

Jeffrey A. Meyers Acting Commissioner

Marcella Jordan Bobinsky Acting Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301-6503 603-271-7922 1-800-852-3345 Ext. 7922 Fax: 603-271-8705 TDD Access: 1-800-735-2964



January 20, 2016

Her Excellency, Governor Margaret Wood Hassan 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 exercise a renewal option and amend an existing agreement with the JSI Research and Training Institute, Inc, d/b/a Community Health Institute, (Vendor #161611-B001), 501 South St., 2nd Floor, Bow, NH 03304, to promote National Diabetes Prevention Programs and conduct a Diabetes Self-Management Education Program workshop by increasing the price limitation by \$265,998 from \$223,998 to \$489,996, effective upon Governor and Executive Council approval through June 30, 2018. The Governor and Executive Council approved the original contract on March 25, 2015 (Item #10). 100% Federal Funding.

Funds are available in the following account for State Fiscal Years 2016 and 2017, and are anticipated to be available in SFY 2018 upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust encumbrances between State Fiscal Years through the Budget Office, without further approval from the Governor and Executive Council, if needed and justified.

05-95-90-902010-1227 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POPULATION HEALTH AND COMMUNITY SERVICES, COMBINED CHRONIC DISEASE

Fiscal Year	Class/ Account	Class Title	Job Number	Current Budget Amount	Increase/ (Decrease)	New Budget Amount
2015	102-500731	Contracts for Prog Svc	90017417	\$111,999	\$0	\$111,999
2016	102-500731	Contracts for Prog Svc	90017417	\$111,999	\$10,000	\$121,999
2016	102-500731	Contracts for Prog Svc	90017117	\$0	\$32,000	\$32,000
2017	102-500731	Contracts for Prog Svc	90017417	\$0	\$111,999	\$111,999
2018	102-500731	Contracts for Prog Svc	90017417	\$0	\$111,999	\$111,999
			Total:	\$223,998	\$265,998	\$489,996

EXPLANATION

This purpose of this request is to add services to the current contract by requiring the vendor to conduct a Diabetes Self-Management Education Program workshop for healthcare and public health organizations and to promote Diabetes Self-Management Education to the healthcare community, people with diabetes, and their caregivers. The workshop will assist New Hampshire organizations to understand the National Standards for Diabetes Self-Management Education and learn about other essential elements required for implementation of a comprehensive program. Organizations planning to start a new diabetes education program or improve an existing program should attend. Diabetes Self-Management Education is proven to improve clinical outcomes, reduce use of acute, inpatient hospital services, and lower Medicare and insurance claim costs.

This request also exercises a renewal option to promote participation in National Diabetes Prevention Programs among New Hampshire adults at high risk for type 2 diabetes. The vendor will continue managing promotion and outreach activities using materials created by the Centers for Disease Control and Prevention that have been tailored specifically for New Hampshire.

The vendor will continue to collaborate with the Diabetes Prevention Advisory Group formed in May 2015. The vendor will also continue collaborative work with healthcare and community partners by utilizing existing materials and developing new materials, as needed, to promote diabetes awareness statewide, based on the needs of local programs throughout the state.

The Department is satisfied with the vendor's performance and supports the request to add to the scope of services and renew the existing agreement.

Should Governor and Executive Council not authorize this request, fewer individuals at risk for type 2 diabetes will be aware of programs and resources that could prevent progression to type 2 diabetes. Without this outreach and promotion of National Diabetes Prevention Programs as well as the Diabetes Self-Management Education Program workshop, there could be an increase in the number of individuals that progress from prediabetes to type 2 diabetes. The result could be an unnecessary increase in New Hampshire's health and economic burden, which would negatively impact the citizens, statewide.

Area served: Statewide.

Source of Funds: 100% Federal Funds from the U.S. Centers for Disease Control and Prevention.

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

Respectfully submitted,

Marcella Jordan Bobinsky

Acting Director

Approved by

Acting Commissioner



State of New Hampshire Department of Health and Human Services Amendment #1 to the Pre-diabetes Media Development and Placement Services

This 1st Amendment to the Pre-diabetes Media Development and Placement Services contract (hereinafter referred to as "Amendment #1") dated this, 20th day of September 2015 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. d/b/a Community Health Institute (hereinafter referred to as "the Contractor"), a non-profit organization 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 March 25, 2015 (item #10), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, and Exhibit C-1 Paragraph 3, the State may renew the contract for two (2) additional years by written agreement of the parties and approval of the Governor and Executive Council; and;

WHEREAS, the parties agree to add to the scope of services, extend the Contract for two (2) additional years, and 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:

To amend as follows:

- Form P-37, General Provisions, Item 1.7, Completion Date, to read:
 June 30, 2018
- Form P-37, General Provisions, Item 1.8, Price Limitation, to read:
 \$489,996
- 3. Add Exhibit A-1 Amendment #1, Scope of Services,
- 4. Delete Exhibit B-1, Budgets and replace with Exhibit B-1 Amendment #1 Budgets
- 5. Add Exhibit B-2 Budgets



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

IN WITNESS WHEREOF, the parties ha	ave set their hands as of the date written below,
	State of New Hampshire Department of Health and Human Services
11/30/15 Date	Brook Dupee Bureau Chief
1.74.15 Date	JSI Research & Training Institute, Inc. d/b/a Community Health Institute NAME Jonathan Stewart TITLE Regional Director
Acknowledgement:	
	nally appeared the person identified above, or hose name is signed above, and acknowledged
Signature of Notary Public or Justice of	the Peace
DEBRA L LOVE My Commission Expire Name and Title of Notary or Justice of the Peac	es October 16, 2018

Amendment #1 Page 2 of 3



New Hampshire Department of Health and Human Services Pre-diabetes Media Development and Placement Services

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

OFFICE OF THE ATTORNEY GENERAL

12/21/5 Date	Name: Myn A/COU Title: Attorney
	mendment was approved by the Governor and of New Hampshire at the Meeting on:
	OFFICE OF THE SECRETARY OF STATE
Date	<u>r</u> .



Exhibit A-1 - Amendment #1

Scope of Services

1. Provisions Applicable to All Services

1.1. The Contractor shall submit a detailed description of the language assistance services that will be provided to persons with limited English proficiency to ensure meaningful access to programs/services offered through this contract within ten (10) days of the Contract effective date.

2. Scope of Work

- 2.1. The Contractor shall coordinate and facilitate a planning committee for the purpose of developing a New Hampshire-specific workshop, entitled, "Building Your Diabetes Education Program," which shall be presented by the American Association of Diabetes Educators (AADE). The Contractor shall:
 - 2.1.1. Recruit and facilitate a planning committee. The committee will provide quidance on tailoring the workshop to NH-specific needs.
 - 2.1.2. Identify, organize, and train a group of planning committee members to assist with registration, evaluation and CEU forms, and other administrative and logistical tasks on the day of the conference.
 - 2.1.3. Within two weeks of amendment approval, recruit planning committee members including representation from the NH Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS), Granite State Diabetes Educators (GSDE), and other partners as determined by DPHS.
 - 2.1.4. Coordinate and facilitate planning committee meetings.
 - 2.1.5. Coordinate communication among members of the planning committee.
 - 2.1.6. Perform additional administrative duties as requested by the Department.
- 2.2. The Contractor shall enter into contract with the American Association of Diabetes Educators (AADE) for the provision of a "Building Your Diabetes Education Program" Workshop. The Contractor shall:
 - 2.2.1. Ensure the AADE workshop is attended by a minimum of 80 attendees, up to a maximum of 100 attendees.
 - 2.2.2. Ensure the AADE workshop takes place no later than June 15, 2016.
 - 2.2.3. Identify and contact accredited AADE speakers and additional speakers, as appropriate, to present information at the scheduled AADE workshop.
 - 2.2.4. Provide logistical support with follow-up contacts to speakers, as needed, to ensure scheduled AADE workshop needs are met. Logistical support shall include, but not be limited to:
 - 2.2.4.1. Preparing and mailing paperwork to scheduled speakers that includes, but is not limited to:

Contractor Initials Date 11/24/15



Exhibit A-1 - Amendment #1

- 2.2.4.1.1. Attendance with the specific date, date, time, and location of the workshop.
- 2.2.4.1.2. Directions to the workshop.
- 2.2.4.1.3. Conflict of interest statements that must be signed and returned to the Department.
- 2.2.4.1.4. Other information as required by the Department.
- 2.2.4.2. Coordinating with AADE to receive, accept, and compile registration forms for the scheduled AADE workshop.
- 2.2.4.3. Collecting registration fees.
- 2.2.4.4. Securing meeting space and audiovisual equipment
- 2.2.4.5. Coordinating accommodations for planning committee members and speakers who require overnight hotel reservations.
- 2.2.4.6. Coordinating light breakfast and lunch in accordance with United States Office of Management and Budget (OMB) guidelines.
- 2.2.4.7. Providing sufficient staff for the workshop.
- 2.2.5. Promote the scheduled AADE workshop by marketing the program to:
 - 2.2.5.1. All NH ADA/AADE program coordinators and staff.
 - 2.2.5.2. Federally qualified health centers (FQHCs).
 - 2.2.5.3. Pharmacists.
 - 2.2.5.4. Community mental health centers.
 - 2.2.5.5. Health care administrators.
 - 2.2.5.6. Other organizations that serve people with diabetes who may benefit from becoming accredited/recognized programs, as identified by the Department.
- 2.2.6. Work with AADE to develop evaluations and compile evaluation results following the workshop.
- 2.2.7. Present a final report on the outcome of the conference to the Department and the planning committee by June 29, 2016.
- 2.2.8. Work with AADE to provide continuing education units (CEU) to workshop participants.
- 2.3. The Contractor shall provide support services that include but are not limited to securing the workshop venue and organizing Workshop Exhibitors. Support services shall include, but not be limited to:
 - 2.3.1. Identifying Workshop Exhibitors to sponsor workshop activities by purchasing vendor space at the workshop.
 - 2.3.2. Making initial contact with Workshop Exhibitors to measure interest in purchasing a vendor space.

Contractor Initials 7/1/24/15

New Hampshire Department of Health and Human Services Prediabetes Media Development and Placement Services



Exhibit A-1 - Amendment #1

- 2.3.3. Securing Workshop Exhibitors for the workshop, which includes but is not limited to, processing vendor registration forms.
- 2.3.4. Providing logistical support to follow-up with Workshop Exhibitors, as needed.
- 2.3.5. Preparing and mailing follow-up paperwork to Workshop Exhibitors to ensure vendor spaces are filled.
- 2.4. The Contractor shall assist AADE/AADE Diabetes Self-Management Education (DSME) Programs to market services in order to increase provider referrals to American Diabetes Association-Recognized and AADE-Accredited DSME Programs. The Contractor shall:
 - 2.4.1. Interview select DSME program coordinators to identify marketing needs that will result in increased provider referrals.
 - 2.4.2. Market the value of DSME to providers and other health professionals by utilizing AADE materials as well as other materials approved by the Department.

Exhibit B-1 - Amendment #1 - Budget

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

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

Budget Request for: Prediabetes Media Development and Placement Services

Budget Period: March 1, 2015 - June 30, 2015

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JSI Research & Training Institute, Inc. d/b/a Community Health Institute Exhibit B-1 Amendment #1 Page 1 of 2

Contractor Intitials:

Exhibit B-1 Amendment #1 Budgets

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

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

Budget Request for: Prediabetes Media Development and Placement Services

Budget Period: July 1, 2015 - June 30, 2016

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Contractor Initials:

Date: 11/24/15

JSI Research Training Institute, Inc., d/b/a Community Health Institute Exhibit B-1 Amendment #1 Page 2 of 2

Exhibit B-2 - Budget

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

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

Budget Request for: Prediabetes Media Development and Placement Services

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Medical	s		\$	-	\$	\$	s	,	9	s		9	ક	
Office	s	3,357.26	8	-	3,357.26	ج	€			69	3,357.26	\$	8	3.357.26
6. Travel	\$	300.00	8		300.00	· &	s	,	- +	s	300.00	\$	55	300.00
Occupancy	\$	4,196.57	s	φ,	4,196.57	69	€	,	- &	s	4,196.57	\$	8	4,196.57
8. Current Expenses	8		s	-	\$	\$	₩	-	٠ ج	s		·	€9	
Telephone	s		\$	1,636.66	1,636.66	\$	\$,		s		\$ 1,636.66	\$	1,636.66
Postage	s,	1	\$	1	\$	€	s	\$		s		ر ج	89	
Subscriptions	s		\$	-	\$	÷	€	-	· \$	s	'	·	\$	'
Audit and Legal	s,		\$		-	· \$	€9	\$,	s	,	, \$	53	
Insurance	\$	•	\$	-	\$	\$	₩.	€		s			s	
Board Expenses	\$		ક	-	\$	ر ج	8	€	ļ.	s		9	s	
9. Software	\$,	s	-	-	- چ	s	\$	ļ ,	s		\$	s	
 Marketing/Communications 	€9	35,000.00	\$	\$	35,000.00	\$	ક્ર	\$		s	35,000.00	- *	69	35,000.00
 Staff Education and Training 	\$		\$	-	\$	\$	ss	\$		s		8	s	•
 Subcontracts/Agreements 	\$		s	-	- \$	\$	\$	\$		s	,	9	s	,
 Other (specific details mandatory): 	\$		s		\$	\$	s	φ	,	€9		9	s	
Formative Research Costs		2,000.00	\$	\$	2,000.00					es.	2,000.00		€9	2,000.00
	\$		8	,										
	\$	•	\$	-	. \$									
	\$		€	-	\$	چ	s	-		\$	-	· ·	s	ļ,
	\$	•	\$	-	\$		ક	\$		\$	-	· •	\$	
TOTAL	<u>~</u>	106.543.46	رم م	5.455.54	\$ \$ 111.999.00		<u> </u>			u	106 543 46	\$ 5.455.54		111 999 00

