - 3.12. US Centers for Disease Control and Prevention, PS 18-1802 HIV Integrated Prevention and Surveillance Programs, Catalog of Federal Domestic Assistance (CFDA) #93.940, Federal Award Identification (FAIN) # U62PS924538.

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8/26/18



Exhibit B, Amendment #3

- 3.13. US Centers for Disease Control and Prevention, Epidemiology and Laboratory Capacity for Infectious Diseases, Catalog of Federal Domestic Assistance (CFDA) # 93.323, Federal Award Identification Number (FAIN) #NU50CK000522,
- 3.14. Other Funds from Pharmaceutical Rebates, Food Protection Fees and Radiological Health Fees
- 3.15. General Funds.
4. Payment for said services shall be made monthly as follows:
 - 4.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items.
 - 4.2. The Contractor will submit an invoice in a form satisfactory to the State by the twentieth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The invoice must be completed, signed, dated and returned to the Department in order to initiate payment. The Contractor agrees to keep records of their activities related to Department programs and services.
 - 4.3. The State shall make payment to the Contractor within thirty (30) days of receipt of each invoice, subsequent to approval of the submitted invoice and if sufficient funds are available. Contractors will keep detailed records of their activities related to DHHS-funded programs and services.
 - 4.4. The final invoice shall be due to the State no later than forty (40) days after the contract Form P-37, Block 1.7 Completion Date.
 - 4.5. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to DPHScontractbilling@dhhs.nh.gov, or invoices may be mailed to:

Financial Administrator
Department of Health and Human Services
Division of Public Health Services
29 Hazen Drive
Concord, NH 03301
 - 4.6. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A, Scope of Services and in this Exhibit B.
5. Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

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8/26/19

New Hampshire Department of Health and Human Services
Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: SFY 2020

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 39,669.58	\$ -	\$ 39,669.58
2. Employee Benefits	\$ 15,074.44	\$ -	\$ 15,074.44
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 1,190.09	\$ -	\$ 1,190.09
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 2,776.87	\$ -	\$ 2,776.87
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 300.00	\$ -	\$ 300.00
7. Occupancy	\$ 3,966.96	\$ -	\$ 3,966.96
8. Current Expenses	\$ 2,776.87	\$ -	\$ 2,776.87
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 793.39	\$ -	\$ 793.39
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meetings & Conference	\$ 31,000.00		\$ 31,000.00
Educational Outreach	\$ 22,353.96		\$ 22,353.96
Health Promotion	\$ 28,544.00		\$ 28,544.00
Information Systems		\$ 2,181.83	\$ 2,181.83
HR		\$ 1,190.09	\$ 1,190.09
Gen Admin	\$ -	\$ 1,190.09	\$ 1,190.09
Payroll and Accounting	\$ -	\$ 2,181.83	\$ 2,181.83
TOTAL	\$ 148,446.16	\$ 6,743.84	\$ 155,190.00

Indirect As A Percent of Direct 4.5%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick, and vacation.

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: SFY 2020

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 15,767.57	\$ -	\$ 15,767.57
2. Employee Benefits	\$ 5,991.68	\$ -	\$ 5,991.68
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 473.03	\$ -	\$ 473.03
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,103.73	\$ -	\$ 1,103.73
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 1,576.76	\$ -	\$ 1,576.76
8. Current Expenses	\$ 1,261.40	\$ -	\$ 1,261.40
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 315.35	\$ -	\$ 315.35
12. Subcontracts/Agreements	\$ 10,000.00	\$ -	\$ 10,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Curriculum Development & Logistics	\$ 5,500.00	\$ -	\$ 5,500.00
			\$ -
			\$ -
Information Systems		\$867.22	\$ 867.22
HR		\$473.02	\$ 473.02
Gen Admin	\$ -	\$473.02	\$ 473.02
Payroll and Accounting	\$ -	\$867.22	\$ 867.22
TOTAL	\$ 41,989.52	\$ 2,680.48	\$ 44,670.00

Indirect As A Percent of Direct

6.4%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Contractor Initials 

Date 8/26/19

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: SFY 2020			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 14,398.91	\$ -	\$ 14,398.91
2. Employee Benefits	\$ 5,471.58	\$ -	\$ 5,471.58
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 431.97	\$ -	\$ 431.97
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,007.92	\$ -	\$ 1,007.92
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 100.00	\$ -	\$ 100.00
7. Occupancy	\$ 1,439.89	\$ -	\$ 1,439.89
8. Current Expenses	\$ 1,007.92	\$ -	\$ 1,007.92
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 287.98	\$ -	\$ 287.98
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meetings & Conference	\$ 10,106.01	\$ -	\$ 10,106.01
Educational Outreach	\$ 3,300.00	\$ -	\$ 3,300.00
Information Systems	\$ -	\$ 791.94	\$ 791.94
HR	\$ -	\$ 431.97	\$ 431.97
Gen Admin	\$ -	\$ 431.97	\$ 431.97
Payroll and Accounting	\$ -	\$ 791.94	\$ 791.94
TOTAL	\$ 37,552.18	\$ 2,447.82	\$ 40,000.00

Indirect As A Percent of Direct

6.5%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Contractor Initials 

New Hampshire Department of Health and Human Services				
Contractor Name:		JSI Research & Training Institute, Inc.		
Budget Request for:		Public Health Professional Support Services		
Budget Period:		SFY 2020		
Line Item	Total Program Cost		Total	
	Direct	Indirect		
1. Total Salary/Wages	\$ 9,277.88	\$ -	\$	9,277.88
2. Employee Benefits	\$ 3,525.59	\$ -	\$	3,525.59
3. Consultants	\$ -	\$ -	\$	-
4. Equipment:	\$ 278.34	\$ -	\$	278.34
Rental	\$ -	\$ -	\$	-
Repair and Maintenance	\$ -	\$ -	\$	-
Purchase/Depreciation	\$ -	\$ -	\$	-
5. Supplies:	\$ 649.45	\$ -	\$	649.45
Educational	\$ -	\$ -	\$	-
Lab	\$ -	\$ -	\$	-
Pharmacy	\$ -	\$ -	\$	-
Medical	\$ -	\$ -	\$	-
Office	\$ -	\$ -	\$	-
6. Travel	\$ 335.92	\$ -	\$	335.92
7. Occupancy	\$ 927.79	\$ -	\$	927.79
8. Current Expenses	\$ 742.23	\$ -	\$	742.23
Telephone	\$ -	\$ -	\$	-
Postage	\$ -	\$ -	\$	-
Subscriptions	\$ -	\$ -	\$	-
Audit and Legal	\$ -	\$ -	\$	-
Insurance	\$ -	\$ -	\$	-
Board Expenses	\$ -	\$ -	\$	-
9. Software	\$ -	\$ -	\$	-
10. Marketing/Communications	\$ -	\$ -	\$	-
11. Staff Education and Training	\$ 185.56	\$ -	\$	185.56
12. Subcontracts/Agreements	\$ 50,000.00	\$ -	\$	50,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$	-
Printing	\$ 1,250.00		\$	1,250.00
Meeting Expenses	\$ 1,250.00		\$	1,250.00
Information Systems		\$510.28	\$	510.28
HR		\$278.34	\$	278.34
Gen Admin	\$ -	\$278.34	\$	278.34
Payroll and Accounting	\$ -	\$510.28	\$	510.28
TOTAL	\$ 68,422.76	\$ 1,577.24	\$	70,000.00
Indirect As A Percent of Direct		2.3%		
The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.				

Contractor Initials *JSI*
 Date 8/24/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 5,621.62	\$ -	\$ 5,621.62
2. Employee Benefits	\$ 2,136.22	\$ -	\$ 2,136.22
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 168.65	\$ -	\$ 168.65
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 393.51	\$ -	\$ 393.51
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 300.00	\$ -	\$ 300.00
7. Occupancy	\$ 562.16	\$ -	\$ 562.16
8. Current Expenses	\$ 449.73	\$ -	\$ 449.73
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 112.43	\$ -	\$ 112.43
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Printing	\$ 500.00	\$ -	\$ 500.00
Meeting Expenses	\$ 3,800.00	\$ -	\$ 3,800.00
Information Systems	\$ -	\$ 309.19	\$ 309.19
HR	\$ -	\$ 168.65	\$ 168.65
Gen Admin	\$ -	\$ 168.65	\$ 168.65
Payroll and Accounting	\$ -	\$ 309.19	\$ 309.19
TOTAL	\$ 14,044.32	\$ 955.68	\$ 15,000.00

Indirect As A Percent of Direct 6.8%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

Food Safety Program

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Contractor Initials 

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 15,875.88	\$ -	\$ 15,875.88
2. Employee Benefits	\$ 5,956.78	\$ -	\$ 5,956.78
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 470.27	\$ -	\$ 470.27
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,097.30	\$ -	\$ 1,097.30
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 1,567.57	\$ -	\$ 1,567.57
8. Current Expenses	\$ 1,254.05	\$ -	\$ 1,254.05
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 313.51	\$ -	\$ 313.51
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meeting Materials	\$ 1,000.00	\$ -	\$ 1,000.00
			\$ -
			\$ -
			\$ -
Information Systems		\$ 882.16	\$ 882.16
HR		\$ 470.27	\$ 470.27
Gen Admin	\$ -	\$ 470.27	\$ 470.27
Payroll and Accounting	\$ -	\$ 882.16	\$ 882.16
TOTAL	\$ 27,335.14	\$ 2,664.86	\$ 30,000.00

Indirect As A Percent of Direct

9.7%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20


Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 22,972.97	\$ -	\$ 22,972.97
2. Employee Benefits	\$ 8,729.73	\$ -	\$ 8,729.73
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 689.19	\$ -	\$ 689.19
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,608.11	\$ -	\$ 1,608.11
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 2,297.30	\$ -	\$ 2,297.30
8. Current Expenses	\$ 1,837.84	\$ -	\$ 1,837.84
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 459.46	\$ -	\$ 459.46
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Prevention Supplies	\$ 40,000.00	\$ -	\$ 40,000.00
Capacity building, marketing, and events	\$ 17,500.00	\$ -	\$ 17,500.00
	\$ -	\$ -	\$ -
		\$ -	\$ -
Information Systems		\$ 1,263.51	\$ 1,263.51
HR		\$ 689.19	\$ 689.19
Gen Admin	\$ -	\$ 689.19	\$ 689.19
Payroll and Accounting	\$ -	\$ 1,263.51	\$ 1,263.51
TOTAL	\$ 96,094.60	\$ 3,905.40	\$ 100,000.00

Indirect As A Percent of Direct 4.1%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

HIV - CDC

Contractor Initial 
Date 8/26/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 84,054.07	\$ -	\$ 84,054.07
2. Employee Benefits	\$ 31,940.54	\$ -	\$ 31,940.54
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 2,521.62	\$ -	\$ 2,521.62
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 5,883.78	\$ -	\$ 5,883.78
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 2,000.00	\$ -	\$ 2,000.00
7. Occupancy	\$ 8,405.41	\$ -	\$ 8,405.41
8. Current Expenses	\$ 6,724.32	\$ -	\$ 6,724.32
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,681.08	\$ -	\$ 1,681.08
12. Subcontracts/Agreements	\$ 5,000.00	\$ -	\$ 5,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
HIV Assessment Participant Incentives	\$ 15,000.00	\$ -	\$ 15,000.00
Tax Prep Services	\$ 10,000.00	\$ -	\$ 10,000.00
Capacity building, marketing, and events	\$ 62,500.00	\$ -	\$ 62,500.00
			\$ -
Information Systems		\$ 4,622.97	\$ 4,622.97
HR		\$ 2,521.62	\$ 2,521.62
Gen Admin	\$ -	\$ 2,521.62	\$ 2,521.62
Payroll and Accounting	\$ -	\$ 4,622.97	\$ 4,622.97
TOTAL	\$ 235,710.82	\$ 14,289.18	\$ 250,000.00

Indirect As A Percent of Direct 6.1%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 91,891.89	\$ -	\$ 91,891.89
2. Employee Benefits	\$ 34,918.92	\$ -	\$ 34,918.92
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 2,756.78	\$ -	\$ 2,756.78
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 6,432.43	\$ -	\$ 6,432.43
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 2,500.00	\$ -	\$ 2,500.00
7. Occupancy	\$ 9,189.19	\$ -	\$ 9,189.19
8. Current Expenses	\$ 7,351.35	\$ -	\$ 7,351.35
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,837.84	\$ -	\$ 1,837.84
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Learning Exchanges	\$ 6,000.00	\$ -	\$ 6,000.00
Core Training	\$ 20,000.00	\$ -	\$ 20,000.00
CQI	\$ 2,500.00	\$ -	\$ 2,500.00
HFA Training & Supports	\$ 20,000.00	\$ -	\$ 20,000.00
Information Systems	\$ -	\$ 5,054.05	\$ 5,054.05
HR	\$ -	\$ 2,756.78	\$ 2,756.78
Gen Admin	\$ -	\$ 2,756.76	\$ 2,756.76
Payroll and Accounting	\$ -	\$ 5,054.05	\$ 5,054.05
TOTAL	\$ 205,378.38	\$ 15,621.62	\$ 221,000.00

Indirect As A Percent of Direct

7.6%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Home Visiting Program

Contractor Initials

Date 8/26/19

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY20			
Line Item	Total Program Cost		
	Direct	Indirect	Total
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	\$ 21,425.00	\$ -	\$ 21,425.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Participant incentives	\$ 2,575.00		\$ 2,575.00
	\$ -		\$ -
	\$ -		\$ -
			\$ -
Information Systems			\$ -
HR			\$ -
Gen Admin	\$ -		\$ -
Payroll and Accounting	\$ -		\$ -
TOTAL	\$ 24,000.00	\$ -	\$ 24,000.00

Indirect As A Percent of Direct 0.0%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

Contractor Initials 
 Date 8/22/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 29,548.21	\$ -	\$ 29,548.21
2. Employee Benefits	\$ 11,228.32	\$ -	\$ 11,228.32
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 886.45	\$ -	\$ 886.45
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 2,068.37	\$ -	\$ 2,068.37
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 335.81	\$ -	\$ 335.81
7. Occupancy	\$ 2,954.82	\$ -	\$ 2,954.82
8. Current Expenses	\$ 2,363.86	\$ -	\$ 2,363.86
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00
11. Staff Education and Training	\$ 590.96	\$ -	\$ 590.96
12. Subcontracts/Agreements	\$ 30,000.00	\$ -	\$ 30,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Conference	\$ 5,000.00	\$ -	\$ 5,000.00
			\$ -
			\$ -
			\$ -
			\$ -
		\$ 1,625.15	\$ 1,625.15
Information Systems		\$ 886.45	\$ 886.45
HR		\$ 886.45	\$ 886.45
Gen Admin	\$ -	\$ 1,625.15	\$ 1,625.15
Payroll and Accounting	\$ -	\$ -	\$ -
TOTAL	\$ 89,976.80	\$ 5,023.20	\$ 95,000.00

Indirect As A Percent of Direct 5.6%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY20

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 10,648.64	\$ -	\$ 10,648.64
2. Employee Benefits	\$ 4,046.49	\$ -	\$ 4,046.49
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 319.46	\$ -	\$ 319.46
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 745.41	\$ -	\$ 745.41
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 100.00	\$ -	\$ 100.00
7. Occupancy	\$ 1,064.86	\$ -	\$ 1,064.86
8. Current Expenses	\$ 851.89	\$ -	\$ 851.89
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 212.97	\$ -	\$ 212.97
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meeting and Training Supplies	\$ 200.00	\$ -	\$ 200.00
Information Systems	\$ -	\$ 585.68	\$ 585.68
HR	\$ -	\$ 319.46	\$ 319.46
Gen Admin	\$ -	\$ 319.46	\$ 319.46
Payroll and Accounting	\$ -	\$ 585.68	\$ 585.68
	\$ -	\$ -	\$ -
TOTAL	\$ 18,189.72	\$ 1,810.28	\$ 20,000.00

Indirect As A Percent of Direct 10.0%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY20			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 3,700.00	\$ -	\$ 3,700.00
2. Employee Benefits	\$ 1,406.00	\$ -	\$ 1,406.00
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 111.00	\$ -	\$ 111.00
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 253.00	\$ -	\$ 253.00
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 370.00	\$ -	\$ 370.00
8. Current Expenses	\$ 296.00	\$ -	\$ 296.00
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 74.00	\$ -	\$ 74.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
			\$ -
			\$ -
			\$ -
			\$ -
<i>Information Systems</i>		\$203.50	\$ 203.50
<i>HR</i>		\$111.00	\$ 111.00
<i>Gen Admin</i>	\$ -	\$111.00	\$ 111.00
<i>Payroll and Accounting</i>	\$ -	\$203.50	\$ 203.50
TOTAL:	\$ 6,210.00	\$ 629.00	\$ 6,839.00


Indirect As A Percent of Direct

10.1%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

PH Crisis Response

Contractor Initials 
Date 8/26/19

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY20			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 51,989.17	\$ -	\$ 51,989.17
2. Employee Benefits	\$ 19,755.89	\$ -	\$ 19,755.89
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 1,559.68	\$ -	\$ 1,559.68
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 3,639.24	\$ -	\$ 3,639.24
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 200.00	\$ -	\$ 200.00
7. Occupancy	\$ 5,198.92	\$ -	\$ 5,198.92
8. Current Expenses	\$ 4,159.14	\$ -	\$ 4,159.14
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,039.78	\$ -	\$ 1,039.78
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Web-based Collaboration System	\$ 8,120.00	\$ -	\$ 8,120.00
Preparedness Conference Support	\$ 10,000.00	\$ -	\$ 10,000.00
Meeting & Training Supplies	\$ 500.00	\$ -	\$ 500.00
Information Systems	\$ -	\$ 2,859.41	\$ 2,859.41
HR	\$ -	\$ 1,559.68	\$ 1,559.68
Gen Admin	\$ -	\$ 1,559.68	\$ 1,559.68
Payroll and Accounting	\$ -	\$ 2,859.41	\$ 2,859.41
TOTAL	\$ 106,161.82	\$ 8,838.18	\$ 115,000.00


Indirect As A Percent of Direct

8.3%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Public Health Emergency Preparedness (PHEP)

Contractor Initials 
Date 8/22/19

New Hampshire Department of Health and Human Services
Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: SFY 2021

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 31,945.42	\$ -	\$ 31,945.42
2. Employee Benefits	\$ 12,139.26	\$ -	\$ 12,139.26
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 958.36	\$ -	\$ 958.36
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 2,236.18	\$ -	\$ 2,236.18
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 300.00	\$ -	\$ 300.00
7. Occupancy	\$ 3,194.54	\$ -	\$ 3,194.54
8. Current Expenses	\$ 2,236.18	\$ -	\$ 2,236.18
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 638.91	\$ -	\$ 638.91
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meetings & Conference	\$ 17,000.00		\$ 17,000.00
Educational Outreach	\$ 35,715.43		\$ 35,715.43
Health Promotion			\$ -
Information Systems		\$ 1,757.00	\$ 1,757.00
HR		\$ 958.36	\$ 958.36
Gen Admin	\$ -	\$ 958.36	\$ 958.36
Payroll and Accounting	\$ -	\$ 1,757.00	\$ 1,757.00
TOTAL	\$ 106,364.28	\$ 5,430.72	\$ 111,795.00

Indirect As A Percent of Direct

5.1%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Contractor Initials

New Hampshire Department of Health and Human Services
Contractor Name: JSI Research & Training Institute, Inc.


Budget Request for: Public Health Professional Support Services

Budget Period: SFY 2021

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 12,032.46	\$ -	\$ 12,032.46
2. Employee Benefits	\$ 4,572.32	\$ -	\$ 4,572.32
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 360.97	\$ -	\$ 360.97
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 842.27	\$ -	\$ 842.27
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 1,203.24	\$ -	\$ 1,203.24
8. Current Expenses	\$ 962.59	\$ -	\$ 962.59
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 240.65	\$ -	\$ 240.65
12. Subcontracts/Agreements	\$ 10,000.00	\$ -	\$ 10,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Curriculum Development & Logistics	\$ 5,500.00	\$ -	\$ 5,500.00
Information Systems	\$ -	\$ 661.78	\$ 661.78
HR	\$ -	\$ 360.97	\$ 360.97
Gen Admin	\$ -	\$ 360.97	\$ 360.97
Payroll and Accounting	\$ -	\$ 661.78	\$ 661.78
TOTAL	\$ 35,714.50	\$ 2,045.50	\$ 37,760.00

Indirect As A Percent of Direct 5.7%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

Contractor Initials 
 Date 8/16/14

New Hampshire Department of Health and Human Services
Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: SFY 2021

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 14,398.91	\$ -	\$ 14,398.91
2. Employee Benefits	\$ 5,471.58	\$ -	\$ 5,471.58
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 431.97	\$ -	\$ 431.97
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,007.92	\$ -	\$ 1,007.92
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 100.00	\$ -	\$ 100.00
7. Occupancy	\$ 1,439.89	\$ -	\$ 1,439.89
8. Current Expenses	\$ 1,007.92	\$ -	\$ 1,007.92
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 287.98	\$ -	\$ 287.98
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meetings & Conference	\$ 10,106.01	\$ -	\$ 10,106.01
Educational Outreach	\$ 3,300.00	\$ -	\$ 3,300.00
Information Systems	\$ -	\$ 791.94	\$ 791.94
HR	\$ -	\$ 431.97	\$ 431.97
Gen Admin	\$ -	\$ 431.97	\$ 431.97
Payroll and Accounting	\$ -	\$ 791.94	\$ 791.94
TOTAL	\$ 37,552.18	\$ 2,447.82	\$ 40,000.00

Indirect As A Percent of Direct

6.5%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Contractor Initials 

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY21

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 9,277.88	\$ -	\$ 9,277.88
2. Employee Benefits	\$ 3,525.59	\$ -	\$ 3,525.59
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 278.34	\$ -	\$ 278.34
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 649.45	\$ -	\$ 649.45
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 335.92	\$ -	\$ 335.92
7. Occupancy	\$ 927.79	\$ -	\$ 927.79
8. Current Expenses	\$ 742.23	\$ -	\$ 742.23
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 185.56	\$ -	\$ 185.56
12. Subcontracts/Agreements	\$ 50,000.00	\$ -	\$ 50,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Printing	\$ 1,250.00		\$ 1,250.00
Meeting Expenses	\$ 1,250.00		\$ 1,250.00
Information Systems		\$ 510.28	\$ 510.28
HR		\$ 278.34	\$ 278.34
Gen Admin	\$ -	\$ 278.34	\$ 278.34
Payroll and Accounting	\$ -	\$ 510.28	\$ 510.28
TOTAL	\$ 68,422.76	\$ 1,577.24	\$ 70,000.00

Indirect As A Percent of Direct 2.3%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY21			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 7,027.03	\$ -	\$ 7,027.03
2. Employee Benefits	\$ 2,670.27	\$ -	\$ 2,670.27
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 210.81	\$ -	\$ 210.81
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 491.89	\$ -	\$ 491.89
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 702.70	\$ -	\$ 702.70
8. Current Expenses	\$ 562.16	\$ -	\$ 562.16
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 140.54	\$ -	\$ 140.54
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meeting Expenses & Webinar Recording	\$ 2,000.00	\$ -	\$ 2,000.00
Information Systems		\$ 386.49	\$ 386.49
HR		\$ 210.81	\$ 210.81
Gen Admin	\$ -	\$ 210.81	\$ 210.81
Payroll and Accounting	\$ -	\$ 386.49	\$ 386.49
TOTAL	\$ 13,805.40	\$ 1,194.60	\$ 15,000.00

Indirect As A Percent of Direct

8.7%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Food Safety Program

Contractor Initials 

Date 8/26/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY21

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 15,675.68	\$ -	\$ 15,675.68
2. Employee Benefits	\$ 5,956.76	\$ -	\$ 5,956.76
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 470.27	\$ -	\$ 470.27
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,097.30	\$ -	\$ 1,097.30
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 1,567.57	\$ -	\$ 1,567.57
8. Current Expenses	\$ 1,254.05	\$ -	\$ 1,254.05
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 313.51	\$ -	\$ 313.51
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meeting Materials	\$ 1,000.00	\$ -	\$ 1,000.00
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
Information Systems		\$ 862.16	\$ 862.16
HR		\$ 470.27	\$ 470.27
Gen Admin	\$ -	\$ 470.27	\$ 470.27
Payroll and Accounting	\$ -	\$ 862.16	\$ 862.16
TOTAL	\$ 27,335.14	\$ 2,664.86	\$ 30,000.00

Indirect As A Percent of Direct

9.7%

fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Healthcare Acquired Infections

Contractor Initials

Date 8/24/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY21


Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 22,972.97	\$ -	\$ 22,972.97
2. Employee Benefits	\$ 8,729.73	\$ -	\$ 8,729.73
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 689.19	\$ -	\$ 689.19
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,608.11	\$ -	\$ 1,608.11
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -
7. Occupancy	\$ 2,297.30	\$ -	\$ 2,297.30
8. Current Expenses	\$ 1,837.84	\$ -	\$ 1,837.84
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 459.46	\$ -	\$ 459.46
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Prevention Supplies	\$ 40,000.00	\$ -	\$ 40,000.00
Capacity building, marketing, and events	\$ 17,500.00	\$ -	\$ 17,500.00
	\$ -	\$ -	\$ -
		\$ -	\$ -
Information Systems		\$ 1,263.51	\$ 1,263.51
HR		\$ 689.19	\$ 689.19
Gen Admin	\$ -	\$ 689.19	\$ 689.19
Payroll and Accounting	\$ -	\$ 1,263.51	\$ 1,263.51
TOTAL	\$ 96,094.60	\$ 3,905.40	\$ 100,000.00

Indirect As A Percent of Direct 4.1%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

HIV - CDC

Contractor Initials 
 Date 8/26/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY21

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 78,270.27	\$ -	\$ 78,270.27
2. Employee Benefits	\$ 29,742.70	\$ -	\$ 29,742.70
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 2,348.11	\$ -	\$ 2,348.11
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 5,478.92	\$ -	\$ 5,478.92
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 1,200.00	\$ -	\$ 1,200.00
7. Occupancy	\$ 7,827.03	\$ -	\$ 7,827.03
8. Current Expenses	\$ 6,261.62	\$ -	\$ 6,261.62
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,565.41	\$ -	\$ 1,565.41
12. Subcontracts/Agreements	\$ 4,000.00	\$ -	\$ 4,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
HIV Assessment Participant Incentives	\$ 10,000.00	\$ -	\$ 10,000.00
Tax Prep Services	\$ 10,000.00	\$ -	\$ 10,000.00
Capacity building, marketing, and events	\$ 30,000.00	\$ -	\$ 30,000.00
Information Systems		\$ 4,304.86	\$ 4,304.86
HR		\$ 2,348.11	\$ 2,348.11
Gen Admin	\$ -	\$ 2,348.11	\$ 2,348.11
Payroll and Accounting	\$ -	\$ 4,304.86	\$ 4,304.86
TOTAL	\$ 186,694.06	\$ 13,305.94	\$ 200,000.00

Indirect As A Percent of Direct

7.1%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

HIV - Rebates

Contractor Initials

Date 8/24/15

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY21			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 91,891.89	\$ -	\$ 91,891.89
2. Employee Benefits	\$ 34,918.92	\$ -	\$ 34,918.92
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 2,756.76	\$ -	\$ 2,756.76
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 6,432.43	\$ -	\$ 6,432.43
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 2,500.00	\$ -	\$ 2,500.00
7. Occupancy	\$ 9,189.19	\$ -	\$ 9,189.19
8. Current Expenses	\$ 7,351.35	\$ -	\$ 7,351.35
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,837.84	\$ -	\$ 1,837.84
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Learning Exchanges	\$ 6,000.00	\$ -	\$ 6,000.00
Core Training	\$ 20,000.00	\$ -	\$ 20,000.00
CQI	\$ 2,500.00	\$ -	\$ 2,500.00
HFA Training & Supports	\$ 20,000.00	\$ -	\$ 20,000.00
Information Systems	\$ -	\$ 5,054.05	\$ 5,054.05
HR	\$ -	\$ 2,756.76	\$ 2,756.76
Gen Admin	\$ -	\$ 2,756.76	\$ 2,756.76
Payroll and Accounting	\$ -	\$ 5,054.05	\$ 5,054.05
TOTAL	\$ 205,378.38	\$ 15,821.62	\$ 221,000.00

Indirect As A Percent of Direct

7.6%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.

Budget Request for: Public Health Professional Support Services

Budget Period: FY21

Line Item	Total Program Cost		
	Direct	Indirect	Total
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	\$ 21,425.00	\$ -	\$ 21,425.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Participant incentives	\$ 2,575.00	\$ -	\$ 2,575.00
	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -
		\$ -	\$ -
Information Systems		\$ -	\$ -
HR		\$ -	\$ -
Gen Admin	\$ -	\$ -	\$ -
Payroll and Accounting	\$ -	\$ -	\$ -
TOTAL	\$ 24,000.00	\$ -	\$ 24,000.00

Indirect As A Percent of Direct

0.0%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Home Visiting - MCH Block Grant

Contractor Initials

Date 8/26/19

New Hampshire Department of Health and Human Services

Contractor Name: JSI Research & Training Institute, Inc.


Budget Request for: Public Health Professional Support Services

Budget Period: FY21

Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 29,548.21	\$ -	\$ 29,548.21
2. Employee Benefits	\$ 11,228.32	\$ -	\$ 11,228.32
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 886.45	\$ -	\$ 886.45
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 2,068.37	\$ -	\$ 2,068.37
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 335.81	\$ -	\$ 335.81
7. Occupancy	\$ 2,954.82	\$ -	\$ 2,954.82
8. Current Expenses	\$ 2,363.86	\$ -	\$ 2,363.86
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00
11. Staff Education and Training	\$ 590.96	\$ -	\$ 590.96
12. Subcontracts/Agreements	\$ 30,000.00	\$ -	\$ 30,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Conference	\$ 5,000.00	\$ -	\$ 5,000.00
			\$ -
			\$ -
			\$ -
			\$ -
		\$ 1,625.15	\$ 1,625.15
Information Systems		\$ 886.45	\$ 886.45
HR		\$ 886.45	\$ 886.45
Gen Admin	\$ -	\$ 886.45	\$ 886.45
Payroll and Accounting	\$ -	\$ 1,625.15	\$ 1,625.15
TOTAL	\$ 89,978.80	\$ 5,023.20	\$ 95,000.00

Indirect As A Percent of Direct 5.6%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

Contractor Initials 
 Date 8/26/19

New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY21			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 10,648.64	\$ -	\$ 10,648.64
2. Employee Benefits	\$ 4,046.49	\$ -	\$ 4,046.49
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 319.46	\$ -	\$ 319.46
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 745.41	\$ -	\$ 745.41
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 100.00	\$ -	\$ 100.00
7. Occupancy	\$ 1,064.86	\$ -	\$ 1,064.86
8. Current Expenses	\$ 851.89	\$ -	\$ 851.89
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 212.97	\$ -	\$ 212.97
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Meeting and Training Supplies	\$ 200.00		\$ 200.00
Information Systems		\$585.68	\$ 585.68
HR		\$319.46	\$ 319.46
Gen Admin	\$ -	\$319.46	\$ 319.46
Payroll and Accounting	\$ -	\$585.68	\$ 585.68
	\$ -	\$ -	\$ -
TOTAL	\$ 18,189.72	\$ 1,810.28	\$ 20,000.00

Indirect As A Percent of Direct 10.0%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.


New Hampshire Department of Health and Human Services			
Contractor Name: JSI Research & Training Institute, Inc.			
Budget Request for: Public Health Professional Support Services			
Budget Period: FY21			
Line Item	Total Program Cost		
	Direct	Indirect	Total
1. Total Salary/Wages	\$ 51,989.17	\$ -	\$ 51,989.17
2. Employee Benefits	\$ 19,755.89	\$ -	\$ 19,755.89
3. Consultants	\$ -	\$ -	\$ -
4. Equipment:	\$ 1,559.68	\$ -	\$ 1,559.68
Rental	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -
5. Supplies:	\$ 3,639.24	\$ -	\$ 3,639.24
Educational	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -
6. Travel	\$ 200.00	\$ -	\$ 200.00
7. Occupancy	\$ 5,198.92	\$ -	\$ 5,198.92
8. Current Expenses	\$ 4,159.14	\$ -	\$ 4,159.14
Telephone	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,039.78	\$ -	\$ 1,039.78
12. Subcontracts/Agreements	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -
Web-based Collaboration System	\$ 8,120.00	\$ -	\$ 8,120.00
Preparedness Conference Support	\$ 10,000.00	\$ -	\$ 10,000.00
Meeting & Training Supplies	\$ 500.00	\$ -	\$ 500.00
Information Systems	\$ -	\$ 2,859.41	\$ 2,859.41
HR	\$ -	\$ 1,559.68	\$ 1,559.68
Gen Admin	\$ -	\$ 1,559.68	\$ 1,559.68
Payroll and Accounting	\$ -	\$ 2,859.41	\$ 2,859.41
TOTAL	\$ -	\$ -	\$ -
TOTAL	\$ 106,161.82	\$ 8,838.18	\$ 115,000.00

Indirect As A Percent of Direct 6.3%

The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.

JSI Research Training Institute, Inc. d/b/a Community Health Institute

Public Health Emergency Preparedness (PHEP)

Contractor Initials 
Date 8/24/19



A. Definitions

The following terms may be reflected and have the described meaning in this document:

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.
3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

Confidential Information also includes any and all information owned or managed by the State of NH - created, received from or on behalf of the Department of Health and Human Services (DHHS) or accessed in the course of performing contracted services - of which collection, disclosure, protection, and disposition is governed by state or federal law or regulation. This information includes, but is not limited to Protected Health Information (PHI), Personal Information (PI), Personal Financial Information (PFI), Federal Tax Information (FTI), Social Security Numbers (SSN), Payment Card Industry (PCI), and or other sensitive and confidential information.

4. "End User" means any person or entity (e.g., contractor, contractor's employee, business associate, subcontractor, other downstream user, etc.) that receives DHHS data or derivative data in accordance with the terms of this Contract.
5. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder.
6. "Incident" means an act that potentially violates an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data; and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of physical or electronic

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mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification or destruction.

7. "Open Wireless Network" means any network or segment of a network that is not designated by the State of New Hampshire's Department of Information Technology or delegate as a protected network (designed, tested, and approved, by means of the State, to transmit) will be considered an open network and not adequately secure for the transmission of unencrypted PI, PFI, PHI or confidential DHHS data.
8. "Personal Information" (or "PI") means information which can be used to distinguish or trace an individual's identity, such as their name, social security number, personal information as defined in New Hampshire RSA 359-C:19, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.
9. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
10. "Protected Health Information" (or "PHI") has the same meaning as provided in the definition of "Protected Health Information" in the HIPAA Privacy Rule at 45 C.F.R. § 160.103.
11. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 C.F.R. Part 164, Subpart C, and amendments thereto.
12. "Unsecured Protected Health Information" means Protected Health Information that is not secured by a technology standard that renders Protected Health Information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

A. Business Use and Disclosure of Confidential Information.

1. The Contractor must not use, disclose, maintain or transmit Confidential Information except as reasonably necessary as outlined under this Contract. Further, Contractor, including but not limited to all its directors, officers, employees and agents, must not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.
2. The Contractor must not disclose any Confidential Information in response to a



request for disclosure on the basis that it is required by law, in response to a subpoena, etc., without first notifying DHHS so that DHHS has an opportunity to consent or object to the disclosure.