JSI Research & Training Institute, Inc, d/b/a Community Health Institute Exhibit B-2 Page 1 of 2

Contractor Intitials:

Exhibit B-2 Budgets

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

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

Budget Request for: Prediabetes Media Development and Placement Services

Budget Period: July 1, 2017 - June 30, 2018

		Total P	Total Program Cost		H	Cont	Contractor Share / Match	are / Ma	ıtch	Funded	Funded by DHHS contract share	ract share
		Direct	Indirect	Total	H	Direct	Indirect	ซ	Total	Direct	Indirect	Total
Line Itom		Incremental	Fixed		2	ncremental	Fixed	75%		Incremental	Fixed	
 Total Salary/Wages 	ક્ર	33,124.65	\$ 3,014.34	\$ 36,138	\$	١	s	€	,	\$ 33,124.65	\$ 3,014.34	\$ 36,138.99
Employee Benefits	s	12,587.37	ا د	\$ 12,587.37	2	:	s	ω	,	\$ 12,587.37	€	\$ 12,587.37
3. Consultants	\$	•	- \$		Н		s	\$		- ج	, S	- ج
4. Equipment:	8	2,981.22	\$	\$ 2,981.22	2 \$,	S	\$		\$ 2,981.22	- \$	\$ 2,981.22
Rental	ક્ક	•	- چ	€	₩		ક્ક	€		- ج	, \$	- ج
Repair and Maintenance	ક્ર	-	, \$	÷	es.		8	د	٠	- ج	- ج	-
Purchase/Depreciation	s		\$	ş	ક્ક	,	so	\$		- ₩	- ج	9
5. Supplies:	ક		\$	\$	₩	١.	s	8		- &>	- \$	\$
Educational	ક		. 8	\$	ઝ	,	s	\$,	<u>-</u>	- ج	- σ
Lab	ક		- ج	, ↔	ક્ક		s	€		- •	- ج	5
Pharmacy	s		- ھ	↔	ઝ		s	€7		- ↔	ا ج	5
Medical	s		٠ د	ج	₩.		s	ده -		-	, ↔	- ج
Office	es.	2,649.97	, 49	\$ 2,649.97	\$ 2	۱,	s	\$,	\$ 2,649.97	9	\$ 2,649.97
6. Travel	ઝ	275.00	ر ج	\$ 275.00	₽		s	\$		\$ 275.00	₩	\$ 275.00
7. Occupancy	မှာ	3,312.46	، ج	\$ 3,312.46	\$		s	\$		\$ 3,312.46	9	\$ 3,312.46
8. Current Expenses	\$	-	- \$	\$	မှာ		ક	\$		€	- \$	s
Telephone	\$	-	\$ 1,291.86	\$ 1,291.86	\$ 9		\$	\$		9	\$ 1,291.86	\$ 1,291.86
Postage	ક	•	\$	\$	ક		s	\$	-	\$	- \$.
Subscriptions	\$	-	- \$	\$	ક		s	- \$	-	- \$	\$	- \$
Audit and Legal	s	•	- \$	\$	S		s	\$ -	,	- ج	- \$	€9
Insurance	\$	-	- \$	\$	ઝ		s	\$		-	- \$	-
Board Expenses	ક્ક	-	- \$	\$	ક્ર		€9	•	,	- \$	- ج	- ج
9. Software	ક		- \$	\$	ક્ર		S	\$		\$	- ج	- \$
 Marketing/Communications 	ક્ર	50,762.13	. 8	\$ 50,762.13	3		\$	\$		\$ 50,762.13	- ج	\$ 50,762.13
 Staff Education and Training 	&	•	- \$	- \$	₩.		S	- 8		- \$	\$	₽
12. Subcontracts/Agreements	\$	•	\$	\$	ક	-	\$	\$		- \$	- \$	- σ
Other (specific details mandatory):	s	•	- \$	- ج	ક્ક		ક્ક	\$		- ج	, \$	- σ
Formative Research Costs		2,000.00	\$	\$ 2,000.00	\$ 0		\$,	\$ 2,000.00	- ج	\$ 2,000.00
	ક	-	- \$	\$	ક્ક		\$	\$,	- 8	- \$	φ.
	s	•	, \$	\$	₩.	,	\$	₽-	,	- \$	- 8	€
	s	•	\$	\$	₩.		s	€-		- \$	- ج	€
	ક્ર		- \$	\$	ક	-	69	\$		- \$	ج	- ₩
	s	-	- \$	\$	ક્ક	٠	s	\$,	\$	ΙI	ج
TOTAL	s	107,692.80	\$ 4,306.20	\$111,999.00	\$		\$	-		\$107,692.80	\$ 4,306.20	\$111,999.00
Indirect As A Percent of Direct			4.0%	9								



JSI Research Training Institute, Inc., d/b/a Community Health Institute Exhibit B-2 Page 2 of 2

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 on March 29, 2007 and that JSI RESEARCH AND TRAINING INSTITUTE, INC. presently own(s) this trade name. I further certify that it is in good standing as far as this office is concerned, having paid the fees required by law.

In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed, the Seal of the State of New Hampshire, this 15th day of April, A.D. 2015

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 <u>President of the JSI Research & Training Institute, Inc., d/b/a Community</u> 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 November 24, 2015.

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 24th day of November, 2015.

STATE OF New Hampshire

COUNTY OF Merrimack

The foregoing instrument was acknowledged before me this 24th day of November, 2015 by Joel H.

Lamstein.

Notary Public/Justice of the Peace

My Commission Expires:

JOHNSNO-01

DMEANEY



CERTIFICATE OF LIABILITY INSURANCE

DATE (MW/DD/YYYY) 9/11/2015

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to

	the terms and conditions of the policy certificate holder in lieu of such endors				ndorsement. A	sta	tement on th	is certificate de	es not c	onfer	rights to the
PR	ODUCER				CONTACT Judy	Ye	arv				
	son & Mason Technology Insurance Se	rvic	es, lı	nc.	PHONE (A/C, No, Ext): (781				FAX	(781) 447-7230
	B South Ave. hitman, MA 02382			İ	E-MAIL ADDRESS: info@	m	eonineuro	com	(A/C, No):	(,,,	, 47-1250
**	iitillali, MA 02302				ADDRESS: ITTO						
					Fd -			DING COVERAGE			NAIC#
					INSURER A : Fede						20281
INS	GURED				INSURER B : Exec	uti	ve Risk Ind	emnity			35181
	JSI d/b/a Community Health	Insti	tute	,	INSURER C:						
	2nd Floor				INSURER D:						
	Bow, NH 03304				INSURER E :						
L					INSURER F :						
C	OVERAGES CERT	TIFIC	CATE	NUMBER:				REVISION NU	MBER:		
	THIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH F	PER POLIC	REMI TAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	N OF ANY CONT DED BY THE PO BEEN REDUCED	RA LIC BY	CT OR OTHER IES DESCRIB PAID CLAIMS.	DOCUMENT W	TH RESPE	ECT T	O WHICH THIS
INS	TYPE OF INSURANCE	NSD.	SUBR	POLICY NUMBER	(MM/DD/YY	₩,	POLICY EXP (MM/DD/YYYY)		LIMIT	s	
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			35873320	09/09/20	15	09/09/2016	EACH OCCURREN DAMAGE TO RENT PREMISES (Ea occ	ED	\$	1,000,000
								MED EXP (Any one		\$	10,000
								PERSONAL & ADV	· · · -	s	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGRE		\$	2,000,000
	PRO. V							PRODUCTS - COM		\$	2,000,000
								PRODUCTS - COM	FIOF AGG	\$	_,,,,,,,,,
_	OTHER:	_						COMBINED SINGLE	ELIMIT	s	1,000,000
A				70546604	00/00/20	4 5	09/09/2016	(Ea accident) BODILY INJURY (P	or nemon)	\$	1,000,000
^	ANY AUTO ALL OWNED Y SCHEDULED			73546634	09/09/20	13	09/09/2010	BODILY INJURY (P			
	AUTOS AUTOS		ĺ					PROPERTY DAMA		\$	
	X HIRED AUTOS X NON-OWNED AUTOS		İ					(Per accident)			
										\$	22 222 222
	X UMBRELLA LIAB X OCCUR							EACH OCCURREN	CE	\$	20,000,000
Α	EXCESS LIAB CLAIMS-MADE		1	79861066	09/09/20	15	09/09/2016	AGGREGATE		\$	20,000,000
	DED X RETENTION \$ 10,000							255	OTH-	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							X PER STATUTE	ER ER		
Α	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A		71733182	09/09/20	15	09/09/2016	E.L. EACH ACCIDE	NT	s	1,000,000
İ	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	11/7						E.L. DISEASE - EA	EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - PO	LICY LIMIT	s	1,000,000
В				82120859	09/09/20	15	09/09/2016	EACH OCC/G	EN AGG		1,000,000
A	DIRECTORS & OFFICERS			81595534	11/09/20	14	11/09/2015	EACH OCC/G	EN AGG		3,000,000
It is	SCRIPTION OF OPERATIONS / LOCATIONS / VEHICLS understood and agreed that NH Department of the terms and onditions of the terms are the terms and onditions of the terms are the terms and onditions of the terms are the terms and onditions of the terms are t	nent	of He	ealth and Human Services	le, may be attached if is included as an	ad	re space is requir Iditional insur	red) red as respects	general li	ability	y as required by
	NH Department of Health and	4 H.	man	Services	THE EXPIRA	TIO	N DATE TH	ESCRIBED POLICE			

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129 Pleasant Street Concord, NH 03301

AUTHORIZED REPRESENTATIVE

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

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 Concord, 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.

JSI RESEARCH AND TRAINING INSTITUTE, INC. AND AFFILIATE

Audited Consolidated Financial Statements and Reports Required by Government Auditing Standards and OMB Circular A-133

September 30, 2014

JSI Research and Training Institute, Inc. and Affiliate September 30, 2014

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



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

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, 2014, 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, 2014, 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 U.S. Office of Management and Budget Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, 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 March 17, 2014. In our opinion, the summarized consolidated comparative information presented herein as of and for the year ended September 30, 2013 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 February 12, 2015, on our consideration of JSI Research and Training Institute, Inc. and its 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 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 its affiliate's internal control over financial reporting and compliance.

Homen Jongrak CDA

Duxbury, Massachusetts February 12, 2015

JSI Research and Training Institute, Inc. and Affiliate CONSOLIDATED STATEMENT OF FINANCIAL POSITION

September 30, 2014
(With Comparative Totals for 2013)

	2014	2013
ASSETS		
Current Assets:		
Cash and cash equivalents	\$ 29,466,831	\$ 40,491,257
Receivables for program work	12,193,072	5,530,251
Loans receivable	425,470	330,711
Field advances - program	2,612,580	2,855,789
Employee advances	221,271	181,854
Prepaid expenses	3,700	3,864
Total Current Assets	44,922,924	49,393,726
Property and Equipment:		
Furniture and equipment	625,913	625,102
Leasehold improvements	30,355	30,355
	656,268	655,457
Less: Accumulated depreciation	(603,262)	(585,250)
Net Property and Equipment	53,006	70,207
Other Assets	83,336	80,198
TOTAL ASSETS	\$ 45,059,266	\$ 49,544,131
LIABILITIES AND NET ASSETS Current Liabilities:		
Accounts payable and payroll withholdings	\$ 5,026,325	\$ 4,013,743
Accrued vacation	1,563,950	1,456,613
Advances for program work	14,217,480	24,753,370
Loans payable	-	-
Notes payable	-	-
Contingencies	-	
Total Current Liabilities	20,807,755	30,223,726
Net Assets:		
Unrestricted	24,246,511	19,315,405
Temporarily restricted	5,000	5,000
Total Net Assets	24,251,511	19,320,405
TOTAL LIABILITIES AND NET ASSETS	\$ 45,059,266	\$ 49,544,131

JSI Research and Training Institute, Inc. and Affiliate CONSOLIDATED STATEMENT OF ACTIVITIES

Year Ended September 30, 2014 (With Comparative Totals for 2013)

	2014	2013
UNRESTRICTED NET ASSETS:		
Public Support and Revenue	•	
Public Support:		
Government grants and contracts:		
U.S. Government	\$ 173,962,790	\$ 151,661,231
Commonwealth of Massachusetts	5,842,551	5,293,338
Other grants and contracts	44,450,878	40,181,675
Program income	95,478	125,762
Contributions	2,061,708	261,260
In kind project contributions	7,244,720	10,537,825
Interest income	12,236	47,775
Total Unrestricted Support and Revenue	233,670,361	208,108,866
Expenses		
Program Services:		
International programs	190,033,358	171,082,230
Domestic programs	14,255,597	12,226,257
Total Program Services	204,288,955	183,308,487
Supporting Services:		
Management and General	24,224,914	21,788,613
Fundraising	225,386	219,210
Total Supporting Services	24,450,300	22,007,823
Total Expenses	228,739,255	205,316,310
Increase (Decrease) in Unrestricted Net Assets	4,931,106	2,792,556
Net Assets at Beginning of Year	19,320,405	16,527,849
Net Assets at End of Year	\$ 24,251,511	<u>\$ 19,320,405</u>

JSI Research and Training Institute, Inc. and Affiliate CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES Year Ended September 30, 2014 (With Comparative Totals for 2013)

													TOTAL	YF.	
	a	ROGR	PROGRAM SERVICES	ES			SUI	PORT	SUPPORTING SERVICES	CES			EXPE	EXPENSES	
	International	_	Domestic			Ÿ	Management								
	Programs		Programs		Total	Ar	And General	Fu	Fundraising		Total		2014		2013
Salaries	\$ 20,457,182	S	6,609,295	s	27,066,477	S	5,705,147	€9	150,040	S	5,855,187	S	32,921,664	S	29,361,382
Consultants	11,720,327		3,862,158		15,582,485		666,153		29,400		695,553		16,278,038		15,167,039
Cooperating National															
Salaries	29,311,608		•		29,311,608		532,134		•		532,134		29,843,742		25,610,137
Travel	11,824,448		558,707		12,383,155		604,462		127		604,589		12,987,744		11,206,790
Allowance & Training	7,576,320		2,165		7,578,485		218,327		1		218,327		7,796,812		6,290,231
Sub-contracts	47,859,375		1,805,034		49,664,409		•		•		•		49,664,409		39,388,618
Equipment, Material and															
Supplies	5,458,019		31,814		5,489,833		187,477		80		187,557		5,677,390		4,794,885
Other Costs	48,581,359		1,386,424		49,967,783		16,293,202		45,739		16,338,941		66,306,724		62,947,371
In-kind project expenses	7,244,720		•		7,244,720		•		•		1		7,244,720		10,537,825
Depreciation	•						18,012				18,012	İ	18,012		12,032
TOTAL EXPENSE	\$ 190,033,358	~	\$ 14,255,597	S	204,288,955	œ	24,224,914	49	225,386	S	24,450,300	S	228,739,255	8	205,316,310

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate CONSOLIDATED STATEMENT OF CASH FLOWS

Year Ended September 30, 2014 (With Comparative Totals for 2013)

		2014		2013
Cash Flows From Operating Activities:				
Increase (Decrease) in net assets	\$	4,931,106	\$	2,792,556
Adjustments to reconcile change in net assets to net				
cash provided by operating activities:				
Depreciation		18,012		12,032
(Increase) Decrease in receivables for program work		(6,662,821)		(2,979,106)
(Increase) Decrease in loans receivable		(94,759)		(330,711)
(Increase) Decrease in field advances - program		243,209		(706,652)
(Increase) Decrease in employee advances		(39,417)		3,766
(Increase) Decrease in prepaid expenses		164		-
(Increase) Decrease in other assets - deposits		(3,138)		762
Increase (Decrease) in accounts payable and				
payroll withholdings		1,012,582		1,203,439
Increase (Decrease) in accrued vacation		107,337		93,070
Increase (Decrease) in advances for program work		(10,535,890)		2,883,650
Net Cash Provided (Used) By				
Operating Activities		(11,023,615)		2,972,806
Cash Flows From Investing Activities:				
Acquisition of property and equipment		(811)		(34,047)
Net Cash Provided (Used) By				
Investing Activities		(811)		(34,047)
Cash Flows From Financing Activities:				
Proceeds from loans payable		4,046,996		2,910,553
Payments of loans payable		(4,046,996)		(3,395,271)
Net Cash Provided (Used) By				
Financing Activities		-		(484,718)
Net Increase (Decrease) in Cash and Cash Equivalents		(11,024,426)		2,454,041
Cash and Cash Equivalents at Beginning of Year		40,491,257		38,037,216
Cash and Cash Equivalents at End of Year	<u>\$</u>	29,466,831	<u>\$</u>	40,491,257

JSI Research and Training Institute, Inc. and Affiliate NOTES TO CONSOLIDATED FINANCIAL STATEMENTS September 30, 2014

NOTE 1 – ORGANIZATION AND NATURE OF ACTIVITIES

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.

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).

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.

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 is reported on the basis of cost less accumulated depreciation. Acquisitions of property and equipment in excess of \$1,500 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

Unrestricted and restricted contributions are recognized as revenue at the date the pledge is made or the gift is received, whichever is earlier. Revenue from cost reimbursement contracts and grants is recorded as the related expenditures are incurred.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued

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 2011, 2012 and 2013, 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.

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

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued

year ended September 30, 2014 there was no activity in temporarily restricted or permanently restricted net assets.

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:

- 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.

NOTE 4 – INVESTMENTS - continued

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, 2014:

Current assets:

Cash and cash equivalents (invested)

\$ 14,500,645

\$ 14,500,645

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, 2014:

	Unrestricted
Interest income	\$ 12,236
Total investment return	\$ 12,236

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, 2014 was \$0.

NOTE 5 - RECEIVABLES FOR PROGRAM WORK - continued

Receivables for program work consist of the following at September 30, 2014:

U.S. Agency for International Development	\$ 7,422,214
U.S. Department of Health and Human Services	379,820
U.S. Department of State	215,127
U.S. Department of Labor	61,542
U.S. Department of Education	8,756
Commonwealth of Massachusetts	295,121
Other - non-governmental	 3,810,492
	\$ 12,193,072

NOTE 6 – LOANS RECEIVABLE

Loans receivable 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, 2014 is \$425,470.

NOTE 7 – PROPERTY AND EQUIPMENT AND ACCUMULATED DEPRECIATION

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

		Cost		cumulated preciation	 Net
Furniture and equipment Leasehold Improvements	\$	625,913 30,355	\$ _	(574,806) (28,456)	\$ 51,107 1,899
	<u>s</u>	656,268	<u>\$</u>	(603,262)	\$ 53,006

Depreciation expense was \$18,012 for the year ended September 30, 2014.

NOTE 8 – OTHER ASSETS

Other assets consist of the following at September 30, 2014:

Deposits	\$	46,391
Artwork - donated	<u>, ,</u>	36,945
	\$	83,336

NOTE 9 – ACCRUED VACATION

In accordance with formal policies, vacation was accrued at September 30, 2014 as follows:

JSI Research and Training Institute, Inc.	\$ 1,262,970
World Education, Inc. (Affiliate)	 300,980
	\$ 1,563,950

NOTE 10 – ADVANCES FOR PROGRAM WORK

Advances for program work consist of the following at September 30, 2013:

Other - non-governmental	<u>\$ 14,217,480</u>
	\$ 14,217,480

NOTE 11 – LOANS PAYABLE

Loans payable 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, 2014 is \$0.

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 April 1, 2014. 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 December 31, 2014 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, 2014, the outstanding balance is \$0 and no interest was incurred on this loan during the year ended September 30, 2014.

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, 2013. 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, 2016. The loan is not collateralized. No funds were borrowed during the year and as a result, as of September 30, 2014, the outstanding balance is \$0. No interest was incurred on this loan during the year ended September 30, 2014. (See NOTE 17)

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 of a demand loan with no balance due at September 30, 2014. Management believes that the co-borrower is current on the loan and that its collateral exceeds the balance due. (See NOTE 17)

NOTE 14 – TEMPORARILY RESTRICTED NET ASSETS

At September 30, 2014, the Welthy Fisher Fund of World Education, Inc. is the beneficiary of an irrevocable life income trust agreement. Under the terms of the agreement, the donor will receive either a fixed percentage of the initial fair market value of the gift or the actual income earned by the trust. Upon the death of the donor, the funds are released to World Education, Inc. for its unrestricted use.

No assets were released from donor restriction by occurrence of events specified by the donor during the year ended September 30, 2014. The temporarily restricted net assets balance at September 30, 2014 is \$5,000.

NOTE 15 – SURPLUS REVENUE RETENTION

In accordance with the Massachusetts Division of Purchased Services (DPS) Regulation, 808 CMR 1.19 (3), a nonprofit provider of services is allowed to retain a portion of its excess of support and revenue over expenses in a fiscal year (the "surplus"). A nonprofit provider may retain as its surplus up to 5% of its total revenue from Commonwealth of Massachusetts purchasing agencies during any fiscal year. In addition, a nonprofit provider may retain a cumulative amount of surplus over a period of years not to exceed 20% of the prior year's total support and revenue from Commonwealth of Massachusetts purchasing agencies and the cumulative surplus must be segregated as surplus retention net assets. A current year surplus which exceeds the 5% level or a cumulative surplus exceeding the 20% amount may be: 1) reinvested in program services as stipulated by the purchasing agencies; 2) recouped or; 3) used by the Commonwealth to reduce the price of future contracts.

The following summarizes the Company's calculation of the surplus for fiscal year 2014 and on a cumulative basis:

	Surpl	monwealth us Retention et Assets		Other Net Assets		Total Net Assets
Beginning of Year Current Year	\$	647,090 172,416	\$	18,673,315 4,758,690	\$	19,320,405 4,931,106
End of Year	\$	819,506	<u>\$</u>	23,432,005	<u>\$</u>	24,251,511

NOTE 16 – COMMONWEALTH OF MASSACHUSETTS

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

Accrued (deferred) Revenue at October 1, 2013	\$	827,417
Receipts		(6,374,847)
Disbursements/expenditures	_	5,842,551
Accrued (deferred) Revenue at September 30, 2014	\$	295,121

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, 2014, John Snow, Inc. billed JSI Research and Training Institute, Inc. \$18,635,515 for consulting services (technical support). This amount is reflected under the program services-consulting line item (\$11,424,234) and program services – other costs line item (\$7,211,281) on the statement of functional expenses. In addition, JSI Research and Training Institute, Inc. performed consulting services (technical support) for John Snow, Inc. totaling \$8,962,419.

The two companies also share facilities and pool various overhead expenses. For the year ended September 30, 2014, JSI Research and Training Institute, Inc. incurred \$18,024,907 of overhead expenses (supporting services), of which \$5,162,195 was its share of John Snow, Inc. incurred costs.

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 February 28, 2015, 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, 2014 was 2.234%. At September 30, 2014, a balance of \$0 was outstanding on the loan. Management believes the loan payable will be extended, when due, under similar terms and conditions.

NOTE 17 – RELATED PARTY TRANSACTIONS – continued

John Snow, Inc. - continued

During the year, the Company had various loans receivable due from, and various loans payable due to John Snow, Inc. At September 30, 2014, the loan receivable balance is \$425,479 and the loan payable balance is \$0.

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, 2014 are summarized as follows:

Administrative and technical support	\$ 343,644
Other direct charges (including rent of \$694,897)	 932,966
	\$ 1,276,610

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. provided services to John Snow, Inc. during the year ended September 30, 2014 totaling \$256,252 and was recorded as revenue in the consolidated statement of activities.

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

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 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, 2014, JSI Research and Training Institute, Inc. billed PSCM \$55,743,613 for services performed.

NOTE 17 - RELATED PARTY TRANSACTIONS - continued

Partnership for Supply Chain Management, Inc. - continued

During the year ended September 30, 2014, PSCM made an unrestricted contribution of \$2,000,000 to the Company.

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.)

\$ 1,226,711

\$ 1,226,711

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. Employer contributions are based on a percentage (10% - 15% depending on length of service) of salary. The Plan was effective April 11, 1979. Pension expense was \$2,566,460 for the year ended September 30, 2014.

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 \$331,738 in the year ended September 30, 2014.

NOTE 19 – COMMITMENTS

Operating Leases

The JSI Research and Training Institute, Inc. leases space for general offices under operating leases expiring from 2014 through 2018. The leases contain renewal options for periods of up to 5 years.

NOTE 19 – COMMITMENTS - continued

Operating Leases - continued

During the year ended September 30, 2014, rentals under long-term lease obligations were \$527,209. Future obligations over the primary terms of the Company's long-term leases as of September 30, 2014 are:

Year Ended September 30,		
2015	\$ 469,7	86
2016	384,2	43
2017	258,9	01
2018	170,4	68
Thereafter		
	\$ 1,283,3	98

World Education, Inc. (Affiliate) leases space for general offices on a year-to-year basis. Rent expense for the year ended September 30, 2014 was \$694,897.