3. If DHHS notifies the Contractor that DHHS has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Contractor must be bound by such additional restrictions and must not disclose PHI in violation of such additional restrictions and must abide by any additional security safeguards.
4. The Contractor agrees that DHHS Data or derivative there from disclosed to an End User must only be used pursuant to the terms of this Contract.
5. The Contractor agrees DHHS Data obtained under this Contract may not be used for any other purposes that are not indicated in this Contract.
6. The Contractor agrees to grant access to the data to the authorized representatives of DHHS for the purpose of inspecting to confirm compliance with the terms of this Contract.

II. METHODS OF SECURE TRANSMISSION OF DATA

1. Application Encryption. If End User is transmitting DHHS data containing Confidential Data between applications, the Contractor attests the applications have been evaluated by an expert knowledgeable in cyber security and that said application's encryption capabilities ensure secure transmission via the internet.
2. Computer Disks and Portable Storage Devices. End User may not use computer disks or portable storage devices, such as a thumb drive, as a method of transmitting DHHS data.
3. Encrypted Email. End User may only employ email to transmit Confidential Data if email is encrypted and being sent to and being received by email addresses of persons authorized to receive such information.
4. Encrypted Web Site. If End User is employing the Web to transmit Confidential Data, the secure socket layers (SSL) must be used and the web site must be secure. SSL encrypts data transmitted via a Web site.
5. File Hosting Services, also known as File Sharing Sites. End User may not use file hosting services, such as Dropbox or Google Cloud Storage, to transmit Confidential Data.
6. Ground Mail Service. End User may only transmit Confidential Data via *certified* ground mail within the continental U.S. and when sent to a named individual.
7. Laptops and PDA. If End User is employing portable devices to transmit Confidential Data said devices must be encrypted and password-protected.
8. Open Wireless Networks. End User may not transmit Confidential Data via an open



wireless network. End User must employ a virtual private network (VPN) when remotely transmitting via an open wireless network.

9. Remote User Communication. If End User is employing remote communication to access or transmit Confidential Data, a virtual private network (VPN) must be installed on the End User's mobile device(s) or laptop from which information will be transmitted or accessed.
10. SSH File Transfer Protocol (SFTP), also known as Secure File Transfer Protocol. If End User is employing an SFTP to transmit Confidential Data, End User will structure the Folder and access privileges to prevent inappropriate disclosure of information. SFTP folders and sub-folders used for transmitting Confidential Data will be coded for 24-hour auto-deletion cycle (i.e. Confidential Data will be deleted every 24 hours).
11. Wireless Devices. If End User is transmitting Confidential Data via wireless devices, all data must be encrypted to prevent inappropriate disclosure of information.

III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

The Contractor will only retain the data and any derivative of the data for the duration of this Contract. After such time, the Contractor will have 30 days to destroy the data and any derivative in whatever form it may exist, unless, otherwise required by law or permitted under this Contract. To this end, the parties must:

A. Retention

1. The Contractor agrees it will not store, transfer or process data collected in connection with the services rendered under this Contract outside of the United States. This physical location requirement shall also apply in the implementation of cloud computing, cloud service or cloud storage capabilities, and includes backup data and Disaster Recovery locations.
2. The Contractor agrees to ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
3. The Contractor agrees to provide security awareness and education for its End Users in support of protecting Department confidential information.
4. The Contractor agrees to retain all electronic and hard copies of Confidential Data in a secure location and identified in section IV. A.2
5. The Contractor agrees Confidential Data stored in a Cloud must be in a FedRAMP/HITECH compliant solution and comply with all applicable statutes and regulations regarding the privacy and security. All servers and devices must have currently-supported and hardened operating systems, the latest anti-viral, anti-hacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a



whole, must have aggressive intrusion-detection and firewall protection.

6. The Contractor agrees to and ensures its complete cooperation with the State's Chief Information Officer in the detection of any security vulnerability of the hosting infrastructure.

B. Disposition

1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire data destroyed by the Contractor or any subcontractors as a part of ongoing, emergency, and or disaster recovery operations. When no longer in use, electronic media containing State of New Hampshire data shall be rendered unrecoverable via a secure wipe program in accordance with industry-accepted standards for secure deletion and media sanitization, or otherwise physically destroying the media (for example, degaussing) as described in NIST Special Publication 800-88, Rev 1, Guidelines for Media Sanitization, National Institute of Standards and Technology, U. S. Department of Commerce. The Contractor will document and certify in writing at time of the data destruction, and will provide written certification to the Department upon request. The written certification will include all details necessary to demonstrate data has been properly destroyed and validated. Where applicable, regulatory and professional standards for retention requirements will be jointly evaluated by the State and Contractor prior to destruction.
2. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to destroy all hard copies of Confidential Data using a secure method such as shredding.
3. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to completely destroy all electronic Confidential Data by means of data erasure, also known as secure data wiping.

IV. PROCEDURES FOR SECURITY

- A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:

1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.
2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

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3. The Contractor will maintain appropriate authentication and access controls to contractor systems that collect, transmit, or store Department confidential information where applicable.
4. The Contractor will ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
5. The Contractor will provide regular security awareness and education for its End Users in support of protecting Department confidential information.
6. If the Contractor will be sub-contracting any core functions of the engagement supporting the services for State of New Hampshire, the Contractor will maintain a program of an internal process or processes that defines specific security expectations, and monitoring compliance to security requirements that at a minimum match those for the Contractor, including breach notification requirements.
7. The Contractor will work with the Department to sign and comply with all applicable State of New Hampshire and Department system access and authorization policies and procedures, systems access forms, and computer use agreements as part of obtaining and maintaining access to any Department system(s). Agreements will be completed and signed by the Contractor and any applicable sub-contractors prior to system access being authorized.
8. If the Department determines the Contractor is a Business Associate pursuant to 45 CFR 160.103, the Contractor will execute a HIPAA Business Associate Agreement (BAA) with the Department and is responsible for maintaining compliance with the agreement.
9. The Contractor will work with the Department at its request to complete a System Management Survey. The purpose of the survey is to enable the Department and Contractor to monitor for any changes in risks, threats, and vulnerabilities that may occur over the life of the Contractor engagement. The survey will be completed annually, or an alternate time frame at the Departments discretion with agreement by the Contractor, or the Department may request the survey be completed when the scope of the engagement between the Department and the Contractor changes.
10. The Contractor will not store, knowingly or unknowingly, any State of New Hampshire or Department data offshore or outside the boundaries of the United States unless prior express written consent is obtained from the Information Security Office leadership member within the Department.
11. Data Security Breach Liability. In the event of any security breach Contractor shall make efforts to investigate the causes of the breach, promptly take measures to prevent future breach and minimize any damage or loss resulting from the breach. The State shall recover from the Contractor all costs of response and recovery from

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8/24/19



Exhibit K

DHHS Information Security Requirements

the breach, including but not limited to: credit monitoring services, mailing costs and costs associated with website and telephone call center services necessary due to the breach.

12. Contractor must, comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.
13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at <https://www.nh.gov/doi/vendor/index.htm> for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.
14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor will notify the State's Privacy Officer and the State's Security Officer of any security breach immediately, at the email addresses provided in Section VI. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.
15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.
16. The Contractor must ensure that all End Users:
 - a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.
 - b. safeguard this information at all times.
 - c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.
 - d. send emails containing Confidential Information only if encrypted and being sent to and being received by email addresses of persons authorized to receive such information.

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- e. limit disclosure of the Confidential Information to the extent permitted by law.
- f. Confidential Information received under this Contract and individually identifiable data derived from DHHS Data, must be stored in an area that is physically and technologically secure from access by unauthorized persons during duty hours as well as non-duty hours (e.g., door locks, card keys, biometric identifiers, etc.).
- g. only authorized End Users may transmit the Confidential Data, including any derivative files containing personally identifiable information, and in all cases, such data must be encrypted at all times when in transit, at rest, or when stored on portable media as required in section IV above.
- h. in all other instances Confidential Data must be maintained, used and disclosed using appropriate safeguards, as determined by a risk-based assessment of the circumstances involved.
- i. understand that their user credentials (user name and password) must not be shared with anyone. End Users will keep their credential information secure. This applies to credentials used to access the site directly or indirectly through a third party application.

Contractor is responsible for oversight and compliance of their End Users. DHHS reserves the right to conduct onsite inspections to monitor compliance with this Contract, including the privacy and security requirements provided in herein, HIPAA, and other applicable laws and Federal regulations until such time the Confidential Data is disposed of in accordance with this Contract.

V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

The Contractor must further handle and report Incidents and Breaches involving PHI in accordance with the agency's documented Incident Handling and Breach Notification procedures and in accordance with 42 C.F.R. §§ 431.300 - 306. In addition to, and notwithstanding, Contractor's compliance with all applicable obligations and procedures, Contractor's procedures must also address how the Contractor will:

1. Identify Incidents;
2. Determine if personally identifiable information is involved in Incidents;
3. Report suspected or confirmed Incidents as required in this Exhibit or P-37;
4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and



5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

Incidents and/or Breaches that implicate PI must be addressed and reported, as applicable, in accordance with NH RSA 359-C:20.

VI. PERSONS TO CONTACT

A. DHHS Privacy Officer:

DHHSPrivacyOfficer@dhhs.nh.gov

B. DHHS Security Officer:

DHHSInformationSecurityOffice@dhhs.nh.gov

LU

8/26/19

State of New Hampshire

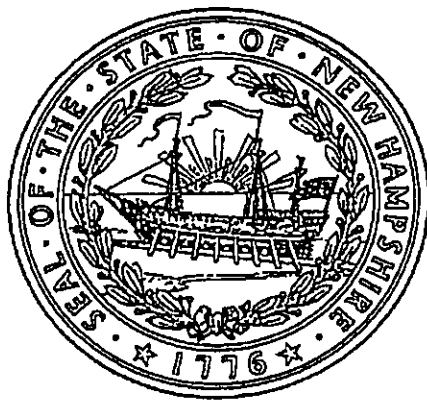
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that JSI RESEARCH & TRAINING INSTITUTE, INC. is a Massachusetts Nonprofit Corporation registered to transact business in New Hampshire on February 17, 2016. 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: 739507

Certificate Number : 0004519471



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 23rd day of May A.D. 2019.

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

William M. Gardner
Secretary of State

State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that COMMUNITY HEALTH INSTITUTE is a New Hampshire Trade Name registered to transact business in New Hampshire on April 12, 2016. 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: 742096

Certificate Number : 0004519464



IN TESTIMONY WHEREOF,
I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 23rd day of May A.D. 2019.

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

William M. Gardner
Secretary of State

CERTIFICATE OF VOTE/AUTHORITY

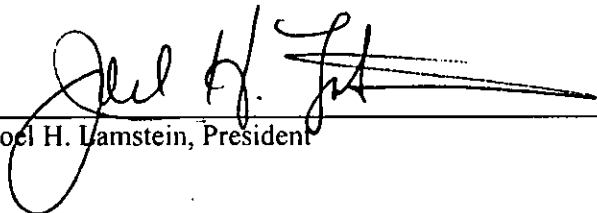
I, Joel H. Lamstein, of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute, do hereby certify that:

1. I am the duly elected President of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute;
2. By Unanimous Consent in Writing of the Board of Directors in Lieu of the 2008 Annual Meeting, the following is true copy of one resolution duly adopted by the Board of Directors of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute, duly dated October 24, 2008;

RESOLVED: Appointment of Jonathan Stewart as Director of the Community Health Institute with the authority to enter into contracts and agreements binding the Corporation.

3. I further certify that the foregoing resolutions have not been amended or revoked and remain in full force and effect as of August 26, 2019

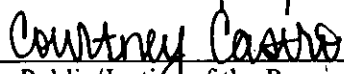
IN WITNESS WHEREOF, I have hereunto set my hand as the President of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute this 26th day of August 2019



Joel H. Lamstein, President

STATE OF New Hampshire
COUNTY OF Merrimack

The foregoing instrument was acknowledged before me this 8/26/19 by Joel H. Lamstein.



Notary Public/Justice of the Peace
My Commission Expires: COURTNEY A. GASTRO, Notary Public
My Commission Expires November 8, 2022





JOHNSNO-01

DMEANEY

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/9/2019

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).

PRODUCER Mason & Mason Technology Insurance Services, Inc. 458 South Ave. Whitman, MA 02382	CONTACT NAME: Judy Yeary	
	PHONE (A/C, No, Ext): (781) 447-5531	FAX (A/C, No): (781) 447-7230
	E-MAIL ADDRESS: jyeary@masoninsure.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Great Northern Insurance Co.	20303
INSURED John Snow Inc. JSI Research & Training Institute, Inc. World Education, Inc. 44 Farnsworth Street Boston, MA 02210-1206	INSURER B: Federal Insurance Company	20281
	INSURER C: Executive Risk Indemnity	35181
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL 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			35873320	9/9/2019	9/9/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPIOP AGG \$ Included
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: Combined Agg \$10M						
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			73546634	9/9/2019	9/9/2020	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			79861066	9/9/2019	9/9/2020	EACH OCCURRENCE \$ 20,000,000 AGGREGATE \$ 20,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	71733182	9/9/2019	9/9/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
C	ERRORS & OMISSIONS			82120859	11/30/2018	11/30/2019	GENERAL AGGREGATE \$ 2,000,000
B	DIRECTORS & OFFICERS			81595534	11/30/2018	11/30/2019	EACH OCC/GEN AGG \$ 3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Blanket Additional Insured status is granted to the Certificate Holder with respect to Commercial General Liability ONLY IF required in written contract and per the terms and conditions of Chubb CGL form 80-02-2367

CERTIFICATE HOLDER

CANCELLATION

NH Department of Health and Human Services 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

JSI Research and Training Institute Inc.

Mission Statement

JSI Research and Training Institute was incorporated in 1987 as a 501©3 non-profit organization in the Commonwealth of Massachusetts. Our mission is to alleviate public health problems both in the United States and in developing countries around the world through applied research, technical assistance and training. JSI maintains offices in Boston, Massachusetts; Washington, D.C.; Denver, Colorado and Bow, New Hampshire; as well as seven overseas offices in developing nations. Since its inception, JSI has successfully completed more than 400 contracts in the health and human service fields.

Community Health Institute

Mission Statement

The Community Health Institute's mission is to support and strengthen New Hampshire's health care system by providing coordinated information dissemination and technical assistance resources to health care providers, managers, planners, and policy makers, statewide. Our success translates into improved access to quality health and social services for all New Hampshire residents.

**JSI RESEARCH AND TRAINING INSTITUTE, INC.
AND
AFFILIATE**

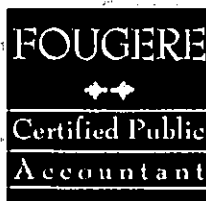
**Audited Consolidated Financial Statements and Reports
Required by Government Auditing Standards and the Uniform Guidance**

September 30, 2018

**JSI Research and Training Institute, Inc. and Affiliate
September 30, 2018**

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INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
JSI Research and Training Institute, Inc. and Affiliate

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of JSI Research and Training Institute, Inc. and Affiliate (both non-profit organizations), which comprise the consolidated statement of financial position as of September 30, 2018, and the related consolidated statements of activities, functional expenses, and cash flows for the year 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 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 consolidated financial statements are free of 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.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of JSI Research and Training Institute, Inc. and Affiliate as of September 30, 2018, and the changes in their net assets and their cash flows for the year 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 taken as a whole.

Report on Summarized Comparative Information

We have previously audited the JSI Research and Training Institute, Inc. and Affiliate consolidated financial statements, and we expressed an unmodified opinion on those audited financial statements in our report dated April 23, 2018. In our opinion, the summarized consolidated comparative information presented herein as of and for the year ended September 30, 2017 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued a report dated May 1, 2019, on our consideration of JSI Research and Training Institute, Inc. and Affiliate's internal control over financial reporting and on our tests of their 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 JSI Research and Training Institute, Inc. and Affiliate'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 JSI Research and Training Institute, Inc. and Affiliate's internal control over financial reporting and compliance.

A handwritten signature in black ink, reading "Matthew R. Fugere CPA". The signature is written in a cursive style with a large initial "M".

Duxbury, Massachusetts
May 1, 2019

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF FINANCIAL POSITION
September 30, 2018
(With Comparative Totals for 2017)

	2018	2017
ASSETS		
Current Assets:		
Cash and cash equivalents	\$ 76,856,647	\$ 74,642,976
Receivables for program work	20,895,129	19,782,268
Field advances - program	631,877	1,697,407
Employee advances	190,734	190,500
Prepaid expenses	3,807	67,950
Total Current Assets	98,578,194	96,381,101
Property and Equipment:		
Furniture and equipment	679,098	679,098
Leasehold improvements	30,355	30,355
	709,453	709,453
Less: Accumulated depreciation	(671,248)	(651,423)
Net Property and Equipment	38,205	58,030
Other Assets		
	146,741	119,888
TOTAL ASSETS	\$ 98,763,140	\$ 96,559,019
 LIABILITIES AND NET ASSETS		
Current Liabilities:		
Accounts payable and payroll withholdings	\$ 16,128,795	\$ 11,678,687
Accrued vacation	1,810,950	1,920,964
Advances for program work	27,130,737	35,095,465
Loans payable - related party	369,577	196,828
Notes payable	-	-
Contingencies	-	-
Total Current Liabilities	45,440,059	48,891,944
Net Assets:		
Unrestricted	53,065,872	47,467,027
Temporarily restricted	257,209	200,048
Total Net Assets	53,323,081	47,667,075
TOTAL LIABILITIES AND NET ASSETS	\$ 98,763,140	\$ 96,559,019

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF ACTIVITIES
Year Ended September 30, 2018
(With Comparative Totals for 2017)

	2018	2017
UNRESTRICTED NET ASSETS:		
Public Support and Revenue		
Public Support:		
Government grants and contracts:		
U.S. Government	\$ 253,443,526	\$ 271,426,627
Commonwealth of Massachusetts	6,104,553	5,258,877
Other grants and contracts	67,653,412	57,926,891
Program income	148,646	99,859
Contributions	3,802,515	332,613
In-kind project contributions	2,600,580	14,444,516
Interest income	359,495	121,168
Total Unrestricted Support and Revenue	334,112,727	349,610,551
Expenses		
Program Services:		
International programs	274,067,835	293,709,946
Domestic programs	20,894,935	19,653,591
Total Program Services	294,962,770	313,363,537
Supporting Services:		
Management and General	33,264,070	33,327,219
Fundraising	229,881	149,914
Total Supporting Services	33,493,951	33,477,133
Total Expenses	328,456,721	346,840,670
Increase (Decrease) in Unrestricted Net Assets	5,656,006	2,769,881
TEMPORARILY RESTRICTED NET ASSETS		
Program restricted net assets	-	32,840
Increase (decrease) in temporarily restricted net assets	-	32,840
Increase (decrease) in net assets	5,656,006	2,802,721
Net Assets at Beginning of Year	47,667,075	44,864,354
Net Assets at End of Year	\$ 53,323,081	\$ 47,667,075

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
Year Ended September 30, 2018
(With Comparative Totals for 2017)

	PROGRAM SERVICES			SUPPORTING SERVICES			TOTAL EXPENSES	
	International Programs	Domestic Programs	Total	Management And General	Fundraising	Total	2018	2017
Salaries	\$ 25,490,819	\$ 8,391,315	\$ 33,882,134	\$ 6,151,025	\$ 140,554	\$ 6,291,579	\$ 40,173,713	\$ 40,871,378
Consultants	15,089,802	5,292,500	20,382,302	1,688,340	5,250	1,693,590	22,075,892	22,364,241
Cooperating National Salaries	48,291,700	340	48,292,040	567,964	-	567,964	48,860,004	36,610,983
Travel	11,852,184	874,172	12,726,356	467,576	141	467,717	13,194,073	14,094,230
Allowance & Training	10,944,826	63,463	11,008,289	143,043	-	143,043	11,151,332	10,422,764
Sub-contracts	109,851,141	4,499,510	114,350,651	18,351	22,438	40,789	114,391,440	127,851,455
Equipment, Material and Supplies	9,786,037	164,421	9,950,458	220,300	-	220,300	10,170,758	14,425,484
Other Costs	40,160,746	1,609,214	41,769,960	23,987,646	61,498	24,049,144	65,819,104	65,738,817
In-kind project expenses	2,600,580	-	2,600,580	-	-	-	2,600,580	14,444,516
Depreciation	-	-	-	19,825	-	19,825	19,825	16,802
TOTAL EXPENSE	\$ 274,067,835	\$ 20,894,935	\$ 294,962,770	\$ 33,264,070	\$ 229,881	\$ 33,493,951	\$ 328,456,721	\$ 346,840,670

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF CASH FLOWS
Year Ended September 30, 2018
(With Comparative Totals for 2017)

	<u>2018</u>	<u>2017</u>
Cash Flows From Operating Activities:		
Increase (Decrease) in net assets	\$ 5,656,006	\$ 2,802,721
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	19,825	16,802
(Increase) Decrease in receivables for program work	(1,112,861)	(1,284,050)
(Increase) Decrease in field advances - program	1,065,530	(26,655)
(Increase) Decrease in employee advances	(234)	85,513
(Increase) Decrease in prepaid expenses	64,143	(67,950)
(Increase) Decrease in other assets	(26,853)	(10,830)
Increase (Decrease) in accounts payable and payroll withholdings	4,450,108	804,812
Increase (Decrease) in accrued vacation	(110,014)	96,527
Increase (Decrease) in advances for program work	<u>(7,964,728)</u>	<u>4,453,041</u>
Net Cash Provided (Used) By Operating Activities	2,040,922	6,869,931
Cash Flows From Investing Activities:		
Loans made	(196,828)	(1,001,492)
Loans repaid	369,577	196,828
Acquisition of property and equipment	<u>-</u>	<u>(42,606)</u>
Net Cash Provided (Used) By Investing Activities	<u>172,749</u>	<u>(847,270)</u>
Net Increase (Decrease) in Cash and Cash Equivalents	2,213,671	6,022,661
Cash and Cash Equivalents at Beginning of Year	<u>74,642,976</u>	<u>68,620,315</u>
Cash and Cash Equivalents at End of Year	<u>\$ 76,856,647</u>	<u>\$ 74,642,976</u>

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
September 30, 2018

NOTE 1 – ORGANIZATION AND NATURE OF ACTIVITIES

JSI Research and Training Institute, Inc. was incorporated in the Commonwealth of Massachusetts on April 11, 1979. JSI Research and Training Institute, Inc. provides education and research primarily to non-profit health and human service agencies both in the United States and abroad. Current funding is principally from the United States Agency for International Development and the United States Department of Health and Human Services (HHS).

JSI Research and Training Institute, Inc. is the sole member of World Education, Inc. (Affiliate) with such powers as are typically accorded to a sole member including the power of appointment and removal of the World Education, Inc. board of trustees, the right to approve amendments to the bylaws and certificate of incorporation of World Education, Inc., and the right to approve any merger, consolidation, dissolution or transfer of substantial assets of World Education, Inc.

World Education, Inc. (Affiliate) was founded in 1951 and incorporated in the state of New Jersey. Working in partnership with community, national, and international agencies in Asia, Africa, and the United States, it provides professional assistance in the design and implementation of non-formal adult education programs. These programs integrate functional education with relevant problem-solving aspects of individual growth and national development such as health, nutrition, family planning, childcare, refugee education, agricultural practices, literacy, and income generation.

JSI Research and Training Institute, Inc. and its affiliate are tax exempt organizations under 501 (c) (3) of the Internal Revenue Code and file separate unconsolidated tax returns.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Principles of Consolidation

The consolidated financial statements include the accounts of JSI Research and Training Institute, Inc. and World Education, Inc., its affiliate, (collectively referred to as the Organization). Significant intra-entity accounts and transactions have been eliminated in consolidation.

Basis of Accounting

The consolidated financial statements of the Organization have been prepared utilizing the accrual basis of accounting and include the accounts of JSI Research and Training Institute, Inc. and its affiliate in conformity with accounting principles generally accepted in the United States of America.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued

Use of Estimates

The preparation of consolidated 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 may differ from those estimates.

Fair Value

The Organization values its qualifying assets and liabilities under a fair value hierarchy that prioritizes the inputs and assumptions used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and liabilities and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Organization uses appropriate valuation techniques based on the available inputs to measure the fair value of its assets and liabilities. When available, the Organization measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

Cash and Cash Equivalents

The Organization considers all monies in banks and highly liquid investments with maturity dates of three months or less to be cash equivalents. The carrying value of cash and cash equivalents approximates fair value because of the short maturities of those financial instruments.

Investments

Investments in marketable securities with readily determinable fair values and all investments in debt securities (marketable investments) are measured at fair values based on quoted market prices in the consolidated statement of financial position. Unrealized gains and losses are included in the statement of activities.

Property and Equipment

Property and equipment are reported on the basis of cost less accumulated depreciation. Acquisitions of property and equipment in excess of \$5,000 are capitalized. Depreciation is computed using the straight-line method calculated to extinguish the book value of the respective assets over their estimated useful lives (5 - 7 years) of the related assets.

Revenue Recognition

The majority of the Organization's revenues are derived from contracts, cooperative agreements, and grants with U.S. government agencies, primarily the United States Agency for International Development and the United States Department of Health and Human Services. Revenues are recognized when the Organization incurs qualifying expenditures that are reimbursable under the terms of the contracts, agreements or grants, or in accordance with the grantor's restrictions.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued

Revenue Recognition - continued

Unrestricted and restricted contributions are recognized as revenue at the date the pledge is made or the gift is received, whichever is earlier.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Contributions are reported as temporarily restricted support and are then reclassified to unrestricted net assets upon expiration of the time restriction. Temporarily restricted support, whose restrictions are met in the same reporting period, is shown as unrestricted support.

Donated Materials and Services

Donated materials and services are recorded as in kind project contributions at their estimated fair market value as of the date of receipt and as an expense in the accompanying consolidated statement of activities. Donated services are recognized if the services received create or enhance non-financial assets or require specialized skills that are provided by individuals possessing those skills and would typically need to be purchased if not provided by donation.

Income Taxes

The Organization is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and is not a private foundation as described in Section 509. Accordingly, no provision for income taxes is included in the accompanying consolidated financial statements.

The Organization has evaluated its tax positions and believes that there would be no material changes to the results of its operations or financial position as a result of an audit by the applicable taxing authorities, federal or state. The Organization has filed all of its known and required returns in a timely manner including as permitted allowed extensions. Following administrative practice of the taxing authorities, the tax years 2015, 2016, 2017 and 2018, remain open years subject to examination and review.

JSI Research and Training Institute, Inc. and World Education, Inc. (Affiliate) file separate unconsolidated tax returns. JSI Research and Training Institute, Inc. files tax returns based on a September 30th year end and its affiliate files tax returns based on a June 30th year end.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the consolidated statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued

Financial Statement Presentation

In accordance with accounting principles generally accepted in the United States of America, the Organization reports information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets based upon the existence or absence of donor imposed restrictions. For the year ended September 30, 2018 there was no activity in permanently restricted net assets.

Prior Year Comparative Totals

The financial statements include prior-year summarized comparative information in total. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Company's financial statements for the year ended September 30, 2017, from which the summarized information was derived.

Reclassification

Certain amounts for 2017 have been reclassified to conform to current year presentation.

NOTE 3 – CONCENTRATION OF CREDIT RISK

The Organization maintains demand deposits and money market funds at financial institutions. At times, certain balances held in these accounts may not be fully guaranteed by the United States Government. The uninsured portions of cash and money market accounts are backed solely by the assets of the financial institution. Therefore, the failure of a financial institution could result in a financial loss to the Organization. However, the Organization has not experienced losses on these accounts in the past and management believes the risk of loss, if any, to be minimal.

NOTE 4 – INVESTMENTS

Fair Value

In accordance with accounting principles generally accepted in the United States of America, the Organization values its qualifying assets and liabilities under a fair value hierarchy that prioritizes the inputs and assumptions used to measure fair value. The three levels of the fair value hierarchy are as follows:

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 4 – INVESTMENTS - continued

Fair Value - continued

- *Level 1* – Observable inputs that reflect unadjusted quoted prices in active markets for identical assets or liabilities at the measurement date.
- *Level 2* – Inputs other than quoted prices in active markets that are observable for the asset either directly or indirectly, including inputs from markets that are not considered to be active.
- *Level 3* – Unobservable inputs which reflect the Organization’s assessment of the assumptions that market participants would use in pricing the asset or liability including assumptions about risk.

A qualifying asset or liability’s level within the framework is based upon the lowest level of any input that is significant to the fair value measurement.

The following is a summary of fair values of investments which are measured on a recurring basis using Level 1 inputs as recorded in the Consolidated Statement of Financial Position at September 30, 2018:

Current assets:

Cash and cash equivalents (invested)	\$ 63,194,532
	<u>\$ 63,194,532</u>

No assets or liabilities were measured at Level 2 or Level 3.

The following schedule summarizes the investment return and its classification in the Consolidated Statement of Activities for the year ended September 30, 2018:

	<u>Unrestricted</u>
Interest income	\$ 359,495
Total investment return	<u>\$ 359,495</u>

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 5 – RECEIVABLES FOR PROGRAM WORK

Receivables for program work are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectable amounts through a provision for bad debt expense and an adjustment to a valuation allowance based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. The allowance for doubtful accounts at September 30, 2018 was \$0.

Receivables for program work consist of the following at September 30, 2018:

U.S. Agency for International Development	\$ 12,911,645
U.S. Department of Health and Human Services	716,214
U.S. Department of State	2,219,003
Commonwealth of Massachusetts	847,669
Other - non-governmental	<u>4,200,598</u>
	<u>\$ 20,895,129</u>

NOTE 6 – LOANS RECEIVABLE – RELATED PARTY

Loans receivable – related party consist of various unsecured short-term loans, due on demand, from John Snow, Inc., a related party (See NOTE 17). No interest is charged on the loans. The loans receivable balance at September 30, 2018 is \$0.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 7 – PROPERTY AND EQUIPMENT AND ACCUMULATED DEPRECIATION

Property and equipment and accumulated depreciation account balances are as follows:

	Cost	Accumulated Depreciation	Net
Furniture and equipment	\$ 679,098	\$ (640,893)	\$ 38,205
Leasehold improvements	30,355	(30,355)	-
	\$ 709,453	\$ (671,248)	\$ 38,205

Depreciation expense was \$19,825 for the year ended September 30, 2018.

NOTE 8 – OTHER ASSETS

Other assets consist of the following at September 30, 2018:

Deposits	\$ 109,796
Artwork - donated	36,945
	\$ 146,741

Donated artwork is recorded at a discounted appraised value at the date of gift.

NOTE 9 – ACCRUED VACATION

In accordance with formal policies, vacation was accrued at September 30, 2018 as follows:

JSI Research and Training Institute, Inc.	\$ 1,546,016
World Education, Inc. (Affiliate)	264,934
	\$ 1,810,950

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 10 – ADVANCES FOR PROGRAM WORK

Advances for program work consist of the following at September 30, 2018:

Other - non-governmental	
Partnership for Supply Chain Management, Inc. (related party)	\$ 91,723
Bill & Melinda Gates Foundation	20,858,284
Other	<u>6,180,730</u>
	<u>\$ 27,130,737</u>

NOTE 11 – LOANS PAYABLE – RELATED PARTY

Loans payable – related party consist of various unsecured short-term loans, payable on demand, from John Snow, Inc., a related party (See NOTE 17). No interest is charged on the loans. The loans payable balance at September 30, 2018 is \$369,577.

NOTE 12 – NOTES PAYABLE

Citizens Bank

World Education, Inc. (Affiliate) has a revolving line of credit established February 3, 2004 with Citizens Bank of Massachusetts with a borrowing limit of up to \$500,000. The revolving line of credit was renewed on September 10, 2018. The loan is payable on demand. Interest is charged by utilizing a fluctuating rate based on the LIBOR (Advantage) rate plus 2.50%. The line of credit remains in effect until May 31, 2019 and annually thereafter contingent upon performance. The loan is collateralized by a first priority interest in all the assets of World Education, Inc. No funds were borrowed during the year and as a result, as of September 30, 2018, the outstanding balance is \$0 and no interest was incurred on this loan during the year ended September 30, 2018.

John Snow, Inc.

World Education, Inc. (Affiliate) has an unsecured revolving line of credit established September 1, 2007 with John Snow, Inc. (a related party) with a borrowing limit of up to \$1,000,000. The loan was renewed on July 1, 2016. Interest is charged by utilizing a fluctuating rate based on the current prime rate plus 0.25%. The loan is payable on demand and, in any event, on or prior to June 30, 2018. The loan is not collateralized. No funds were borrowed during the year and as a result, as of September 30, 2018, the outstanding balance is \$0. No interest was incurred on this loan during the year ended September 30, 2018. (See NOTE 17)

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 13 – CONTINGENCIES

In accordance with the terms of its federal and state grants and contracts, the records of the Organization are subject to audit. The Organization is, therefore, contingently liable for any disallowed costs. Management believes that any adjustment, which might result from such an audit, would be immaterial.

JSI Research and Training Institute, Inc. is a co-borrower (with a related party) of a demand loan with no balance due at September 30, 2018. Management believes that the co-borrower is current on the loan and that its collateral exceeds the balance due. (See NOTE 17)

Provisional indirect cost rates are negotiated with the United States Agency for International Development (AID) on an annual basis. As of September 30, 2018, actual indirect cost rates have been approved by AID for JSI Research and Training Institute, Inc. through December 31, 2012 and World Education, Inc. through June 30, 2015. Based on favorable past experience, management believes the effects of changes to the overhead rates, if any, would not be material to the financial statements.

NOTE 14 – TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets are restricted by donors as follows at September 30, 2018:

Program Services	<u>\$ 257,209</u>
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During the year ended September 30, 2018, \$5,000 of temporarily restricted net assets were released from donor restriction by occurrence of events specified by the donor.

NOTE 15 – SURPLUS REVENUE RETENTION

In accordance with the Massachusetts Division of Bureau Services, Regulation 808 CMR 1.03(7), "if, through cost savings initiatives implemented consistent with programmatic and contractual obligations, a non-profit Contractor accrues an annual net surplus from the revenues and expenses associated with services provided to Departments which are subject to 808 CMR 1.00, the Contractor may retain, for future use, a portion of that annual surplus not to exceed 20% of said revenues. Surpluses may be used by the Contractor for any of its established charitable purposes, provided that no portion of the surplus may be used for any non-reimbursable cost set forth in 808

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 15 – SURPLUS REVENUE RETENTION - continued

CMR 1.05, the free care prohibition excepted. Operational Services Division shall be responsible for determining the amount of surplus that may be retained by each Contractor in any given year and may determine whether any excess surplus shall be used to reduce future prices or be recouped.”

For the year ended September 30, 2018, the organization did not have an annual net surplus that exceeded 20% of relevant Massachusetts revenues.

NOTE 16 – COMMONWEALTH OF MASSACHUSETTS

The following is a schedule of expenditures with the Commonwealth of Massachusetts:

Receivables from program work at October 1, 2017	\$ 584,391
Receipts	(5,841,275)
Disbursements/expenditures	<u>6,104,553</u>
Receivables from program work at September 30, 2018	<u>\$ 847,669</u>

NOTE 17 – RELATED PARTY TRANSACTIONS

John Snow, Inc.

JSI Research and Training Institute, Inc. (an exempt organization) and John Snow, Inc. (a non-exempt corporation) purchase consulting services from each other. Mr. Joel Lamstein is President and Director of both organizations, and is the sole stockholder of John Snow, Inc. The two companies bill each other at the same rates that they bill the federal and state governments.