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, 2014:

		Income Received	% of Total Income	
U.S. Agency for International Development Partnership for Supply Chain Management, Inc.	\$	108,805,271 55,743,613	46.56% 23.86%	
	<u>\$</u>	164,548,884	<u>70.42</u> %	

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 \$7,244,720 for the year ended September 30, 2014, 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, 2014, the following donated materials and services received by the Organization have been used to fulfill matching requirements on active grants:

36521	Uganda STAR-EC	\$	3,323,453
36528	Nigeria Tship		(10)
36620	Africa FHI NID		195,684
36662	Madagascar CBIHP		3,040,202
36883	Social ACO's		33,672
36895	Mozambique M-SIP		820
63068	Benin		340
63092	Mali/Walaikim		123,802
63101	Senegal/Journalism		62,274
63104	AED/Senegal/PGP		27,028
63114	Uganda		88,079
64024	Tanzania	•	180,756
64026	Uganda		116
64057	Zimbabwe		168,504
		\$	7,244,720

NOTE 22 – SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through February 12, 2015, 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.



Federal Grantor/Pass-through Grantor Program Title U.S. ACENCY FOR INTERNATIONAL DEVEL ORMEN	Agency or Pass-through Number	Federal CFDA Number	E	Federal xpenditures
U.S. AGENCY FOR INTERNATIONAL DEVELOPMEN	ı			
Direct Grants:				
36359 - Nepal Family Health Program II	367-A-00-08-00001-00	98.001	\$	(1,051)
36514 - Liberia RBHS	669-A-00-09-00001-00	98.001		8,626,055
36521 - Uganda HIV/AIDS/TB	617-A-00-09-00007-00	98.001		8,647,008
36528 - Nigeria TSHIP	620-A-00-09-00014-00	98.001		16,701,004
36529 - Ghana Focus	641-A-00-09-00030-00	98.001		3,317,858
36532 - Turkmenistan YC	120-A-00-09-00029-00	98.001		277,655
36648 - Pakistan TAUH	391-A-00-11-01214-00	98.001		(22,171)
36662 - Madagascar CBIHP	687-A-00-11-00013-00	98.001		8,601,160
36697 - SPRING	AID-OAA-A-11-00031	98.001		15,677,524
36702 - Nepal CHX Cord Care	AID-OAA-A-11-00073	98.001		491,614
36747 - Ukraine HWUP	AID-121-A-11-00003	98.001		1,561,345
36800 - Advancing Partners	AID-OAA-A-12-00047	98.001		15,640,709
36807 - Live Learn & Play	AID-OAA-L-12-00003	98.001		140,027
36845 - Pakistan HSSP	AID-391-A-13-00002	98.001		3,413,097
36895 - Mozambique M-SIP	AID-656-A-13-00006	98.001		1,028,594
36932 - Senegal LLP	AID-685-A-14-00001	98.001		269,622
36991 - AIDSFREE	AID-OAA-A-14-00046	98.001		172,613
Total Direct Grants				84,542,663
Pass-through Grants:				
Passed through Partnership for Supply Chain Management,				
Inc. (PSCM):				
36344/36524 - Supply Chain Management System	GPO-I-00-05-00032-00	98.001		53,204,470
Passed through World Education:				
36591 - Tanzania OVC	621-A-00-10-00024-00	98.001		23,975
36840 - Zimbabwe - Vanc. Bantwana	64053-0556-1001	98.001		246,231
Passed through Family Health International (FHI):				
36620 - Africa FHI Neglected Tropical Disease	OAA-A-10-00050	98.001		329,480
Passed through International Business Initiatives,				·
Corporation (IBI):				
36826 - Liberia Governance and Economic Management				
Support Program	669-C-00-11-00050-00	98.001		186,595
Total Pass-through Grants				53,990,751
Total - CFDA #98.001 - USAID Foreign Assistance for Prog	rams Overseas			138,533,414
Sub-Total				138,533,414

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT	- CONTINUED		
Sub-Total from previous page			\$ 138,533,414
Direct Grant:	,		
36098 - Pakistan MNH Prog. Paiman	391-A-00-05-01037-00	98.004	(55,253)
Total - CFDA #98.004 - Non-Governmental Organization Strengthening (NGO)			(55,253)
TOTAL - U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT			\$ 138,478,161
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVIC	ES		
Pass-through Grants:			
Passed through NACCHO:			
36689 - NH MRC Conferences	2011-041218	93.008	\$ 1
36773 - NH MRC Conferences	2012-041010	93.008	6,411
Total CFDA #93.008 - Medical Reserve Corps Small Grant Pr	ogram		6,412
Direct Grant:			
36612 - Project HOPE	MPPWH100030	93.015	23,967
Total CFDA #93.015 - HIV Prevention Programs For Women			23,967
Pass-through Grant:			
Passed through State of New Hampshire:			
36741 - Injury Prevention	1022534	93.043	103
Total CFDA #93.043 - Special Programs for the Aging - Title	VII, Chapter 2		103
Pass-through Grant:			
Passed through Harvard School of Public Health:			
36936 - HSPH Evaluation	Agreement @ 2-21-14	93.061	1,760
Total CFDA #93.061 - Innovations in Applied Public Health R	esearch		1,760
Sub-Total			32,242

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number		ederal
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICE	CS - CONTINUED			
Sub-Total from previous page			\$	32,242
Direct Grants:				
36537 - CDC - Botswana IS	5U2GPS001958-04	93.067		22,776
36538 - CDC - Botswana IS	5U2GPS001958-05	93.067		150,095
36901 - CDC - Strategic Assessments for Strategic Action in India	1U2GGH001132-01	93.067		450,567
Total CFDA #93.067 - Global AIDS			-	623,438
Pass-through Grants:				
Passed through State of New Hampshire:				
36879 - Public Health Program Services Support	PO# 1031592	93.069		83,077
36880 - Public Health Program Services Support	PO# 1031592	93.069		16,571
Passed through Goodwin Community Health:				
36943 - Strafford Cty Data	Agreement @ 3-14-14	93.069		3,977
Total CFDA #93.069 - Public Health Emergency Preparedness				103,625
Pass-through Grants:				
Passed through State of Vermont:				
36847 - Asthma Control Program	23940	93.070		38,653
Passed through State of New Hampshire:				
36879 - Public Health Program Services Support	PO# 1031592	93.070		28,887
36880 - Public Health Program Services Support	PO# 1031592	93.070		2,607
Total CFDA #93.070 - Environmental Public Health and Emer	gency Response			70,147
Pass-through Grants:				
Passed through Puerto Rico Academy of Medical Directors, Inc.:				
36871 - Cuidate TDF Training	Agreement @ 7-2-13	93.092		7,898
36948 - Cuidate TDF Training	Agreement @ 4-1-14	93.092		5,441
Total CFDA #93.092 - Affordable Care Act Personal Responsit Education Program	oility			13 220
-				13,339
Pass-through Grant:				
Passed through State of Vermont:				
36959 - Wise Woman Evaluation	26288	93.094	\$	11,505
Total CFDA #93.094 - Well-Integrated Screening and Evaluati	on for			
Women Across the Nation				11,505
Sub-Total				854,296

Federal Grantor/Pass-through Grantor	Agency or Pass-through	Federal CFDA		Federal
Program Title	Number	Number	Exp	oenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SER	VICES - CONTINUED			
Sub-Total from previous page			\$	854,296
Pass-through Grants:				
Passed through State of New Hampshire:				
36501 - Epidemiology/Public Health Data	3160295	93.110		268
36879 - Public Health Program Services Support	PO# 1031592	93.110		33,114
36880 - Public Health Program Services Support	PO# 1031592	93.110		3,879
Total CFDA #93.110 - Maternal and Child Health Federa	al Consolidated Programs			37,261
Pass-through Grant:				
Passed through State of Vermont:				
36877 - VT ORHPC TA	24572	93.130		688
Total CFDA #93.130 - Cooperative Agreements to States.	Territories for the			
Coordination and Development of Primary Care Offic	es			688
Pass-through Grant:				
Passed through State of Rhode Island:				
36501 - Epidemiology/Public Health Data	3160295	93.136		32,268
Total CFDA #93.136 - Injury Prevention and Control Re	search and			
State and Community Based Programs				32,268
Pass-through Grants:				
Passed through Health Research, Inc.:				
36886 - National Quality Center Evaluation Activities	4538-02	93.145		182,549
36989 - National Quality Center Evaluation				
Consultation Services	4538-03	93.145		17,466
Direct Grant:				
36904 - Ryan White ACE	UF2HA26520	93.145		1,880,060
Total CFDA #93.145 - AIDS Education and Training Ce	nters			2,080,075

Sub-Total 3,004,588

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal penditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICE	ES - CONTINUED		
Sub-Total from previous page			\$ 3,004,588
Pass-through Grants:			
Passed through Action for Boston Community Development, Inc.:			
36834 - FamPlan Data Systems		93.217	17,042
36935 - FamPlan Data Systems		93.217	25,078
Passed through State of New Hampshire:			
36834 - FamPlan Data Systems	PO# 1031566	93.217	4,748
36935 - FamPlan Data Systems	PO# 1039867	93.217	2,550
Passed through State of Rhode Island:			
36834 - FamPlan Data Systems	PO# 3307663	93.217	15,556
36935 - FamPlan Data Systems	PO# 3307663	93.217	9,766
Passed through Planned Parenthood of Southern New England:			
36834 - FamPlan Data Systems		93.217	22,280
36935 - FamPlan Data Systems		93.217	32,785
Passed through Planned Parenthood of Northern New England:			
36834 - FamPlan Data Systems		93.217	10,160
36935 - FamPlan Data Systems		93.217	14,951
Passed through Health Imperatives, Inc.:			
36834 - FamPlan Data Systems		93.217	7,195
36935 - FamPlan Data Systems		93.217	10,588
Passed through Planned Parenthood League of Massachusetts:			
36834 - FamPlan Data Systems		93.217	2,643
36935 - FamPlan Data Systems		93.217	3,889
Passed through Health Quarters, Inc.:			
36834 - FamPlan Data Systems		93.217	5,124
36935 - FamPlan Data Systems		93.217	7,540
Passed through Tapestry Health Systems:			
36834 - FamPlan Data Systems		93.217	5,187
36935 - FamPlan Data Systems		93.217	7,633
Passed through Family Planning Association of Maine:			
36834 - FamPlan Data Systems		93.217	13,598
36935 - FamPlan Data Systems		93.217	 20,011
Total CFDA #93.217 - Family Planning Services			 238,324

Sub-Total 3,242,912

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number		Federal penditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	- CONTINUED			
Sub-Total from previous page			s	3,242,912
Pass-through Grants:				
Passed through First Nations Community Healthsource:				
36856 - Readiness Assessment	Agreement @ 5-3-13	93.224		4,937
37000 - NCQA PCMH Recognition Technical Assistance	Agreement @ 6-13-14	93.224		531
Total CFDA #93.224 - Consolidated Health Centers				5,468
Pass-through Grants:				
Passed through State of New Hampshire:		•		
36875 - NH Center for Excellence - Drug and Alcohol	1025785	93.243		288,727
Passed through County of Cheshire, New Hampshire:				
36889 - Drug Court Program	Agreement @ 8-19-13	93.243		48,054
Passed through Institute for Health & Recovery:				
36619 - IHR - RENW Eval	Agreement @ 10-27-10	93.243		23,127
Passed through Action for Boston Community Development, Inc.:				
36806 - Entre Nosotras II	Agreement @ 12-2-12	93.243		823
36903 - Entre Nosotras FY14	Agreement @ 10-19-13	93.243		20,151
36913 - ABCD SIS Evaluation	PO# 71039	93.243		6,890
Passed through City of Dover, New Hampshire:				•
36837 - Dover STOP Act Grant Evaluation	PO# 201307604	93.243		2,262
Passed through Buildings Bright Futures State Advisory Council, Inc:				
36850 - Vermont L.A.U.N.C.H. Project	13/7	93.243		69,803
Total CFDA #93.243 - Substance Abuse and Mental Health				
Services Projects of Regional and National Significance				459,837
Pass-through Grant:				
Passed through The Dartmouth Institute for Health Policy and				
Clinical Practice:				
36861 - Community Health Assessment and Improvement				
Process	Agreement @ 3-22-13	93.249		13,152
Total - CFDA #93.249 - Public Health Training Centers Program				13,152

Sub-Total	3,721,369
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Federal Grantor/Pass-through Grantor	Agency or Pass-through	Federal CFDA	ī	Federal
Program Title	Number	Number	Expenditures	
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	S - CONTINUED			
Sub-Total from previous page			\$	3,721,369
Direct Grants:				
36777 - National Training Center - Quality Assurance, Quality				
Improvement, Evaluation	FPTPA006025	93.260		725,366
36787 - Reproductive Health Prevention Training and Technical				
Assistance	FPTPA006015	93.260		197,555
36792 - National Training Center for Management and Systems				
Improvement	FPTPA006023	93.260		923,279
36794 - Region VIII Sexual Health	FPTPA006016	93.260		167,107
Total - CFDA #93.260 - Family Planning - Personnel Training				2,013,307
Pass-through Grants:				
Passed through State of New Hampshire:				
36879 - Public Health Program Services Support	PO# 1031592	93.268		85,173
36880 - Public Health Program Services Support	PO# 1031592	93.268		10,640
Total CFDA #93.268 - Immunization Cooperative Agreements				95,813
Pass-through Grants:				
Passed through Merrimack, New Hampshire School District:				
36915 - Evaluation Services	PO# 1499031	93.276		9,606
Passed through Community Action Partnership for Strafford				
County, New Hampshire:				
36920 - Bridging the Gap Evaluation Services	Agreement @ 12-9-13	93.276		7,961
Passed through United Way of Greater Nashua:				
36937 - Nashua DFC Evaluation	Agreement @ 3-5-14	93.276		5,883
Total CFDA #93.276 - Drug-free Communities Support Program	n Grants			23,450

Sub-Total

5,853,939

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal penditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	- CONTINUED		
Sub-Total from previous page			\$ 5,853,939
Pass-through Grants:			
Passed through State of New Hampshire:			
36843 - Tobacco Helpline	1028499	93.283	247,002
36880 - Public Health Program Services Support	PO# 1031592	93.283	11,416
36906 - NH Top QL Partnership	Agreement @ 9-14-13	93.283	63,942
Passed through City of Manchester, New Hampshire Health Department:			
36955 - NH Tobacco Helpline	Agreement @ 3-25-14	93.283	14,095
36964 - NH Tobacco Helpline	Agreement @ 5-27-14	93.283	4,757
Passed through Community Health Access Network:			
36909 - NH Asthma Aware FY14	13-14:01	93.283	2,499
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.283	33,183
36849 - Smoker's Helpline - Quitline Tobacco Cessation	3320510	93.283	157,635
Passed through Commonwealth of Massachusetts Department of			
Public Health:			
36157 - HIV/AIDS Research, Training and Support	INTF-2915M04900315005	93.283	 53,606
Total - CFDA #93.283 - Centers for Disease Control and Prevention	on -		
Investigations and Technical Assistance			 588,135
Direct Grant:			
36891 - PPHF 2013 - OSTLTS Partnerships	1U38OT000188	93.292	109,528
Total - CFDA #93.292 - National Public Health			
Improvement Initiative			 109,528
Pass-through Grants:			
Passed through Black Ministerial Alliance of Greater Boston, Inc.:			
36664 - Healthy Futures	Agreement @ 6-1-11	93.297	175,458
36750 - Healthy Futures Health Education	Agreement @ 4-20-12	93.297	19,449
36848 - Teen Pregnancy Prevention Initiative	Agreement @ 5-1-13	93.297	7,357
Passed through Touchstone Behavioral Health:			
36912 - Ciudate - Training of Trainers	Agreement @ 10-17-13	93.297	 4,686
Total - CFDA #93.297 - Teenage Pregnancy Prevention Program			206,950

Sub-Total

6,758,552

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SER	VICES - CONTINUED		
Sub-Total from previous page			\$ 6,758,552
Pass-through Grant:			
Passed through State of New Hampshire:			
36879 - Public Health Program Services Support	PO# 1031592	93.448	1,224
Total - CFDA #93,448 - Food Safety and Security Monito	ring Project		1,224
Pass-through Grant:			
Passed through State of Vermont:			
36853 - Maternal, Infant, and Early Childhood Home			
Visitation Program	24086	93.505	45,835
Total - CFDA #93.505 - Affordable Care Act Maternal, I	nfant,		
and Early Childhood Home Visiting Program			45,835
Pass-through Grants:			
Passed through State of New Hampshire:			
36879 - Public Health Program Services Support	PO# 1031592	93.507	13,367
36880 - Public Health Program Services Support	PO# 1031592	93.507	2,827
Total - CFDA #93.507 - PPHF 2012 National Public Heal	th		
Improvement Initiative			16,194
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.525	6,812
Total - CFDA #93.525 - State Planning and Establishmen	it		
Grants for the Affordable Care Act (ACA)'s Exchange	·s		6,812
Pass-through Grants:			
Passed through Town of Hudson, Massachusetts:			
36754 - MetroWest Moves	Agreement @ 5-9-12	93.531	77,531
Passed through State of Vermont:			,
36930 - Vermont Oral Health Coalition	25965	93.531	10,153
Total - CFDA #93.531 - PPHF 2012 - Community Transi	tion Grants		87,684
Pass-through Grant:			
Passed through State of New Hampshire:			
36879 - Public Health Program Services Support	PO# 1031592	93.538	49,200
Total - CFDA #93.538 - Affordable Care Act - Nat'l Envi	ronmental		
Public Health Tracking Program			49,200
Sub-Total			6,965,501

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	ederal
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	- CONTINUED		
Sub-Total from previous page			\$ 6,965,501
Pass-through Grant:			
Passed through Dartmouth College:			
36970 - TDI Q1 Research	Agreement @ 5-1-14	93.542	 13,887
Total - CFDA #93.542 - Health Promotion and Disease Prevention	ı		
Research Centers: PPHF - Affordable Care Act Projects			 13,887
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.548	 6,744
Total - CFDA #93.548 - PPHF: State Nutrition, Physical Activity,	, and		
Obesity Programs			 6,744
Pass-through Grants:			
Passed through Commonwealth of Massachusetts Department of			
Public Health:			
Ensuring Quitline Capacity	INTF-2915-M04900315005	93.735	381,685
Passed through State of New Hampshire:			,
36843 - Tobacco Helpline	1028499	93.735	83,012
Total - CFDA #93.735 - State Public Health Approaches for Ensu	ring		
Quitline Capacity	-		464,697
			 10 1,000
Pass-through Grant:			
Passed through Ozarks Regional YMCA:			
36835 - Transformation Engagement Project	Agreement @ 2-28-13	93.737	126,165
36929 - Ozarks Regional Food Policy Council	Agreement @ 1-12-14	93.73 7	 14,454
Total - CFDA #93.737 - Community Transformation Grants			 140,619
Pass-through Grant:			
Passed through state of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.758	 2,535
Total - CFDA #93.758 - Preventive Health and Health Services			
Block Grant Funded Solely with Prevention and Public			
Health Funds (PPHF)			 2,535
Sub-Total			7,593,983

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Ex	Federal penditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICE	S - CONTINUED			
Sub-Total from previous page			\$	7,593,983
Pass-through Grants:				
Passed through State of New Hampshire:				
36879 - Public Health Program Services Support	PO# 1031592	93.889		153,399
36880 - Public Health Program Services Support	PO# 1031592	93.889		45,281
Total - CFDA #93.889 - National Bioterrorism Hospital				
Preparedness Program				198,680
Pass-through Grants:				
Passed through Mid-State Health Center:				
36953 - PATT Evaluation	MS1415-1	93.912		1,775
Passed through Plains Medical Center:				
36872 - ECHO Evaluation	Agreement @ 6-24-13	93.912		750
36882 - ECHO Project	Agreement @ 7-1-13	93.912		3,303
Total - CFDA #93.912 - Rural Health Care Services Outreach				5,828
Pass-through Grants:				
Passed through State of New Hampshire:				
36623 - Rural Health and Primary Care	PO# 1011440	93.913		8,457
36879 - Public Health Program Services Support	PO# 1031592	93.913		34,162
36880 - Public Health Program Services Support	PO# 1031592	93.913		386
36988 - Rural Health and Primary Care	PO# 1038916	93.913		1,787
Total - CFDA #93.913 - Grants to States for Operation of Office	es of Rural Health			44,792
Pass-through Grant:				
Passed through Boston Public Health Commission:				
36453 - BPHC Quality Management	6307A	93.914		158,303
Total - CFDA #93.914 - HIV Emergency Relief Project Grants				158,303
Pass-through Grants:				
Passed through State of New Hampshire:				
36879 - Public Health Program Services Support	PO# 1031592	93.917		59,657
36880 - Public Health Program Services Support	PO# 1031592	93.917		11,072
Passed through Commonwealth of Massachusetts Department of				,-/-
Public Health:				
36157 - HIV Care	INTF-4971-M04603614082	93.917		420,297
Total - CFDA #93.917 - HIV Care Formula Grants				491,026
Sub-Total				9 403 613
				8,492,612

Federal Grantor/Pass-through Grantor Program Title	Agency or . Pass-through Number	Federal CFDA Number	Federal Expenditures
$\ensuremath{\text{U.s.}}$ Department of health and human services	- CONTINUED		
Sub-Total from previous page			\$ 8,492,612
Direct Grant:			
36967 - Healthy Start Performance Project	UF5MC26845	93.926	153,686
Total - CFDA #93.926 - Healthy Start Initiative			153,686
Pass-through Grant:			
Passed through Commonwealth of Massachusetts Department of			
Public Health:			
Special Projects of National Significance	INTF-4971-M04603614082	93.928	47,825
Total - CFDA #93.928 - Special Projects of National Significance			47,825
Direct Grant:			
36487 - CDC CBA Project	U65PS001661	93.939	520,793
36945 - CDC CBA FY13 - FY19	U65PS004406	93.939	318,514
Total - CFDA #93.939 - HIV Prevention Activities - NGO Based			839,307
Pass-through Grants:			
Passed through Commonwealth of Massachusetts Department of			
Public Health:			
36157 - HIV Prevention Activities	INTF-4971-M04603614082	93.940	49,114
Passed through State of New Hampshire:			
36879 - Public Health Program Services Support	PO# 1031592	93.940	39,771
36880 - Public Health Program Services Support	PO# 1031592	93.940	7,381
Total - CFDA #93.940 - HIV Prevention Activities - Health Depar	tment Based		96,266
Pass-through Grant:			
Passed through Commonwealth of Massachusetts Department of			
Public Health:			
HIV/AIDS Surveillance	INTF-4971-M04603614082	93.944	14,106
Total - CFDA #93.944 - HIV/AIDS Surveillance			14,106
Direct Grant:			
36615 - CDC Teen Pregnancy	U58DP002906	93.946	295,496
Total - CFDA #93.946 - Cooperative Agreements to Support State	-Based		
Safe Motherhood and Infant Initiative Programs			295,496
Sub-Total			9,939,298

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal penditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SEI	RVICES - CONTINUED		
Sub-Total from previous page			\$ 9,939,298
Pass-through Grant:			
Passed through State of Rhode Island:			
36801 - Prevention Resource Center	3316844	93.959	 200,861
Total - CFDA #93.959 - Block Grants for Prevention and	d Treatment		
of Substance Abuse			 200,861
Pass-through Grants:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.994	9,478
Passed through State of New Hampshire:			
36879 - Public Health Program Services Support	PO# 1031592	93.994	1,617
36889 - Public Health Program Services Support	PO# 1031592	93.994	575
Total - CFDA #93.994 - Maternal & Child Health Service	ces Block		
Grant to the States			 11,670
TOTAL - U.S. DEPARTMENT OF HEALTH AN	ND		
HUMAN SERVICES			\$ 10,151,829

Federal Grantor/Pass-through Grantor Program Title U.S. DEPARTMENT OF HOMELAND SECURITY	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
Pass-through Grant:			
Passed through State of New Hampshire:			
36854 - Supplemental Oxygen Exercises	1029685	97.067	\$ 82,886
Total CFDA #97.067 - Homeland Security Grant Program			82,886
Direct Grants:			
United States Coast Guard -			
36757 - Nat'l. Estimate of Life Jacket Wear Rate	3311FAN1202.03	97.012	(1,888)
36857 - Nat'l. Estimate of Life Jacket Wear Rate	3313FAN1302.15	97.012	68,221
36958 - WA Parks Lifejackets	315-126	97.012	28,597
36969 - Nat'l. Estimate of Life Jacket Wear Rate	3314FAN1402.09	97.012	162,511
Total CFDA #97.012 - Boating Safety Financial Assistance	•		257,441
TOTAL - U.S. DEPARTMENT OF HOMELAND S	SECURITY		\$ 340,327
Direct Grant: 36789 - Reducing Asthma Disparities Through Adult Basic			
Education	96161301	66.034	\$ 29,162
Total CFDA #66.034 - Surveys Studies Research Investigate and Special Purpose Activities Relating to the Clean Air	•		29,162
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	66.472	18,094
Total CFDA #66.472 - Beach Monitoring and Notification Implementation Grants	Program		18,094
Direct Grant:	96159901	66.604	4,425
36788 - Latino Youth Environment Awareness and Action			4,425
Total CFDA #66.604 - Environmental Justice Small Grant	Program		
Sub-Total			51,681

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	_	ederal enditures
U.S. ENVIRONMENTAL PROTECTION AGENCY - CONTIN	NUED			
Sub-Total from previous page			\$	51,681
Direct Grant:				
36698 - Children's Health	CH-83510601	66.609		4,592
Total CFDA #66.609 - Protection of Children From Environment	tal Health Risks			4,592
Pass-through Grant:				
Passed through State of New Hampshire:				
36880 - Public Health Program Services Support	PO# 1031592	66.707		14,788
Total CFDA #66.707 - TSCA Title IV State Lead Grants Certific	ation			
of Lead-Based Paint Professional				14,788
TOTAL - U.S. ENVIRONMENTAL PROTECTION AGE	SNC		3	71,061
U.S. DEPARTMENT OF JUSTICE				
Pass-through Grants:				
Passed through State of New Hampshire:				
36838 - Court Diversion	Agreement @ 2-1-13	16.540		28,704
36931 - Court Diversion	Pending @ 2-21-14	16.540		58,450
Total - CFDA #16.540 - Juvenile Justice and Delinquency				
Prevention - Allocation to States				87,154
Pass-tbrough Grant:				
Passed through County of Cheshire, New Hampshire:				
36902 - Cheshire County Drug Court	Agreement @ 9-20-13	16.858	_	16,053
Total - CFDA #16.858 - Department of Justice, Bureau of Justice				
Assistance Grant				16,053
TOTAL U.S. DEPARTMENT OF JUSTICE			<u>s</u>	103,207

	Agency or	Federal	
Federal Grantor/Pass-through Grantor	Pass-through	CFDA	Federal
Program Title	Number	Number	Expenditures
U.S. DEPARTMENT OF STATE			
Direct Grant:			
36796 - Pakistan - PRM	S-PRMCO-12-CA-1067	19.519	\$ 71,503
Total - CFDA #19.519 - Overseas Refugee Assistance Program for	r		
Near East and South Asia			71,503
TOTAL U.S. DEPARTMENT OF STATE			\$ 71,503
TOTAL FEDERAL AWARDS			\$ 149,216,088

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

September 30, 2014

NOTE 1 – BASIS OF PRESENTATION

JSI Research and Training Institute, Inc. is the sole member of World Education, Inc. (the affiliate).