During the year ended September 30, 2018, John Snow, Inc. billed JSI Research and Training Institute, Inc. \$30,676,239 for consulting services (technical support). This amount is reflected under the program services - consulting line item (\$16,769,197) and program services - other costs line item (\$13,907,042) on the statement of functional expenses. In addition, JSI Research and Training Institute, Inc. performed consulting services (technical support) for John Snow, Inc. totaling \$7,179,908.

The two companies also share facilities and pool various overhead expenses. For the year ended September 30, 2018, JSI Research and Training Institute, Inc. incurred \$26,038,286 of overhead expenses (supporting services), of which \$10,220,583 was its share of John Snow, Inc. incurred costs.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 17 – RELATED PARTY TRANSACTIONS – continued

John Snow, Inc. - continued

JSI Research and Training Institute, Inc. is a co-borrower with John Snow, Inc. on a commercial demand loan-revolving line of credit with an expiration date of May 31, 2019, which allows for borrowings up to \$6,500,000. The loan is collateralized by a security agreement with a first position lien on all corporate assets of JSI Research and Training Institute, Inc. and John Snow, Inc. including assignment of promissory notes and security documents between the two companies. Interest is charged by utilizing a fluctuating rate based on LIBOR (Advantage) plus two percent (2.00%) payable monthly in arrears, which at September 30, 2018 was 4.176%. At September 30, 2018, a balance of \$0 was outstanding on the loan. Management believes the loan payable will be extended, when due, under similar terms and conditions.

During the year, the Company had various loans receivable due from, and various loans payable due to John Snow, Inc. At September 30, 2018, the loan receivable balance is \$0 and the loan payable balance is \$369,577.

World Education, Inc. (Affiliate) has an agreement with John Snow, Inc. whereby John Snow, Inc. will provide administrative and technical support as deemed necessary by World Education, Inc.'s Board of Trustees. Transactions with John Snow, Inc. for the year ended September 30, 2018 are summarized as follows:

Administrative and technical support	\$ 1,549,343
Other direct charges (including rent of \$892,543)	<u>1,276,616</u>
	<u>\$ 2,825,959</u>

The agreement is on a year-to-year basis and can be terminated by either party upon ninety days written notice to the other.

World Education, Inc. has an unsecured line of credit with John Snow, Inc. with a borrowing limit of up to \$1,000,000. (See NOTE 12)

Partnership for Supply Chain Management, Inc.

Partnership for Supply Chain Management, Inc. (PSCM) (an exempt organization) was incorporated on February 14, 2005 by JSI Research and Training Institute, Inc. and Management Sciences for Health, Inc. Each organization has 50% control.

PSCM has been awarded a U.S. government contract to procure and deliver life-saving medicines and medical supplies to treat HIV/AIDS patients worldwide. The contract for the Supply Chain Management System project was awarded through the U.S. Agency for the International

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 17 – RELATED PARTY TRANSACTIONS – continued

Partnership for Supply Chain Management, Inc. – continued

Development as part of the U.S. government's \$15 billion President's Emergency Plan for AIDS Relief.

Mr. Joel Lamstein, President and Director of JSI Research and Training Institute, Inc., is President and Director of PSCM.

During the year ended September 30, 2018, JSI Research and Training Institute, Inc. billed PSCM \$6,504,555 for services performed.

Other

The Organization has an agreement with a certain related company to purchase services. Transactions with this company were charged to sub-contracts expense and are as follows:

The Manoff Group, Inc. (a non-exempt corporation; 40% owned by John Snow, Inc.)	\$ <u>539,027</u>
	\$ <u>539,027</u>

NOTE 18 – RETIREMENT PLANS

JSI Research and Training Institute, Inc. has a defined contribution profit sharing/401(K) plan covering substantially all its employees. Employee contributions are voluntary. As of June 30, 2018, employer contributions were based on a percentage (10% - 15% depending on length of service) of salary. As of July 1, 2018, the Company contributes an amount equal to 7% of the employee's monthly earnings, funded with each month's payroll. In addition, employees will receive a 100% match on the first 2% of contributions made to their retirement account. Employees who are contributing less than 2% of their pay to their retirement account will automatically be enrolled at 2% either at the time of hire, or annually in July. The Plan was effective April 11, 1979. Pension expense was \$4,363,861 for the year ended September 30, 2018.

World Education, Inc. (Affiliate) provides retirement benefits to substantially all employees under a plan. World Education, Inc.'s contributions of 7 percent of employee salaries are used to purchase individual annuities. Additional voluntary contributions may be made by the employees. Participants of the plan are fully and immediately vested when contributions are made. Pension costs incurred by World Education, Inc. were \$357,246 for the year ended September 30, 2018.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 19 – COMMITMENTS

Operating Leases

The JSI Research and Training Institute, Inc. leases space for general offices under operating leases expiring from 2019 through 2026. The leases contain renewal options for periods of up to 5 years.

During the year ended September 30, 2018, rentals under long-term lease obligations were \$539,464. Future obligations over the primary terms of the Company's long-term leases as of September 30, 2018 are:

<u>Year Ended September 30,</u>	
2019	\$ 2,594,650
2020	2,777,736
2021	2,888,057
Thereafter	<u>1,481,270</u>
	<u>\$ 9,741,713</u>

World Education, Inc. (Affiliate) leases space for general offices on a year-to-year basis. Rent expense for the year ended September 30, 2018 was \$892,543.

NOTE 20 – CONCENTRATION OF FUNDING

The Organization receives a majority of its funding through contracts and grants with various departments and agencies of the Federal government.

The Organization received 10% or more of its revenues and support from the following sources for the year ended September 30, 2018:

	<u>Income Received</u>	<u>% of Total Income</u>
U.S. Agency for International Development	\$ 199,317,085	59.66%

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2018

NOTE 21 – IN KIND PROJECT CONTRIBUTIONS

The Organization receives donated materials and services consisting of commodities, facilities and equipment, and services for use in its programs from overseas collaborative private voluntary organizations and from foundations providing grants directly to a project. Donated materials and services totaled \$2,600,580 for the year ended September 30, 2018, and are reflected as In Kind Project Contributions on the Consolidated Statement of Activities and In Kind Project Expenses on the Consolidated Statement of Functional Expenses.

These contributions satisfy part of the matching requirements needed to obtain full funding on certain U.S. Agency for International Development grants. During the year ended September 30, 2018, the following donated materials and services received by the Organization have been used to fulfill matching requirements on active grants:

36697	SPRING	\$ 180,342
36800	Advancing Partners	524,822
36895	Mozambique M-SIP	14,403
37024	Tanzania CHSS	267,610
37095	Myanmar UNCF-MM-QOC	45,638
37134	Timor Leste RBHS	25,241
37162	Ghana HIV/AIDS	139,034
37186	Madagascar CCH	169,507
37260	Ethiopia CBNC 3	18,354
37265	Ethiopia TRANSFORM	262,587
63114	Uganda	57,043
64057	Zimbabwe	242,586
64062	Uganda	41,226
64071	OUTCOMES	308,063
64074	Mozambique	304,124
		<u>\$ 2,600,580</u>

NOTE 22 – SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through May 1, 2019, the date on which the consolidated financial statements were available to be issued. During this period, there were no subsequent events that require adjustment to the consolidated financial statements.

Supplementary Information

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT:				
Direct Grants:				
36521 - Uganda HIV/AIDS/TB	617-A-00-09-00007-00	98.001	\$ -	\$ 151
36697 - SPRING	AID-OAA-A-11-00031	98.001	-	10,076,548
36702 - Nepal CHX Cord Care	AID-OAA-A-11-00073	98.001	-	235,961
36800 - Advancing Partners	AID-OAA-A-12-00047	98.001	22,766,072	46,458,820
36845 - Pakistan HSSP	AID-391-A-13-00002	98.001	(437)	1,973,985
36895 - Mozambique M-SIP	AID-656-A-13-00006	98.001	-	1,584,313
36991 - AIDSFREE	AID-OAA-A-14-00046	98.001	36,748,664	62,188,777
37024 - Tanzania CHSS	AID-621-A-14-00004	98.001	650,551	5,755,790
37129 - Zambia Discover Health	AID-611-A-16-00004	98.001	1,569,350	22,602,341
37134 - Timor Leste RBHS	AID-472-A-16-00001	98.001	-	1,432,785
37162 - Ghana HIV/AIDS	AID-641-A-16-00007	98.001	1,234,077	3,756,222
37186 - Madagascar CCH	AID-687-A-16-00001	98.001	348,946	6,506,222
37356 - Building Healthy Cities	AID-OAA-A-17-00028	98.001	181,987	651,121
37360 - Pakistan IHSS - SD	AID-391-A-17-00002	98.001	1,007,706	3,094,096
37437 - OFDA CB	720FDA18GR00039	98.001	-	44,792
37462 - USAID Advancing Nutrition	7200AA18C00070	98.001	-	156,413
Total Direct Grants - CFDA #98.001			64,506,916	166,518,337
Pass-through Grants:				
Passed through Partnership for Supply Chain Management, Inc. (PSCM):				
36519/36524/37034/37053/37150 - Supply Chain Management System	GPO-I-00-05-00032-00	98.001	-	4,424,112
Passed through Johns Hopkins University:				
37099 - Ethiopia SBCC	AID-663-A-15-000011	98.001	-	(6,382)
Passed through Pathfinder International:				
37265 - Ethiopia TRANSFORM	AID663A1700002	98.001	-	7,423,425
Passed through Program for Appropriate Technology in Health:				
37301 - Open LMIS - Phase I	AID.2134-01555716-CR	98.001	-	698
37434 - GOFR Connect	AID0AA-A-16-00084	98.001	-	17,020
Passed through The National Cooperative Business Association:				
37375 - Senegal FTF Cult Nt	72068518CA00001	98.001	-	281,712

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT:				
Pass-through Grants (continued):				
Passed through Baylor College of Medicine:				
37408 - Baylor SZ MIS	AID-674-A-116-0003	98.001	-	134,703
Passed through United Nations Foundation:				
37464 - DIAL Open CMIS	AID-OAA-A-14-00067	98.001	-	204
Total Pass-through Grants - CFDA #98.001			-	12,275,492
Total - CFDA #98.001 - USAID Foreign Assistance for Programs Overseas			64,506,916	178,793,829
TOTAL - U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT			\$ 64,506,916	\$ 178,793,829
 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:				
Direct Grant:				
37087 - Adolescent HIV/AIDS Prevention	MA1AH000001	93.057	\$ -	\$ 283,156
Total CFDA #93.057 - National Resource Center for HIV Prevention Among Adolescents			-	283,156
Pass-through Grants:				
Passed through Connecticut Dept. of Public Health:				
37160 - CT QI Asthma Program	Log# 2016-0099	93.070	-	25,827
Passed through State of Vermont:				
37212 - VT HPDP Evaluation	Contract #31786	93.070	-	27,836
Passed through Rhode Island Dept. of Health:				
37344 - Tick Free RI Branding	N/A	93.070	-	10,826
Passed through New Hampshire Dept. of HHS:				
37429 - NH Consulting	Agreement @ 6/13/18	93.070	-	2,497
Total CFDA #93.070 - Environmental Public Health and Emergency Response			-	66,986

JSI Research and Training Institute, Inc.
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Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Pass-through Grants:				
Passed through State of New Hampshire:				
37407 - NCW - HERC	Agreement @ 2/20/18	93.074	-	5,059
Total CFDA #93.074 - Hospital Preparedness Program				5,059
Direct Grant:				
36967 - Healthy Start	UFSMC26845-05-00	93.110	-	136,940
Total CFDA #93.110 - Maternal and Child Health Federal Consolidated Programs				136,940
Direct Grants:				
37103 - HITEQ	U30CS29366	93.129	-	949,607
37363 - CHCACT UDS 2017	N/A	93.129	-	3,158
Total CFDA #93.129 - Technical and Non-Financial Assistance to Health Centers				952,765
Pass-through Grant:				
Passed through State of Maine:				
37376 - ME DHHS HPSA	CDO-18-2215	93.130	-	47,755
Total CFDA #93.130 - Cooperative Agreements to States/Territories for the Coordination and Devel. Of Primary Care Offices				47,755
Pass-through Grant:				
Passed through Boston Medical Center:				
37397 - Project.RECOVER Evaluation	N/A	93.137	-	31,047
Total CFDA #93.137 - Community Programs to Improve Minority Health Grant Program				31,047
Pass-through Grant:				
Passed through Dartmouth Toxic Metals:				
37297 - Dartmouth Arsenic Site	APW/DTMSRP/4.17.17	93.143	-	10,083
Total CFDA #93.143 - NIEHS Superfund Hazardous Substances-Basic Research and Education				10,083
Pass-through Grant:				
Passed through State of Vermont.:				
37212 - VT HPDP-Evaluation	Contract #31786	93.184	-	3,803
Total CFDA #93.184 - Disabilities Prevention				3,803

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Pass-through Grants:				
37163 - FamPlan Data Systems FY16	Agreement @ 3/1/16	93.217	-	7,166
37255 - UMASS Data Extract	N/A	93.217	-	489
37281 - FamPlan Data Systems	N/A	93.217	-	83,374
37313 - ABCD FP System FY18	APW/ABCD/5.31.17	93.217	-	47,904
37387 - NYS FP Training	DOH01-C3322966-34500	93.217	-	102,544
37390 - NH FP Data Systems FY18	05-95-90-902010-5530	93.217	-	7,485
37420 - FamPlan Data Systems	Agreement @ 3/1/18	93.217	-	68,704
37450 - RI FP Data Systems FY19	Agreement @ 5.1.18	93.217	-	12,778
Total CFDA #93.217 - Family Planning Services			-	330,444
Pass-through Grants:				
Passed through Community Health Institute and Harbor Homes, Inc.:				
37042 - Harbor Homes Inc.		93.243	-	3,085
Passed through State of Rhode Island:				
37107 - PFS II	3426881	93.243	-	74,803
Passed through State of New Hampshire:				
37133 - HCDC Evaluation	Agreement @ 10/01/15	93.243	-	32,898
37151 - NH DMH Client Survey	Agreement @ 01/13/16	93.243	-	74,712
Passed through State of Vermont:				
37212 - VT HPDP Evaluation	Contract #31786	93.243	-	22,224
Passed through Savannah State University:				
37286 - HS Atlanta Consulting	Email 7/28/17	93.243	-	1,057
Passed through Substance Abuse Center:				
37300 - RI Healthy Trans		93.243	-	34
37463 - NHIS - @MCHC Launch	Agreement @ 9/5/18	93.243	-	965
Total CFDA #93.243 - Substance Abuse and Mental Health Services Projects of Regional and National Significance			-	209,778
Direct Grant:				
37223 - Family Planning National Training Center for Service Delivery Improvement	FPTPA006028	93.260	1,085,862	4,350,177
Total CFDA #93.260 - Family Planning - Personnel Training			1,085,862	4,350,177

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Direct Grant:				
37321 - HRSA RRHO	UH5HA30789	93.266	-	673,717
Total CFDA #93.266 - Health Systems Strengthening and HIV/AIDS Prevention, Care and Treatment under the President's Emergency Plan for AIDS Relief				
			-	673,717
Pass-through Grants:				
Passed through Narragansett Prevention Partnership:				
37148 - NPP Evaluation	Agreement @ 1-01-16	93.276	-	11,919
Passed through City of Franklin, NH:				
37290 - FMDTF DFC Eval	APW/COF/1.5.17	93.276	-	2,500
37419 - FMDTF Eval 17-18	Agreement @ 1/31/18	93.276	-	5,399
37429 - NH Consulting	Agreement @ 8.21.18	93.276	-	1,089
Passed through Mary Hitchcock Memorial Hospital:				
37324 - Upper Valley DFC Eval	Agreement @ 3-29-17	93.276	-	9,460
Total CFDA #93.276 - Drug-free Communities Support Program Grants				
			-	30,367
Pass-through Grants:				
Passed through State of Vermont:				
37212 - VT HPDP Evaluation	Contract #31786	93.283	-	4,821
37229 - VTOHC Support	32307	93.283	-	12,236
Total - CFDA #93.283 - Centers for Disease Control and Prevention - Investigations and Technical Assistance				
			-	17,057
Direct Grant:				
36891 - PPHF 2013 - OSTLTS Partnerships	1U380T000188	93.292	-	77,068
Total - CFDA #93.292 - National Public Health Improvement Initiative				
			-	77,068

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

<u>Federal Grantor/Pass-through Grantor Program Title</u>	<u>Agency or Pass-through Number</u>	<u>Federal CFDA Number</u>	<u>Passed Through to Subrecipients</u>	<u>Federal Expenditures</u>
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Pass-through Grants:				
Passed through Vermont Department of Health:				
37212 - Vermont Health Evaluation	Contract #31786	93.305	-	70,381
Passed through New Hampshire Dept. of Health and Human Services:				
37435 - ENDS SFY18	RFP-2018-DPHS-18-TOBAC	93.305	-	61,873
37436 - Workforce Development	RFP-2018-DPHS-26-WPRKF	93.305	-	30,252
Passed through National Jewish Health:				
37438 - Tobacco 19 QuitNow - NH	Agreement @ 5/18/18	93.305	-	8,301
Total - CFDA #93.305 - Nat. State Based Tobacco Control Program				170,807
Pass-through Grant:				
Passed through Hampton University:				
37442 - Hampton University	N/A	93.307	-	7,894
Total - CFDA #93.307 - Minority Health and Health Disparities Research				7,894
Pass-through Grant:				
Passed through Council of State and Territorial Epidemiologists				
37453 - CSTE Assessments	Agreement @ 7/23/18	93.424	-	28,846
Total - CFDA #93.424 - Building Capacity of the Public Health System to Improve Population Health through National Nonprofit Organizations				28,846
Pass-through Grant:				
Passed through New Hampshire Dept. of Health and Human Services:				
37295 - MCH & Tobacco Bundle		93.505	-	182,720
Total - CFDA #93.505 - Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting Program				182,720

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Pass-through Grants:				
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS FY18	Agreement @ 6.21.17	93.539	-	47,536
37452 - PHPS FY19	Agreement @ 6.21.17	93.539	-	12,605
Total - CFDA #93.539 - PPHF Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure				60,141
Pass-through Grants:				
Passed through State of Maine:				
37288 - MECDC CHW/DBTS	CDC-17-3073	93.624	-	13,507
Passed through Rhode Island Department of Health:				
37411 - RI BH Workforce Dev FY18	N/A	93.624	-	226,481
Total - CFDA #93.624 - ACA - State Innovation Models: Funding for Model Design and Model Testing Assistance				239,988
Pass-through Grant:				
Passed through the University of Colorado:				
37270 - TCPI	PSC-00584	93.638	-	23,712
37399 - TCPI Practices	PSC-00584	93.638	-	88,193
Total - CFDA #93.638 - ACA Transforming Clinical Practice Initiative: Practice Transformation Networks (PTNs)				111,905
Direct Grant:				
37015 - Tobacco Use Prevention	NU58DP005338	93.735	-	60,457
Total - CFDA #93.735 - State Public Health Approaches for Ensuring Quitline Capacity				60,457
Pass-through Grants:				
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS FY18	Agreement @ 6.21.17	93.753	-	23,544
37452 - PHPS FY19	Agreement @ 6.21.17	93.753	-	16,257
Total - CFDA #93.753 - Child Lead Poisoning Prevention Surveillance Financed in part by Prevention and Public Health Program (PPHF)				39,801

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Pass-through Grants:				
Passed through State of New Hampshire:				
37048 - National Diabetes Prevention Program	1042855	93.757	-	130,702
37068 - NH RHC TA Network	N/A	93.757	-	52,226
37200 - Public Health Program Services Support	PO# 1031592	93.757	-	7,936
Passed through State of Colorado				
37413 - CO O-D Analysis	N/A	93.757	-	3,922
Total - CFDA #93.757 - State Public Health Actions to Prevent Diabetes, Heart Disease, Obesity and Assoc. Risk Factors				194,786
Pass-through Grants:				
Passed through Missouri Department of Health and Senior Services:				
37130 - MO HEAL	C315199001	93.758	-	41,693
Passed through Rhode Island Department of Health:				
37140 - RI Epidemiological Support	7549784	93.758	-	147,007
Passed through State of Vermont:				
37212 - VT HPDP Evaluation	Contract #31786	93.759	-	513
Total - CFDA #93.758 - Preventive Health and Health Services Block Grant Funded Solely with Prevention and Public Health Funds (PPHF)				189,213
Pass-through Grants:				
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS FY 18	Agreement @ 6.21.17	93.800	-	63,089
37452 - PHPS FY 19	Agreement @ 6.21.17	93.800	-	22,989
Passed through State of Colorado:				
37413 - CO - O-D Analysis	N/A	93.800	-	5,882
Total - CFDA #93.800 - Organized Approaches to Increase Colorectal Cancer Screening				91,960
Pass-through Grant:				
Passed through Spere Memorial Hospital:				
37429 - NH Consulting	PRF61	93.817	-	4,271
Total - CFDA #93.817 - Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities				4,271

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED:				
Pass-through Grants:				
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS FY18	Agreement @ 6.21.17	93.870	-	224,636
37452 - PHPS19	Agreement @ 6.21.17	93.870	-	65,883
Total - CFDA #93.870 - Maternal, Infant and Early Childhood Home Visiting Grant Program			-	290,519
Pass-through Grants:				
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS FY18	Agreement @ 6.21.17	93.889	-	58,771
37452 - PHPS19	Agreement @ 6.21.17	93.889	-	4,589
Total - CFDA #93.889 - National Bioterrorism Hospital Preparedness Program			-	63,360
Pass-through Grants:				
Passed through Vermont Department of Health:				
37212 - VT HPDP Evaluation	Contract #31786	93.898	-	32,154
Passed through New Hampshire Department of Health and Human Services:				
37440 - NH CCC Stat Ping	Agreement @ 4.20.18	93.898	-	577
Passed through Massachusetts Dept. of Public Health:				
37460 - DPH Pall Care	CAPACITYLYBLD500824M04	93.898	-	4,831
Total - CFDA #93.898 - Cancer Prevention and Control Programs for State, Territorial and Tribal Organization			-	37,562
Pass-through Grant:				
Passed through State of New Hampshire:				
37068 - Technical Assistance Network for Rural Health Clinics	N/A	93.913	-	24,106
Total - CFDA #93.913 - Grants to States for Operation of Offices of Rural Health			-	24,106

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED				
Direct Grants:				
37191 - HIV Integrated Planning	U69HA30144	93.914	-	546,598
37194 - RWHAP ACE Health Training	U69HA30143	93.914	-	385,489
37327 - CHATT Planning TA	U69HA30795	93.914	144,592	524,848
Pass-through Grants:				
Passed through Boston Public Health Commission:				
37170 - Quality Assurance	Agreement @ 3-01-16	93.914	399	112,762
Passed through Fenway Community Health:				
37444 - Fenway E2I Toolkits	Agreement @ 6.14.18	93.914	-	26,945
Total - CFDA #93.914 - HIV Emergency Relief Project Grants			144,991	1,596,642
Direct Grant:				
36967 - Healthy Start Performance Project	UF5MC26845	93.926	140,435	2,315,907
Total - CFDA #93.926 - Healthy Start Initiative			140,435	2,315,907
Direct Grant:				
36945 - CDC CBA FY15 - FY19	U65PS004406	93.939	-	930,854
Total - CFDA #93.939 - HIV Prevention Activities - NGO Based			-	930,854
Pass-through Grant:				
Passed through State of Massachusetts:				
37153 - CoRECT Study	PRI61	93.943	-	53,585
Total - CFDA #93.943 - Epidemiologic Research Studies of Acquired Immunodeficiency System (AIDS) and Human Immunodeficiency Virus (HIV) Infection in Selected Groups			-	53,585
Pass-through Grant:				
Passed through South County Hospital Healthcare System:				
37091 - South County Health Equity Zone	Agreement @ 5-1-15	93.945	-	19,809
Total - CFDA #93.945 - Assistance Programs for Chronic Disease Prevention and Control			-	19,809

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED				
Pass-through Grants:				
Passed through State of Rhode Island:				
36801 - Prevention Resource Center	3316844	93.959	-	18
37349 - RIPRCII	3534294	93.959	-	193,961
Passed through New Hamp. Prevention Certification Board of New Hampshire:				
37168 - NHPCB Workforce Development	N/A	93.959	-	11,729
Total - CFDA #93.959 - Block Grants for Prevention and Treatment of Substance Abuse				205,708
Pass-through Grant:				
Passed through Arizona Family Health Partnership:				
37328 - AFHP CT Screening	17-JS11	93.977	-	1,342
Total - CFDA #93.977 - Sexually Transmitted Diseases (STD) Prevention and Control Grants				1,342
Pass-through Grants:				
Passed through Vermont Department of Health:				
37279 - VT 3-4-50	32435	93.991	3,925	3,925
Total - CFDA #93.991 - Preventative Health and Health Services Block Grant				3,925
Pass-through Grants:				
Passed through State of Vermont:				
37294 - VT Safe Sleep	33460	93.994	-	54,985
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS19	Agreement @ 6.21.17	93.994	-	24,000
Total - CFDA #93.994 - Maternal & Child Health Services Block Grant to the States				78,985
TOTAL - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			\$ 1,375,213	\$ 14,231,295

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HOMELAND SECURITY:				
Direct Grants:				
United States Coast Guard -				
37302 - Nat'l. Estimate of Life Jacket Wear Rate	3317FAN170210	97.012	\$ 3,714	\$ 57,965
37427 - Nat'l. Estimate of Life Jacket Wear Rate	3317FAN170210	97.012	-	111,826
Total CFDA #97.012 - Boating Safety Financial Assistance			<u>3,714</u>	<u>169,791</u>
TOTAL - U.S. DEPARTMENT OF HOMELAND SECURITY			<u>\$ 3,714</u>	<u>\$ 169,791</u>
 U.S. DEPARTMENT OF JUSTICE:				
Pass-through Grants:				
Passed through State of New Hampshire:				
37250 - Juvenile Diversion Evaluation		16.540	\$ -	\$ 25,121
Total - CFDA #16.540 - Juvenile Justice and Delinquency Prevention - Allocation to States			<u>-</u>	<u>25,121</u>
TOTAL U.S. DEPARTMENT OF JUSTICE			<u>\$ -</u>	<u>\$ 25,121</u>
 ENVIRONMENTAL PROTECTION AGENCY:				
Pass-through Grants:				
Passed through New Hampshire Department of Health and Human Services:				
37326 - PHPS FY18	Agreement @ 6.21.17	66.707	\$ 75,530	\$ 31,255
37452 - PHPS19	Agreement @ 6.21.17	66.707	-	13,598
Total - CFDA #66.707 - TSCA Title IV State Lead Grants Certification of Lead Based Paint Professionals			<u>75,530</u>	<u>44,853</u>
TOTAL ENVIRONMENTAL PROTECTION AGENCY			<u>\$ 75,530</u>	<u>\$ 44,853</u>

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF AGRICULTURE:				
Pass-through Grant:				
Passed through Food Insecurity Nutrition Incentive (FINI):				
37257 - FINI Evaluation	PRF61	10.331	\$ -	\$ 112,759
Total CFDA #10.331 - Food Insecurity Nutrition Incentive Grants Program			-	112,759
Pass-through Grant:				
Passed through State of Vermont:				
37212 - VT HPDP Evaluation	30754	10.561	4,787	4,273
Total CFDA #10.561 - State Administrative Matching Grants for the Supplemental Nutrition Assistance Program			4,787	4,273
TOTAL - U.S. DEPARTMENT OF AGRICULTURE			\$ 4,787	\$ 117,032
U.S. DEPARTMENT OF STATE:				
Pass-through Grant:				
Passed through Dreams Innovation Challenge:				
37188 - DREAMS	S-LMAQM-16-CA-1103	19.029	\$ 23,380,845	\$ 28,999,322
Total CFDA #19.029 - The U.S. President's Emergency Plan for AIDS Relief Programs			23,380,845	28,999,322
Direct Grant:				
37244 - Russia P2P	S-RS500-16-CA-179	19.900	-	20
Total CFDA #19.900 - AEECA/ESF PD Programs			-	20
TOTAL - U.S. DEPARTMENT OF STATE			\$ 23,380,845	\$ 28,999,342

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2018

<u>Federal Grantor/Pass-through Grantor Program Title</u>	<u>Agency or Pass-through Number</u>	<u>Federal CFDA Number</u>	<u>Passed Through to Subrecipients</u>	<u>Federal Expenditures</u>
U.S. DEPARTMENT OF COMMERCE:				
Pass-through Grant:				
Passed through Regents of the University of Michigan:				
37303 - Cape Cod Coastal		11.419	\$ -	\$ 2,853
Total CFDA #11.419 - Coastal Zone Management Administration Awards			<u>-</u>	<u>2,853</u>
TOTAL U.S. DEPARTMENT OF COMMERCE			<u>\$ -</u>	<u>\$ 2,853</u>
TOTAL FEDERAL AWARDS			<u>\$ 89,347,005</u>	<u>\$ 222,384,116</u>

JSI Research and Training Institute, Inc.
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
September 30, 2018

NOTE 1 – BASIS OF PRESENTATION

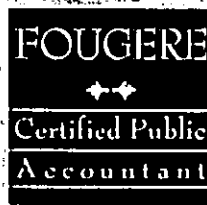
The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal grant activity of JSI Research and Training Institute, Inc. under programs of the federal government for the year ended September 30, 2018. The information in this Schedule is presented in accordance with 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 JSI Research and Training Institute, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of JSI Research and Training Institute, Inc.

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, wherein certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Catalog of Federal Domestic Assistance (CFDA) numbers and pass-through entity identifying numbers are presented when available.

NOTE 3 – INDIRECT COST RATE

JSI Research and Training Institute, Inc. has elected not to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.



**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
JSI Research and Training Institute, Inc. and Affiliate

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 JSI Research and Training Institute, Inc. and Affiliate ("Organization"), which comprise the consolidated statement of financial position as of September 30, 2018, and the related consolidated statements of activities, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated May 1, 2019.

Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered JSI Research and Training Institute, Inc. and its affiliate'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 JSI Research and Training Institute, Inc. and Affiliates' 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 Organization'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.

Compliance and Other Matters

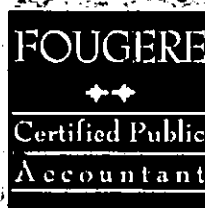
As part of obtaining reasonable assurance about whether JSI Research and Training Institute, Inc. and Affiliate's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, 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

This 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.

Handwritten signature of Norman R. Fongue, CPA.

Duxbury, Massachusetts
May 1, 2019



**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
JSI Research and Training Institute, Inc. and Affiliate

Report on Compliance for Each Major Federal Program

We have audited JSI Research and Training Institute, Inc.'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 JSI Research and Training Institute, Inc.'s major federal programs for the year ended September 30, 2018. JSI Research and Training Institute, Inc.'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.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of JSI Research and Training Institute, Inc.'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 JSI Research and Training Institute, Inc.'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 JSI Research and Training Institute, Inc.'s compliance.

Opinion on Each Major Federal Program

In our opinion, JSI Research and Training Institute, Inc. complied, in all material respects, with the 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 JSI Research and Training Institute, Inc. 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 JSI Research and Training Institute, Inc.'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 JSI Research and Training Institute, Inc.'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.

World Education, Inc. (Affiliate) maintains a different fiscal year (June 30) and has its own stand alone audit performed in accordance with the Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). However, the consolidated financial statements contain the combined activity of JSI Research and Training, Institute and World Education, Inc.

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.

A handwritten signature in black ink, reading "Shannon R. Zygaris CPA". The signature is written in a cursive style with a large, stylized initial 'S'.

Duxbury, Massachusetts
May 1, 2019

JSI Research and Training Institute, Inc. and Affiliate
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
September 30, 2018

SECTION I - Summary of Auditors' Results:

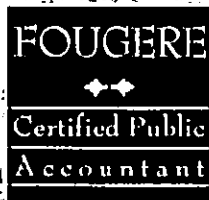
Financial Statements

The type of report issued on the financial statements:	Unmodified opinion
Internal control over financial reporting:	
• Material weaknesses identified?	No
• Significant deficiencies identified that are not considered to be material weaknesses?	None reported
Noncompliance material to the financial statements noted?	No

Federal Awards

Internal control over major programs:	
• Material weaknesses identified?	No
• Significant deficiencies identified that are not considered to be material weaknesses?	No
Type of auditors' report issued on compliance for major programs:	Unmodified opinion
Any audit findings which are required to be reported under 2 CFR section 200.516(a):	No
• Identification of major programs:	USAID Foreign Assistance for for Programs Overseas CFDA #98.001
	The U.S. President's Emergency Plan for AIDS Relief Programs CFDA #19.029
	Family Planning – Personnel Training CFDA #93.260
Dollar threshold used to distinguish between Type A and Type B programs:	\$3,000,000
Auditee qualified as low risk auditee under 2 CFR Section 200.520	Yes

NORMAN R. FOUGERE, JR. CPA
99 HERITAGE LANE
DUXBURY, MA 02332-4334



PHONE: 781-934-0460
FAX: 781-934-0606

STATUS OF PRIOR YEAR'S FINDINGS AND QUESTIONED COSTS

There were no reportable findings or questioned costs for the year ended September 30, 2017.



**JSI Research & Training Institute, Inc.
Board of Trustees**

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John Snow, Inc.

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Nanyang Technological University (NTU) Professor of Human Resources and Management
Sloan School of Management at M.I.T.

Mike Useem, M.A., Ph.D.
William and Jacalyn Egan Professor of Management
Wharton School at University of Pennsylvania

JSI Research & Training Institute, Inc. (JSI) d/b/a Community Health Institute (CHI)

Key Personnel

Public Health Professional Support Services

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Jonathan Stewart	Regional Director / Project Director	\$150,000	15%	\$22,500
Katie Robert	Fiscal Manager / Task Lead	\$78,000	30%	\$23,400
Alyson Cobb	Task Lead	\$81,000	70%	\$56,700
Melissa Schoemmell	Task Lead	\$70,000	20%	\$14,000
Lori Walter	Task Lead	\$65,000	80%	\$52,000
Christin D'Ovidio	Task Lead	\$87,000	10%	\$8,700
Martha Bradley	Task Lead	\$100,000	10%	\$10,000

ALYSON M. COBB

JSI, 501 South Street, Bow, New Hampshire 03304 (603) 573-3319

acobb@jsi.com

EDUCATION

BOSTON UNIVERSITY SCHOOL OF PUBLIC HEALTH, BOSTON, MASSACHUSETTS
Masters of Public Health in Epidemiology, 2015
Delta Omega Honorary Society in Public Health

BUCKNELL UNIVERSITY, LEWISBURG, PENNSYLVANIA
Bachelor of Arts in Chemistry, Minor in American Literature, 2009

TRAININGS

FEMA EMERGENCY MANAGEMENT INSTITUTE, EMMITSBURG, MARYLAND
Master Exercise Practitioner Program, 2018-2020

NH DIVISION OF FIRE STANDARDS AND TRAINING AND EMS, CONCORD, NEW HAMPSHIRE
IS-300 Intermediate ICS for Expanding Incidents, 2017

FEMA EMERGENCY MANAGEMENT INSTITUTE, INDEPENDENT STUDY COURSES (ONLINE)
IS-100.a Introduction to the Incident Command System, 2009
IS-120.a: An Introduction to Exercises, 2015
IS-103.a How to be an Exercise Evaluator, 2018
IS-200.a ICS for Single Resources and Initial Action Incidents, 2009
IS-700.a National Incident Management System- An Introduction, 2009
IS-800.c National Response Framework, An Introduction, 2018

HOMELAND SECURITY EXERCISE AND EVALUATION PROGRAM, AGAWAM, MASSACHUSETTS
Homeland Security Exercise and Evaluation Program Training Course, 2010

EXPERIENCE

JSI, Bow, New Hampshire
Project Director, August 2015 to present
Project Associate, August 2010 to August 2015
*AmeriCorps*VISTA Member, August 2009 to August 2010*

Selected projects:

MA Region 4AB Medical Countermeasures Dispensing in Response to Emerging Infectious Disease Workshop
Technical Advisor on project to develop, facilitate, and evaluate a workshop for Region 4AB BOH representatives to strengthen capabilities to protect the health and safety of critical staff in public health emergencies. Developed template plan language based on workshop findings.