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, 2014. The information in this Schedule is presented in accordance with the requirements of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. 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.

The Schedule does not include the federal grant activity of World Education, Inc. (the affiliate). World Education, Inc. maintains a different fiscal year end (June 30) and has its own stand alone audit performed in accordance with the U.S. Office of Management and Budget Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, which includes its own separate schedule of expenditures of federal awards. However, the consolidated financial statements contain the combined activity of JSI Research and Training, Institute and World Education, 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 OMB Circular A-122, Cost Principles for Non-Profit Organizations, wherein certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Catalog of Federal Domestic Assistance (CFDA) numbers are presented when available.

NOTE 3 – SUBRECIPIENTS

Of the federal expenditures presented in the schedule, JSI Research and Training Institute, Inc. provided federal awards to subrecipients as follows:

Program	CFDA Number	Amount Provided to Subrecipients
Juvenile Justice and Delinquency Prevention	16.540	\$ 20,378
Overseas Refugee Assistance Program for Near East and South Asia	19.519	23,747
Environmental Justice Small Grant Program	66.604	4,375
Protection of Children from Environmental Health Risks	66.609	2,771
Environmental Public Health and Emergency Response	93.070	4,7 07
AIDS Education and Training Centers	93.145	393,299
Family Planning Services	93.217	43,731
Substance Abuse and Mental Health Services - Projects of Regional and		
National Significance	93.243	106,539
Family Planning - Personnel Training	93.260	9,750
Centers for Disease Control and Prevention - Investigations and		7,00
Technical Assistance	93.283/93.917/93.940/93.941	337,504
National Public Health Improvement Initiative	93.292	49,000
ACA - State Innovation Models: Funding for Model Design and Model		,,,,,,
Testing Assistance	93.624	30,486
Centers for Medicare and Medicaid Services Research, Demonstrations		
and Evaluations	93.779	22,650
Grants to States for Operation of Offices of Rural Health	93.913/93.283/93.236/93.130	29,248
HIV Care Formula Grants	93.917	5,521
Healthy Start Initiative	93.926	3,804
Assistance Programs for Chronic Disease Prevention and Control	93.945	11,440
RI Prevent Resource Center	93.959	450
Homeland Security Grant Program	97.067	26,159
USAID Foreign Assistance for Program Overseas	98.001	31,001,970
Total Federal Awards Provided to Subrecipients		\$ 32,127,529
Non-Federal Awards Provided to Subrecipients		3,264,101
		\$ 35,391,630

The federal expenditures provided to subrecipients are reflected in the sub-contracts line item of the schedule of functional expenses.

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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, 2014, 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 February 12, 2015.

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 its affiliates's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the 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 its 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.

Themman Jungua R COA

Duxbury, Massachusetts February 12, 2015 NORMAN R. FOUGERE, JR. CPA 99 HERITAGE LANE DUXBURY, MA 02332-4334



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

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE IN REQUIRED BY OMB CIRCULAR A-133

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 Circular A-133 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, 2014. 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 the requirements of laws, regulations, contracts, and grants 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 OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 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, 2014.

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 OMB Circular A-133, 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 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 U.S. Office of Management and Budget Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. 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 OMB Circular A-133. Accordingly, this report is not suitable for any other purpose.

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Duxbury, Massachusetts February 12, 2015

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

September 30, 2014

A. SUMMARY OF AUDIT RESULTS

- 1. The auditors' report expresses an unqualified opinion on the consolidated financial statements of JSI Research and Training Institute, Inc. and Affiliate.
- 2. No significant deficiencies were disclosed during the audit of the consolidated financial statements of JSI Research and Training Institute, Inc. and Affiliate.
- 3. No instances of noncompliance material to the consolidated financial statements of JSI Research and Training Institute, Inc. and Affiliate were disclosed during the audit.
- 4. No significant deficiencies in internal control were disclosed during the audit of the major federal award programs of JSI Research and Training Institute, Inc.
- The auditors' report on compliance for the major federal award programs for JSI Research and Training Institute, Inc. expresses an unqualified opinion on all major federal programs.
- 6. There are no audit findings that are required to be reported in this schedule in accordance with Sec. 510 (a) of OMB Circular A-133.
- 7. The programs tested as major programs included:

Agency	Program Title	C.F.D.A. #
Agency for International Development	USAID Foreign Assistance	
	for Programs Overseas	98.001 (Cluster)

- 8. The threshold for distinguishing Types A and B programs was \$3,000,000.
- 9. JSI Research and Training Institute, Inc. was determined to be a low-risk auditee.

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STATUS OF PRIOR YEAR'S FINDINGS AND QUESTIONED COSTS

There were no reportable findings or questioned costs for the year ended September 30, 2013.



JSI Research & Training Institute, Inc.

Officers

Name <u>Title</u> <u>Address & Telephone #</u>

Joel H. Lamstein President

Joel H. Lamstein Treasurer

Patricia Fairchild Secretary

Joanne McDade Assistant Secretary

Board of Directors

Name <u>Title</u>

Joel H. Lamstein Director

Alexander K. Baker Director

Patricia Fairchild Director

44 Farnsworth Street
Boston - Massachusetts

617 482 9485 Voice 617 482 0617 Fax

02210 · 1211



Board of Directors, cont.

Name	<u>Title</u>	Address & Telephone #
Kenneth J. Olivola	Director	
David E. Bloom	Director	
Leland Goldberg	Director	
Carolyn Hart	Director	
Louis Kaplow	Director	
Paul Osterman	Director	
Nancy Turnbull	Director	

Director

Michael Useem

KARYN DUDLEY MADORE

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kmadore@jsi.com

EDUCATION

UNIVERSITY OF SOUTH FLORIDA, TAMPA, COLLEGE OF PUBLIC HEALTH GRADUATE CERTIFICATE PROGRAM HEALTH COMMUNICATION IN PUBLIC HEALTH SUMMER 2014

PLYMOUTH STATE COLLEGE, PLYMOUTH, NEW HAMPSHIRE M.Ed. 1995

PLYMOUTH STATE COLLEGE, PLYMOUTH, NEW HAMPSHIRE B.S., Marketing 1987

EXPERIENCE

JSI Research & Training Institute, Inc. d/b/a Community Health Institute. Bow, New Hampshire Operations Director, August 1998 to present

Operations Director

Serve as Operations Director for the JSI-NH office, d.b.a. Community Health Institute. Provide operational oversight of office functions and operations including project and support staff workload division, professional and skill development and liaison to other JSI offices and departments.

JSI-NH Health Communications Director

Serve as Health Communications Director for the JSI-NH office, d.b.a. Community Health Institute. As Health Communications Director, provide overall strategic direction, administration, and management of health communications services to a variety of projects. Oversee the development of marketing and communication campaigns, print materials, and collateral as well as print material distribution services to ensure that all materials and campaigns are of high quality, effective, and innovative.

National Healthy Start Branding and Communications Lead

Maternal and Child Health Bureau (MCHB), Division of Healthy Start and Perinatal Services (DHSPS), Washington, DC. Branding and Communications Lead for the Supporting Healthy Start Performance Project (SHSPP) to provide capacity building assistance (CBA) to approximately 100 Healthy Start grantees to ensure program effectiveness in achieving the goals to reduce infant mortality, reduce health disparities and improve perinatal health outcomes. CBA incorporates technical assistance, training, technology transfer and information transfer and dissemination.

NH Immunization Marketing

Serve as Project Director to develop a creative health marketing campaign, for the NH Immunization Program, that identifies priority audiences, best-practice outreach strategies, partner communication channels, effective educational outreach materials to advance the understanding of the health benefits of vaccines and immunizations and increase NH immunization rates. The team will review existing state and national materials, and create new graphics and logos.

NH Tobacco Addiction Treatment Services (TATS)

Serve as Project Director and Media Lead for the NH TATS project, which is a follow on to the NH Tobacco Use Cessation and Counter Marketing Project completed in FY07. This contract serves as the hub for the NH Tobacco Resource Center, which incorporates: 1) the NH Smokers' Helpline offering free and confidential counseling and services in English, Spanish and Portuguese; 2) the promotion of the NH Smokers' Helpline through a variety of traditional and non-traditional media outlets; and 3) www.trytostopnh.org, a web-based resource for NH tobacco users and 4) QuitWorks-NH a resource for NH clinicians working with their patients to quit using tobacco by providing them with a single portal for referring their patients who use tobacco for state-of-the-art treatment (www.quitworknsnh.org). This initiative also includes the continued development of a consortium of health insurers who are willing to promote TTS-NH to their subscribers directly and endorse QuitWorks-NH to their contracted health care providers.

NH Environmental Public Health Tracking Program Outreach Project

Worked with NH DHHS Environmental Public Health Tracking Program (EPHT) staff and partners 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. Assisted EPHT in developing a user analytics data collection process for web-based tools.

NH County Rankings Video Project -MATCH

Co-Lead the process to collaborate with the NH State County Health Rankings Team to produce three 5-minute videos and one 15-minute video. The videos focus on Public Health in NH as it relates to the NH County Health Rankings and the NH State Health Report. Data from the reports will be linked to stories gathered around the state that illustrate community actions to improve health or people impacted by improvements in public health. The videos serve to educate and motivate NH individuals and communities into action to improve the health of their community and state.

Mobilizing Action Toward Community Health (MATCH)

In partnership with DHHS and the North Country Health Consortium, developed the overarching concept for four videos. These videos highlight data found in the County Health Rankings Report, the NH State Health Report and highlights the role of public health in the state. CHI worked with the state in identifying local or statewide "success stories" to highlight. Lead script development process and worked with videographers to complete the video projects.

Expand and Promote Try-To Stop Resource Center

Served as Project Director to expand and promote the NH Tobacco Helpline. With funding from the American Recovery and Reinvestment Act (ARRA), this project includes a population based media campaign that promotes free Nicotine Replacement Therapy (NRT) kits to a variety of audiences, including a pilot with employees of the Department of Transportation and their families, and then the entire state of NH. A variety of media was used to promote the NH Tobacco Helpline including radio, TV, newspaper, bus and web advertising. Additionally, the plan includes a pilot project to implement systems change through Families First, where they will implement an electronic referral form to contact the Helpline rather than the fax referral currently in place.

NH Tobacco & Obesity Policy Project

Served as Project Director to implement a feasibility assessment for implementing high-impact public policy in three identified domains of licensed child care settings, public schools and workplaces. This assessment is timely and a critical opportunity for NH stakeholders to engage in a collaborative educational process that will likely result in strengthening regulatory rules, implementation of high-impact public policy access strategies, educating municipalities and legislators and building stronger public health partnerships.

New Hampshire Public Health Emergency Planning Technical Assistance and Training

Co-created the development and implementation of a Public Information Officer Training for public health and safety officials and representatives of human service organizations likely to be called upon to fill a Public Information Officer (PIO) role in a public health event. The goal of this Regional PIO Training is to strengthen the communication skills of individuals to perform the role of a PIO in a public health emergency, including but not limited press releases, speaking with the press, key messaging, and audience definition. The training s continues on an as needed basis.

Communication Training

Researched, customized and implement a social communication training to help individuals identify their personal communication strengths and weaknesses in times of stress through interactive workshops. This training is an effective tool in organizational and leadership development, team building, and career planning and conflict resolution. To date this training has been provided to the following organizations: NH Tobacco Prevention and Control Program, NH Red Cross Granite Chapter, Community Health Institute, MIT Medical and JSI and continues to be offered by request.

NH Tobacco Use Cessation and Counter Marketing (TUCCM)

Served as Program and Media Manager for the NH TUCCM project completed June 30, 2007. This project incorporated three major components: 1) the toll free NH Smokers' Helpline offering services in English, Spanish and Portuguese through which smokers and other citizens of NH receive information on any aspect of tobacco and may be referred to state-of-the-art prevention and tobacco treatment resources, if appropriate; 2) the promotion of the NH Smokers' Helpline through a variety of traditional and non-traditional media outlets; and 3) a Tobacco Education Clearinghouse.