New Hampshire Public Health Emergency Planning Technical Assistance and Training

Lead project to provide technical assistance and support to the 13 Regional Public Health Networks in NH around public health emergency preparedness, planning, and response, as well as Public Health Advisory Council development. Assess statewide needs to provide technical assistance to all 13 Networks and provide one-on-one technical assistance to Networks upon request. Develop and deliver trainings, plan templates, and tools on a variety of public health and emergency response topics, including medical surge, standard precautions, points of dispensing, and public information. Develop, facilitate, and evaluate exercises and real events. Conducted After Action Report development processes in New Hampshire for 2009 H1N1, 2012 Hepatitis C Outbreak, and 2014-15 Ebola responses. Serve on the planning committee and conference staff for the annual NH Emergency Preparedness Conference.

North Central Wisconsin Healthcare Emergency Readiness Coalition Exercises



Planned two tabletop exercises for coalition partners to exercise regional plans to manage high threat infectious disease outbreaks and mass casualty incidents resulting in medical surge and mass fatalities. Responsibilities included designing, facilitating, and evaluating the tabletop exercises (TTXs), including the development of an After Action Report and Improvement Plan.

Granite State Health Care Coalition

Co-lead coalition efforts to increase healthcare preparedness and meet US Assistant Secretary for Preparedness and Response (ASPR) requirements including development of coalition plans; planning, conduct, and evaluation of the statewide Coalition Surge Test; and conduct of the annual Hazard Vulnerability Assessment.

New Hampshire Medical Reserve Corps Development

Work to strengthen the statewide volunteer system, including convening regular meetings of unit coordinators, providing individual technical assistance, organizing statewide recruitment efforts, developing and implementing volunteer surveys, and developing and providing trainings for volunteers. Facilitate planning process of the NH Integrated Emergency Volunteer Training Conference, which draws 200 attendees annually. In 2016, expanded NH Integrated Emergency Volunteer Training Conference to include a Point of Dispensing (POD) exercise, in which all 200 attendees had the opportunity to act as both a responder and a client.

Massachusetts Jurisdictional Risk Assessments

Worked with Massachusetts Division of Public Health, Office of Preparedness and Emergency Management (MA DPH, OPEM) to design and implement a participatory, multi-sectoral risk assessment process for the six Health and Medical Coordinating Coalitions (HMCCs). Project included development of an online survey for coalition members to prioritize risks from a set of nine hazards and assess regional preparedness using a JSI-developed instrument derived from the CDC's 2011 Public Health Emergency Preparedness Capabilities and the 2016 Health Care Capabilities. Analyzed data and facilitated in-person meetings with coalition members in each region to review results and plan appropriate mitigation strategies to reduce risk. Developed toolkit to assist HMCCs with mitigation strategy development and implementation.

Spere Memorial Hospital High Threat Infectious Disease Plan Development

Work with Spere Memorial Hospital to revise existing plans to incorporate most recent guidance on the identification, isolation, and management of suspect and confirmed high threat infectious disease cases, including protocols for PPE donning and doffing, readying isolation rooms, laboratory sample management, internal patient transport, and radiology procedures.

New Hampshire Ebola and Emerging Infectious Disease Readiness

Implemented project to improve preparedness of the health care system to identify, isolate, and manage high threat infectious disease cases. Conducted an assessment of current infectious disease readiness capacity of hospitals, based on the CDC Infection Control Assessment and Response Program's methodology. Planned and facilitated two HSEEP-compliant tabletops focused on isolation of an infectious disease patient and transporting an Ebola patient to the Regional Ebola Treatment Center in MA. Drafted NH's first ever High Threat Infectious Disease Plan and updated state Ebola Response Plan to address new guidance and findings from tabletop exercises.

Massachusetts Department of Public Health Emergency Operations & Recovery Plans Development

Working with MA DPH OPEM to update a department-wide Emergency Operations Plan and develop a Recovery Annex. Facilitated collaborative process with MA DPH staff to develop an Emergency Operations Plan that met the needs and concerns of all bureaus and offices involved in a response. Currently developing Recovery Annex to formalize process through which recovery activities occur across the department.

Active Ebola Monitoring Program for Low Risk Travelers in Massachusetts

As a consultant epidemiologist for MA Department of Public Health, actively monitored incoming travelers from Ebola-affected West Africa with a low risk of exposure for 21 day incubation period. Role included daily communication with travelers, entering traveler information into web-based secure surveillance system (MAVEN), and coordinating with local health departments to ensure continuous monitoring.

MELISSA SCHOEMMELL

JSI, 501 South Street, 2nd Fl, Bow, New Hampshire 03304 (603)573-3324

melissa_schoemmell@jsi.com

EDUCATION

UNIVERSITY OF NEW HAMPSHIRE
Master's in Public Health, 2013

UNIVERSITY OF NEW HAMPSHIRE
Bachelors of Science, Health Management and Policy, 2008

EXPERIENCE

JSI d/b/a Community Health Institute, Bow, New Hampshire
Program Coordinator, October 2015 to present

New Hampshire Center for Excellence

Project team member for the NH Center for Excellence, a state-wide technical assistance and resource center for the implementation of evidence-based interventions in alcohol and other drug prevention, intervention, treatment and recover services. Primary role responsibilities include supporting the operational functions of the center, development of communities of practice across the state, preparing presentations and other materials, and providing other technical assistance needs.

New Hampshire Public Health Professional Support Services (PHPS)

Project Team member for the NH Public Health Professional Support Services to increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

Environmental Public Health Tracking (EPHT)

Project team member for the NH EPHT program, working to link environmental factors and human health through research, tracking of data and development, implementation and evaluation of regulatory and public health actions to prevent or control environment-related disease. Under this program, provides logistical and program support in the development of a CDC informed evaluation plan and strategic plan for the next five years.

Food Protection Section

Project lead for the NH Food Protection Section, working to ensure safety and security of the New Hampshire food supply and prevents foodborne illness and injuries through inspection, enforcement, and education by qualified staff in collaboration with the food industry. Role on this project includes guidance and support in the development of a robust, sustainable and actionable employee training and development plan.

Immunization Program

Assist the team in marketing strategy, materials development and reporting.
Support the team through maintenance of social media. Develop original and share appropriate content to targeted audiences.

Massachusetts Jurisdictional Risk Assessment

Project team member for the Commonwealth of Massachusetts Department of Public Health, Office of Preparedness and Emergency Management (MA DPH OPEM) conducting a Jurisdictional Risk Assessment (JRA) in each of the six Health and Medical Coordinating Coalition (HMCC) regions, culminating in one statewide and six regional reports to guide the establishment of future planning priorities. As a project team member, provided logistical and technical support.

New Hampshire Public Health Advisory Council Learning Collaborative

Project lead for this Robert Wood Johnson Foundation, County Health Rankings & Roadmaps to Health funded project. Provided logistical support for the learning collaborative meetings, assisted in content development and provided technical assistance as needed. The overall goal of this project was to assist the Regional Public Health Networks in development of logic models based on their work plans, corresponding evaluation plans and rapid cycle improvement.

City of Nashua, Division of Public Health and Community Services, Nashua, New Hampshire

Health Program Specialist, 2013–2015

Promotion of health programs, community forums, presentations and initiatives within the health department and among community partners, coordination of relevant and timely health information to target audiences, development of all marketing and health promotion materials, maintenance of web and social media presence, and in the event of a public health emergency, served as the Public Information Officer in the local emergency operations center.

Program Assistant, 2013–2015

Planning, coordination and facilitation of Homeland Security Exercise and Evaluation Program (HSEEP) compliant Public Health Emergency Preparedness workshops, drills trainings and exercises, facilitation and participation in emergency responses, and assisted with the development and maintenance of standard operating procedures.

City of Manchester Health Department, Manchester, New Hampshire

Consultant, 2013

Conducted a neighborhood health assessment using Healthy Eating Active Living (HEAL) methodology in Manchester, NH. Assessments included a walkability audit, GIS analysis and a survey of resident perceptions. Provided recommendations to assist in the development of a “Community Schools Model” at a local elementary school.

New Hampshire Asthma Control Program, New Hampshire Department of Health and Human Services, Concord, New Hampshire

Intern, 2013

Conducted a cross-sectional survey of smoke-free publicly assisted housing in New Hampshire and presented findings at the New Hampshire Public Health Association Annual Meeting.

Boston Children’s Hospital, Boston, Massachusetts

Program Coordinator, 2008–2013

Coordination of the Intermediate Care Program and Medicine ICU Resident Rotations, developed and maintained the website, planning of events (conferences, holiday events, meetings, retreats, travel arrangements), oversaw compliance of required federal and state licensure for physicians, and assisted in grant writing and application process for both NIH and privately funded grants.

SKILLS | CERTIFICATIONS

Computer: Microsoft (Word, Excel, PowerPoint, Access, Publisher), Adobe Professional Suite, SPSS

Volunteer Activities: Board of Director, New Hampshire Public Health Association, *2013 to present* and Chair of the New Hampshire Public Health Association Communications Committee, *2013 to present*

Certifications: FEMA Certifications (ICS-100, 200, 300, 400, 700, 800), Homeland Security Exercise and Evaluation Program (HSEEP) and Medical terminology

AWARDS

New Hampshire Public Health Association Young Professional Award, *2015*

First place for the UNH Master’s in Public Health capstone project, “Community Schools: A Unifying Thread, Assessment and Recommendations for the Implementation of the Community School Model at Bakersville Elementary School”, *2013*

Third place at the New Hampshire Public Health Association annual meeting for poster presentation, “Cross-Sectional Survey of Smoke-Free Publicly Assisted Housing in NH - Findings and Recommendations, *2013*

LORI WALTER, CMP

JSI, 501 South Street, Bow, New Hampshire 03301 (603) 573-3306

lwalter@jsi.com

EDUCATION

ASHWORTH UNIVERSITY, NORCROSS, GEORGIA
A.S., Business Management

CONVENTION INDUSTRY COUNCIL, WASHINGTON, D.C.
Certified Meeting Professional (CMP) designation 2005

PROFESSIONAL CAREER DEVELOPMENT INSTITUTE, ASHWORTH UNIVERSITY, NORCROSS, GEORGIA
Certified in Bridal Consulting, 2003
Certified in Travel & Tourism, 1998

NEW HAMPSHIRE TECHNICAL INSTITUTE, CONCORD, NEW HAMPSHIRE
Coursework in hospitality sales & management, hotel management, and convention planning, 1999–2001

EXPERIENCE

JSI, Bow, NH

Training & Event Manager, July 2007 to present

Continuing Nursing Education Coordinator *January 2012 to present*

Provides ongoing support and administration of JSI's continuing nursing education (CNE) accreditation through the Northeast Multi-State Division of Continuing Education. Works with JSI staff to develop programs that adhere to the strict NEMSD and American Nursing Association guidelines for CNE approval. In addition, works with JSI staff on researching and developing programs that adhere to other accreditation guidelines such as continuing medical education, social worker education, licensed drug and alcohol counselors, prevention specialists, etc.

NH HIV Planning Group (HPG) *July 2017 - Present*

Project director for the NH HPG through a contract with the NH Department of Health and Human Services, Bureau of Infectious Disease. Project management, budgeting, client relations, and overseeing the project and the project team. Provides logistical support for committee meetings, trainings, and special events including a biennial conference, World Aids Day activities, training to health and community professionals on issues such as HIV, and transgender health.

Vermont Immunization & Infectious Disease Conference and Diversion Workshop Logistics

Project director overseeing and managing event logistics for the Vermont Department of Health's biennial Immunization & Infectious Disease Conference, and the 2018 Vermont Drug Diversion Workshop.

Public Health Emergency Preparedness Training and Technical Assistance *July 2007 to present*

Provides administrative support and conference and training logistics management for the Public Health Emergency Preparedness Technical Assistance and Training projects funded by the NH DHHS and NH Homeland Security and Emergency Managements (HSEM) to provide training and technical assistance to public health emergency planning partners in New Hampshire's Public Health Regions. As part of the Technical Assistance and Training project, provides training logistics for contracted training, workshops and events as well as conference management for the one-day NH Emergency Preparedness Conference held annually for over 900 attendees, speakers and vendors. In addition, manages logistics for the NH Integrated Emergency Volunteer Training Conference held annually for 200 emergency volunteers. Also provided conference logistics for the 2010 Functional Needs Conference for 150 participants.

Marketing the Immunization Message in NH *July 2010 to present*

Provides project support and conference logistics for the NH DHHS Immunization Program's annual NH Immunization Conference. The conference team provides promotion, registration, fiscal management, exhibitor solicitation, planning committee management, speaker coordination, CEU/CME management, set-up and day-of onsite management. The goal of the conference is to educate healthcare providers on immunization specific topics.

NH Center for Excellence *January 2009 to present*

Provides logistical and administrative support for a statewide technical assistance resource center for evidence-based practice in substance abuse services. The Center establishes a base of evidence-based practices in prevention, developing



a learning collaborative of networks and practitioners to engage in systems change to support evidence-based practice, and establishes data dissemination systems to ensure that data is both an input to and output of evidence-based practice. An expert panel endorses evidence-based practice selections, outcome measurement designs, and the process by which promising practices may develop a base of evidence of effectiveness in New Hampshire.

Healthy Home and Lead Poisoning Prevention Program *July 2014 - present*

Primary responsibilities include working with the New England Lead Coordinating Committee to coordinate the biennial New England Lead Conference, as well working with the HHLPPP to coordinate regional dinners and other events to promote the program initiatives. In 2018, work also included event management for the NH Healthy Homes Conference.

NH Governor's Summit on Substance Misuse *November 2015 – July 2016*

Provided conference management for the one-day NH Governor's Summit on Substance Misuse held in May 2016 for 800+ attendees, speakers and vendors. Services included promotion, registration, fiscal management, exhibitor solicitation, planning committee management, speaker coordination, CEU management, set-up and day-of onsite management.

Weight of the Nation Community Screenings & Events *December 2012 to January 2014*

Provided project management and logistical coordination. The project, funded by HNH Foundation, was to provide logistical support and coordination to community partners for 12 community screenings of the Weight of the Nation film *four Challenges*. The objective of the screening project was to raise awareness of the social costs and implication of obesity and to begin to build local and regional action to create access to healthy food and enhance recreational opportunities.

Uniform Data System for the Bureau of Primary Care *September 2008 to 2014*

Serves as a training logistics coordinator for a major initiative to collect 'Uniform Data System' (UDS) information from all BPHC funded sites across the country. Responsibilities include coordinating training logistics with the training coordinator, host primary care associations (PCAs) and trainers, compilation and distribution of training materials to the host PCAs, and compiling and summarizing training evaluations.

Uniform Data System for the Indian Health Services Urban Indian Health Program *September 2008 to 2014*

Serves as a training coordinator for a major initiative to collect 'Uniform Data System' (UDS) information. The UDS is a standardized reporting system that provides consistent information about the administrative, financial and clinical performance of 34 UIHP funded grantees nationwide. Responsibilities includes coordinating several annual one or two day trainings around the United States, informing grantees of training in their area, registering grantees, trainer travel arrangements, facility site selection and logistical management, compilation and distribution of training materials, and compiling and summarizing training evaluations.

New England Meat Conference *September 2012 to July 2013*

Provided project management and event logistics and management for the first ever New England Meat Conference and New England Meat Ball in March 2013 which over the course of two-days, attracted over 350 participants. The goal of the conference was to enhance the production, processing, and marketing of sustainable, nutritious, humanely-raised, and delicious meat from New England farms by providing education and networking opportunities for meat producers, processors, government officials, and consumers.

Prescription Drug Strategy Summit *August –November 2011*

Provided project management and event logistics management for the October 2011 Prescription Drug Abuse Strategy Summit which brought together 165 stakeholders to address NH's prescription drug abuse epidemic. The goal of the summit was to gather stakeholder input for the Prescription Drug Abuse Plan which goes before the Governor in December 2011.

Child & Family Services Adolescent Substance Abuse Treatment Program *October 2007 to August 2011*

Provided administrative support and data management services for Child and Family Services (CFS) for the CSAT funded Assertive Adolescent and Family Treatment (AAFT-2 and AAFT-3) projects. Data management activities include: Acts as the liaison between Chestnut Health Systems, CSAT and CFS data systems, provides ongoing technical assistance and support in setting up and maintaining the ABS/GAIN data collection systems, compile and report on client satisfaction survey upon discharge from ASAT program, ongoing data monitoring and technical assistance, conduct process and outcome evaluation activities, evaluation tool development, data collection training and support for CFS staff as needed to maintain quality data, SPSS and Access database development, creating client tracking systems, web based GPRA data entry, data cleaning and analysis, and report writing.

Social Distancing Law Project *March–July 2010*

Provided logistics for the NH DHHS and NH AG's office Social Distancing legal assessment meeting which followed a tabletop format and was conducted with state and local public health leaders and other key stakeholders to determine the sufficiency and identify potential gaps in current state law regarding implementation of social distancing measures.

NH Teen Foster Conference *July 2007 to September 2009*

Provided administration support coordination and conference management for the third, fourth and fifth annual NH Teen Foster Conferences. The CHI team worked closely with the DCYF staff and Youth Advisory Board, to develop workshops and materials that are most interesting and helpful to the youth and meet their mission and goals. CHI provided conference management services including developing and managing a confidential registration system and day-of, onsite logistical support.

Healthy Eating Active Living (HEAL) *August–November 2007*

Provided administrative support and conference management for the state wide HEAL conference in 2007. The HEAL objectives were to develop a statewide plan for promoting health eating and active living. The ultimate goal of the project is to promote personal wellness through active living and healthy eating. CHI facilitated a process lead by a statewide Steering Committee composed of representatives from schools, business, communities, and government. Five work groups were established to identify priority policy, educational and programmatic interventions to promote individual wellness including: schools, health care industry, worksites, food and recreational industry, community, and built and natural environment. The project includes a statewide conference to present the plan to stakeholders and technical assistance to community-based collaborative to develop active plans for implementing the statewide plan.

Youth Vision *December 2007 to March 2008*

Provided administrative support and focus group coordination for assessment project for NH Employment Services and the NH Departments of Education and Health and Human Services to gather quantitative and qualitative data on the well being of youth exiting the foster care and residential care system in Manchester.

NH HIV Logistics and Capacity Building *July 2007 to June 2008*

Provide administrative support for the NH HIV Logistics and Capacity Building Project funded by the NHDHHS and the Division of Public Health Services STD/HIV Prevention Section. This project provides logistical and capacity building support for the NH HIV community planning process and for funded HIV Prevention Services agencies.

NH Center for Nonprofits, Concord, New Hampshire

Member Services Coordinator, November 2006 to February 2007

Processing event registrations and payments; processing membership applications and payments; ongoing correspondence with members both current and prospective; event planning including coordination of speakers, materials, site details, and onsite registrations management; administrative assistance for executive director and assistant director.

NH Local Government Center, Concord, New Hampshire

Event Planner, September 1999 to December 2005

Event and trade show management; requests for proposals; site inspections; contract negotiation; marketing; exhibitor, sponsor and advertiser solicitation and relations; speaker coordination and support; registration; preparation of handouts; food and beverage management; on-site logistics; staff and volunteer management; event evaluation. Supervised event associate and functional supervision of support staff; in-house catering coordination and ordering; in-house audiovisual assistance; member services; coordinated Local Government Center awards and scholarship programs. Received 2003 Employee of the Year Award.

Holiday Inn, Concord, New Hampshire

Front Office Manager/Guest Service Agent, June 1996 to September 1999

Guest relations; rate setting; coordinating work with sales department on group arrivals, billing and special requests; housekeeping inspections; site inspections with prospective groups and clients; revenue forecasting; night audit; manager on duty; direct Supervision of a staff of 8 including hiring, training, scheduling, and personnel issues.

KATHERINE ROBERT, MPA

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EDUCATION

UNIVERSITY OF NEW HAMPSHIRE, DURHAM, NEW HAMPSHIRE
Master of Public Administration, 2009
Bachelor of Arts in Political Science, 2006

EXPERIENCE

JSI Research & Training Institute, Inc., Bow, New Hampshire
Consultant, December 2007 to present

JSI provides consultation to health care organizations in the areas of health services delivery, public health, practice management, information for decision-making, and program evaluation. Clients include government agencies, public and private health care providers (hospitals, group practices, community health centers, family planning organizations, health maintenance organizations, community-based coalitions and social service agencies). JSI is a health care consulting firm working with clients in the public and private sectors. Since 1978, JSI has provided consulting, research and training services for agencies and organizations seeking to improve the health of individuals, communities and nations.

HIGHLIGHTS OF RELEVANT PROJECTS

NH Home Visiting Program Supports and Services July 2015 to present Oversee and coordinate seven scopes of work building capacity for the NH Home Visiting Program and its sub-recipient agencies implementing the Healthy Families America model, funded by the federal Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV). Act as statewide training coordinator for the Healthy Families America home visitors. Conduct annual needs assessment, identify subject-matter expert trainers, and engage in continuous dialogue with agencies to most effectively provide training and technical assistance resources. Develop and implement a statewide needs assessment, and provide consultation to the NH Home Visiting Task Force. Oversight of additional scopes of work include implementation of continuous quality improvement plan for local implementing agencies, marketing and multi-media campaign development, and post-partum visit utilization pilot research project.

Behavioral Health for Childhood Trauma Recovery Needs Assessment July 2018 to present Provide project direction and oversight to a needs assessment aimed at prioritizing areas of need to bolster New Hampshire's capacity to provide behavioral health services to support trauma recovery for children who have experienced abuse. Facilitate Advisory Panel meetings to solicit expert feedback from leaders from relevant statewide and local agencies.

Northern New England Healthy Equity Workgroup February 2018 to present Participate in an internal workgroup whose purpose is to create a welcoming, inclusive work environment to maximize work and life potential for JSI staff and the clients we serve. The committee aims to empower staff and supervisors to practice equity as a core value, promote equitable recruitment and hiring practices, and strengthens JSI's position as a leader in increasing health equity. Participate in selection committee for new Equity Manager position. Develop and deliver staff trainings relevant to equity issues, including cultural competency.

Environmental Health Integration Team Strategic Facilitation March 2019 to present Provide expert facilitation and strategic planning support to the newly created Environmental Health Integration Team, an initiative of the Division of Public Health Services. Develop agenda and activities to elicit team input on development of purpose statement, and goals, and facilitation of workgroups in developing strategies aligning with identified goals.

Healthy Start EPIC Center December 2014 to May 2019 Provide technical assistance and training to Healthy Start grantees to ensure program effectiveness in achieving the goals to reduce infant mortality and health disparities, and improve perinatal health outcomes. This project focuses on providing comprehensive and innovative capacity building assistance to community-based grantees, measuring project success by the degree to which grantees achieve core competencies essential for effective implementation of the Healthy Start model and institutionalize a culture of QI and evaluation based on a foundation of documented program effectiveness. Primary responsibilities include coordination of technical assistance.



Trauma Informed Care for Early Childhood Services (TIECS) Training Coordination July 2014 to June 2017
Engaged subject matter experts and early childhood service professionals from around the state to complete a Train the Trainer exercise and subsequent 50+ community trainings to train over 600+ professionals serving young children and their families. Worked with technical staff to translate the in-person training curriculum to an e-learning format, and with subject matter experts to develop and facilitate a learning collaborative to train interested professionals in becoming early childhood trauma consultants.

Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) Services May 2012 to June 2013
~~Recruited and hired qualified consultants to implement NAP SACC in targeted NH communities.~~ Provided technical assistance to consultants during the project period through program recruitment support, logistical support, and implementation support. Conducted an evaluation of past NAP SACC interventions from the perspective of trained sites and trainers.

Tobacco and Obesity Policy Project June 2010 to January 2012 Provided project management support, and worked with NH DHHS Obesity Prevention Program and Tobacco Prevention and Control Program staff and partners to assist in the development of strategies and creation of trainings and materials for licensed childcare settings, schools, and workplaces to develop and adopt evidence-based guidelines around nutrition, physical activity, screen time, and tobacco exposure. Conduct qualitative research to inform process.

Southern New Hampshire University, Manchester, New Hampshire
Member, Public Health Advisory Council, 2018-present
Advise SNHU to support its Council of Education for Public Health Accreditation application process.

NH Health & Equity Partnership, Concord, New Hampshire
Diversity and Cultural Competence trainer, April 2018 – present
Participated in a train the trainer session to qualify in offering diversity and cultural competence trainings for wide range of organizations.

Rivier University, Nashua, New Hampshire
Adjunct Faculty, September 2016-January 2018
Developed the curriculum for and instructs the online capstone for the undergraduate Public Health program.

PROFESSIONAL ASSOCIATIONS

NH Public Health Association, Immediate Past President

- Board of Directors / Executive Committee – 2012 – Present
- Human Resources Committee, 2015 - Present
- Communications Committee, 2012 – Present

NH Home Visiting Task Force

- Member, 2015 – Present

American Public Health Association

- Member, 2013 – Present

NH Public Health Services Improvement Council

- Member, 2016-2017

COMPUTER SKILLS

Proficient in Adobe InDesign CS5.5, Adobe Illustrator CS5.5, Microsoft Word, Excel, and Publisher.
Working knowledge of Microsoft Access, QuickBooks, Adobe Photoshop, and SPSS.



JONATHAN A. STEWART

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EDUCATION

DUKE UNIVERSITY SCHOOL OF MEDICINE, DURHAM, NORTH CAROLINA
Department of Health Administration, Master of Health Administration, 1986
Department of Biochemistry, Master of Arts, Biochemistry, 1984

UNIVERSITY OF DELAWARE, NEWARK, DELAWARE
School of Arts & Sciences, Bachelor of Arts, Biology, 1981

EXPERIENCE

JSI Research and Training Institute/Community Health Institute, Bow, New Hampshire
Regional Director, September 2000 to present

Provide technical assistance, training and evaluation to health and human service organizations to support the development of effective public health and health care systems.

Selected Technical Assistance & Training Projects

NH Community and Public Health Development Program: Project Director providing technical assistance and training support to communities involved in development of improved local public health infrastructure; worked with multiple partners to develop the statewide New Hampshire Public Health Network.

Community Health Services Network and Partnership for Public Health: Community assessment, workgroup facilitation and plan development for regional integrated behavioral health system as part of a NH Delivery System Reform Incentive Payment initiative (1115 Medicaid Waiver).

Boston Metropolitan Area Hazard Vulnerability Assessment: Technical Assistance including planning, facilitation and analytic support to Massachusetts and New Hampshire state health departments and regional partners for assessment of hazards, risks and preparedness for health care, behavioral health and public health infrastructure.

Metrowest Community Health Care Foundation (Massachusetts): Capacity and readiness assessment of seven municipalities in Metro-Boston for developing collaborative models for local public health service delivery.

NH Division of Public Health Services: Project team member providing assistance on development of a Comprehensive HIV Needs Assessment; role is focused on client and community stakeholder engagement and qualitative needs assessment.

Robert Wood Johnson Foundation; New Hampshire Turning Point Initiative: Project Director for multi-year initiative to develop sustainable strategies for improved local public health capacity.

HRSA, Bureau of Primary Health Care, Uniform Data System: Trainer and editor for annual Uniform Data System reporting for the federal Community and Migrant Health Center program.

Selected Program Evaluation Projects

Central New Hampshire Health Partnership: Evaluator for two federal Rural Health Outreach Grant Initiatives: the first for improving care coordination of socially and medically vulnerable populations; the second for improving care transitions from hospital to home and community.

Communities for Alcohol and Drug free Youth (Plymouth, NH): Program Evaluator for community-based coalition involved in multiple initiatives to promote positive and healthy school and community environments for youth.

NH Division of Alcohol & Drug Prevention & Recovery: Project Director for evaluation of state-wide ATOD prevention initiative involving multiple community-based coalitions implementing a range of programs including family strengthening, school-based education, mentoring and community action for environmental change.

Family Planning Private Sector Project (Nairobi, Kenya): Operations research on cost effectiveness and sustainability of FP/MCH service delivery sites throughout Kenya to assist USAID in resource allocation decisions and to improve cost recovery capability of clinics.

New York State Department of Health (Albany, New York): Qualitative Evaluation of New York State Healthy Heart Program; an initiative intended to influence CVD risk factors through community intervention and social marketing.



Selected Research Projects

National Network of Public Health Institutes and Robert Wood Johnson Foundation: Qualitative Assessment of Local and State Health Officials awareness of, interest in, and capacity to employ computer modeling for emergency preparedness.

Endowment for Health: Study of the effect of New Hampshire's Community Benefits Law for Health Care Charitable Trusts. Cooperative effort with NHDHHS Office of Health Planning and the NH Office of the Attorney General.

Bureau of Health Professions (Rockville, MD): Study of the effect of AIDS Education and Training Centers on physician attitudes and practices; Comparative analysis of parallel CDC-funded study of the general primary care physician population.

Bureau of Primary Health Care Delivery and Assistance (Rockville, MD): Study to assess preparedness of C/MHC's to respond to HIV-related service needs

Bureau of Primary Health Care, Rockville, Maryland: Survey project designed to gather information on provider practices in Community and Migrant Health Services relative to recommendations of the 1988 US Preventive Services Task Force.

North Country Health Consortium, Littleton, New Hampshire

Executive Director, 12/97 to 8/00 Founding Director of rural health network formed by four hospitals, two community health centers, two home health agencies, a mental health and developmental services organization, and a community action program.

Ammonoosuc Community Health Services, Littleton, New Hampshire

Operations Director, 11/94 to 12/97 of federally-funded, multi-site rural Community Health Center Network.

John Snow, Inc., Boston, Massachusetts

Consultant, 10/86 to 7/94 providing assistance in health services evaluation, financial analysis and program management.

SELECTED PUBLICATIONS | REPORTS

Rosenfeld, LA, Fox CE, Kerr D, Marziale E, Cullum A, Lota K, Stewart J, and Thompson MZ. "Use Of Computer Modeling For Emergency Preparedness Functions By Local And State Health Officials: A Needs Assessment". *J Public Health Management Practice*, 15(2), 96–104, 2009.

Stewart J, Kassler W, McLeod M. "Public Health Partnerships: A New Hampshire Dance". *Transformations in Public Health*, Volume 3, Issue 3, *Winter 2002*.

Stewart, JA, Wroblewski S, Colapietro J, Davis H. "Survey of US Physicians Trained by Regional AIDS Education and Training Centers". Abstract No. PO-D21-4047; 1Xth International Conference on AIDS. Berlin, Germany, *June –1, 1993*.

Kibua T, Stewart JA, Njiru S, Gitari A. "Sustainability and Cost Effectiveness of Family Planning Private Sector Subprojects". United States Agency for International Development; Nairobi, Kenya, *March 1990*.

SELECTED WORKSHOPS | PRESENTATIONS

Dartmouth College, The Dartmouth Institute, MPH Program, (formerly CECS) guest lecturer - project management, evaluation, coalition development, Public Health 101; community health needs assessment; academic review of capstone theses; *2004–2016*.

Public Health Performance Improvement – The New Hampshire Experience (with Joan Ascheim, NHDHHS); 6th Annual National Public Health Performance Standards Training Workshop; Nashville, TN; *April 1–6, 2008*.

Building the Public Health Infrastructure: State Lessons Learned and Keys to Success; Nebraska Health and Human Services, Expanding Our Vision – Transforming Vital Public Health Systems, *October 2006*.

Building Infrastructure in Public Health - RWJF National Turning Point Showcase Conference, Denver, CO; *May 2004*

Community Benefits Exemplary Practices – New Hampshire statewide conference; *November 2002*

SELECTED BOARDS | AFFILIATIONS

National Network of Public Health Institutes, Board of Directors, *2008 to present, Chair, 2014 - 2016*

New Hampshire Public Health Services Improvement Council, *2008 to present*

NH Prescription Monitoring Program, Advisory Council, *2012 to present*

New Hampshire Healthy People 2010 Leadership Council; Co-chair, *2000–2002*

New Hampshire Public Health Association; Treasurer, *1999–2003*



MARTHA BRADLEY, MS

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mbradley@jsi.com

EDUCATION

SPRINGFIELD COLLEGE, MANCHESTER, NEW HAMPSHIRE
M.S., Human Service Administration, May, 2001

UNIVERSITY OF NEW HAMPSHIRE, DURHAM, NEW HAMPSHIRE
B.A., Psychology, May, 1987

EXPERIENCE

JSI, Bow, New Hampshire

Project Manager, December 2002 to present

Areas of technical expertise include: Project management and implementation, health education and material development, training, and qualitative research.

Wisconsin Human Trafficking Awareness and Prevention Campaign, April 2017 to present

Worked on team to create a campaign to inform the public that (1) sex trafficking of youth is an issue in urban, rural, suburban and tribal communities throughout WI (2) educate about the indicators that a youth is being or may be at risk of being sex trafficked (3) disseminate information about the risk factors that make youth vulnerable to trafficking; and, (4) implement a statewide media/social marketing campaign that reduces demand and prevents sex trafficking of youth.

NH Center for Excellence (CFEX): Best Practices in Reducing Alcohol and Drug Problems

Worked on three projects for CFEX which provides consultation, training, and technical assistance for substance misuse prevention, substance use disorder treatment, continuum of care development, and integration of behavioral health into primary care including needs assessment, system capacity assessment, strategic planning, and policy recommendation.

NH Young Adult Prevention Messaging August 2016 to present

Responsible for developing the approach and methods for the exploratory and qualitative research resulting in a public health campaign targeting young adults ages 21 – 25 who drink frequently and excessively.

New Hampshire SBIRT Initiative, December 2015 to present

Under funding for NH Charitable Foundation in partnership with the Conrad N. Hilton Foundation and NH Bureau of Drug and Alcohol Services provided training to healthcare providers and systems implementing SBIRT (Screening, Brief Intervention, and Referral to Treatment) as a strategy to integrate behavioral health and primary care to identify patients at risk of substance misuse. Developed and implemented a variety of learning opportunities such as webinars, meetings, onsite trainings and shared learning to help providers address all facets of their workflow. The training builds knowledge and skills utilizing motivational interviewing techniques with patients identified at greater risk.

NH Opioid Awareness Media Campaign: *Anyone.Anytime.NH™* August 2015 – September 2015

Responsible for conducting eight focus groups to understand current attitudes and beliefs about the use of naxalone, understanding of the passage of a new law and knowledge of services available to assist an individual dealing with an opioid addiction that informed the creation of the awareness campaign *Anyone.Anytime.NH™*.

Partnerships for Quitline Sustainability, August 2014 to present

A multi-year contract with the CDC to work with the state health department to develop strategy and material to engage insurance professionals to consider cost sharing arrangements for Helpline services. Strategy based on model developed by North American Quitline Consortium and key informant interviews with insurance stakeholders.

Prediabetes Media Development and Placement Services, March 2015 to present

Responsible for developing a statewide media campaign that encourages those at risk to enroll in a National Diabetes Prevention Program which includes quantitative research of the target audience, audience testing, and message and material development.



Child Abuse Needs Assessment, April–October 2015

Conducted a comprehensive needs assessment to increase knowledge on the factors that impact the competencies and capacities of healthcare providers to provide special medical exams to child victims of suspected physical abuse.