PROFESSIONAL ASSOCIATIONS

National Public Health Information Coalition, Member CDC Media Network Representative for NH Circle Program, Mentor, 1993 to present NH Tobacco-Free Coalition, Member Public Relations Society of America, Member Concord Area Red Cross Board of Directors: 2001–2007.

Vice-Chair, 2004–2005, President, 2005–2007 Comprehensive Cancer Collaborative Tobacco Prevention Workgroup, Past Member MSA Violation Monitoring National Workgroup, Past Member



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

Nashua Community Health Assessment

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 and wrote summary report of findings.

SHARE Needs Assessment

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.

HNH Foundation

Worked with 12 community groups across NH to plan, coordinate, implement and evaluate 12 screening and education events of the *Challenges* film from the HBO series *Weight of the Nation*. The aim of the project is to increase awareness among NH residents of the social costs and implications of obesity and to encourage local and regional strategies to address access to healthy food and opportunities for physical activity.

NH Department of Education, Child and Adult Care Food Program (CACFP)

Created content for two lessons and supplemental activities on the topics of nutrition and physical activity for CACFP for professionals working in family-based child care programs that are enrolled in CACFP and their sponsoring agencies.

NH Environmental Public Health Tracking Program Data Utilization and Outreach Project

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.

NH Immunization Marketing

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.

New Hampshire Public Health Emergency Planning Technical Assistance and Training

New Hampshire Department of Health and Human Services, Division of Public Health Services, Office of Community and Public Health: Provide technical assistance and support to two of the 14 regional public health regions. Developed and delivered a five hour *Risk Communication* training designed to build skills for professionals serving as a public information officer during a public health emergency, Family and Individual Preparedness train-the-trainer, Continuity of Operations Planning training and several other Homeland Security Emergency Planning compliant exercises to assist the regions build knowledge and skills to plan and respond to public health emergencies. Support, participate in and evaluate training exercises.



Dartmouth-Hitchcock Colorectal Cancer Screening Program Focus Groups Catholic Medical Center, Abstinence Education Program, Why Am I Tempted Curriculum

Convened, facilitated, and summarized findings of qualitative and market research of target audiences. Developed line of questioning and facilitator's script, developed relevant recruitment and logistical materials, and wrote summary of findings with recommendations for material development and program improvement.

Tobacco and Obesity Policy Project

Worked with NH Department of Health and Human Services, Tobacco Prevention & Control Program and Obesity Prevention Program staff and partners to develop strategy and create training and materials for licensed childcare settings and schools to adopt national standards around nutrition, physical activity, screen time, and tobacco exposure. Conducted quantitative research of childcare professionals and developed baseline and follow-up survey to assess changes to policies.

Engaging Smokers in Cessation through Financial Assistance Program

Through funding from the American Legacy Foundation coordinated with financial assistance programs in NH and RI to implement a demonstration project to connect low-income individuals who smoke with evidence-based cessation services. Trained credit counselors to assess smoking status of all clients, advise on the high personal costs of smoking and impact on their budget and refer clients to the state's quitline and developed tools to track progress of project.

Manchester Community Sustainable Access Project: Community Benefits Assessment

Through funding from Elliot Health Systems, Catholic Medical Center and the Manchester Health Department developed a strategy to collect qualitative data from community members represented in six towns served by agencies in Manchester, NH. The purpose of the research was to determine the extent to which the community benefited from their services a non profit organization. Qualitative research methods included 13 focus groups and 15 key informant interviews. Wrote report with recommendations based on data from assessment.

Training Oral Health Providers to Motivate Patients to Quit Smoking

Year one of this project included planning and convening phase to assess the readiness of oral health providers to engage patients who use tobacco in a brief intervention. Data was collected through key informant interviews, focus groups, literature review and a curricula search. Wrote report with recommendations. In subsequent years, recruited practices and conducted 50 trainings reaching over 500 oral health professions on an evidence-based model for reaching tobacco users in a practice setting.

Healthy Eating Active Living

Facilitated a strategic planning process with NH worksite representatives to draft statewide recommendations to increase healthy eating and active living for NH employees. Reviewed the literature. Coordinated statewide NH conference to present the strategic plan to reduce obesity rates for NH children and adults with over 200 stakeholders present.

Tobacco & Literacy in NH: A Pilot Program for Young Adults

Through funding from the American Legacy Foundation coordinated with three Adult Education Programs in NH to develop and pilot test three lessons that advanced adult literacy skills and tobacco knowledge to adult learners. Disseminated lesson plans to national adult literacy and tobacco control programs.

Smoking Cessation: State-of-the-Art Tobacco Treatment

Provided project management for the NHDHHS, Tobacco Prevention and Control Program. Recruited and trained 120 healthcare clinical sites to assist patients who use tobacco in the 5A tobacco treatment model and provided technical assistance to sites to adopt the recommendations in the Public Health Services' Clinical Practice Guideline, Treating Tobacco Use and Dependence. Developed curriculum. Track results of the intervention with baseline and post surveys using SPSS.

Tobacco Free in the Queen City

Provided project management to the NH Chapter of March of Dimes in partnership with the Elliot Wellness Center to train health and human service providers serving pregnant women or new families in the 5A tobacco treatment model through the Elliot Health Systems. Trained and provided technical assistance to staff from various programs or departments.

Smoking Cessation for Women of Reproductive Age: State-of-the-Art Tobacco Treatment

Provided project management for the NHDHHS, Tobacco Prevention and Control Program in partnership with Southern and Northern NH Area Health Education Centers and the NH Foundation for Healthy Communities. The goal of the project was to



increase the capacity of NH health providers serving perinatal and reproductive age women to systematically provide effective smoking cessation interventions in their clinical setting. Responsibilities included: contract monitoring, recruitment and training of health educators to deliver the guideline-based tobacco treatment intervention and the recommended practice improvements to both publicly and privately funded clinical sites throughout NH. Promoted and recruited the clinical sites, designed training materials and survey tools. Monitored project.

PRESENTATIONS

Presented Poster at Moffitt Cancer Center: Cancer, Culture and Literacy Conference in 2008 & 2010.

Presented 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.

Presented Poster and 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.

Presented at National Conference on Tobacco or Health, Engaging Low-Income Smokers in Tobacco Cessation via Credit Counseling Programs, 2012.

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

Attended National Tobacco Conference, Boston, MA, 2004

Completed Basic Skills for Working with Smokers, University of Massachusetts Medical School, 2002



SHASTA A. JORGENSEN, M.P.H.

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sjorgensen@jsi.com

EDUCATION

BOSTON UNIVERSITY SCHOOL OF PUBLIC HEALTH, BOSTON, MASSACHUSETTS Master of Public Health, Concentration in Social and Behavioral Science, 2010

UNIVERSITY OF REDLANDS, REDLANDS, CALIFORNIA Bachelor of Arts, International Relations, 2001

EXPERIENCE

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

Project Manager, February 2012 to present Project Coordinator, March 2009 to 2012 Project Assistant, February 2003to February 2009

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.

Partnerships for Quitline Sustainability, New Hampshire Tobacco Prevention and Control Program: *Project Manager*. Provide consultation and technical assistance to the health department on the development of quitline cost sharing relationships with private health plans insurers in an effort to support tobacco quitline operations. Develop strategies based on research around health plan cessation programs/benefits to engage private health plans in a cost sharing partnership with NH Tobacco Helpline.

NH Tobacco Helpline

New Hampshire Department of Health and Human Services, Tobacco Prevention and Control Program
Responsible for program and administrative management of the NH Tobacco Helpline. Serve as primary contact, along with the Project Director, for contract with TPCP for the NH Tobacco Helpline and subcontractors. In collaboration with the management team, monitor progress in meeting goals of overall contract workplan and overall project. Assist TPCP in promoting the Helpline services to statewide organizations. Facilitate alliances among state agencies and/or organizations that serve similar priority populations. Oversee budget and serve as fiscal contact for additional services as determined by TPCP. Provide technical assistance regarding counter-marketing and public awareness initiatives. Oversee Program Assistant and Program Support staff activities and duties.

Expand and Promote the Try-TO-STOP TOBACCO Resource Center of NH

New Hampshire Department of Health and Human Services

Served as Project Coordinator to expand, promote and increase awareness and utilization of the evidence-based cessation tools and resources offered through the Try-To-STOP TOBACCO Resource Center of NH through the creation of a strategic plan that includes a population based media campaign and outreach to NH physicians and other clinical and public health professionals such as the Community Health Access Network (CHAN), the NH Medical Society, NH health insurance providers as well as statewide partners to implement systemic adoption of the US PHSG.

Dover Youth Empowerment Model Evaluation

City of Dover

Data Manager for the Dover Youth Empowerment Model Evaluation. Collected evidence of effectiveness of this youth empowerment model for the innovators of this model. Efforts included getting the program elected as a Center for Substance Abuse Prevention's Service-to-Science program and furthering the program along the continuum of evidence . for eligibility in the SAMHSA National Registry of Evidence-based Programs.



Multistate Learning Collaborative

Robert Wood Johnson Foundation

Project Coordinator for the RWJF-funded Multistate Learning Collaborative (MLC-3), a national collaborative effort to improve public health services and the health of communities by linking public health processes to health outcomes. Managed two learning collaboratives addressing childhood obesity and health improvement planning, and tobacco cessation among pregnant women and workforce development. Developed assessment tools and conduct public health network capacity assessments to inform NH public health regionalization process.

Engaging Smokers in Cessation through Financial Assistance Program

Legacy Foundation

Through funding from the American Legacy Foundation coordinated with financial assistance programs in NH and RI to implement a demonstration project to connect low-income individuals who smoke with evidence-based cessation services. Trained credit counselors to assess smoking status of all clients, advise on the high personal costs of smoking and impact on their budget and refer clients to the state's quitline and developed tools to track progress of project.

New Hampshire Tobacco Use Cessation and Counter Marketing

New Hampshire Department of Health and Human Services

Project Assistant of the New Hampshire Tobacco Cessation and Counter Marketing Project funded by the NH DHHS. This project incorporates three major components: 1) the toll free NH Smokers' Helpline offering services in English, Spanish and Portuguese through which smokers and other citizens of New Hampshire receive information on any aspect of tobacco and may be referred to state-of-the-art prevention and tobacco treatment resources, if appropriate; 2) the promotion of the NH Smokers' Helpline through a variety of traditional and non-traditional media outlets; and 3) a Tobacco Education Clearinghouse, which develops and distributes in bulk quantities high quality, culturally appropriate tobacco education materials.

Rural Health and Primary Care Section

New Hampshire Department of Health and Human Services

Project Assistant for the Healthcare Workforce Shortage Designation process for the state of New Hampshire. Purpose of project is to identify areas of the state that meet the federal criteria for Healthcare Professional Shortage Areas (HPSAs) and Medically Underserved Areas/Populations (MUA/Ps). Primary responsibilities include date managing of provider survey and make follow up calls to non-responsive providers.

Vulnerable Populations Emergency Preparedness Needs Assessment

NH Bureau of Emergency Management

Responsible for providing administrative and logistical support to the project including meeting logistics, focus group transcription and data management of emergency management director survey. The assessment includes collaboration with agencies working with special populations and in disaster response, an emergency management director survey and focus group data collection to detail emergency preparedness needs of these populations, identify gaps in organized emergency planning related to special populations, and develop recommendations to improve the capacity of emergency response system to meet these needs.

Smoking Cessation for Women of Reproductive Age: State-of-the-Art Tobacco Treatment

New Hampshire Department of Health and Human Services

Assist project director with administration of the development and implementation of a multifaceted project to increase the capacity of New Hampshire health care providers serving perinatal and reproductive-age women to systematically provide effective smoking cessation interventions in their clinical settings. The scope of work included: evidence-based training, Help Pregnant Women Stop Smoking: Its Time Well Spent, developed by JSI with CDC funding; developing a universal and enrollment process for linking perinatal and reproductive-age women to the state- of-the-art proactive telephone-based tobacco treatment service of the Try-To-STOP TOBACCO Resource Center of New Hampshire.

Tobacco Technical Assistance and Development

New Hampshire Department of Health and Human Services

This project seeks to develop and implement a comprehensive needs assessment and strategic planning process that allows the NH Tobacco Prevention and Control Program and its community partners to maximize the impact of limited resources with an emphasis on those who are most disparately impacted by tobacco. Concurrently, this project is also providing technical assistance to existing tobacco cessation coalitions in NH and will utilize the data collected through the needs assessment to fund additional tobacco coalitions around the state. Provided conference logistics for the Tobacco Prevention and Control Conference.