Arsenic in Private Well Water, March–August 2015

Worked with the Dartmouth Toxic Metals Superfund Research Program to create intervention material to increase home owners' readiness to voluntarily test their well water for arsenic. Developed message themes and conducted end user testing to identify factors influencing home owners' interest in testing.

NH Immunization Marketing, June 2010 to present

NH Department of Health and Human Services, NH Immunization Program: Worked with community stakeholders to research, develop, and implement a statewide marketing and awareness campaign aimed at increasing immunization rates for the priority population.

NH Environmental Public Health Tracking Program Data Utilization and Outreach Project, April 2012 to present

NH Department of Health and Human Services, Environmental Public Health Tracking Program: works to increase the utilization of the EPHT's data portal and other communication tools by developing a communication plan consisting of contemporary marketing and outreach strategies. Conducted formative research and wrote current communication plan. Conducted end user testing on a web-based tool to assess the probability of arsenic in well water.

Nashua Community Health Assessment, September 2013 to May 2014

Worked with client to develop appropriate protocols for focus groups with targeted segments of population, varying from topic-specific issues, to general health issues. Facilitated 10 focus groups and wrote summary report of findings.

SHARE Needs Assessment, September 2013 to May 2014

Developed methodology for local non-profit needs assessment, covering five towns in Southern NH. Developed protocols for focus groups and key informant interviews and developed needs assessment report.

PRESENTATIONS

- Presentation at IHA Health Literacy Conference: *SBIRT: Talking with Your Patients about Substance Misuse*, 2017
- Moffitt Cancer Center: *Cancer, Culture and Literacy Conference* in 2008 & 2010
- Presentation at the NH Conference for Adult Educators on *Tobacco & Literacy in NH: A Pilot Program for Young Adults*, February 2007 and abstract accepted at the ACCESS 08 Conference
- Presentation at the Break Free Alliance Conference, *Promising Practice to Eliminate Tobacco Related Disparities: the Power of Communities*, April 2012
- Presented poster Break Free Alliance Conference on *Supporting Healthy Practices in Child Care: Nutrition, Physical Activity & Tobacco Exposure*, April 2012
- Presentation at National Conference on Tobacco or Health. *Engaging Low-Income Smokers in Tobacco Cessation via Credit Counseling Programs*, 2012

PUBLICATIONS

- LaFave LR, Bradley M, Murray AR, Pepin AL, Sprangers KS, Thies, KM (2018) Lessons learned from implementing Screening, Brief Intervention, and Referral to Treatment (SBIRT) for youth and young adults in primary care settings. *Integrative Pediatrics and Child Care* 1 (1):8-13
- Bradley M, D'Ovidio C, Kipligat S, New Hampshire Women's Perceptions of Marijuana and Alcohol Use Before, During and After Pregnancy, January 2018.

OTHER EDUCATION

- National Institutes of Health, Office of Extramural Research, Protecting Human Research Participants, *September 2009*
- New Hampshire Department of Safety, Division of Fire Standards and Training:
 - IS-700: NIMS an Introduction*, January 2009
 - IS-100: Introduction to ICS*, January 2009
 - Public Information Office*, April 2009
- Homeland Security Exercise & Evaluation Program (HSEEP) Training Course, December 2008
- Attended National Conference on Tobacco or Health, Minneapolis, MN, 2007
- Attended World Tobacco Conference, Washington, D.C., 2006
- Completed *Motivational Interviewing* workshop at Health Education and Training Institute, Portland, ME, 2005

CHRISTIN H. D'OVIDIO

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cdovidio@jsi.com

EDUCATION & CERTIFICATIONS

NATIONAL PUBLIC HEALTH INFORMATION COALITION, MARIETTA, GEORGIA
Certified Communicator in Public Health, 2015

UNIVERSITY OF SOUTH FLORIDA, TAMPA, FLORIDA
Graduate Certificate Degree, Social Marketing for Public Health, 2013

NEW SCHOOL FOR SOCIAL RESEARCH, NEW YORK, NEW YORK
Master of Fine Arts, Acting & Fine Arts Production, 2002

MILLS COLLEGE, OAKLAND, CALIFORNIA
Bachelor of Arts, Dramatic Arts & Communications, 1998

HOOTSUITE ACADEMY
Social Marketing Certification, 2018

EXPERIENCE

JSI Research and Training Institute, Inc., New Hampshire
Marketing and Communications Project Director, 2016-present

Young Adult Alcohol Harm Reduction Campaign (2018 – present)

Project Director and Creative Director: Oversee a team of four, conducting formative research around current knowledge, attitudes and beliefs on the use of binge drinking via peer crowd/group segmentation in NH college or professional career focused, young adults. Formative research includes literature review, online survey testing, focus groups and digital a/b testing. Pending research results, creative development could include: video production, a statewide digital campaign, market research, and influencer marketing.

NH Maternal Marijuana and Alcohol Campaign (2017 - present)

Project Director and Creative Director: Oversee a team of six, conducting formative research around current knowledge, attitudes and beliefs on the use of marijuana and alcohol during pregnancy by of women of child-bearing age. Formative research includes online survey testing (MaxDiff, conjoint), focus groups and digital a/b testing. Creative development includes video production and a statewide digital campaign. The campaign, *Today Is For Me.*, includes a provider toolkit to support campaign messages and video on SBIRT for providers. Work includes collaboration with the NH Governor's Commission on Alcohol and Other Drugs, Perinatal Substance Exposure Task Force.

NH Electronic Nicotine Delivery Systems (ENDS) Preliminary Prevention Among High School Youth (2018-present)

Project Director: Oversee a team of six conducting formative research for the State of NH to determine high school-aged peer crowd representation in the state as well as ENDS/vaping risk behavior prevalence among peer populations. Ultimately the research will be used to execute a marketing and communications campaign targeted at reducing ENDS use among high school aged youth found most at-risk. The project includes: strong community and partner collaboration, IRB consideration and approval, and independent evaluation.

NH Center for Excellence: NH Youth Binge Drinking Prevention Campaign (2016 - present)

Project Director and Research Lead: Leading research and creative direction to create and implement a young-adult focused binge-drinking prevention campaign. The campaign involves the theories of social marketing and behavior change, social media, traditional media, and youth leadership. Research for the binge drinking campaign has involved peer group or peer network identification and validation in NH and video production. *Binge-Free 603: What's Your Reason* launched on social/digital in 2018 and received the *2018 Berreth Gold Award – for Excellence in Health Marketing* from the National Public Health Information Coalition. The campaign has been relaunched in 2019.

State of Wisconsin, Youth Sex Trafficking Awareness Campaign (2017 - present)

Project Manager and Evaluator to develop a high-impact awareness campaign for the WI Department of Children and Families to inform the public that sex trafficking of WI youth under the age of 18 is an issue in urban, suburban, and rural communities throughout the state. The campaign has a positive focus and includes using trauma-informed, developmentally appropriate, and youth-centered solutions. JSI has implemented an effective statewide media/social marketing campaign in 2018 and 2019 to raise awareness of the sex trafficking of youth in WI.

New Hampshire Opioid Awareness Campaign: Anyone.Anytime.NH™ (2016 - present)

Project Manager/Marketing and Communications Director: The statewide awareness campaign, Anyone.Anytime.NH™, was created to reduce stigma around opioid addiction, increase awareness around the passage of two laws developed to save lives



in an overdose situation, and encourage treatment and recovery in NH. This statewide traditional and media campaign includes video and digital production, website and digital marketing. The Anyone.Anytime.NH™ campaign was recently cited in the U.S. Department of Health and Human Services, Office of the Surgeon General, *Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health*. Washington, DC: HHS, November 2016, and won the *Berreth Award – Honorable Mention, Corporate Health Marketing - National Public Health Information Coalition*, 2017. Subsequently, JSI was contracted to update and reignite the campaign for the Governor's Commission. Ms. D'Ovidio acted as Creative Director to film a documentary-style campaign, *The Doorway-NH*, re-branding the former campaign. JSI has been contacted by a number of states and municipalities, as well as SAMHSA, around campaign adaptation.

New Hampshire Lyme Disease Prevention Marketing Campaign (2016-present)

Project Director to develop a grass-roots and social marketing campaign for a private funder in order to reduce tick encounters and cases of Lyme disease in NH. This project identifies priority audiences affected by tick bites, best-practice outreach strategies, partner communication channels for grass-roots interventions, and effective educational outreach materials. Iterative work with the funder, the Tick Free NH Council, and partners, has supported this four-year communications plan. *Tick Free NH (TickFreeNH.org)* includes the development and creation of a Public Service Announcement, mass-media marketing campaign, social media campaign, and website. Tick Free NH won the *2017 Berreth Bronze Award - in Corporate Health Marketing* from the National Public Health Information Coalition and JSI was contracted by the State of Rhode Island to create Tick Free RI. In 2019 the project will work with the NH Medical Society to do provider outreach and engagement.

Rivier University, Division of Nursing and Health Professions, Nashua, New Hampshire
Adjunct Professor, 2016-present

State of New Hampshire, Department of Health and Human Services, Concord, New Hampshire
Marketing and Media Specialist (Tobacco Prevention & Cessation, Asthma Control, Oral Health, Coordinated Chronic Disease), 2008-2016

PUBLICATIONS

- Bradley M, D'Ovidio C, Kipligat S, *New Hampshire Women's Perceptions of Marijuana and Alcohol Use Before, During and After Pregnancy*. (January 2018).

ORAL PRESENTATIONS

- *Setting Them up for Failure: Why Parents Struggle to Adhere to Infant Safe Sleep Guidelines*. (2018). National Conference on Health Communication Marketing and Media. Atlanta, GA. [Bourgoin, A., D'Ovidio, C.].
- *Binge-Free 603: What's Your Reason? Preventing Binge Drinking in Young Adults by Accessing Values*. (2018). 25th USF Social Marketing Conference. Clearwater Beach, FL.
- *Formative Research for Public Health*. (October 2017). Presentation to Public Health 101, Rivier University, Nashua, NH.
- *Reducing Binge Drinking in New Hampshire Young Adults: Applications of Socio-Psychological Theories to Health Behavior Change*. (August 2017). National Conference on Health Communication Marketing and Media. Atlanta, GA.
- *Tick Free NH: A Grass-Roots Lyme Disease Prevention Campaign in New Hampshire*. (August 2017). National Conference on Health Communication Marketing and Media. Atlanta, GA.
- *Social Media Training*. (May 2017). State of New Hampshire Health Promotion Users Group, Concord, NH.
- *Anyone Anytime. NH: New Hampshire Heroin Awareness Campaign*. (June 2016). 24th Social Marketing Conference, Building on the Legacy: Forging New Paths. Clearwater Beach, FL.

HONORS AND AWARDS

- *Binge-Free 603: What's Your Reason? (2018) Berreth Gold Award for Excellence in Public Health Marketing*. National Public Health Information Coalition.
- *Tick Free NH - Grass-Roots Lyme Disease Prevention in New Hampshire (2017) Berreth Award - Bronze Medal, Corporate Health Marketing*. National Public Health Information Coalition.
- *Anyone.Anytime.NH™ Campaign (2017) Berreth Award – Honorable Mention, Corporate Health Marketing*. National Public Health Information Coalition.
- *Anyone.Anytime.NH™ Campaign (2016)*. U.S. Department of Health and Human Services, Office of the Surgeon General, *Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health*. Washington, DC: HHS, November 2016.
- *Dear Me New Hampshire 2013-2014 Campaign Summary Report (2015) Grady Award – Bronze Medal*. National Public Health Information Coalition.

PROFESSIONAL ORGANIZATIONS/VOLUNTEER ACTIVITIES

International Social Marketing Association, Member 2016-current; Society for Health Communication, Founding Member 2016-current; Social Marketing Association of North America, Member 2016-current, National Public Health Information Coalition, Member & Certifier 2014-current; New Hampshire Public Health Association Member, Member 2008-2010, 2016-current.





Jeffrey A. Meyers
Commissioner

Lisa M. Morris
Director

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

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

March 12, 2019

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a **sole source** amendment to an existing agreement with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, Vendor #161611-B001, 501 South Street, 2nd Floor, Bow, NH 03304 to provide a broad range of support services across a number of public health programs by increasing the price limitation by \$342,125 from \$1,578,580 to \$1,920,705, effective upon date of Governor and Council approval, with no change to the completion date of June 30, 2019. 81.61% Federal Funds, 12.54% General Funds, and 5.85% Other Funds.

The original contract was approved by the Governor and Executive Council on June 21, 2017 (Item #51), as amended (Amendment #1) and approved by the Governor and Executive Council on February 21, 2018 (Item #8).

Funds are available in the following accounts in State Fiscal Year (SFY) 2018 and 2019, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office without approval from Governor and Executive Council, if needed and justified.

FISCAL DETAILS ATTACHED.

EXPLANATION

This request is **sole source** because the amount of additional funding exceeds ten percent (10%) of the original contract value and because the Department is adding to the current scope of work for the contract period. These additional services are required to effectively implement activities included in the Division's federal funding agreements for the current state fiscal year.

The funding contained in this Contract will pay for implementing a statewide opioid related vulnerability assessment as part of the Department's response to the opioid crisis; facilitate meetings of the Home Visiting Task Force and its workgroups; conduct 10 (ten) jurisdictional risk assessments addressing public health emergencies; procure and distribute additional HIV testing supplies based on an increase in need; distribute funding to support 13 (thirteen) regional

Medical Reserve Corps units and 2 (two) Regional Public Health Networks to regional priorities addressing environmental public health issues; and develop outreach materials to support the Regional Public Health Networks.

The Contractor currently provides a broad range of public health professional support services including, but not limited to developing and implementing risk and needs assessments; training programs; developing educational materials; planning for large statewide conferences as well as smaller meetings and conferences; serving as a fiscal agent for the Department, including entering into subcontracts; providing technical assistance to local partners; and providing subject matter expertise.

The funding provided through this amendment will be used to fund and expand the following support services:

- **Opioid Assessment services:** The contractor will conduct a statewide HIV and viral hepatitis community vulnerability assessment in order to identify areas of the state that can be targeted for services to prevent the transmission of these infections in people with substance use disorder. This activity is a requirement of federal opioid crisis funding.
- **Public Health Emergency Preparedness services:** The contractor will conduct Jurisdictional Risk Assessments in collaboration with at least 10 (ten) public health preparedness coordinators from the 13 (thirteen) organizations funded to provide Public Health Network services. These assessments will be used to identify the public health threats of greatest concern in each region and to develop strategies to mitigate them. This activity is a requirement of federal preparedness funding. The contractor will also increase the amount of funding in current subcontracts that support 13 (thirteen) regional Medical Reserve Corps units.
- **HIV Prevention services:** The contractor will purchase and distribute additional HIV testing supplies to community partners to meet an increase in need due to the opioid epidemic. Early diagnosis and treatment of people infected with HIV helps to prevent further transmission of this virus in the community and improves health outcomes for people living with HIV. In addition, funds will be utilized to bring together community stakeholders to address the goals of the NH HIV Integrated Plan to end HIV in NH and to support targeted media and marketing efforts to promote the prevention of HIV among those at highest risk of acquiring the infection.
- **Environmental Public Health Tracking services:** The contractor will increase the amount of funding in current subcontracts with 2 (two) Regional Public Health Networks to develop and distribute training materials related to reducing health risks from the environment and utilize these materials during in-person trainings and workshops with regional partners.
- **Maternal, Infant and Early Childhood Home Visiting Grant Program services:** The contractor will facilitate and provide logistical support to Home Visiting Task Force Meetings and participation in workgroup meetings, such as Data System, Strategic Planning, and Communications workgroups; conduct a strategic planning session

of the Parent Advisory Council; and increase the current technical assistance and accreditation support for Home Visiting Programs funded by the Department.

- Preventative Health and Services Block Grant programs: The contractor will develop outreach materials to increase the level of awareness of the Regional Public Health Networks.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, the Department may amend the current agreement, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Executive Council.

Should the Governor and Executive Council not authorize this request, the Department will lack the ability to collect and analyze data necessary to conduct jurisdictional risk assessments in accordance with CDC requirements, procure and distribute necessary additional HIV testing supplies, conduct a statewide opioid related vulnerability assessments in accordance with CDC requirements; support an increased level of activity in the 13 (thirteen) Medical Reserve Corps units and 3 (three) Regional Public Health Networks addressing environmental health problems; and support the Home Visiting Task Force and Parent Advisory Council.

Area served: Statewide.

Source of Funds: Funds being added are 81.61% Federal (the Public Health Emergency Preparedness Program, the Hospital Preparedness Program, the Environmental Public Health Tracking Program, the Maternal, Infant and Early Childhood Home Visiting Grant Program, the Preventative Health and Services Block Grant Program, the HIV Integrated Prevention and Surveillance Program, and the Opioid Assessment Program), 12.54% General (the Public Health Emergency Preparedness Program), and 5.85% Other (Pharmaceutical Rebates).

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

Respectfully submitted,



Jeffrey A. Meyers
Commissioner

**Public Health Professional Support Services
Fiscal Details**

**05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY
PREPAREDNESS, 67% Federal, 33% General**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90077410	\$115,000	0	\$115,000
2019	102-500731	Contracts for Prog Svc	90077410	\$115,000	\$130,000	\$245,000
			Sub Total	\$230,000	\$130,000	\$360,000

**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**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90077700	\$70,000	0	\$70,000
2019	102-500731	Contracts for Prog Svc	90077700	\$70,000	0	\$70,000
			Sub Total	\$140,000	0	\$140,000

**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
PROGRAM, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90023320	\$65,000	0	\$65,000
2019	102-500731	Contracts for Prog Svc	90023320	\$65,000	0	\$65,000
			Sub Total	\$130,000	0	\$130,000

**05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PHARMACEUTICAL
REBATES, 100% Other**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90024600	\$183,800	0	\$183,800
2019	102-500731	Contracts for Prog Svc	90024600	\$113,800	\$20,000	\$133,800
			Sub Total	\$297,600	\$20,000	\$317,600

**05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
 DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD PROTECTION 37%
 General, 63% Other**

SFY	Class / Account	Class Title	Job Number	Current/ Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90000022	\$18,000	0	\$18,000
2019	102-500731	Contracts for Prog Svc	90000022	\$18,000	0	\$18,000
			Sub Total	\$36,000	0	\$36,000

**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, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90041000	\$50,000	0	\$50,000
2019	102-500731	Contracts for Prog Svc	90041000	\$50,000	\$20,000	\$70,000
			Sub Total	\$100,000	\$20,000	\$120,000

**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 PROTECTION, 100%
 Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90003600	\$36,000	0	\$36,000
	102-500731	Contracts for Prog Svc	90038000	\$50,000	0	\$50,000
			Sub Total SFY 2018	\$86,000	0	\$86,000
2019	102-500731	Contracts for Prog Svc	90003600	\$9,000	0	\$9,000
	102-500731	Contracts for Prog Svc	90038000	\$40,000	0	\$40,000
			Sub Total SFY 2019	\$49,000	0	\$49,000
			Sub Total	\$135,000	0	\$135,000

**05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
 DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, ACA HOME
 VISITING X02 FORMULA GRANT, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90083200	\$221,990	0	\$221,990
2019	102-500731	Contracts for Prog Svc	90083200	\$221,990	\$25,579	\$247,569
			Sub Total	\$443,980	\$25,579	\$469,559

**05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, MATERNAL -
CHILD HEALTH, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90080001	\$24,000	0	\$24,000
2019	102-500731	Contracts for Prog Svc	90080001	\$24,000	0	\$24,000
			Sub Total	\$48,000	0	\$48,000

**05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, RADIOLOGICAL
EMERGENCY RESPONSE, 100% Other**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90030000	9,000	0	\$9,000
2019	102-500731	Contracts for Prog Svc	90030000	9,000	0	\$9,000
			Sub Total	\$18,000	\$0	\$18,000

**05-95-90-902510-7536 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, STD/HIV PREVENTION,
100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	9002400	0	0	0
2019	102-500731	Contracts for Prog Svc	9002400	0	\$75,000	\$75,000
			Sub Total	0	\$75,000	\$75,000

**05-95-90-901010-5362 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH SYSTEMS, POLICY, AND PERFORMANCE,
100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	9001022	0	0	0
2019	102-500731	Contracts for Prog Svc	9001022	0	\$15,000	\$15,000
			Sub Total	0	\$15,000	\$15,000

**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, 100% Federal**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90703903	0	0	0
2019	102-500731	Contracts for Prog Svc	90703903	0	\$56,546	\$56,546
			Sub Total	0	\$56,546	\$56,546
			TOTAL	\$1,578,580	\$342,125	\$1,920,705



STATE OF NEW HAMPSHIRE
DEPARTMENT OF INFORMATION TECHNOLOGY
27 Hazen Dr., Concord, NH 03301
Fax: 603-271-1516 TDD Access: 1-800-735-2964
www.nh.gov/doi

Denis Goulet
Commissioner

March 18, 2019

Jeffrey A. Meyers, Commissioner
Department of Health and Human Services
State of New Hampshire
29 Hazen Drive
Concord, NH 03301

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to amend an existing contract with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, of Bow, NH, as described below and referenced as DoIT No. 2018-029B.

The purpose of this contract amendment is for JSI Research and Training Institute, Inc., to continue to provide a broad range of programmatic support services across a number of public health programs including, but not limited to; developing and implementing a statewide opioid related vulnerability assessment to inform the implementation of prevention and intervention services as part of the Department of Health and Human Services response to the opioid crisis.

The funding amount for this amendment is \$342,125, increasing the current contract from \$1,578,580, to an amount not to exceed \$1,920,705 and is effective upon the date of Governor and Council approval, with no change to the completion date of June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

Denis Goulet

DG/kaf
DoIT #2018-029B
cc: Bruce Smith, IT Manager, DoIT



**State of New Hampshire
Department of Health and Human Services
Amendment #2 to the
Public Health Professional Support Services**

This 2nd Amendment to the Public Health Professional Support Services contract (hereinafter referred to as "Amendment #2") dated this 12th day of October, 2018, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and JSI Research and Training Institute, Inc., d/b/a Community Health Institute, (hereinafter referred to as "the Contractor"), a nonprofit agency with a place of business at 501 South Street, 2nd Floor, Bow, NH 03304.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 21, 2017 (Item #51), and as amended (Amendment #1) approved by the Governor and Executive Council on February 21, 2018 (Item #8), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may modify the scope of work and the payment schedule of the contract by written agreement of the parties;

WHEREAS, the parties agree to increase the price limitation, 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. Amend Form P-37, Block 1.6 Account Number, to read 05-95-90-902510-7545, 05-95-90-902510-2239, 05-95-90-902510-5178, 05-95-90-902510-2229, 05-95-90-902510-5390, 05-95-90-900510-5173, 05-95-90-902510-7964, 05-95-90-902010-5896, 05-95-90-902010-5190, 05-95-90-901510-5299, 05-095-090-902510-7536, 05-95-90-901010-5362, & 05-95-90-902510-7039.
2. Amend Form P-37, Block 1.8, Price Limitation, to read:
\$1,920,705.
3. Amend Form P-37, Block 1.9, Contracting Officer for State Agency, to read:
Nathan D. White, Director.
4. Amend Form P-37, Block 1.10, State Agency Telephone Number, to read:
603-271-9631.
5. Delete Exhibit A, Scope of Services in its entirety, and replace with Exhibit A, Amendment #2, Scope of Services.
6. Delete Exhibit B, Method and Conditions Precedent to Payment in its entirety, and replace with Exhibit B, Amendment #2, Method and Conditions Precedent to Payment.
7. Delete Budget for Public Health Professional Support Services – Public Health Emergency Preparedness, SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services – Public Health Emergency Preparedness, SFY 2019 Amendment #2.



**New Hampshire Department of Health and Human Services
Public Health Professional Support Services**

8. Add Budget for Public Health Professional Support Services – HIV Prevention, SFY 2019 Amendment #2.
9. Delete Budget for Public Health Professional Support Services – Pharmaceutical Rebates – SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services – Pharmaceutical Rebates – SFY 2019 Amendment #2.
10. Delete Budget for Public Health Professional Support Services – EPHT, SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services – EPHT, SFY 2019 Amendment #2.
11. Delete Budget for Public Health Professional Support Services – Home Visiting, SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services – Home Visiting, SFY 2019 Amendment #2.
12. Add Budget for Public Health Professional Support Services – PHHS Block Grant, SFY 2019 Amendment #2.
13. Add Budget for Public Health Professional Support Services – Opioid Assessment, SFY 2019 Amendment #2.



New Hampshire Department of Health and Human Services
Public Health Professional Support Services

This amendment shall be effective upon the date of Governor and Executive Council approval.
IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

Name: LISA MORRIS
Title: DIRECTOR, DPMS

2/1/19
Date

JSI Research and Training Institute, Inc., d/b/a Community Health Institute

Name: Jonathan Stewart
Title: Regional Director

January 24, 2019
Date

Acknowledgement of Contractor's signature:

State of New Hampshire, County of Merrimack on January 24, 2019, before the undersigned officer, personally appeared the person identified directly above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

Debra Love, Notary Public

Name and Title of Notary or Justice of the Peace

DEBRA L. LOVE, Notary Public
My Commission Expires September 5, 2023

My Commission Expires: _____




New Hampshire Department of Health and Human Services
Public Health Professional Support Services

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

OFFICE OF THE ATTORNEY GENERAL

3/21/2019
Date


Name: Nancy S. Smith
Title: Senior Asst. Attorney General

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:



Exhibit A, Amendment #2

Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor will submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. Notwithstanding any other provision of the Contract to the contrary, no services shall continue after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30, 2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennia.

2. Scope of Services

The Contractor shall:

- 2.1. Provide a broad range of public health professional support services including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS) contractors.
- 2.2. Increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens and ensure successful outcomes across this range of services and program areas that include: transparent and informed community planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among DPHS contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.
- 2.3. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 2.3.1. In consultation with DPHS subject matter experts, provide logistical support for ongoing committees/planning groups as defined in Attachment F.
- 2.4. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.4.1. Provide logistical support to the New England Lead Coordinating Committee (NELCC). This includes up to 12 regular meetings of the full NELCC and up to 2 of committee/ workgroup meetings per year. Information about the NELCC is available at: <http://www.newenglandlead.org/>.



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- 2.5. Environmental Public Health Tracking
- 2.5.1. Provide logistical support to host up to 10 meetings with Regional Public Health Networks to gather feedback on the EPHT Data Portal.
 - 2.5.2. Provide logistical support for up to 5 focus groups to conduct user research of EPHT data and projects.
- 2.6. Infectious Disease Prevention, Investigation & Care Services Section
- 2.6.1. Provide logistical support to the NH HIV Planning Group (HPG). This includes up to 6 regular meetings of the full HPG and up to 30 of committee/workgroup meetings per year. More information about the HIV HPG is available at: nhhiv.org.
- 2.7. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
- 2.7.1. Provide logistical support to quarterly conference calls for three, peer-based caucuses. The caucuses will be role based (e.g. supervisors, home visitors, and quality improvement staff).
 - 2.7.2. Provide logistical support for the Home Visiting Task Force, formerly known as the Home Visiting Coordinating Council at least quarterly. This group serves as the MIECHV Advisory Group and is made up of collaborating partners and others in the state with an interest and background in home visiting.
 - 2.7.3. Participate in Data Systems; Strategic Planning; and Communications workgroup meetings.
- 2.8. Develop and Implement Training Programs
- 2.8.1. In consultation with DPHS subject matter experts, develop and/or implement training programs based on adult learning theories that use various training modalities (i.e. classroom, web-based, training of trainers, etc.) to maximize the reach of these programs.
 - 2.8.1.1. Food Protection Section (FPS):
 - 2.8.1.1.1. In consultation with Food Protection Staff develop training curricula for three discrete audiences:
 - 2.8.1.1.1.1. DPHS FPS staff and Food Service Establishment (FSE) inspectors in municipalities that regulate FSE. A list of these municipalities is available at: <http://www.dhhs.nh.gov/dphs/fp/documents/selfinspect.pdf>
 - 2.8.1.1.1.2. Staff from state agencies that conduct food safety inspections as one component of a more comprehensive operational inspection. This includes Department of Environmental Services Youth Camp inspection staff, DHHS Health Facilities Licensing staff (which inspects child care centers, nursing homes and assisted living facilities).



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- 2.8.1.1.1.3. Food Service Workers including, but not limited to workers in restaurants, retail food stores, schools, and caterers.
- 2.8.1.2. Public Health Emergency Preparedness:
 - 2.8.1.2.1. Develop and implement training programs for two discrete audiences:
 - 2.8.1.2.1.1. RPHN emergency preparedness coordinators
 - 2.8.1.2.1.2. Local municipal officials, healthcare preparedness personnel, volunteers and others engaged in regional PHEP planning and response.
 - 2.8.1.3. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.8.1.3.1. Plan and implement the 1-day Renovation, Repair and Painting Training programs in New Hampshire's highest risk communities using the US Environmental Protection Agency curriculum.
 - 2.8.1.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.8.1.4.1. In consultation with MIECHV/MCH staff, facilitate a training needs assessment for the 11 MIECHV contracted home visiting sites.
 - 2.8.1.4.2. Develop and implement an annual training plan (which will include site specific training plans), including evaluation, from the information garnered from the training needs assessment. At a minimum, ten (10) training accessible opportunities should be offered per MIECHV funded home visiting site per year. An opportunity is defined as a pre-existing training, which the contractor pays home visiting staff to attend (can be out of state) and trainings which are provided by the contractor. These can be offered electronically (webinars, etc.) or in-person.
- 2.9. Provide Logistical Support for Conferences
 - 2.9.1. In consultation with DPHS subject matter experts, provide logistical support for conferences as defined by the DPHS in the original Request for Proposal.
 - 2.9.1.1. Healthy Homes and Lead Poisoning Prevention Program
 - 2.9.1.1.1. Provide logistical and planning support for the NELCC's annual conference for up to 300 attendees. Provide logistical and planning support for four regional dinner meetings for up to 120 attendees each.
 - 2.9.1.2. Immunization Program
 - 2.9.1.2.1. Provide logistical support for the annual Immunization Conference for approximately 400 attendees.
 - 2.9.1.3. Public Health Emergency Preparedness
 - 2.9.1.3.1. Provide logistical and planning support for the annual NH Statewide Preparedness conference for up to 800 attendees.
 - 2.9.1.4. Infectious Disease Prevention, Investigation & Care Services Section



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- 2.9.1.4.1. Provide logistical and planning support for the bi-annual NH STD, HIV, Hepatitis, TB conference for up to 250 attendees. Planning support includes provision of continuing education credits.
- 2.9.1.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section
 - 2.9.1.5.1. Provide logistical and planning support, including evaluation, to semi-annual conferences-learning exchanges (fall and spring) for up to 55 staff at MIECHV contracted sites. The spring 2018 training will focus on Healthy Families America required content training for continued certification. The fall training 2018 will be based on findings from the needs assessment.
 - 2.9.1.5.2. Provide logistical and planning support for at least two half or full day in-person statewide and/or regional trainings.
- 2.10. Provide Technical Assistance
 - 2.10.1. Public Health Emergency Preparedness
 - 2.10.1.1. In consultation with DPHS subject matter experts, provide technical assistance to three discrete groups directed toward their meeting the national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (March 2011) and subsequent editions:
 - 2.10.1.1.1. DPHS/Emergency Services Unit (ESU) preparedness staff
 - 2.10.1.1.2. Public health preparedness coordinators at the 13 organizations funded by DPHS to provide Regional Public Health Network services. TA will be available to both individuals and as a group.
 - 2.10.1.1.3. Medical Reserve Corps units recognized by the registered with the U.S. Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps, to support recruitment, training and deployment of the MRC volunteers.
 - 2.10.1.2. Conduct Jurisdictional Risk Assessments in accordance with CDC requirements in collaboration with at least ten (10) public health preparedness coordinators from the thirteen (13) organizations funded to provide Public Health Network services.
 - 2.10.1.3. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.3.1. In consultation with DPHS subject matter experts, identify and coordinate the availability of technical assistance providers to DPHS contractors and service provider agencies.
 - 2.10.1.4. Develop and produce educational materials
 - 2.10.1.4.1. In consultation with DPHS subject matter experts, develop and/or produce educational materials on topics determined by DPHS staff. All materials shall be developed in accordance with CDC recommendations contained in Simply Put: Guide to Developing Easy-To-Understand Materials, CDC July 2010, available at: https://www.cdc.gov/healthliteracy/pdf/Simply_Put.pdf
 - 2.10.1.5. Environmental Public Health Tracking Program (EPHT)
 - 2.10.1.5.1. Develop educational materials targeted to public health professionals, emergency preparedness officials, and local partners to increase knowledge and understanding of the EPHT program at the state and local levels.



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- 2.10.1.6. Healthy Homes and Lead Poisoning Prevention Program (HHLPPP)
 - 2.10.1.6.1. Develop educational materials in collaboration with the HHLPPP to target to clinicians, contractors, and families to increase knowledge and understanding of best practices relative to Screening and Management Guidelines, lead-safe work practices, and keeping children safe from lead hazards.
- 2.10.1.7. Immunization Program
 - 2.10.1.7.1. Develop educational materials targeted towards increasing awareness related to the Immunization Information System (IIS).
 - 2.10.1.7.2. Develop educational materials targeted towards increasing awareness related to the benefits of immunizations across the lifespan.
- 2.10.1.8. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.8.1. In consultation with DPHS, maintain and update the NH HIV Planning Group (HPG) website.
- 2.10.1.9. Community Health Development Section
 - 2.10.1.9.1. Develop educational materials to increase awareness of regional Public Health Advisory Councils.
- 2.10.1.10. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section
 - 2.10.1.10.1. Provide Continuous Quality Improvement technical assistance through site visits and phone consultations to support local implementing agencies funded by DPHS that seek accreditation from the Health Families America accreditation board.
- 2.10.2. Develop and Implement Evaluation Plans
 - 2.10.2.1. In consultation with DPHS subject matter experts, develop evaluation plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
 - 2.10.2.2. Environmental Public Health Tracking Program
 - 2.10.2.2.1. Develop and implement a plan to evaluate ongoing EPHT projects that meets criteria outlined by CDC and fulfills federal requirements. This document will facilitate programming planning, implementation, and evaluation.
 - 2.10.2.2.2. Develop and implement a plan to evaluate previously funded HHLPPP projects that addressed dissemination techniques and understanding of the 2015 Lead Surveillance Report and the Childhood Lead Screening and Management Guidelines.
 - 2.10.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.2.3.1. Implement current MIECHV Continuous Quality Improvement Plan
 - 2.10.2.3.2. Participate in updating the MIECHV Continuous Quality Improvement Plan.
- 2.10.3. Update Strategic Plans

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- 2.10.3.1. In consultation with DPHS subject matter experts, update pre-existing strategic plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
- 2.10.3.2. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.3.2.1. Update the 2010 MIECHV Strategic State Plan.
- 2.11. Serve as a Fiscal Agent
 - 2.11.1. As directed by DPHS staff, serve as fiscal agent to maximize the efficient use of resources as follows:
 - 2.11.2. Environmental Public Health Tracking Program
 - 2.11.2.1. Enter into up to 3 mini-grants with vendors funded by DPHS to provide Regional Public Health Networks services. A list of currently funded vendors is available at: <http://www.dhhs.nh.gov/dphs/rphn/index.htm>.
 - 2.11.2.2. Subcontract with mini-grant recipients funded by DPHS to provide Regional Public Health Networks services in order to increase the amount of funds and amend work plans.
 - 2.11.3. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.11.3.1. Reimburse costs incurred by approximately 5 public members of the HPG to attend out-of-state conferences identified by the DPHS and mileage costs to attend in-state meetings. The purpose is to increase the knowledge and skills of the public members of the HPG.
 - 2.11.3.2. Procure prevention supplies as determined by the IDPICSS to an additional six (6) clinics funded by the IDPICSS to provide testing and treatment for sexually transmitted infections and human immunodeficiency virus.
 - 2.11.3.3. Execute a subcontract with a vendor identified by the DPHS to provide consultation and technical assistance on the production of a digital storytelling project, including coordination, development and implementation of a digital storytelling workshop; production of a digital storytelling electronic file for up to eight stories and training of participants in conducting an engagement session with stakeholders.
 - 2.11.4. Public Health Emergency Preparedness
 - 2.11.4.1. Execute a subcontract with a vendor identified by the DPHS to procure E-Studio, a web-based collaboration system currently in use at DPHS.
 - 2.11.4.2. Subcontract with 13 Medical Reserve Corps units to build capacity to staff emergency response facilities during public health emergencies.
 - 2.11.4.3. Enter into subcontracts with up to 4 individuals identified by the DPHS to participate in radiological emergency planning, training and exercises to build staffing capacity to respond to radiological emergencies.
 - 2.11.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):

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- 2.11.5.1. Support at least two MIECHV funded home visiting agency staff selected by the DHHS to attend the annual MIECHV grantee conference.
- 2.11.5.2. Execute a subcontract with a vendor identified by the DPHS to research and identify methods to increase utilization of postpartum visits by home visiting families.
- 2.12. HIV and Hepatitis Community Vulnerability Assessments:
 - 2.12.1. The Contractor shall design methodology, including but not limited to:
 - 2.12.1.1. Working with the Department's Bureau of Infectious Disease Control (BICD) to organize and engage a stakeholder group (Stakeholder Group) to provide input on the vulnerability assessment design, methods, expected output and outcomes;
 - 2.12.1.2. Review current literature describing similar Vulnerability Assessments to inform the study design;
 - 2.12.1.3. Work with the BICD to coordinate technical assistance potentially available from the Center for Disease Control and Prevention for study design and interpretation of results;
 - 2.12.2. The Contractor shall assemble data, including but not limited to:
 - 2.12.2.1. Working with the BICD to develop data use agreements, as applicable, to obtain data for the assessment to include data on:
 - 2.12.2.1.1. Overdose mortality and morbidity;
 - 2.12.2.1.2. Emergency medical service and emergency department utilization;
 - 2.12.2.1.3. Incidence of bloodborne infections associated with non-sterile drug injection;
 - 2.12.2.2. Obtaining other relevant data for the Vulnerability Assessment to include:
 - 2.12.2.2.1. Demographic data, Medication Assisted Treatment capacity;
 - 2.12.2.2.2. Other substance-use related treatment capacity;
 - 2.12.2.2.3. Controlled drug prescription rates; and
 - 2.12.2.2.4. Public safety data;
 - 2.12.2.3. With geographical context, to the extent such data is available, sufficient to conduct analyses to facilitate resource targeting;
 - 2.12.2.4. Any work performed by the Contractor as part of these initiatives shall comply with all state rules, and state and federal laws as required to safeguard the confidentiality of the information, and to comply with 42 CFR part 2 as applicable.
 - 2.12.3. The Contractor shall conduct analyses for the Vulnerability Assessment, including but not limited to:



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- 2.12.3.1. Completing statistical analyses following design and modeling procedures as defined in collaboration with the Stakeholder Group
- 2.12.3.2. Work with the BICD and the Stakeholder Group to review interim findings;
- 2.12.3.3. Refine the analysis as necessary and possible with additional data, methodological variations or innovations;
- 2.12.3.4. Complete the analysis for different sub-geographies of the state as determined in conjunction with BICD and the Stakeholder Group.
- 2.12.4. The Contractor shall disseminate and apply findings of the Vulnerability Assessment by use of the following methods:
 - 2.12.4.1. Produce jurisdictional maps identifying high-risk areas identified through the assessment process;
 - 2.12.4.2. Distribute findings to key stakeholders in formats that support action;
 - 2.12.4.3. Presenting at public health and healthcare provider meetings;
 - 2.12.4.4. Creating fact sheets or report cards for geographic sub-regions of New Hampshire;
 - 2.12.4.5. Publishing findings in professional journals;
 - 2.12.4.6. Use the findings from the assessment to assist the Department in the development of plans that strategically allocate prevention and intervention services.

3. Staffing

The Contractor shall:

- 3.1. Provide sufficient staff to perform all tasks specified in this Contract and shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion to meet the scope of work
- 3.2. Ensure staffing structure includes a contract administrator to administer all scopes of work relative to this Contract, as well as progress and finance reporting.
- 3.3. Ensure that across all funded positions, in addition to subject matter expertise, there is a combined level of expertise, skills and ability to understand data; use data for planning and evaluation; community engagement and collaboration; group facilitation skills; and IT skills in order to function as a team, ideally with complementary skill and abilities across these foundational areas of expertise and abilities.
- 3.4. Ensure that policies and procedures consistent with state and federal laws are in place to adequately and appropriately train staff to safeguard any individual confidential information or protected health information that they may have access to while performing their duties for the Contractor.



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- 3.5. Ensure that personnel are available during normal business hours, at a minimum Monday through Friday, 8:00 A.M. to 4:00 P.M.

4. Outcomes / Performance Measures

- 4.1. The Contractor shall ensure that following performance outcomes and measures are annually achieved and monitored monthly to measure the effectiveness of the agreement:
- 4.2. Convene, Coordinate and Facilitate Community-Based Public Health Partners
- 4.2.1. Environmental Public Health Tracking
- 4.2.1.1. At least 85% of participants rate the Feedback Sessions as either "excellent" or "very good" in an evaluation survey.
- 4.2.2. Healthy Homes and Lead Poisoning Prevention Program
- 4.2.2.1. At least 85% of participants rate the regular NELCC meetings as either "excellent" or "very good" in an evaluation survey.
- 4.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
- 4.2.3.1. At least 85% of participants rate the quarterly caucus phone meetings as either "excellent" or "very good" in an evaluation survey.
- 4.2.3.2. At least 85% of participants rate the quarterly Home Visiting Task Force, formerly known as the Home Visiting Coordinating Council, meetings as either "excellent" or "very good" in an evaluation survey.
- 4.3. Develop and Implement Training Programs
- 4.3.1. Food Protection Section
- 4.3.1.1. The training modules are approved and rated by the DHHS as either "excellent" or "very good"
- 4.3.1.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
- 4.3.2. Public Health Emergency Preparedness
- 4.3.2.1. The training modules are rated as either "excellent" or "very good" by DPHS.
- 4.3.2.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
- 4.3.3. Healthy Homes and Lead Poisoning Prevention Program
- 4.3.3.1. The training module is rated as either "excellent" or "very good" by DPHS.
- 4.3.3.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
- 4.3.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
- 4.3.4.1. Needs assessment and training plan (overall and site specific) approved by DPHS.



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- 4.3.4.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey. At least 85% of participants in the Parent Advisory Council trainings rate the training programs as either "excellent" or "very good" in an evaluation survey.
- 4.4. Provide Logistical Support for Conferences
 - 4.4.1. Healthy Homes and Lead Poisoning Prevention Program
 - 4.4.1.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.1.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2. Immunization Program
 - 4.4.2.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3. Public Health Emergency Preparedness
 - 4.4.3.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.4.4.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.4.5.1. At least 85% of learning exchange participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
- 4.5. Provide Technical Assistance
 - 4.5.1. Public Health Emergency Preparedness
 - 4.5.1.1. At least 90% of high-priority technical assistance requests made are met.
 - 4.5.1.2. Publish 10 Jurisdictional Risk Assessment reports.
 - 4.5.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.5.3.
 - 4.5.3.1. At least 90% of high-priority technical assistance requests made are met.
- 4.6. Develop and produce educational materials
 - 4.6.1. Environmental Public Health Tracking Program

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- 4.6.1.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.6.2.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.3. Immunization Program
 - 4.6.3.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.6.4.1. Approval by the Division of Public Health Services of the content and functionality of the HPG website.
- 4.7. Develop and Implement Evaluation Plans
 - 4.7.1. Environmental Public Health Tracking Program
 - 4.7.1.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.7.2.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.7.3.1. Implementation of at least 90% of the current MIECHV Continuous Quality Improvement Plan.
 - 4.7.3.2. Participate in at least 80% of the Continuous Quality Improvement planning meetings.
- 4.8. Update Strategic Plans
 - 4.8.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.8.1.1. Approval by the Division of Public Health Services of updated MIECHV Strategic State Plan.
 - 4.8.1.2. At least 85% of participants rate the Home Visiting Task Force strategic planning session as either "excellent" or "very good" in an evaluation survey.
- 4.9. Serve as a Fiscal Agent
 - 4.9.1. Environmental Public Health Tracking Program
 - 4.9.1.1. Subcontracts with RPHNs executed as directed by DPHS.
 - 4.9.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.9.2.1. Target: 95% of HIV and HCV testing and prevention supplies distributed to sites are logged on the appropriate distribution log within one week of distribution.
 - 4.9.2.2. Numerator- The number of HIV and HCV testing and prevention supply distributions listed on the distribution log that were logged within one week of the distribution date.



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- 4.9.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.9.3.1. Subcontract for increase in postpartum visit project executed as directed by DPHS.
- 4.9.4. Public Health Emergency Preparedness
 - 4.9.4.1. Subcontracts with Medical Reserve Corps executed as directed by DPHS/ESU.
 - 4.9.4.2. Subcontract for web-based collaboration system executed as directed by DPHS.
 - 4.9.4.3. Subcontracts with up to four individuals executed as directed by DPHS.
- 4.10. Annually, the Contractor shall develop and submit to the DHHS, a corrective action plan for any performance measure that was not achieved.

5. State and Federal Laws

The Contractor shall:

- 5.1. Be responsible for compliance with all relevant state and federal laws. Special attention is called to the following statutory responsibilities:
- 5.2. Publications funded under this contract shall be responsible to adhere to the requirements in Exhibit C Special Provisions, Paragraph 14. Prior Approval and Copyright Ownership.
- 5.3. The Contractor shall ensure equal access to quality health services and provide culturally and linguistically appropriate services and adhere to the requirements in Exhibit C Special Provisions, Paragraph 16. Limited English Proficiency (LEP).
- 5.4. DHHS recognizes that Contractors may choose to use subcontractors with specific expertise to perform certain services or functions for efficiency or convenience. However, the Contractor shall retain the responsibility and accountability for the function(s) for any services required by this Contract that are provided, in whole or in part, by a subcontracted agency or provider, and adhere to the requirements in Exhibit C Special Provisions, Paragraph 19. Subcontractors of this Contract.
- 5.5. Adhere to the Health Insurance Portability and Accountability Act requirements to maintain the confidentiality of protected health information provided by individuals who contact the poison control center in Exhibit I Health Insurance Portability Act Business Associate and any applicable state rule or other state or federal law.
- 5.6. The Contractor shall ensure that following performance indicators are annually achieved and monitored monthly to measure the effectiveness of the agreement:



Exhibit B, Amendment #2

Method and Conditions Precedent to Payment

- 1) The State shall pay the contractor an amount not to exceed the Form P-37, Block 1.8, Price Limitation for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
 - 1.1. This contract is funded with Funds from:
 - 1.1.1. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA) # 93.069, Federal Award Identification Number (FAIN) # U90TP000535,
 - 1.1.2. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA) # 93.889, Federal Award Identification Number (FAIN) # U90TP000535,
 - 1.1.3. US Centers for Disease Control and Prevention, 2013 Cooperative Agreement Application for the Immunization, Vaccine for Children, Catalog of Federal Domestic Assistance (CFDA) # 93.539, Federal Award Identification Number (FAIN) # 23IP000757,
 - 1.1.4. US Centers for Disease Control and Prevention, Environmental Public Health Tracking Program - Network Implementation, Catalog of Federal Domestic Assistance (CFDA) # 93.070, Federal Award Identification Number (FAIN) # NU38EH000947,
 - 1.1.5. US Centers for Disease Control and Prevention, NH - Reduced Lead Poisoning of Children, Catalog of Federal Domestic Assistance (CFDA) # 93.753, Federal Award Identification Number (FAIN) # NUE1EH001271.
 - 1.1.6. US Environmental Protection Agency, Lead 404(g) Training and Certification, Catalog of Federal Domestic Assistance (CFDA) # 66.707, Federal Award Identification Number (FAIN) # 99151215.
 - 1.1.7. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA) # 93.870, Federal Award Identification Number (FAIN) # X10MC29490.
 - 1.1.8. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA) # 93.994, Federal Award Identification Number (FAIN) # BO4MC30627.
 - 1.1.9. US Centers for Disease Control and Prevention, Preventative Health and Health Services Block Grant, Catalog of Federal Domestic Assistance (CFDA) # 93.758, Federal Award Identification Number (FAIN) # NB01OT009141.
 - 1.1.10. Health and Social Services, Department of Health and Human Services, HHS: Division of Public Health, Bureau of Infectious Disease Control, Public Health Crisis Response, Catalog of Federal Domestic Assistance (CFDA) # 93.354, Federal Award Identification Number (FAIN) #U90TP921693.
 - 1.1.11. US Centers for Disease Control and Prevention, PS 18-1802 HIV Integrated Prevention and Surveillance Programs, Catalog of Federal Domestic Assistance (CFDA) #93.940, Federal Award Identification (FAIN) # U62PS9244538.
 - 1.1.12. Other Funds from Pharmaceutical Rebates, Food Protection Fees and Radiological Health Fees
 - 1.1.13. General Funds.
 - 1.2. The Contractor agrees to provide the services in Exhibit A, Amendment #2, Scope of Service in compliance with funding requirements. Failure to meet the scope of services may jeopardize the funded contractor's current and/or future funding.



Exhibit B, Amendment #2

2) Payment for said services shall be made monthly as follows:

- 2.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items.
- 2.2. The Contractor will submit an invoice in a form satisfactory to the State by the twentieth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The invoice must be completed, signed, dated and returned to the Department in order to initiate payment. The Contractor agrees to keep records of their activities related to Department programs and services.
- 2.3. The State shall make payment to the Contractor within thirty (30) days of receipt of each invoice, subsequent to approval of the submitted invoice and if sufficient funds are available. Contractors will keep detailed records of their activities related to DHHS-funded programs and services.
- 2.4. The final invoice shall be due to the State no later than forty (40) days after the contract Form P-37, Block 1.7 Completion Date.
- 2.5. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to DPHScontractbilling@dhhs.nh.gov, or invoices may be mailed to:

Financial Administrator
Department of Health and Human Services
Division of Public Health Services
29 Hazen Drive
Concord, NH 03301

- 2.6. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A, Scope of Services and in this Exhibit B.
- 3) Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc. d/b/a

Bidder/Contractor Name: Community Health Institute

**Public Health Professional Support
Services - Public Health Emergency**

Budget Request for: Preparedness

(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 47,297.30		\$ 47,297.30	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 17,972.97		\$ 17,972.97	
3. Consultants			\$ -	
4. Equipment: (Includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,418.92		\$ 1,418.92	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 3,310.81		\$ 3,310.81	
6. Travel			\$ -	
7. Occupancy	\$ 4,729.73		\$ 4,729.73	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 3,783.78		\$ 3,783.78	
9. Software			\$ -	
10. Marketing/Communications			\$ -	
11. Staff Education and Training	\$ 945.95		\$ 945.95	
12. Subcontracts/Agreements			\$ -	
13. Other (specific details mandatory):			\$ -	
Medical Reserve Corps Mini-Grants	\$ 30,000.00		\$ 30,000.00	
Meeting & Training Supplies	\$ 12,500.00		\$ 12,500.00	
Information Systems		\$ 2,601.35	\$ 2,601.35	
HR		\$ 1,418.92	\$ 1,418.92	
Gen Admin		\$ 1,418.92	\$ 1,418.92	
Payroll and Accounting		\$ 2,601.35	\$ 2,601.35	
			\$ -	
TOTAL	\$ 121,959.46	\$ 8,040.54	\$130,000.00	

Indirect As A Percent of Direct

6.6%

Contractor Initials: AS

Date: 1/24/19

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - HIV Prevention

(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 9,730.00		\$ 9,730.00	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,697.40		\$ 3,697.40	
3. Consultants			\$ -	
4. Equipment: (Includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 291.90		\$ 291.90	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 681.10		\$ 681.10	
6. Travel	\$ -		\$ -	
7. Occupancy	\$ 973.00		\$ 973.00	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 778.40		\$ 778.40	
9. Software			\$ -	
10. Marketing/Communications			\$ -	
11. Staff Education and Training	\$ 194.60		\$ 194.60	
12. Subcontracts/Agreements			\$ -	
13. Other (specific details mandatory):			\$ -	
HPG Member Reimbursements			\$ -	
Conference Support			\$ -	
Prevention Supplies	\$ 13,000.00		\$ 13,000.00	
Meeting Expenses	\$ 25,440.00		\$ 25,440.00	
Website Maintenance			\$ -	
Subscription Services			\$ -	
Other Professional Support Services			\$ -	
Special Projects	\$ 18,559.50		\$ 18,559.50	
Information Systems		\$535.15	\$ 535.15	
HR		\$291.90	\$ 291.90	
Gen Admin		\$291.90	\$ 291.90	
Payroll and Accounting		\$535.15	\$ 535.15	
	\$ -	\$ -	\$ -	
TOTAL	\$ 73,345.90	\$ 1,654.10	\$ 75,000.00	

Indirect As A Percent of Direct

2.3%

Contractor Initials: 

Date: 1/24/19

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - EPHT

(Name of RFP)

Budget Period: SFY 2018 | Amendment #2

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages			\$ -	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits			\$ -	
3. Consultants			\$ -	
4. Equipment: (Includes Rentals, Repair & Maintenance, Purchase & Depreciation)			\$ -	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)			\$ -	
6. Travel			\$ -	
7. Occupancy			\$ -	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)			\$ -	
9. Software			\$ -	
10. Marketing/Communications			\$ -	
11. Staff Education and Training			\$ -	
12. Subcontracts/Agreements	\$ 20,000.00		\$ 20,000.00	
13. Other (specific details mandatory):			\$ -	
Materials Production			\$ -	
Information Systems			\$ -	
HR			\$ -	
Gen Admin			\$ -	
Payroll and Accounting			\$ -	
			\$ -	
			\$ -	
TOTAL			\$ 20,000.00	

Indirect As A Percent of Direct

#DIV/0!

Contractor Initials: JSI

Date: 1/24/19

New Hampshire Department of Health and Human Services

Bidder/Contractor Name: JSI Research & Training Institute, Inc.
d/b/a Community Health Institute

Budget Request for: Public Health Professional Support
Services - Home Visiting
(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line-Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 13,826.50		\$ 13,826.50	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 5,254.06		\$ 5,254.06	
3. Consultants			\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 414.79		\$ 414.79	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 967.85		\$ 967.85	
6. Travel			\$ -	
7. Occupancy	\$ 1,382.65		\$ 1,382.65	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 1,106.12		\$ 1,106.12	
9. Software			\$ -	
10. Marketing/Communications			\$ -	
11. Staff Education and Training	\$ 276.53		\$ 276.53	
12. Subcontracts/Agreements			\$ -	
13. Other (specific details mandatory):			\$ -	
Learning Exchanges			\$ -	
Scholarships			\$ -	
HFA Training & Supports			\$ -	
		\$ 760.46	\$ 760.46	
<i>Information Systems</i>		\$ 414.79	\$ 414.79	
<i>HR</i>		\$ 414.79	\$ 414.79	
<i>Gen Admin</i>		\$ 760.46	\$ 760.46	
<i>Payroll and Accounting</i>				
TOTAL	\$ 23,228.50	\$ 2,350.50	\$ 25,579.00	

Indirect As A Percent of Direct

10.1%

Contractor Initials: JS

Date: 1/24/19

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - PHHS Block Grant

(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 5,945.95	\$ -	\$ 5,945.95	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. Includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 2,259.45	\$ -	\$ 2,259.45	
3. Consultants		\$ -		
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 178.38	\$ -	\$ 178.38	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 416.22	\$ -	\$ 416.22	
6. Travel		\$ -		
7. Occupancy	\$ 594.59	\$ -	\$ 594.59	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 475.67	\$ -	\$ 475.67	
9. Software		\$ -		
10. Marketing/Communications	\$ 4,000.00	\$ -	\$ 4,000.00	
11. Staff Education and Training	\$ 118.92	\$ -	\$ 118.92	
12. Subcontracts/Agreements		\$ -		
13. Other (specific details mandatory):		\$ -		
		\$ -		
		\$ -		
<i>Information Systems</i>		\$ 327.03	\$ 327.03	
<i>HR</i>		\$ 178.38	\$ 178.38	
<i>Gen Admin</i>		\$ 178.38	\$ 178.38	
<i>Payroll and Accounting</i>		\$ 327.03	\$ 327.03	
TOTAL	\$ 13,989.19	\$ 1,010.81	\$ 15,000.00	

Indirect As A Percent of Direct

7.2%

Contractor Initials: JSI

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.
 Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support
 Budget Request for: Services - Opioid Assessment
 (Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 30,400.80	\$ -	\$ 30,400.80	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 11,552.27	\$ -	\$ 11,552.27	
3. Consultants		\$ -		
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 912.01	\$ -	\$ 912.01	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 2,128.06	\$ -	\$ 2,128.06	
6. Travel	\$ 300.00	\$ -	\$ 300.00	
7. Occupancy	\$ 3,040.07	\$ -	\$ 3,040.07	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,432.02	\$ -	\$ 2,432.02	
9. Software		\$ -		
10. Marketing/Communications		\$ -		
11. Staff Education and Training	\$ 608.03	\$ -	\$ 608.03	
12. Subcontracts/Agreements		\$ -		
13. Other (specific details mandatory):		\$ -		
		\$ -		
		\$ -		
		\$ -		
Information Systems		\$ 1,673.54	1673.54	
HR		\$ 912.82	912.82	
Gen Admin		\$ 912.82	912.82	
Payroll and Accounting		\$ 1,673.54	1673.54	
TOTAL	\$ 51,373.28	\$ 5,172.73	\$ 56,546.00	

Indirect As A Percent of Direct

10.1%

Contractor Initials: JSI

Date: 1/24/19



Jeffrey A. Meyers
Commissioner

Lisa M. Morris
Director

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

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

January 22, 2018

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Division of Public Health Services, to enter into an amendment with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, Vendor #161611-B001, 501 South Street, 2nd Floor, Bow, NH 03304 to provide a broad range of programmatic support services across a number of public health programs by increasing the price limitation by \$13,000 from \$1,565,580 to \$1,578,580 effective upon date of Governor and Council approval, with no change to the completion date of June 30, 2019. The original contract was approved by the Governor and Executive Council on June 21, 2017 (Item #51). Funds being added are 100% Other Funds (Pharmaceutical Rebates).

Funds are available in the following accounts in SFY 2018 and 2019, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

FISCAL DETAILS ATTACHED.

EXPLANATION

The purpose of this request is to increase the budget for the Human Immunodeficiency Virus (HIV) Program by adjusting several program-area budgets in order to enable the vendor to purchase additional prevention supplies, specifically Human Immunodeficiency Virus (HIV) test kits. The budget for the Childhood Lead Poisoning Prevention Program is decreased due to a reduction in our federal awards for the program from the Environmental Protection Agency (EPA) and the Centers for Disease Control and Prevention (CDC). The adjustments result in an overall price limitation increase of \$13,000.

The vendor provides a broad range of public health professional support services including, but not limited to; developing and implementing training programs; developing evaluation plans; conducting needs assessments; developing educational materials; planning for large statewide conferences; serving as a fiscal agent; providing technical assistance to local partners; and making subject matter experts available to Departmental contractors.

These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to New Hampshire citizens.

The overarching purpose of this contract is to better coordinate a range of public health professional support services on a statewide basis to assure that New Hampshire residents are served by effective initiatives to protect and improve the health of the public. The Vendor will ensure successful outcomes across this range of services and program areas that include: transparent and informed evaluation planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among Department contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.

The Department procured these services as it does not have the resources available to manage these specific services in-house. Support services to be provided include:

- Environmental Public Health Tracking activities;
- Food Protection activities;
- Lead Poisoning Prevention activities;
- Immunization Promotion;
- Infectious Disease Prevention, Investigation and Care activities;
- Maternal and Child Health activities;
- Public Health Emergency Preparedness activities

This contractor was selected through a competitive bid process.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, this Agreement has the option to extend for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council. No renewal request is being made at this time.

Should Governor and Executive Council not authorize this Request, the vendor may not have sufficient HIV test kits to provide to contracted testing sites. This may lead to testing not being available to individuals to inform them of their HIV status.

Area served: Statewide.

Source of Funds: Funds being added are 100% Other Funds (Pharmaceutical Rebates). Funding for the total contract are 73% Federal Funds from the Centers for Disease Control and Prevention, HPP & PHEP Cooperative Agreements, Immunization Cooperative Agreement, EPHT Program, NH Reduced Lead Poisoning of Children, US EPA Lead 404G Training and Certification, UH Health Resources & Services Administration, Maternal, Infant & Early Childhood Home Visiting Grant, Maternal and Child Health Grant, 21% Other Funds from HIV Pharmaceutical Rebates, Food Protection Agency Licensing Fees, Utility Assessment from Safety, and 6% General Funds.

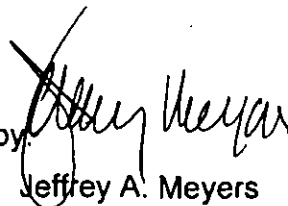
In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Lisa M. Morris
Director

Approved by



Jeffrey A. Meyers
Commissioner

**Public Health Professional Support Services
Fiscal Details**

**05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL,
EMERGENCY PREPAREDNESS 67% Federal, 33% General**

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90077410	115,000
SFY 2019	102-500731	Contracts for Prog Svc	90077410	115,000
		Sub Total		\$230,000

**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**

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90077700	70,000
SFY 2019	102-500731	Contracts for Prog Svc	90077700	70,000
		Sub Total		\$140,000

**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 PROGRAM 100% Federal**

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90023320	65,000
SFY 2019	102-500731	Contracts for Prog Svc	90023320	65,000
		Sub Total		\$130,000

**05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL,
PHARMACEUTICAL REBATES 100% Other**

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90024600	133,800	50,000	183,800
2019	102-500731	Contracts for Prog Svc	90024600	113,800		113,800
		Sub Total		\$247,600	\$50,000	\$297,600

**05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD
PROTECTION 37% General, 63% Other**

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90000022	18,000
SFY 2019	102-500731	Contracts for Prog Svc	90000022	18,000
			Sub Total	\$36,000

**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 100% Federal**

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90041000	50,000
SFY 2019	102-500731	Contracts for Prog Svc	90041000	50,000
			Sub Total	\$100,000

**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
PROTECTION 100% Federal**

Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
SFY 2018	102-500731	Contracts for Prog Svc	90003600	36,000	0	36,000
	102-500731	Contracts for Prog Svc	90038000	50,000	0	50,000
			Sub Total SFY 2018	86,000	0	86,000
SFY 2019	102-500731	Contracts for Prog Svc	90003600	36,000	(27,000)	9,000
	102-500731	Contracts for Prog Svc	90038000	50,000	(10,000)	40,000
			Sub Total SFY 2019	86,000	(37,000)	49,000
			Sub Total	\$172,000	(37,000)	\$135,000

**05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, ACA
HOME VISITING X02 FORMULA GRANT 100% Federal**

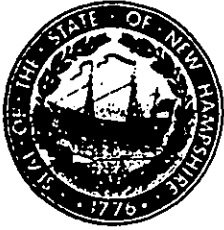
Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90083200	221,990
SFY 2019	102-500731	Contracts for Prog Svc	90083200	221,990
			Sub Total	\$443,980

**05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES,
MATERNAL – CHILD HEALTH 100% Federal**

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90080001	24,000
SFY 2019	102-500731	Contracts for Prog Svc	90080001	24,000
			Sub Total	\$48,000

**05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION,
RADIOLOGICAL EMERGENCY RESPONSE 100% Other**

Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
SFY 2018	102-500731	Contracts for Prog Svc	90030000	9,000	0	9,000
SFY 2019	102-500731	Contracts for Prog Svc	90030000	9,000	0	9,000
			Sub Total	\$18,000	\$0	\$18,000
			TOTAL	\$1,565,580	\$13,000	\$1,578,580



STATE OF NEW HAMPSHIRE
DEPARTMENT OF INFORMATION TECHNOLOGY
27 Hazen Dr., Concord, NH 03301
Fax: 603-271-1516 TDD Access: 1-800-735-2964
www.nh.gov/doi

Denis Goulet
Commissioner

February 5, 2018

Jeffrey A. Meyers, Commissioner
Department of Health and Human Services
State of New Hampshire
29 Hazen Drive
Concord, NH 03301

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to enter into a contract with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, of Bow, NH, as described below and referenced as DoIT No. 2018-029A.

The purpose of this contract amendment is for JSI Research and Training Institute, Inc., to continue to provide a broad range of programmatic support services across a number of public health programs including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Departmental contractors. These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

The funding amount for this amendment is \$13,000, increasing the current contract from \$1,565,580, to an amount not to exceed \$1,578,580 and is effective upon the date of Governor and Council approval, with no change to the completion date of June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

Denis Goulet

DG/kaf
DoIT #2018-029A

cc: Bruce Smith, IT Manager, DoIT



**State of New Hampshire
Department of Health and Human Services
Amendment #1 to the
Public Health Professional Support Services**

This 1st Amendment to the Public Health Professional Support Services contract (hereinafter referred to as "Amendment #1") dated this 22nd day of January, 2018, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and JSI Research and Training Institute, Inc., d/b/a Community Health Institute, (hereinafter referred to as "the Contractor"), a nonprofit agency with a place of business at 501 South Street, 2nd Floor, Bow, NH 03304.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 21, 2017 (Item #51), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may modify the scope of work and the payment schedule of the contract by written agreement of the parties;

WHEREAS, the parties agree to increase the price limitation, 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 as follows:

1. Amend Form P-37, Block 1.8, to increase Price Limitation by \$13,000 from \$1,565,580 to read: \$1,578,580.
2. Amend Form P-37, Block 1.9, to read E. Maria Reinemann, Esq., Director of Contracts and Procurement.
3. Amend Form P-37, Block 1.10 to read 603-271-9330.
4. Delete Budget Request for Public Health Professional Support Services – HIV, SFY 18 and replace with Budget Request for Public Health Professional Support Services – HIV SFY 18 Amendment #1.
5. Delete Budget Request for Public Health Professional Support Services – EPA Lead, SFY 19 and replace with Budget Request for Public Health Professional Support Services –EPA Lead SFY 19 Amendment #1.
6. Delete Budget Request for Public Health Professional Support Services – CDC Lead, SFY 19 and replace with Budget Request for Public Health Professional Support Services – CDC Lead SFY19 Amendment #1.



**New Hampshire Department of Health and Human Services
Public Health Professional Support Services**

This amendment shall be effective upon the date of Governor and Executive Council approval.
IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

2/1/18
Date

Lisa Martels
Name: LISA MARTELS
Title: DIRECTOR, DPHS

JSI Research and Training Institute, Inc., d/b/a Community
Health Institute

1/22/18
Date

Jonathan Stewart
Name: Jonathan Stewart
Title: Regional Director

Acknowledgement of Contractor's signature:

State of New Hampshire, County of Merrimack on 1/22/18, before the undersigned officer, personally appeared the person identified directly above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

Courtney Castro
Signature of Notary Public or Justice of the Peace

Courtney Castro, Notary Public
Name and Title of Notary or Justice of the Peace

My Commission Expires: COURTNEY A. CASTRO, Notary Public
My Commission Expires November 8, 2022

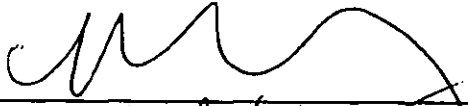
**New Hampshire Department of Health and Human Services
Public Health Professional Support Services**



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

OFFICE OF THE ATTORNEY GENERAL

2/6/19
Date


Name: Megan A. Cole
Title: Attorney

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

OFFICE OF THE SECRETARY OF STATE

Date

Name:
Title:

New Hampshire Department of Health and Human Services

Bidder/Contractor Name: JSI Research & Training Institute, Inc.,
d/b/a Community Health Institute

Budget Request for: Public Health Professional Support
Services - HIV
Amendment #1

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Priced	Total	Allocation Method for Indirect/Other Cost
1. Total Salary/Wages	\$ 37,607.84	\$ -	\$ 37,607.84	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 14,290.98	\$ -	\$ 14,290.98	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,165.84	\$ -	\$ 1,165.84	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,880.39	\$ -	\$ 1,880.39	
6. Travel	\$ 500.00	\$ -	\$ 500.00	
7. Occupancy	\$ 3,760.78	\$ -	\$ 3,760.78	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,820.60	\$ -	\$ 2,820.60	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 752.16	\$ -	\$ 752.16	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):		\$ -	\$ -	
HPG Member Reimbursement	\$ 2,000.00	\$ -	\$ 2,000.00	
Conference Support	\$ 2,000.00	\$ -	\$ 2,000.00	
Prevention Supplies	\$ 66,800.00	\$ -	\$ 66,800.00	
Digital Storytelling	\$ 25,000.00	\$ -	\$ 25,000.00	
Meeting Expenses	\$ 6,000.00	\$ -	\$ 6,000.00	
Website Maintenance	\$ 500.00	\$ -	\$ 500.00	
Subscription Services	\$ 700.00	\$ -	\$ 700.00	
Other Professional Support Services	\$ 10,000.00	\$ -	\$ 10,000.00	
Special Projects	\$ 1,853.73	\$ -	\$ 1,853.73	
Information Systems		\$ 1,541.92	\$ 1,541.92	
HR		\$ 1,541.92	\$ 1,541.92	
Gen Admin		\$ 1,541.92	\$ 1,541.92	
Payroll and Accounting		\$ 1,541.92	\$ 1,541.92	
	\$ -	\$ -	\$ -	
TOTAL	\$ 177,632.32	\$ 6,167.88	\$ 183,800.00	

Indirect As A Percent of Direct

3.5%

Contractor Initials:

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc., d/b/a
Bidder/Contractor Name: Community Health Institute**

**Public Health Professional Support Services -
Budget Request for: CDC Lead
Amendment #1**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect Fixed Cost
1. Total Salary/Wages	\$ 2,802.20	\$ -	\$ 2,802.20	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 1,064.84	\$ -	\$ 1,064.84	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 86.87	\$ -	\$ 86.87	
5. Supplies: (includes supplies for Education; Lab, Pharmacy, Medical, Office)	\$ 140.11	\$ -	\$ 140.11	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 280.22	\$ -	\$ 280.22	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 210.15	\$ -	\$ 210.15	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 56.04	\$ -	\$ 56.04	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Educational Outreach	\$ 3,900.01	\$ -	\$ 3,900.01	
Information Systems	\$ -	\$ -	\$ -	
HR	\$ -	\$ 114.89	\$ 114.89	
Gen Admin	\$ -	\$ 114.89	\$ 114.89	
Payroll and Accounting	\$ -	\$ 114.89	\$ 114.89	
	\$ -	\$ 114.89	\$ 114.89	
TOTAL	\$ 8,540.44	\$ 459.56	\$ 9,000.00	

Indirect As A Percent of Direct

5.4%

RFP-2018-DPHS-03-PUBLIC

Contractor Initials:

JSI

51 mac

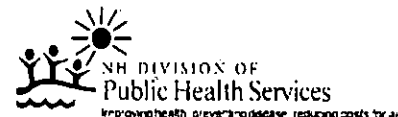
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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301-6527
603-271-4501 1-800-852-3345 Ext. 4501
Fax: 603-271-4827 TDD Access: 1-800-735-2964



Jeffrey A. Meyers
Commissioner

Lisa Morris, MSSW
Director

May 25, 2017

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 Division of Public Health Services, to enter into an agreement with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, Vendor #161611-B001, 501 South Street, 2nd Floor, Bow, NH 03304, in an amount not to exceed \$1,565,580, to provide a broad range of programmatic support services across a number of public health programs, effective July 1, 2017 or upon date of Governor and Council approval, whichever is later, through June 30, 2019. Funds are 76% Federal, 18% Other, and 6% General Funds.

Funds are anticipated to be available in the following accounts in SFY 2018 and SFY 2019, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY PREPAREDNESS 67% Federal, 33% General

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90077410	115,000
SFY 2019	102-500731	Contracts for Prog Svc	90077410	115,000
			Sub Total	\$230,000

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

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90077700	70,000
SFY 2019	102-500731	Contracts for Prog Svc	90077700	70,000
			Sub Total	\$140,000

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 PROGRAM
 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90023320	65,000
SFY 2019	102-500731	Contracts for Prog Svc	90023320	65,000
			Sub Total	\$130,000

05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
 DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PHARMACEUTICAL
 REBATES 100% Other

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90024600	133,800
SFY 2019	102-500731	Contracts for Prog Svc	90024600	113,800
			Sub Total	\$247,600

05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:
 DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD PROTECTION 37%
 General, 63% Other

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90000022	18,000
SFY 2019	102-500731	Contracts for Prog Svc	90000022	18,000
			Sub Total	\$36,000

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
 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90041000	50,000
SFY 2019	102-500731	Contracts for Prog Svc	90041000	50,000
			Sub Total	\$100,000

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 PROTECTION 100%
 Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90003600	36,000
	102-500731	Contracts for Prog Svc	90038000	50,000
			Sub Total SFY 2018	86,000
SFY 2019	102-500731	Contracts for Prog Svc	90003600	36,000
	102-500731	Contracts for Prog Svc	90038000	50,000
			Sub Total SFY 2019	86,000
			Sub Total	\$172,000

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, ACA HOME VISITING X02 FORMULA GRANT 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90083200	221,990
SFY 2019	102-500731	Contracts for Prog Svc	90083200	221,990
			Sub Total	\$443,980

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, MATERNAL - CHILD HEALTH 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90080001	24,000
SFY 2019	102-500731	Contracts for Prog Svc	90080001	24,000
			Sub Total	\$48,000

05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, RADIOLOGICAL EMERGENCY RESPONSE 100% Other

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90030000	9,000
SFY 2019	102-500731	Contracts for Prog Svc	90030000	9,000
			Sub Total	\$18,000
			TOTAL	\$1,565,580

EXPLANATION

Funds in this agreement will be used to provide a broad range of public health professional support services including, but not limited to; developing and implementing training programs; developing evaluation plans; conducting needs assessments; developing educational materials; planning for large statewide conferences; providing technical assistance to local partners; and making subject matter experts available to Departmental contractors. These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

The overarching purpose of this contract is to better coordinate a range of public health professional support services on a statewide basis to assure that all New Hampshire residents are covered by initiatives to protect and improve the health of the public. The Vendor will ensure successful outcomes across this range of services and program areas that include: transparent and informed evaluation planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among Department contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.

The Department procured these services as it does not have the resources available to manage these specific services in-house. Support services to be provided include:

1. Environmental Public Health Tracking activities;
2. Food Protection activities;
3. Lead Poisoning Prevention activities;
4. Immunization Promotion;
5. Infectious Disease Prevention, Investigation and Care activities;
6. Maternal and Child Health activities;
7. Public Health Emergency Preparedness activities

Notwithstanding any other provision of the Contract to the contrary, no services shall be provided after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30, 2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennium.

Should Governor and Executive Council not authorize this Request, there will be a reduced capacity to provide training to a range of public health partners on multiple health topics; host large scale conferences; develop plans to evaluate the effectiveness of services; develop and produce educational materials; and provide technical assistance to local and state partners.

JSI Research and Training Institute, Inc., d/b/a Community Health Institute was selected for this project through a competitive bid process. A Request for Proposals was posted on The Department of Health and Human Services' web site from March 10, 2017 through April 5, 2017. In addition, bidder's conference was held on March 20, 2017.

The Department received one proposal. The proposal was reviewed and scored by a team of individuals with program specific knowledge. The review included a thorough discussion of the strengths and weaknesses of the proposals/applications. The Bid Summary is attached.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, this Agreement has the option to extend for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council.

The performance measures/objectives that will be used to measure the effectiveness of the agreement are attached:

Area served: Statewide.

Source of Funds: 76% Federal Funds from the Centers for Disease Control and Prevention, HPP & PHEP Cooperative Agreements, Immunization Cooperative Agreement, EPHT Program, NH Reduced Lead Poisoning of Children, US EPA Lead 404G Training and Certification, UH Health Resources & Services Administration, Maternal, Infant & Early Childhood Home Visiting Grant, Maternal and Child Health Grant, 18% Other Funds from HIV Pharmaceutical Rebates, Food Protection Agency Licensing Fees, Utility Assessment from Safety, and 6% General Funds.

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
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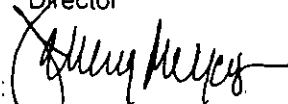
In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

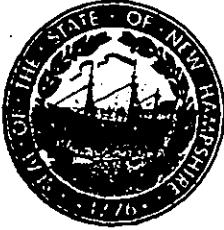


Lisa Morris, MSSW
Director

Approved by:



Jeffrey A. Meyers
Commissioner



STATE OF NEW HAMPSHIRE
DEPARTMENT OF INFORMATION TECHNOLOGY
27 Hazen Dr., Concord, NH 03301
Fax: 603-271-1516 TDD Access: 1-800-735-2964
www.nh.gov/doi

Denis Goulet
Commissioner

May 23, 2017

Jeffrey A. Meyers, Commissioner
Department of Health and Human Services
State of New Hampshire
29 Hazen Drive
Concord, NH 03301

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to enter into a contract with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, of Bow, NH, as described below and referenced as DoIT No. 2018-029.

This is a request to enter into a contract with JSI Research and Training Institute, Inc., to provide a broad range of programmatic support services across a number of public health programs including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Departmental contractors. These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

The funding amount is not to exceed \$1,565,580, and is effective July 1, 2017, or upon the date of Governor and Council approval, whichever is later, through June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

Denis Goulet

DG/ik
DoIT #2018-029

cc: Bruce Smith, IT Manager, DoIT



New Hampshire Department of Health and Human Services
 Office of Business Operations
 Contracts & Procurement Unit
 Summary Scoring Sheet

Public Health Professional Support
 Services

RFP-2018-DPHS-03-PUBLIC

RFP Name

RFP Number

Reviewer Names

Bidder Name

1.	JSI dba Community Health Institute
2.	0
3.	0
4.	0
5.	0
6.	0
7.	0

Pass/Fail	Maximum Points	Actual Points
85%	400	340
	400	0
	400	0
	400	0
	400	0
	400	0
	400	0

1. Neil Twitchell, Tech
2. Karen Blizzard Royce
3. Katie Bush
4. Lindsay Pierce
5. Rhonda Siegel
6. Beverly Drouin
7. Jennifer Conroy, Cost
8. Ellen Chase Lucard
9. Philip Nadeau

**Public Health Professional Support Services
Performance Measures**

1. Performance Measures

- 1.1. The Contractor shall ensure that following performance outcomes and measures are annually achieved and monitored monthly to measure the effectiveness of the agreement:
- 1.2. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 1.2.1. Environmental Public Health Tracking
 - 1.2.1.1. At least 85% of participants rate the Feedback Sessions as either "excellent" or "very good" in an evaluation survey.
 - 1.2.2. Healthy Homes and Lead Poisoning Prevention Program
 - 1.2.2.1. At least 85% of participants rate the regular NELCC meetings as either "excellent" or "very good" in an evaluation survey.
 - 1.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.2.3.1. At least 85% of participants rate the quarterly caucus phone meetings as either "excellent" or "very good" in an evaluation survey.
 - 1.2.3.2. At least 85% of participants rate the quarterly Home Visiting Coordinating Council meetings as either "excellent" or "very good" in an evaluation survey.
- 1.3. Develop and Implement Training Programs
 - 1.3.1. Food Protection Section
 - 1.3.1.1. The training modules are approved and rated by the DHHS as either "excellent" or "very good"
 - 1.3.1.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 1.3.2. Public Health Emergency Preparedness
 - 1.3.2.1. The training modules are rated as either "excellent" or "very good" by DPHS.
 - 1.3.2.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 1.3.3. Healthy Homes and Lead Poisoning Prevention Program
 - 1.3.3.1. The training module is rated as either "excellent" or "very good" by DPHS.
 - 1.3.3.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 1.3.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.3.4.1. Needs assessment and training plan (overall and site specific) approved by DPHS.
 - 1.3.4.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.

Public Health Professional Support Services Performance Measures

- 1.4. Provide Logistical Support for Conferences
 - 1.4.1. Healthy Homes and Lead Poisoning Prevention Program
 - 1.4.1.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.1.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.2. Immunization Program
 - 1.4.2.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.2.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.3. Public Health Emergency Preparedness
 - 1.4.3.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.3.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.4.4.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.4.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.4.5.1. At least 85% of learning exchange participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
- 1.5. Provide Technical Assistance
 - 1.5.1. Public Health Emergency Preparedness
 - 1.5.1.1. At least 90% of high-priority technical assistance requests made are met.
 - 1.5.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.5.2.1. At least 90% of high-priority technical assistance requests made are met.
- 1.6. Develop and produce educational materials
 - 1.6.1. Environmental Public Health Tracking Program
 - 1.6.1.1. Approval by the Division of Public Health Services of developed educational materials.
 - 1.6.2. Healthy Homes and Lead Poisoning Prevention Program
 - 1.6.2.1. Approval by the Division of Public Health Services of developed educational materials.

Public Health Professional Support Services Performance Measures

- 1.6.3. Immunization Program
 - 1.6.3.1. Approval by the Division of Public Health Services of developed educational materials.
- 1.6.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.6.4.1. Approval by the Division of Public Health Services of the content and functionality of the HPG website.
- 1.7. Develop and Implement Evaluation Plans
 - 1.7.1. Environmental Public Health Tracking Program
 - 1.7.1.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 1.7.2. Healthy Homes and Lead Poisoning Prevention Program
 - 1.7.2.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 1.7.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.7.3.1. Implementation of at least 90% of the current MIECHV Continuous Quality Improvement Plan.
- 1.8. Update Strategic Plans
 - 1.8.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.8.1.1. Approval by the Division of Public Health Services of updated MIECHV Strategic State Plan.
- 1.9. Serve as a Fiscal Agent
 - 1.9.1. Environmental Public Health Tracking Program
 - 1.9.1.1. Subcontracts with RPHNs executed as directed by DPHS.
 - 1.9.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.9.2.1. Target: 95% of HIV and HCV testing and prevention supplies distributed to sites are logged on the appropriate distribution log within one week of distribution.
 - 1.9.2.2. Numerator- The number of HIV and HCV testing and prevention supply distributions listed on the distribution log that were logged within one week of the distribution date.
 - 1.9.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.9.3.1. Subcontract for increase in postpartum visit project executed as directed by DPHS.
 - 1.9.4. Public Health Emergency Preparedness
 - 1.9.4.1. Subcontracts with Medical Reserve Corps executed as directed by DPHS/ESU.
 - 1.9.4.2. Subcontract for web-based collaboration system executed as directed by DPHS.
 - 1.9.4.3. Subcontracts with up to four individuals executed as directed by DPHS.
- 1.10. Annually, the Contractor shall develop and submit to the DHHS, a corrective action plan for any performance measure that was not achieved.

Subject: Public Health Professional Support Services RFP-2018-DPHS-03-PUBLIC

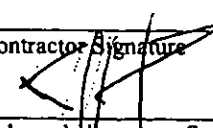
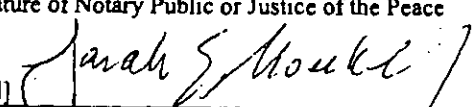
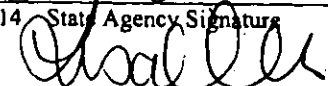
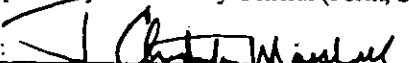
Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

1. IDENTIFICATION.

1.1 State Agency Name NH Department of Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name JSI Research and Training Institute, Inc., d/b/a Community Health Institute		1.4 Contractor Address 501 South Street, 2 nd Floor Bow, NH 03304	
1.5 Contractor Phone Number 603-573-3300	1.6 Account Number 05-95-90-202510-7545, 05-95-90-902510-2239, 05-95-90-902510-5178, 05-95-90-902510-2229, 05-95-90-902510-5390, 05-95-90-902510-5173, 05-95-90-902510-7964, 05-95-90-902010-5896, 05-95-90-902010-5190, & 05-95-90-201510-5299	1.7 Completion Date June 30, 2019	1.8 Price Limitation \$1,565,580
1.9 Contracting Officer for State Agency Jonathan V. Gallo, Esq., Interim Director		1.10 State Agency Telephone Number 603-271-9246	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory Jonathan Stewart, Director	
1.13 Acknowledgement: State of <u>NH</u> , County of <u>Merrimack</u> On <u>May 23, 2017</u> before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace [Seal] 			
1.13.2 Name and Title of Notary or Justice of the Peace <u>Sarah E. Moeckel, Notary</u> SARAH E. MOECKEL, Notary Public Commission Expires September 17, 2019			
1.14 State Agency Signature 		1.15 Name and Title of State Agency Signatory Lisa Morris, MSSW, Director	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By:  On: <u>6/5/17</u>			
1.18 Approval by the Governor and Executive Council (if applicable) By: _____ On: _____			

2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

7. PERSONNEL.

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

10. **TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

11. **CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

12. **ASSIGNMENT/DELEGATION/SUBCONTRACTS.** The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

13. **INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

15. WORKERS' COMPENSATION.

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

16. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

17. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

18. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no

such approval is required under the circumstances pursuant to State law, rule or policy.

19. CONSTRUCTION OF AGREEMENT AND TERMS.

This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

22. SPECIAL PROVISIONS. Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.



Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor will submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. Notwithstanding any other provision of the Contract to the contrary, no services shall continue after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30, 2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennia.

2. Scope of Services

The Contractor shall:

- 2.1. Provide a broad range of public health professional support services including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS) contractors.
- 2.2. Increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens and ensure successful outcomes across this range of services and program areas that include: transparent and informed community planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among DPHS contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.
- 2.3. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 2.3.1. In consultation with DPHS subject matter experts, provide logistical support for ongoing committees/planning groups as defined in Attachment F.
- 2.4. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.4.1. Provide logistical support to the New England Lead Coordinating Committee (NELCC). This includes up to 12 regular meetings of the full NELCC and up to 2 of committee/workgroup meetings per year. Information about the NELCC is available at: <http://www.newenglandlead.org/>.



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- 2.5. Environmental Public Health Tracking
- 2.5.1. Provide logistical support to host up to 10 meetings with Regional Public Health Networks to gather feedback on the EPHT Data Portal.
 - 2.5.2. Provide logistical support for up to 5 focus groups to conduct user research of EPHT data and projects.
- 2.6. Infectious Disease Prevention, Investigation & Care Services Section
- 2.6.1. Provide logistical support to the NH HIV Planning Group (HPG). This includes up to 6 regular meetings of the full HPG and up to 30 of committee/workgroup meetings per year. More information about the HIV HPG is available at: nhhiv.org.
- 2.7. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
- 2.7.1. Provide logistical support to quarterly conference calls for three, peer-based caucuses. The caucuses will be role based (e.g. supervisors, home visitors, and quality improvement staff).
 - 2.7.2. Provide logistical support for the Home Visiting Coordinating Council at least quarterly. This group serves as the MIECHV Advisory Group and is made up of collaborating partners and others in the state with an interest and background in home visiting.
- 2.8. Develop and Implement Training Programs
- 2.8.1. In consultation with DPHS subject matter experts, develop and/or implement training programs based on adult learning theories that use various training modalities (i.e. classroom, web-based, training of trainers, etc.) to maximize the reach of these programs.
 - 2.8.1.1. Food Protection Section (FPS):
 - 2.8.1.1.1. In consultation with Food Protection Staff develop training curricula for three discrete audiences:
 - 2.8.1.1.1.1. DPHS FPS staff and Food Service Establishment (FSE) inspectors in municipalities that regulate FSE. A list of these municipalities is available at:
<http://www.dhhs.nh.gov/dphs/fp/documents/selfinspect.pdf>
 - 2.8.1.1.1.2. Staff from state agencies that conduct food safety inspections as one component of a more comprehensive operational inspection. This includes Department of Environmental Services Youth Camp inspection staff, DHHS Health Facilities Licensing staff (which inspects child care centers, nursing homes and assisted living facilities).
 - 2.8.1.1.1.3. Food Service Workers including, but not limited to workers in restaurants, retail food stores, schools, and caterers.
 - 2.8.1.2. Public Health Emergency Preparedness:
 - 2.8.1.2.1. Develop and implement training programs for two discrete audiences:
 - 2.8.1.2.1.1. RPHN emergency preparedness coordinators



- 2.8.1.2.1.2. Local municipal officials, healthcare preparedness personnel, volunteers and others engaged in regional PHEP planning and response.
- 2.8.1.3. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.8.1.3.1. Plan and implement the 1-day Renovation, Repair and Painting Training programs in New Hampshire's highest risk communities using the US Environmental Protection Agency curriculum.
- 2.8.1.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.8.1.4.1. In consultation with MIECHV/MCH staff, facilitate a training needs assessment for the 11 MIECHV contracted home visiting sites.
 - 2.8.1.4.2. Develop and implement an annual training plan (which will include site specific training plans), including evaluation, from the information garnered from the training needs assessment. At a minimum, ten (10) training accessible opportunities should be offered per MIECHV funded home visiting site per year. An opportunity is defined as a pre-existing training, which the contractor pays home visiting staff to attend (can be out of state) and trainings which are provided by the contractor. These can be offered electronically (webinars, etc.) or in-person.
- 2.9. Provide Logistical Support for Conferences
 - 2.9.1. In consultation with DPHS subject matter experts, provide logistical support for conferences as defined by the DPHS in the original Request for Proposal.
 - 2.9.1.1. Healthy Homes and Lead Poisoning Prevention Program
 - 2.9.1.1.1. Provide logistical and planning support for the NELCC's annual conference for up to 250 attendees. Provide logistical and planning support for four regional dinner meetings for up to 120 attendees each.
 - 2.9.1.2. Immunization Program
 - 2.9.1.2.1. Provide logistical support for the annual Immunization Conference for approximately 400 attendees.
 - 2.9.1.3. Public Health Emergency Preparedness
 - 2.9.1.3.1. Provide logistical and planning support for the annual NH Statewide Preparedness conference for up to 800 attendees.
 - 2.9.1.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.9.1.4.1. Provide logistical and planning support for the bi-annual NH STD, HIV, Hepatitis, TB conference for up to 250 attendees. Planning support includes provision of continuing education credits.
 - 2.9.1.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section



Exhibit A

- 2.9.1.5.1. Provide logistical and planning support, including evaluation, to semi-annual conferences-learning exchanges (fall and spring) for up to 55 staff at MIECHV contracted sites. The spring 2018 training will focus on Healthy Families America required content training for continued certification. The fall training 2018 will be based on findings from the needs assessment.
- 2.9.1.5.2. Provide logistical and planning support for at least two half or full day in-person statewide and/or regional trainings.
- 2.10. Provide Technical Assistance
 - 2.10.1. Public Health Emergency Preparedness
 - 2.10.1.1. In consultation with DPHS subject matter experts, provide technical assistance to three discrete groups directed toward their meeting the national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (March 2011) and subsequent editions:
 - 2.10.1.1.1. DPHS/Emergency Services Unit (ESU) preparedness staff
 - 2.10.1.1.2. Public health preparedness coordinators at the 13 organizations funded by DPHS to provide Regional Public Health Network services. TA will be available to both individuals and as a group.
 - 2.10.1.1.3. Medical Reserve Corps units recognized by the registered with the U.S. Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps, to support recruitment, training and deployment of the MRC volunteers.
 - 2.10.1.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.2.1. In consultation with DPHS subject matter experts, identify and coordinate the availability of technical assistance providers to DPHS contractors and service provider agencies.
 - 2.10.1.3. Develop and produce educational materials
 - 2.10.1.3.1. In consultation with DPHS subject matter experts, develop and/or produce educational materials on topics determined by DPHS staff. All materials shall be developed in accordance with CDC recommendations contained in Simply Put: Guide to Developing Easy-To-Understand Materials, CDC July 2010, available at: https://www.cdc.gov/healthliteracy/pdf/Simply_Put.pdf
 - 2.10.1.4. Environmental Public Health Tracking Program (EPHT)
 - 2.10.1.4.1. Develop educational materials targeted to public health professionals, emergency preparedness officials, and local partners to increase knowledge and understanding of the EPHT program at the state and local levels.
 - 2.10.1.5. Healthy Homes and Lead Poisoning Prevention Program (HHLPPP)
 - 2.10.1.5.1. Develop educational materials in collaboration with the HHLPPP to target to clinicians, contractors, and families to increase knowledge and understanding of best practices relative to Screening and Management Guidelines, lead-safe work practices, and keeping children safe from lead hazards.
 - 2.10.1.6. Immunization Program
 - 2.10.1.6.1. Develop educational materials targeted towards increasing awareness related to the Immunization Information System (IIS).



Exhibit A

- 2.10.1.6.2. Develop educational materials targeted towards increasing awareness related to the benefits of immunizations across the lifespan.
- 2.10.1.7. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.7.1. In consultation with DPHS, maintain and update the NH HIV Planning Group (HPG) website.
- 2.10.2. Develop and Implement Evaluation Plans
 - 2.10.2.1. In consultation with DPHS subject matter experts, develop evaluation plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
 - 2.10.2.2. Environmental Public Health Tracking Program
 - 2.10.2.2.1. Develop and implement a plan to evaluate ongoing EPHT projects that meets criteria outlined by CDC and fulfills federal requirements. This document will facilitate programming planning, implementation, and evaluation.
 - 2.10.2.2.2. Develop and implement a plan to evaluate previously funded HHLPPP projects that addressed dissemination techniques and understanding of the 2015 Lead Surveillance Report and the Childhood lead Screening and Management Guidelines.
 - 2.10.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.2.3.1. Implement current MIECHV Continuous Quality Improvement Plan
- 2.10.3. Update Strategic Plans
 - 2.10.3.1. In consultation with DPHS subject matter experts, update pre-existing strategic plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
 - 2.10.3.2. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.3.2.1. Update the 2010 MIECHV Strategic State Plan.
- 2.10.4. Serve as a Fiscal Agent
 - 2.10.4.1. As directed by DPHS staff, serve as fiscal agent to maximize the efficient use of resources as follows:
 - 2.10.4.2. Environmental Public Health Tracking Program
 - 2.10.4.2.1. Enter into up to 3 mini-grants with vendors funded by DPHS to provide Regional Public Health Networks services. A list of currently funded vendors is available at: <http://www.dhhs.nh.gov/dphs/rphn/index.htm>.
 - 2.10.4.3. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.4.3.1. Reimburse costs incurred by approximately 5 public members of the HPG to attend out-of-state conferences identified by the DPHS and mileage costs to attend in-state meetings. The purpose is to increase the knowledge and skills of the public members of the HPG.
 - 2.10.4.3.2. Procure prevention supplies as determined by the IDPICSS.



Exhibit A

- 2.10.4.3.3. Execute a subcontract with a vendor identified by the DPHS to provide consultation and technical assistance on the production of a digital storytelling project, including coordination, development and implementation of a digital storytelling workshop; production of a digital storytelling electronic file for up to eight stories and training of participants in conducting an engagement session with stakeholders.
- 2.10.4.4. Public Health Emergency Preparedness
 - 2.10.4.4.1. Execute a subcontract with a vendor identified by the DPHS to procure E-Studio, a web-based collaboration system currently in use at DPHS.
 - 2.10.4.4.2. Enter into mini-grants with up to 13 Medical Reserve Corps units to build capacity to staff emergency response facilities during public health emergencies.
 - 2.10.4.4.3. Enter into subcontracts with up to 4 individuals identified by the DPHS to participate in radiological emergency planning, training and exercises to build staffing capacity to respond to radiological emergencies.
- 2.10.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.4.5.1. Support at least two MIECHV funded home visiting agency staff selected by the DHHS to attend the annual MIECHV grantee conference.
 - 2.10.4.5.2. Execute a subcontract with a vendor identified by the DPHS to research and identify methods to increase utilization of postpartum visits by home visiting families.

3. Staffing

The Contractor shall:

- 3.1. Provide sufficient staff to perform all tasks specified in this Contract and shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion to meet the scope of work
- 3.2. Ensure staffing structure includes a contract administrator to administer all scopes of work relative to this Contract, as well as progress and finance reporting.
- 3.3. Ensure that across all funded positions, in addition to subject matter expertise, there is a combined level of expertise, skills and ability to understand data; use data for planning and evaluation; community engagement and collaboration; group facilitation skills; and IT skills in order to function as a team, ideally with complementary skill and abilities across these foundational areas of expertise and abilities.
- 3.4. Ensure that personnel are available during normal business hours, at a minimum Monday through Friday, 8:00 A.M. to 4:00 P.M.



4. Outcomes / Performance Measures

- 4.1. The Contractor shall ensure that following performance outcomes and measures are annually achieved and monitored monthly to measure the effectiveness of the agreement:
- 4.2. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 4.2.1. Environmental Public Health Tracking
 - 4.2.1.1. At least 85% of participants rate the Feedback Sessions as either "excellent" or "very good" in an evaluation survey.
 - 4.2.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.2.2.1. At least 85% of participants rate the regular NELCC meetings as either "excellent" or "very good" in an evaluation survey.
 - 4.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.2.3.1. At least 85% of participants rate the quarterly caucus phone meetings as either "excellent" or "very good" in an evaluation survey.
 - 4.2.3.2. At least 85% of participants rate the quarterly Home Visiting Coordinating Council meetings as either "excellent" or "very good" in an evaluation survey.
- 4.3. Develop and Implement Training Programs
 - 4.3.1. Food Protection Section
 - 4.3.1.1. The training modules are approved and rated by the DHHS as either "excellent" or "very good"
 - 4.3.1.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.2. Public Health Emergency Preparedness
 - 4.3.2.1. The training modules are rated as either "excellent" or "very good" by DPHS.
 - 4.3.2.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.3. Healthy Homes and Lead Poisoning Prevention Program
 - 4.3.3.1. The training module is rated as either "excellent" or "very good" by DPHS.
 - 4.3.3.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.3.4.1. Needs assessment and training plan (overall and site specific) approved by DPHS.
 - 4.3.4.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.



- 4.4. Provide Logistical Support for Conferences
 - 4.4.1. Healthy Homes and Lead Poisoning Prevention Program
 - 4.4.1.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.1.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2. Immunization Program
 - 4.4.2.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3. Public Health Emergency Preparedness
 - 4.4.3.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.4.4.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.4.5.1. At least 85% of learning exchange participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
- 4.5. Provide Technical Assistance
 - 4.5.1. Public Health Emergency Preparedness
 - 4.5.1.1. At least 90% of high-priority technical assistance requests made are met.
 - 4.5.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.5.2.1. At least 90% of high-priority technical assistance requests made are met.
- 4.6. Develop and produce educational materials
 - 4.6.1. Environmental Public Health Tracking Program
 - 4.6.1.1. Approval by the Division of Public Health Services of developed educational materials.
 - 4.6.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.6.2.1. Approval by the Division of Public Health Services of developed educational materials.



- 4.6.3. Immunization Program
 - 4.6.3.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.6.4.1. Approval by the Division of Public Health Services of the content and functionality of the HPG website.
- 4.7. Develop and Implement Evaluation Plans
 - 4.7.1. Environmental Public Health Tracking Program
 - 4.7.1.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.7.2.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.7.3.1. Implementation of at least 90% of the current MIECHV Continuous Quality Improvement Plan.
- 4.8. Update Strategic Plans
 - 4.8.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.8.1.1. Approval by the Division of Public Health Services of updated MIECHV Strategic State Plan.
- 4.9. Serve as a Fiscal Agent
 - 4.9.1. Environmental Public Health Tracking Program
 - 4.9.1.1. Subcontracts with RPHNs executed as directed by DPHS.
 - 4.9.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.9.2.1. Target: 95% of HIV and HCV testing and prevention supplies distributed to sites are logged on the appropriate distribution log within one week of distribution.
 - 4.9.2.2. Numerator- The number of HIV and HCV testing and prevention supply distributions listed on the distribution log that were logged within one week of the distribution date.
 - 4.9.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.9.3.1. Subcontract for increase in postpartum visit project executed as directed by DPHS.
 - 4.9.4. Public Health Emergency Preparedness
 - 4.9.4.1. Subcontracts with Medical Reserve Corps executed as directed by DPHS/ESU.
 - 4.9.4.2. Subcontract for web-based collaboration system executed as directed by DPHS.
 - 4.9.4.3. Subcontracts with up to four individuals executed as directed by DPHS.



- 4.10. Annually, the Contractor shall develop and submit to the DHHS, a corrective action plan for any performance measure that was not achieved.

5. State and Federal Laws

The Contractor shall:

- 5.1. Be responsible for compliance with all relevant state and federal laws: Special attention is called to the following statutory responsibilities:
- 5.2. Publications funded under this contract shall be responsible to adhere to the requirements in Exhibit C Special Provisions, Paragraph 14. Prior Approval and Copyright Ownership.
- 5.3. The Contractor shall ensure equal access to quality health services and provide culturally and linguistically appropriate services and adhere to the requirements in Exhibit C Special Provisions, Paragraph 16. Limited English Proficiency (LEP).
- 5.4. DHHS recognizes that Contractors may choose to use subcontractors with specific expertise to perform certain services or functions for efficiency or convenience. However, the Contractor shall retain the responsibility and accountability for the function(s) for any services required by this Contract that are provided, in whole or in part, by a subcontracted agency or provider, and adhere to the requirements in Exhibit C Special Provisions, Paragraph 19. Subcontractors of this Contract.
- 5.5. Adhere to the Health Insurance Portability and Accountability Act requirements to maintain the confidentiality of protected health information provided by individuals who contact the poison control center in Exhibit I Health Insurance Portability Act Business Associate
- 5.6. The Contractor shall ensure that following performance indicators are annually achieved and monitored monthly to measure the effectiveness of the agreement:

Y
5/23/17



Exhibit B

Method and Conditions Precedent to Payment

1) The State shall pay the contractor an amount not to exceed the Form P-37, Block 1.8, Price Limitation for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.

1.1. This contract is funded with Funds from:

- 1.1.1. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA #) 93.069, Federal Award Identification Number (FAIN) # U90TP000535,
- 1.1.2. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA #) 93.889, Federal Award Identification Number (FAIN) # U90TP000535,
- 1.1.3. US Centers for Disease Control and Prevention, 2013 Cooperative Agreement Application for the Immunization, Vaccine for Children, Catalog of Federal Domestic Assistance (CFDA #) 93.539, Federal Award Identification Number (FAIN) # 23IP000757,
- 1.1.4. US Centers for Disease Control and Prevention, Environmental Public Health Tracking Program - Network Implementation, Catalog of Federal Domestic Assistance (CFDA #) 93.070, Federal Award Identification Number (FAIN) # NU38EH000947,
- 1.1.5. US Centers for Disease Control and Prevention, NH - Reduced Lead Poisoning of Children, Catalog of Federal Domestic Assistance (CFDA #) 93.753, Federal Award Identification Number (FAIN) # NUE1EH001271.
- 1.1.6. US Environmental Protection Agency, Lead 404(g) Training and Certification, Catalog of Federal Domestic Assistance (CFDA #) 66.707, Federal Award Identification Number (FAIN) # 99151215.
- 1.1.7. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA #) 93.870, Federal Award Identification Number (FAIN) # X10MC29490.
- 1.1.8. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA #) 93.994, Federal Award Identification Number (FAIN) # BO4MC30627.
- 1.1.9. Other Funds from Pharmaceutical Rebates, Food Protection Fees and Radiological Health Fees
- 1.1.10. General Funds.

1.2. The Contractor agrees to provide the services in Exhibit A, Scope of Service in compliance with funding requirements. Failure to meet the scope of services may jeopardize the funded contractor's current and/or future funding.

2) Payment for said services shall be made monthly as follows:

- 2.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved line item.
- 2.2. The Contractor will submit an invoice in a form satisfactory to the State by the twentieth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The invoice must be completed, signed, dated and returned to the Department in order to initiate payment. The Contractor agrees to keep records of their activities related to Department programs and services.



Exhibit B

- 2.3. The State shall make payment to the Contractor within thirty (30) days of receipt of each invoice, subsequent to approval of the submitted invoice and if sufficient funds are available. Contractors will keep detailed records of their activities related to DHHS-funded programs and services.
 - 2.4. The final invoice shall be due to the State no later than forty (40) days after the contract Form P-37, Block 1.7 Completion Date.
 - 2.5. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to DPH\$contractbilling@dhhs.nh.gov, or invoices may be mailed to:

Financial Administrator
Department of Health and Human Services
Division of Public Health Services
29 Hazen Drive
Concord, NH 03301
 - 2.6. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A, Scope of Services and in this Exhibit B.
- 3) Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

**Public Health Professional Support
Services - Public Health Emergency**

Budget Request for: Preparedness

(Name of RFP)

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 49,886.51	\$ -	\$ 49,886.51	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 18,956.87	\$ -	\$ 18,956.87	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,546.48	\$ -	\$ 1,546.48	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 2,700.88	\$ -	\$ 2,700.88	
6. Travel	\$ 1,000.00	\$ -	\$ 1,000.00	
7. Occupancy	\$ 4,988.65	\$ -	\$ 4,988.65	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 3,741.48	\$ -	\$ 3,741.48	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 997.73	\$ -	\$ 997.73	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Web-based Collaboration System	\$ 13,000.00	\$ -	\$ 13,000.00	
Preparedness Conference Support	\$ 10,000.00	\$ -	\$ 10,000.00	
Information Systems	\$ -	\$ 2,045.35	\$ 2,045.35	
HR	\$ -	\$ 2,045.35	\$ 2,045.35	
Gen Admin	\$ -	\$ 2,045.35	\$ 2,045.35	
Payroll and Accounting	\$ -	\$ 2,045.35	\$ 2,045.35	
	\$ -	\$ -	\$ -	
TOTAL	\$ 106,818.60	\$ 8,181.40	\$ 115,000.00	

Indirect As A Percent of Direct

7.7%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc., d/b/a

Bidder/Contractor Name: Community Health Institute

**Public Health Professional Support
Services - Public Health Emergency**

Budget Request for: Preparedness

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 49,887.59	\$ -	\$ 49,887.59	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 18,957.28	\$ -	\$ 18,957.28	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase &	\$ 1,546.52	\$ -	\$ 1,546.52	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical,	\$ 2,698.97	\$ -	\$ 2,698.97	
6. Travel	\$ 1,000.00	\$ -	\$ 1,000.00	
7. Occupancy	\$ 4,988.76	\$ -	\$ 4,988.76	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 3,741.57	\$ -	\$ 3,741.57	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 997.75	\$ -	\$ 997.75	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Web-based Collaboration System	\$ 13,000.00	\$ -	\$ 13,000.00	
Preparedness Conference Support	\$ 10,000.00	\$ -	\$ 10,000.00	
Information Systems	\$ -	\$ 2,045.39	\$ 2,045.39	
HR	\$ -	\$ 2,045.39	\$ 2,045.39	
Gen Admin	\$ -	\$ 2,045.39	\$ 2,045.39	
Payroll and Accounting	\$ -	\$ 2,045.39	\$ 2,045.39	
TOTAL	\$ 106,818.44	\$ 8,181.56	\$ 115,000.00	

Indirect As A Percent of Direct

7.7%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - Hospital Preparedness
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 10,796.70	\$ -	\$ 10,796.70	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick
2. Employee Benefits	\$ 4,102.75	\$ -	\$ 4,102.75	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 334.70	\$ -	\$ 334.70	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 639.83	\$ -	\$ 639.83	
6. Travel	\$ 250.00	\$ -	\$ 250.00	
7. Occupancy	\$ 1,079.67	\$ -	\$ 1,079.67	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 809.76	\$ -	\$ 809.76	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 215.93	\$ -	\$ 215.93	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Medical Reserve Corps Mini-Grants	\$ 50,000.00	\$ -	\$ 50,000.00	
Information Systems	\$ -	\$ 442.67	\$ 442.67	
HR	\$ -	\$ 442.67	\$ 442.67	
Gen Admin	\$ -	\$ 442.67	\$ 442.67	
Payroll and Accounting	\$ -	\$ 442.67	\$ 442.67	
	\$ -	\$ -	\$ -	
TOTAL	\$ 68,229.34	\$ 1,770.66	\$ 70,000.00	
Indirect As A Percent of Direct		2.6%		

Contractor Initials: 

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc., d/b/a

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support

Budget Request for: Services - Hospital Preparedness

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Location Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 10,796.70	\$ -	\$ 10,796.70	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick
2. Employee Benefits	\$ 4,102.75	\$ -	\$ 4,102.75	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 334.70	\$ -	\$ 334.70	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 639.83	\$ -	\$ 639.83	
6. Travel	\$ 250.00	\$ -	\$ 250.00	
7. Occupancy	\$ 1,079.67	\$ -	\$ 1,079.67	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 809.76	\$ -	\$ 809.76	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 215.93	\$ -	\$ 215.93	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Medical Reserve Corps Mini-Grants	\$ 50,000.00	\$ -	\$ 50,000.00	
Information Systems	\$ -	\$ 442.67	\$ 442.67	
HR	\$ -	\$ 442.67	\$ 442.67	
Gen Admin	\$ -	\$ 442.67	\$ 442.67	
Payroll and Accounting	\$ -	\$ 442.67	\$ 442.67	
	\$ -	\$ -	\$ -	
TOTAL	\$ 68,229.34	\$ 1,770.66	\$ 70,000.00	
Indirect As A Percent of Direct		2.6%		

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - Immunization
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 30,219.78	\$ -	\$ 30,219.78	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 11,483.52	\$ -	\$ 11,483.52	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 936.82	\$ -	\$ 936.82	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,510.99	\$ -	\$ 1,510.99	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 3,021.98	\$ -	\$ 3,021.98	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,266.47	\$ -	\$ 2,266.47	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00	
11. Staff Education and Training	\$ 604.40	\$ -	\$ 604.40	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory): 2019 NHIP Conference	\$ 5,000.00	\$ -	\$ 5,000.00	
Information Systems	\$ -	\$ 1,239.01	\$ 1,239.01	
HR	\$ -	\$ 1,239.01	\$ 1,239.01	
Gen Admin	\$ -	\$ 1,239.01	\$ 1,239.01	
Payroll and Accounting	\$ -	\$ 1,239.01	\$ 1,239.01	
	\$ -	\$ -	\$ -	
TOTAL	\$ 60,043.98	\$ 4,956.04	\$ 65,000.00	
Indirect As A Percent of Direct		8.3%		

Contractor Initials: *J*


Date: 5/23/17

New Hampshire Department of Health and Human Services
JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support
Budget Request for: Services - Immunization
(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 30,219.78	\$ -	\$ 30,219.78	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 11,483.52	\$ -	\$ 11,483.52	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 936.82	\$ -	\$ 936.82	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,510.99	\$ -	\$ 1,510.99	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 3,021.98	\$ -	\$ 3,021.98	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,266.47	\$ -	\$ 2,266.47	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00	
11. Staff Education and Training	\$ 604.40	\$ -	\$ 604.40	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory): 2019 NHIP Conference	\$ 5,000.00	\$ -	\$ 5,000.00	
Information Systems	\$ -	\$ 1,239.01	\$ 1,239.01	
HR	\$ -	\$ 1,239.01	\$ 1,239.01	
Gen Admin	\$ -	\$ 1,239.01	\$ 1,239.01	
Payroll and Accounting	\$ -	\$ 1,239.01	\$ 1,239.01	
	\$ -	\$ -	\$ -	
TOTAL	\$ 60,043.96	\$ 4,956.04	\$ 65,000.00	
Indirect As A Percent of Direct		8.3%		

Contractor Initials: 

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - Pharmaceutical Rebates
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Location: Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 37,607.84	\$ -	\$ 37,607.84	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 14,290.98	\$ -	\$ 14,290.98	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,165.84	\$ -	\$ 1,165.84	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,880.39	\$ -	\$ 1,880.39	
6. Travel	\$ 1,500.00	\$ -	\$ 1,500.00	
7. Occupancy	\$ 3,760.78	\$ -	\$ 3,760.78	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,820.60	\$ -	\$ 2,820.60	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 752.16	\$ -	\$ 752.16	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
HPG Member Reimbursement	\$ 2,000.00	\$ -	\$ 2,000.00	
Conference Support	\$ 5,000.00	\$ -	\$ 5,000.00	
Prevention Supplies	\$ 12,000.00	\$ -	\$ 12,000.00	
Digital Storytelling	\$ 25,000.00	\$ -	\$ 25,000.00	
Meeting Expenses	\$ 6,000.00	\$ -	\$ 6,000.00	
Website Maintenance	\$ 500.00	\$ -	\$ 500.00	
Subscription Services	\$ 1,500.00	\$ -	\$ 1,500.00	
Other Professional Support Services	\$ 10,000.00	\$ -	\$ 10,000.00	
Special Projects	\$ 1,853.73	\$ -	\$ 1,853.73	
Information Systems	\$ -	\$ 1,541.92	\$ 1,541.92	
HR	\$ -	\$ 1,541.92	\$ 1,541.92	
Gen Admin	\$ -	\$ 1,541.92	\$ 1,541.92	
Payroll and Accounting	\$ -	\$ 1,541.92	\$ 1,541.92	
TOTAL	\$ 127,832.32	\$ 6,167.68	\$ 133,800.00	

Indirect As A Percent of Direct

4.8%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - Pharmaceutical Rebates
(Name of RFP)**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Location Method to Indirect/Fixed Cost
1. Total Salary/Wages	\$ 38,647.24	\$ -	\$ 38,647.24	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 14,685.95	\$ -	\$ 14,685.95	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,198.06	\$ -	\$ 1,198.06	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,932.36	\$ -	\$ 1,932.36	
6. Travel	\$ 1,500.00	\$ -	\$ 1,500.00	
7. Occupancy	\$ 3,864.72	\$ -	\$ 3,864.72	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,898.54	\$ -	\$ 2,898.54	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 772.94	\$ -	\$ 772.94	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
HPG Member Reimbursements	\$ 2,000.00	\$ -	\$ 2,000.00	
Conference Support	\$ 5,000.00	\$ -	\$ 5,000.00	
Prevention Supplies	\$ 12,000.00	\$ -	\$ 12,000.00	
Meeting Expenses	\$ 6,000.00	\$ -	\$ 6,000.00	
Website Maintenance	\$ 500.00	\$ -	\$ 500.00	
Subscription Services	\$ 1,500.00	\$ -	\$ 1,500.00	
Other Professional Support Services	\$ 10,000.00	\$ -	\$ 10,000.00	
Special Projects	\$ 5,154.71	\$ -	\$ 5,154.71	
Information Systems	\$ -	\$ 1,536.37	\$ 1,536.37	
HR	\$ -	\$ 1,536.37	\$ 1,536.37	
Gen Admin	\$ -	\$ 1,536.37	\$ 1,536.37	
Payroll and Accounting	\$ -	\$ 1,536.37	\$ 1,536.37	
	\$ -	\$ -	\$ -	
TOTAL	\$ 107,654.52	\$ 6,145.48	\$ 113,800.00	

Indirect As A Percent of Direct

5.7%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - Food
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 9,577.03	\$ -	\$ 9,577.03	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,639.28	\$ -	\$ 3,639.28	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 296.89	\$ -	\$ 296.89	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 478.85	\$ -	\$ 478.85	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 957.71	\$ -	\$ 957.71	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 718.29	\$ -	\$ 718.29	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 191.54	\$ -	\$ 191.54	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Training Development	\$ 569.77	\$ -	\$ 569.77	
Information Systems	\$ -	\$ 392.66	\$ 392.66	
HR	\$ -	\$ 392.66	\$ 392.66	
Gen Admin	\$ -	\$ 392.66	\$ 392.66	
Payroll and Accounting	\$ -	\$ 392.66	\$ 392.66	
	\$ -	\$ -	\$ -	
TOTAL	\$ 16,429.36	\$ 1,570.64	\$ 18,000.00	
Indirect As A Percent of Direct		9.6%		

Contractor Initials: JSI

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Food

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 8,791.47	\$ -	\$ 8,791.47	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,340.48	\$ -	\$ 3,340.48	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 272.52	\$ -	\$ 272.52	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 439.55	\$ -	\$ 439.55	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 879.10	\$ -	\$ 879.10	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 659.34	\$ -	\$ 659.34	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 175.82	\$ -	\$ 175.82	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Training Development	\$ 2,000.00	\$ -	\$ 2,000.00	
Information Systems	\$ -	\$ 360.43	\$ 360.43	
HR	\$ -	\$ 360.43	\$ 360.43	
Gen Admin	\$ -	\$ 360.43	\$ 360.43	
Payroll and Accounting	\$ -	\$ 360.43	\$ 360.43	
	\$ -	\$ -	\$ -	
TOTAL	\$ 16,558.28	\$ 1,441.72	\$ 18,000.00	
Indirect As A Percent of Direct		8.7%		

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - EPHT
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 6,483.30	\$ -	\$ 6,483.30	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation
2. Employee Benefits	\$ 2,463.62	\$ -	\$ 2,463.62	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 200.98	\$ -	\$ 200.98	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 324.16	\$ -	\$ 324.16	
6. Travel	\$ 450.00	\$ -	\$ 450.00	
7. Occupancy	\$ 648.32	\$ -	\$ 648.32	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 486.24	\$ -	\$ 486.24	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 129.66	\$ -	\$ 129.66	
12. Subcontracts/Agreements	\$ 30,000.00	\$ -	\$ 30,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Meeting Expenses	\$ 4,600.00	\$ -	\$ 4,600.00	
Materials Development	\$ 3,150.48	\$ -	\$ 3,150.48	
Information Systems	\$ -	\$ 265.81	\$ 265.81	
HR	\$ -	\$ 265.81	\$ 265.81	
Gen Admin	\$ -	\$ 265.81	\$ 265.81	
Payroll and Accounting	\$ -	\$ 265.81	\$ 265.81	
	\$ -	\$ -	\$ -	
TOTAL	\$ 72,200.00	\$ 11,191.00	\$ 50,000.00	

Indirect As A Percent of Direct

15.5%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - EPHT

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 9,609.55	\$ -	\$ 9,609.55	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,651.63	\$ -	\$ 3,651.63	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 297.90	\$ -	\$ 297.90	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 480.48	\$ -	\$ 480.48	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 960.96	\$ -	\$ 960.96	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 720.72	\$ -	\$ 720.72	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 192.16	\$ -	\$ 192.16	
12. Subcontracts/Agreements	\$ 30,000.00	\$ -	\$ 30,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Materials Production	\$ 2,510.64	\$ -	\$ 2,510.64	
Information Systems	\$ -	\$ 393.99	\$ 393.99	
HR	\$ -	\$ 393.99	\$ 393.99	
Gen Admin	\$ -	\$ 393.99	\$ 393.99	
Payroll and Accounting	\$ -	\$ 393.99	\$ 393.99	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 48,424.04	\$ 1,575.96	\$ 50,000.00	

Indirect As A Percent of Direct

3.3%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support
Budget Request for: Services - CDC Lead
(Name of RFP)

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 11,208.79	\$ -	\$ 11,208.79	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick
2. Employee Benefits	\$ 4,259.34	\$ -	\$ 4,259.34	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 347.47	\$ -	\$ 347.47	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 560.44	\$ -	\$ 560.44	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 1,120.88	\$ -	\$ 1,120.88	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 840.66	\$ -	\$ 840.66	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 224.18	\$ -	\$ 224.18	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Educational Outreach	\$ 15,600.00	\$ -	\$ 15,600.00	
Information Systems	\$ -	\$ 459.56	\$ 459.56	
HR	\$ -	\$ 459.56	\$ 459.56	
Gen Admin	\$ -	\$ 459.56	\$ 459.56	
Payroll and Accounting	\$ -	\$ 459.56	\$ 459.56	
	\$ -	\$ -	\$ -	
TOTAL	\$ 34,161.76	\$ 1,838.24	\$ 36,000.00	

Indirect As A Percent of Direct

5.4%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - CDC Lead

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 11,208.79	\$ -	\$ 11,208.79	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 4,259.34	\$ -	\$ 4,259.34	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 347.47	\$ -	\$ 347.47	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 560.44	\$ -	\$ 560.44	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 1,120.88	\$ -	\$ 1,120.88	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 840.66	\$ -	\$ 840.66	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 224.18	\$ -	\$ 224.18	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Educational Outreach	\$ 15,600.00	\$ -	\$ 15,600.00	
Information Systems			\$ -	
HR	\$ -	\$ 459.56	\$ 459.56	
Gen Admin	\$ -	\$ 459.56	\$ 459.56	
Payroll and Accounting	\$ -	\$ 459.56	\$ 459.56	
	\$ -	\$ 459.56	\$ 459.56	
TOTAL	\$ 34,161.76	\$ 1,838.24	\$ 36,000.00	
Indirect As A Percent of Direct		5.4%		

Contractor Initials: JSI

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute, Inc.,
Bidder/Contractor Name: d/b/a Community Health Institute**

**Public Health Professional Support
Budget Request for: Services - EPA Lead
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 23,461.54	\$ -	\$ 23,461.54	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 8,915.38	\$ -	\$ 8,915.38	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 727.31	\$ -	\$ 727.31	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,173.08	\$ -	\$ 1,173.08	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 2,346.15	\$ -	\$ 2,346.15	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 1,759.62	\$ -	\$ 1,759.62	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 469.23	\$ -	\$ 469.23	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
NELCC Meetings	\$ 6,750.01		\$ 6,750.01	
Educational Outreach	\$ 550.00	\$ -	\$ 550.00	
Information Systems	\$ -	\$ 961.92	\$ 961.92	
HR	\$ -	\$ 961.92	\$ 961.92	
Gen Admin	\$ -	\$ 961.92	\$ 961.92	
Payroll and Accounting	\$ -	\$ 961.92	\$ 961.92	
	\$ -	\$ -	\$ -	
TOTAL	\$ 46,152.32	\$ 3,847.68	\$ 50,000.00	

Indirect As A Percent of Direct

8.3%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc., d/b/a

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support Services

Budget Request for: - EPA Lead

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 22,225.27	\$ -	\$ 22,225.27	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 8,445.60	\$ -	\$ 8,445.60	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 688.98	\$ -	\$ 688.98	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,111.26	\$ -	\$ 1,111.26	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 2,222.53	\$ -	\$ 2,222.53	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 1,666.89	\$ -	\$ 1,666.89	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 444.51	\$ -	\$ 444.51	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
NELCC Meetings	\$ 9,000.00	\$ -	\$ 9,000.00	
Educational Outreach	\$ 550.00	\$ -	\$ 550.00	
Information Systems	\$ -	\$ 911.24	\$ 911.24	
HR	\$ -	\$ 911.24	\$ 911.24	
Gen Admin	\$ -	\$ 911.24	\$ 911.24	
Payroll and Accounting	\$ -	\$ 911.24	\$ 911.24	
	\$ -	\$ -	\$ -	
TOTAL	\$ 46,355.04	\$ 3,644.96	\$ 50,000.00	

Indirect As A Percent of Direct

7.9%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Regional Public Health Network Services -

Budget Request for: Home Visiting

(Name of RFP)

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 91,203.33	\$ -	\$ 91,203.33	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick
2. Employee Benefits	\$ 34,657.25	\$ -	\$ 34,657.25	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 2,827.30	\$ -	\$ 2,827.30	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 4,560.16	\$ -	\$ 4,560.16	
6. Travel	\$ 5,000.00	\$ -	\$ 5,000.00	
7. Occupancy	\$ 9,120.33	\$ -	\$ 9,120.33	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 6,840.24	\$ -	\$ 6,840.24	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 1,824.07	\$ -	\$ 1,824.07	
12. Subcontracts/Agreements	\$ 5,000.00	\$ -	\$ 5,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Learning Exchanges	\$ 5,000.00	\$ -	\$ 5,000.00	
Scholarships	\$ 6,000.00	\$ -	\$ 6,000.00	
HFA Training & Supports	\$ 35,000.00	\$ -	\$ 35,000.00	
<i>Information Systems</i>		\$ 3,739.33	\$ 3,739.33	
<i>HR</i>		\$ 3,739.33	\$ 3,739.33	
<i>Gen Admin</i>		\$ 3,739.33	\$ 3,739.33	
<i>Payroll and Accounting</i>		\$ 3,739.33	\$ 3,739.33	
TOTAL	\$ 207,032.68	\$ 14,957.32	\$ 221,990.00	

Indirect As A Percent of Direct

7.2%

Contractor Initials: 

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Regional Public Health Network Services -

Budget Request for: Home Visiting

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 91,203.33	\$ -	\$ 91,203.33	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 34,657.25	\$ -	\$ 34,657.25	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase &	\$ 2,827.30	\$ -	\$ 2,827.30	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical,	\$ 4,560.16	\$ -	\$ 4,560.16	
6. Travel	\$ 5,000.00	\$ -	\$ 5,000.00	
7. Occupancy	\$ 9,120.33	\$ -	\$ 9,120.33	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board	\$ 6,840.24	\$ -	\$ 6,840.24	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 1,824.07	\$ -	\$ 1,824.07	
12. Subcontracts/Agreements	\$ 5,000.00	\$ -	\$ 5,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Learning Exchanges	\$ 5,000.00	\$ -	\$ 5,000.00	
Scholarships	\$ 6,000.00	\$ -	\$ 6,000.00	
HFA Training & Supports	\$ 35,000.00	\$ -	\$ 35,000.00	
Information Systems		\$ 3,739.33	\$ 3,739.33	
HR		\$ 3,739.33	\$ 3,739.33	
Gen Admin		\$ 3,739.33	\$ 3,739.33	
Payroll and Accounting		\$ 3,739.33	\$ 3,739.33	
TOTAL	\$ 207,032.68	\$ 14,957.32	\$ 221,990.00	

Indirect As A Percent of Direct

7.2%

Contractor Initials: JS

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute,
Bidder/Contractor Name: Inc., d/b/a Community Health**

**Regional Public Health Network
Budget Request for: Services - Maternal & Child Health
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ -	\$ -	\$ -	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick
2. Employee Benefits	\$ -	\$ -	\$ -	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ -	\$ -	\$ -	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ -	\$ -	\$ -	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ -	\$ -	\$ -	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ -	\$ -	\$ -	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ -	\$ -	\$ -	
12. Subcontracts/Agreements	\$ 24,000.00	\$ -	\$ 24,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 24,000.00	\$ -	\$ 24,000.00	

Indirect As A Percent of Direct

0.0%

Contractor Initials:



Date:

5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute,
 Bidder/Contractor Name: Inc., d/b/a Community Health


Regional Public Health Network
 Budget Request for: Services - Maternal & Child Health
 (Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ -	\$ -	\$ -	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. Includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday sick
2. Employee Benefits	\$ -	\$ -	\$ -	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ -	\$ -	\$ -	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ -	\$ -	\$ -	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ -	\$ -	\$ -	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ -	\$ -	\$ -	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ -	\$ -	\$ -	
12. Subcontracts/Agreements	\$ 24,000.00	\$ -	\$ 24,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 24,000.00	\$ -	\$ 24,000.00	

Indirect As A Percent of Direct

0.0%

Contractor Initials: 

Date: 5/23/17

New Hampshire Department of Health and Human Services

JSI Research & Training Institute,
Bidder/Contractor Name: Inc., d/b/a Community Health

Regional Public Health Network
Budget Request for: Services - Radiological Emergency
 (Name of RFP)

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 494.51	\$ -	\$ 494.51	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 187.91	\$ -	\$ 187.91	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 15.33	\$ -	\$ 15.33	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 24.73	\$ -	\$ 24.73	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 49.45	\$ -	\$ 49.45	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 37.08	\$ -	\$ 37.08	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 9.89	\$ -	\$ 9.89	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Radiological Emergencies Subcontracts	\$ 8,100.00	\$ -	\$ 8,100.00	
Information Systems	\$ -	\$ 20.28	\$ 20.28	
HR	\$ -	\$ 20.28	\$ 20.28	
Gen Admin	\$ -	\$ 20.28	\$ 20.28	
Payroll and Accounting	\$ -	\$ 20.28	\$ 20.28	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 8,918.90	\$ 81.10	\$ 9,000.00	

Indirect As A Percent of Direct

0.9%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**JSI Research & Training Institute,
Bidder/Contractor Name: Inc., d/b/a Community Health**

**Regional Public Health Network
Budget Request for: Services - Radiological Emergency
(Name of RFP)**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 494.51	\$ -	\$ 494.51	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 187.91	\$ -	\$ 187.91	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 15.33	\$ -	\$ 15.33	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 24.73	\$ -	\$ 24.73	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 49.45	\$ -	\$ 49.45	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 37.08	\$ -	\$ 37.08	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 9.89	\$ -	\$ 9.89	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Radiological Emergencies Subcontracts	\$ 8,100.00	\$ -	\$ 8,100.00	
Information Systems	\$ -	\$ 20.28	\$ 20.28	
HR	\$ -	\$ 20.28	\$ 20.28	
Gen Admin	\$ -	\$ 20.28	\$ 20.28	
Payroll and Accounting	\$ -	\$ 20.28	\$ 20.28	
TOTAL	\$ 8,918.90	\$ 81.10	\$ 9,000.00	

Indirect As A Percent of Direct

0.9%

Contractor Initials:

Date: 5/23/17



SPECIAL PROVISIONS

Contractors Obligations: The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

1. **Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.
2. **Time and Manner of Determination:** Eligibility determinations shall be made on forms provided by the Department for that purpose and shall be made and remade at such times as are prescribed by the Department.
3. **Documentation:** In addition to the determination forms required by the Department, the Contractor shall maintain a data file on each recipient of services hereunder, which file shall include all information necessary to support an eligibility determination and such other information as the Department requests. The Contractor shall furnish the Department with all forms and documentation regarding eligibility determinations that the Department may request or require.
4. **Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.
5. **Gratuities or Kickbacks:** The Contractor agrees that it is a breach of this Contract to accept or make a payment, gratuity or offer of employment on behalf of the Contractor, any Sub-Contractor or the State in order to influence the performance of the Scope of Work detailed in Exhibit A of this Contract. The State may terminate this Contract and any sub-contract or sub-agreement if it is determined that payments, gratuities or offers of employment of any kind were offered or received by any officials, officers, employees or agents of the Contractor or Sub-Contractor.
6. **Retroactive Payments:** Notwithstanding anything to the contrary contained in the Contract or in any other document, contract or understanding, it is expressly understood and agreed by the parties hereto, that no payments will be made hereunder to reimburse the Contractor for costs incurred for any purpose or for any services provided to any individual prior to the Effective Date of the Contract and no payments shall be made for expenses incurred by the Contractor for any services provided prior to the date on which the individual applies for services or (except as otherwise provided by the federal regulations) prior to a determination that the individual is eligible for such services.
7. **Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractor's costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party funders for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party funders, the Department may elect to:
 - 7.1. Renegotiate the rates for payment hereunder, in which event new rates shall be established;
 - 7.2. Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;

[Handwritten Signature]
Date 5/23/17



- 7.3. Demand repayment of the excess payment by the Contractor in which event failure to make such repayment shall constitute an Event of Default hereunder. When the Contractor is permitted to determine the eligibility of individuals for services, the Contractor agrees to reimburse the Department for all funds paid by the Department to the Contractor for services provided to any individual who is found by the Department to be ineligible for such services at any time during the period of retention of records established herein.

RECORDS: MAINTENANCE, RETENTION, AUDIT, DISCLOSURE AND CONFIDENTIALITY:

8. **Maintenance of Records:** In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:
- 8.1. **Fiscal Records:** books, records, documents and other data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor during the Contract Period, said records to be maintained in accordance with accounting procedures and practices which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.
 - 8.2. **Statistical Records:** Statistical, enrollment, attendance or visit records for each recipient of services during the Contract Period, which records shall include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.
 - 8.3. **Medical Records:** Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.
9. **Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the agency fiscal year. It is recommended that the report be prepared in accordance with the provision of Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non Profit Organizations" and the provisions of Standards for Audit of Governmental Organizations, Programs, Activities and Functions, issued by the US General Accounting Office (GAO standards) as they pertain to financial compliance audits.
- 9.1. **Audit and Review:** During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts.
 - 9.2. **Audit Liabilities:** In addition to and not in any way in limitation of obligations of the Contract, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department, all payments made under the Contract to which exception has been taken or which have been disallowed because of such an exception.
10. **Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.



Notwithstanding anything to the contrary contained herein the covenants and conditions contained in the Paragraph shall survive the termination of the Contract for any reason whatsoever.

11. **Reports: Fiscal and Statistical:** The Contractor agrees to submit the following reports at the following times if requested by the Department.
 - 11.1. **Interim Financial Reports:** Written interim financial reports containing a detailed description of all costs and non-allowable expenses incurred by the Contractor to the date of the report and containing such other information as shall be deemed satisfactory by the Department to justify the rate of payment hereunder. Such Financial Reports shall be submitted on the form designated by the Department or deemed satisfactory by the Department.
 - 11.2. **Final Report:** A final report shall be submitted within thirty (30) days after the end of the term of this Contract. The Final Report shall be in a form satisfactory to the Department and shall contain a summary statement of progress toward goals and objectives stated in the Proposal and other information required by the Department.
12. **Completion of Services: Disallowance of Costs:** Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.
13. **Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:
 - 13.1. The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.
14. **Prior Approval and Copyright Ownership:** All materials (written, video, audio) produced or purchased under the contract shall have prior approval from DHHS before printing, production, distribution or use. The DHHS will retain copyright ownership for any and all original materials produced, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports. Contractor shall not reproduce any materials produced under the contract without prior written approval from DHHS.
15. **Operation of Facilities: Compliance with Laws and Regulations:** In the operation of any facilities for providing services, the Contractor shall comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which shall impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit shall be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Contract the facilities shall comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.
16. **Equal Employment Opportunity Plan (EEOP):** The Contractor will provide an Equal Employment Opportunity Plan (EEOP) to the Office for Civil Rights, Office of Justice Programs (OCR), if it has received a single award of \$500,000 or more. If the recipient receives \$25,000 or more and has 50 or



more employees, it will maintain a current EEO on file and submit an EEO Certification Form to the OCR, certifying that its EEO is on file. For recipients receiving less than \$25,000, or public grantees with fewer than 50 employees, regardless of the amount of the award, the recipient will provide an EEO Certification Form to the OCR certifying it is not required to submit or maintain an EEO. Non-profit organizations, Indian Tribes, and medical and educational institutions are exempt from the EEO requirement, but are required to submit a certification form to the OCR to claim the exemption. EEO Certification Forms are available at: <http://www.ojp.usdoj/about/ocr/pdfs/cert.pdf>.

17. **Limited English Proficiency (LEP):** As clarified by Executive Order 13166, Improving Access to Services for persons with Limited English Proficiency, and resulting agency guidance, national origin discrimination includes discrimination on the basis of limited English proficiency (LEP). To ensure compliance with the Omnibus Crime Control and Safe Streets Act of 1968 and Title VI of the Civil Rights Act of 1964, Contractors must take reasonable steps to ensure that LEP persons have meaningful access to its programs.
18. **Pilot Program for Enhancement of Contractor Employee Whistleblower Protections:** The following shall apply to all contracts that exceed the Simplified Acquisition Threshold as defined in 48 CFR 2.101 (currently, \$150,000)

CONTRACTOR EMPLOYEE WHISTLEBLOWER RIGHTS AND REQUIREMENT TO INFORM EMPLOYEES OF WHISTLEBLOWER RIGHTS (SEP 2013)

(a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at 41 U.S.C. 4712 by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR 3.908.

(b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.

(c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.

19. **Subcontractors:** DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.

When the Contractor delegates a function to a subcontractor, the Contractor shall do the following:

- 19.1. Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
- 19.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate
- 19.3. Monitor the subcontractor's performance on an ongoing basis

[Handwritten Signature]
5/23/17



- 19.4. Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed
- 19.5. DHHS shall, at its discretion, review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

DEFINITIONS

As used in the Contract, the following terms shall have the following meanings:

COSTS: Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

DEPARTMENT: NH Department of Health and Human Services.

FINANCIAL MANAGEMENT GUIDELINES: Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

PROPOSAL: If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

UNIT: For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

FEDERAL/STATE LAW: Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

CONTRACTOR MANUAL: Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act. NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

SUPPLANTING OTHER FEDERAL FUNDS: The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.


5/23/17



Exhibit C-1

REVISIONS TO GENERAL PROVISIONS

1. Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:

4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including without limitation, the continuance of payments, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability of funds affected by any state or federal legislative or executive action that reduces, eliminates, or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope of Services provided in Exhibit A, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.

2. Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language:

10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.

10.2 In the event of early termination, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.

10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.

10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.

10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.

3. Extension:

The Department reserves the right to renew the Contract for up to two (2) additional years, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.

[Handwritten Signature]

5/23/17



CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

**US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS**

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner
NH Department of Health and Human Services
129 Pleasant Street,
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
 - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
 - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
 - 1.2.1. The dangers of drug abuse in the workplace;
 - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
 - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
 - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
 - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
 - 1.4.1. Abide by the terms of the statement; and
 - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
 - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

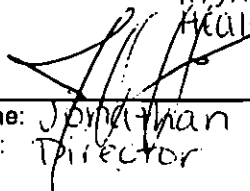


- has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- 1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted
 - 1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - 1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
 - 1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.
2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check if there are workplaces on file that are not identified here.

5/23/17
Date

Contractor Name: USI Research and Training Institute, Inc. d/b/a Community Health Institute

Name: Jonathan Stewart
Title: Director



CERTIFICATION REGARDING LOBBYING

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS
US DEPARTMENT OF EDUCATION - CONTRACTORS
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

- Programs (indicate applicable program covered):
- *Temporary Assistance to Needy Families under Title IV-A
 - *Child Support Enforcement Program under Title IV-D
 - *Social Services Block Grant Program under Title XX
 - *Medicaid Program under Title XIX
 - *Community Services Block Grant under Title VI
 - *Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)
3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Contractor Name: USI Research and Training Institute, Inc., d/b/a Community Health Institute

Name: Jonathan Stewart
Title: Director

5/23/17
Date




**CERTIFICATION REGARDING DEBARMENT, SUSPENSION
AND OTHER RESPONSIBILITY MATTERS**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.
6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and


Date 5/23/17



information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS


11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
 - 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (I)(b) of this certification; and
 - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
 - 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
 - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).
14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name: JSI Research and Training Institute, Inc., d/b/a Community Health Institute

5/23/17
Date


Name: Jonathan Stewart
Title: Director



**CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO
FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND
WHISTLEBLOWER PROTECTIONS**

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;
- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;
- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);
- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;
- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;
- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;
- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;
- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;
- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

Exhibit G

Contractor Initials

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower protections

New Hampshire Department of Health and Human Services
Exhibit G



In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

5/23/17
Date

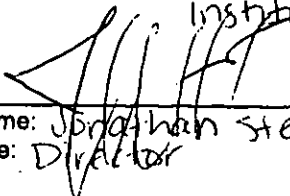
Contractor Name: ISI Research and Training Institute, Inc., d/b/a Community Health Institute

Name: Jonathan Stewart
Title: Director

Exhibit G

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower protections

Contractor Initials





CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name: JSI Research and Training Institute, Inc., d/b/a Community Health Institute

5/23/17
Date

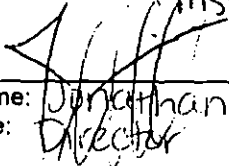

Name: Jonathan Stewart
Title: Director



Exhibit I

HEALTH INSURANCE PORTABILITY ACT
BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) **Definitions.**

- a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
- b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.
- g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, Title XIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.
- h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.
- i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).
- j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
- k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

3/2014

Contractor Initials

Date 5/23/17



Exhibit I

- l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.
- m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.
- n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.
- o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.
- p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) Business Associate Use and Disclosure of Protected Health Information.

- a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.
- b. Business Associate may use or disclose PHI:
 - I. For the proper management and administration of the Business Associate;
 - II. As required by law, pursuant to the terms set forth in paragraph d. below;
 - III. For data aggregation purposes for the health care operations of Covered Entity.
- c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.
- d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business



Exhibit I

Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

- e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) Obligations and Activities of Business Associate.

- a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.
- b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:
 - o The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
 - o The unauthorized person used the protected health information or to whom the disclosure was made;
 - o Whether the protected health information was actually acquired or viewed
 - o The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

- c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.
- d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.
- e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (I). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI



Exhibit I

pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

- f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.
- g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.
- h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.
- i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.
- j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.
- k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.
- l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

3/2014

Contractor Initials

Date 5/23/17



Exhibit I

Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

- a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.
- b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.
- c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

- a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.
- b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.
- c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.
- d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

3/2014

Contractor Initials

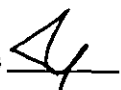

Date 5/23/17



Exhibit I

- e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.
- f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health and Human Services

The State

[Handwritten Signature]

Signature of Authorized Representative

Lisa Morris

Name of Authorized Representative

DIRECTOR

Title of Authorized Representative

5/25/17

Date

JSI Research + Training Institute, Inc.,
d/b/a Community Health Institute

Name of the Contractor

[Handwritten Signature]

Signature of Authorized Representative

Jonathan Stewart

Name of Authorized Representative

Director

Title of Authorized Representative

5/23/17

Date

[Handwritten Initials]



CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than \$25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of \$25,000 or more. If the initial award is below \$25,000 but subsequent grant modifications result in a total award equal to or over \$25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.

In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (DUNS #)
10. Total compensation and names of the top five executives if:
 - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than \$25M annually and
 - 10.2. Compensation information is not already available through reporting to the SEC.

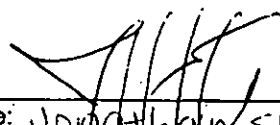
Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.

The Contractor Identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

JSI Research and Training Institute, Inc.
Contractor Name: d/b/a Community Health Institute

5/23/17
Date


Name: Jonathan Stewart
Title: Director



FORM A

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The DUNS number for your entity is: 14-5729117
2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

_____ NO X YES

If the answer to #2 above is NO, stop here

If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

_____ NO X YES

If the answer to #3 above is YES, stop here

If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

Name: _____	Amount: _____
Name: _____	Amount: _____
Name: _____	Amount: _____
Name: _____	Amount: _____
Name: _____	Amount: _____