OTHER EDUCATION

Completed *Motivational Interviewing* workshop at Health Education and Training Institute, Concord, NH, 2010 Completed *Basic Skills for Working with Smokers*, University of Massachusetts Medical School, 2008 Attended National Conference on Tobacco or Health, Minneapolis, MN, 2007 Attended World Tobacco Conference, Washington, D.C., 2006 Attended National Tobacco Conference, Boston, MA, 2004



PRISCILLA DAVIS, BS

JSI Research & Training Institute, Inc., d.b.a. Community Health Institute 501 South Street · 2nd Floor, Bow, NH 03304 · (603) 573-3302

pdavis@jsi.com

EDUCATION

ST. JOSEPH'S COLLEGE, STANDISH, MAINE
Master of Health Administration candidate, currently enrolled

GRANITE STATE COLLEGE, CONCORD, NEW HAMPSHIRE Bachelor of Science, Business Management 2008

UNIVERSITY OF RHODE ISLAND, KINGSTON, RHODE ISLAND School of Business Administration, MIS Concentration 1978-1979

RHODE ISLAND COLLEGE, PROVIDENCE, RHODE ISLAND School of Business Administration 1977-1978

EXPERIENCE

JSI Research & Training Institute, Inc. d/b/a Community Health Institute, Bow, New Hampshire Project Manager - September 1999 to present

Selected Project Work includes:

Indian Health Service Urban Indian Health Program Uniform Data System (UIHP UDS)

Project Manager, Trainer and reviewer for the Urban Indian Health Program's Uniform Data System (UIHP UDS), a federal reporting requirement for the IHS Urban Indian Health Programs. Responsibilities include conducting national training for Urban Indian Health Programs, providing technical assistance related to reporting requirement; Reviewer for Health Center and Program reports, analysis of data and trends on the state, program and national levels and production of key reports with performance indicators as a result; Testing and oversight of software programming to define reporting needs including functionality, formula and edit checks; perform review and finalization of aggregated rollup, comparison and key management reports and written final executive summary for Indian Health Service.

Health Resource and Services Administration (HRSA), Bureau of Primary Health Care (BPHC UDS) Uniform Data System

Trainer, reviewer and data coordinator for the BPHC Uniform Data System (UDS) federal reporting requirement for Federally Qualified Health Centers (FQHC's). As trainer, conduct trainings in various states to assist health centers in accurate reporting. Responsibilities as reviewer include analysis of reports through individual review process with health center representatives and making recommendations for improvement. Also provide technical assistance to grantees and reviewers, contribute to executive summary, assist with compiling comparison, and other management reports as a result of the national collection process.

NH Conference on Aging

Project Manager and fiscal agent for the New Hampshire Bureau of Elderly and Adult's (BEAS) Conference on Aging. The Conference on Aging is an annual event whose goal is to provide information, education and training for older adults, caregivers and providers that promotes awareness, self-determination, advocacy, collaboration and independence. The conference reached a statewide audience of over 800 participants and 80 sponsor/exhibitors. Duties included working directly with planning committee consisting of representative from state and community agencies, to establish event content and outreach/marketing content. Duties also included fiscal management, fundraising through sponsorship and exhibitors, coordination of logistics specific to the needs of the target population, and making recommendations to BEAS. Other duties included building website with interactive online registration



form; tracking, querying and reporting; soliciting sponsors and exhibits; coordination of registration; oversight of graphic design; analysis and summary of evaluations.

New Hampshire Wired Wizard

Conducted statewide community-based trainings for "NH Wired Wizard", an interactive screening tool designed to help New Hampshire's state and community-based agencies streamline the referral and eligibility determination process for individuals and families in need within their communities. Taught weekly training sessions to train, promote and assist in using Wired Wizard. Other responsibilities included producing training manual and materials, maintaining and updating current programs on the software, tracking user accounts, providing technical assistance, establishing and organizing training at locations encompassing all areas of the state, updating programmatic information on website.

NH Hospital Associated Infections Validations

Participated as auditor on team tasked with conducting in-depth hospital audits throughout NH for validation process to assess and improve the quality of National Healthcare Safety Network (NHSN) Hospital Associated Infection (HAI) data reported by the 26 acute care hospitals in New Hampshire. Using a comprehensive method for HAI case finding and data verification to identify possible missed cases of surgical site infections (SSI) and central line associated bloodstream infections (CLASBI). The audit team applied the complex NHSN definitions to each case and compared determinations to those of the hospital infection prevention team.

NH Strategic Prevention Framework (SPF) Regional Evaluation,

Conducted over thirty interviews in SPF Region J related to community readiness around the region's youth substance abuse prevention efforts. One-on-one interviews were held with key informants from business, education, safety, health and local government sectors to help inform the overall assessment.

Teen Assessment Project

Coordinated and conducted the Teen Assessment Project (TAP) Survey for the Communities for Alcoholand Drug-free Youth, Plymouth, NH. Duties included coordination with schools, dissemination and collection of survey and preparation for statistical analysis. The Teen Assessment Project (TAP) is a survey examines teen attitudes, alcohol and other drug abuse, sexual activity, interactions with peers, parent/teen relationships, internet use and health and safety issues, and is distributed bi-annually to participating schools in the Plymouth area SAU district.

The Memorial Hospital/Conway Area Needs Assessment

Co-facilitated focus group involving participants in a prior health related survey, which targeted populations in the Conway service area. A series of focus group sessions were conducted that included representative groups from various sectors included Health Providers, Senior Citizens, Business /Commerce, and Private Citizens. Duties included documenting responses and writing summaries of focus groups. Input received during the focus groups was used for final qualitative findings to aid in assessing health related programs needs in the service area.

HONORS AND AWARDS

Graduated summa cum laude, 2008, Granite State College; ALA Merit Scholarship Recipient, 2008

WORKSHOPS

Grant Writing Workshop, Grant Training Center, 2009

COMPUTER SKILLS

MS Office Applications: Access, Word, Excel, PowerPoint and Publisher; Adobe Photoshop and Dreamweaver; Web Tools: Constant Contact, LogiForms, GoDaddy, Prezi, Survey Monkey, Mail Chimp; Video Editing: Audacity; Statistical Software: SPSS



LORI WALTER, CMP

JSI Research & Training Institute, Inc. d/b/a Community Health Institute 501 South Street, 2nd Floor, Bow, New Hampshire 03301 (603) 573-3306

lwalter@jsi.com

EDUCATION

ASHWORTH UNIVERSITY, NORCROSS, GEORGIA
A.S., Business Management (anticipated completion in 2016)

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

Project Assistant, July 2007 to present

Lead Poisoning and Prevention May 2015 to present

Provides administrative support and conference and steering committee retreat logistics management for the New England Lead Coordinating Committee as part of the NH DHHS Healthy Homes & Lead Poisoning Prevention program activities. Activities include a two-day conference for 170 lead professionals and contractors to be held biennially.

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 800 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 management 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.

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.

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

Provides 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.

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 where 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 where 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.

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.



DEBRA L. LOVE

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dlove@jsi.com

EDUCATION

PLYMOUTH STATE COLLEGE, PLYMOUTH, NEW HAMPSHIRE B.S., Business, Psychology and Health Interdisciplinary Studies: 1985–1990

INSTITUTE OF CHILDREN'S LITERATURE, WEST REDDING, CONNECTICUT

Diploma: Writing, 1994-1996

AT-HOME PROFESSIONS, FORT COLLINS, COLORADO

Certification: Medical Transcriptionist - March to August 2004

Certified NH Notary Public, 2008to Present

EXPERIENCE

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

Project Manager, February 2009 to present Project Coordinator, 2003 to 2009 Project Assistant, 2001 to 2003

NH Tobacco Addiction Treatment Services (TATS)

Serve as Project Assistant for the NH TATS project. This contract serves as the hub for the NH Tobacco Resource Center, which incorporates: 1) the NH Smokers' Helpline offering free and confidential counseling and services in English, Spanish and Portuguese; 2) the promotion of the NH Smokers' Helpline through a variety of traditional and non-traditional media outlets; and 3) www.trytostopnh.org, a web-based resource for NH tobacco users and 4) QuitWorks-NH a resource for NH clinicians working with their patients to quit using tobacco by providing them with a single portal for referring their patients who use tobacco for state-of-the-art treatment (www.quitworknsnh.org). This initiative also includes the continued development of a consortium of health insurers who are willing to promote TTS-NH to their subscribers directly and endorse QuitWorks-NH to their contracted health care providers.

NH Center for Excellence

Provide fiscal, logistical, administrative and data management 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.

Cheshire County Drug Court (CCDC)

Provide support in the program evaluation of the CCDC program, which is expanding the substance use disorder treatment capacity in their Superior Court through the development of the CCDC. The goal is to reduce recidivism by breaking the criminogenic patterns of behavior related to substance abuse and addiction among high risk/high need non-violent offenders.

Quality Improvement in Enhancing the System of Services for Children and Youth with Epilepsy

Provide logistical and administrative support to HRSA's Maternal and Child Health Bureau to assist Innovative

Strategies and Promising Practices grantees to improve the system of care in medically-underserved and rural areas for children and youth with epilepsy. The purpose of the overall initiative is to explore mechanisms to spread improvement of the quality of services for children and youth with epilepsy (CYE) in the medical home and to strengthen the comanagement relationship between the medical home and the specialty network. The project aims are to: 1) Create a three-session learning collaborative for grantees; 2) Analyze the results of the evaluation compiled from prior learning



collaboratives and design a strategy to incorporate continuous learning improvement; and 3) Conduct a comprehensive analysis of the learning collaborative.

Injury Prevention Professional Trainings

Project Manager for the Injury Prevention Program, Division of Public Health Services and the Injury Prevention Community Planning Group to provide planning, promoting and logistical support and evaluation for professional trainings with the goal of supporting appropriate activities that educate the public health workforce, policymakers and the public on the value of evidenced-based injury prevention measures in reducing preventable deaths and the severity of injuries as well as health care costs.

NH Conference on Aging

Project Manager for the New Hampshire Bureau of Elderly and Adult's (BEAS) Conference on Aging. Oversight of this project includes fiscal management, generation of funding through sponsorship and exhibitors, negotiation of conference expenses within, facilitation of planning committee meetings, coordination of logistics specific to the needs of the target population, and providing BEAS with recommendations. Other scope of work includes building website with online registration form; database creation; soliciting sponsors and exhibits; executing speaker and site contracts; coordination of registration; oversight of graphic design; generating weekly reports for client and post-conference survey and analysis. The Conference on Aging is an annual event whose goal is to provide information, education and training for older adults that promotes awareness, self-determination, advocacy, collaboration and independence.

Strategic Prevention Framework - SIG Region B, F, J & I

Provided administrative support for a state-defined region to plan for and implement evidence-based strategies to prevention and reduce alcohol use and abuse among 12 to 17 year olds. The regional initiative is part of a statewide Strategic Prevention Framework (SPF) funded by the U.S. Substance Abuse and Mental Health Services Administration that engages communities in a five step process to assess, build capacity for, plan, implement and evaluate strategies to reduce high risk alcohol consumption and its harmful consequence.

National Health Service Corps (NHSC)

Data Coordinator for a major initiative to collect 'Uniform Data Systems' (UDS) information from all National Health Service Corps sites across the country, which do not receive direct federal grants. The data collected describes the financial and operational parameters of the health centers, and forms the basis of NHSC management decisions and reports to Congress, as well as informing the health centers of their relative performance. The project involves extensive data management and technical editing of reported data as well as the development of unique software to collect, manage, and screen the data electronically.

New England Rural Health RoundTable (NERHRT)

Project Manager for the NERHRT. Responsibilities included maintaining database with dues paid members and with lapsed memberships. Coordinated production of the newsletter and managed layout, and printing. Processed all mailings including annual dues, conference announcements, board mailings, press releases, RFPs, and newsletters. Maintained financial records. Communicated regularly with NERHRT researcher and web site manager. Answered the NERHRT dedicated phone line and processed all inquiries from Board members, association members and individuals seeking information about the association. Logistics coordinator for two annual retreats, a conference, and annual board meeting and provided assistance with organization of annual symposium. Provided assistance to Executive Director.

Multistate Learning Collaborative

Administrative support for the RWJF-funded Multistate Learning Collaborative (MLC-3), a national collaborative effort to improve public health services and the health of communities by linking public health processes to health outcomes. Manage two learning collaboratives addressing childhood obesity and health improvement planning, and tobacco cessation among pregnant women and workforce development. Developed assessment tools and conduct public health network capacity assessments to inform NH public health regionalization process.

PROFESSIONAL ASSOCIATIONS

New Hampshire Public Health Association

COMPUTER SKILLS

Website Management (WordPress, Joomla, GoDaddy) Database Management (MS Access) Adobe Creative Suite Email Marketing Platforms (EventBrite, Mail Chimp,
Constant Contact)
Survey Monkey
Microsoft Office
SPSS



LISA M. BRYSON

JSI Research & Training Institute, Inc., d.b.a. Community Health Institute 501 South Street, 2nd Floor, Bow, New Hampshire 03304 (603) 573-3359

lbryson@jsi.com

EDUCATION

PLYMOUTH STATE UNIVERSITY, PLYMOUTH, NEW HAMPSHIRE Bachelor of Art, Concentrations in Graphic Design and Printmaking, 1998

EXPERIENCE

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

Staff Associate, November 2013 to present

Supports a variety of on-going public health projects in regards to design, formatting and layout of reports and literature as well as administrative assistance. 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.

Selected Projects:

Poison Control Innovation/Transformation Project

Develop and implement multi-pronged market research protocol to inform the development of a three-year innovation/transformation plan for the American Association for Poison Control Centers. Served as administrative and research assistant.

New Hampshire Center for Excellence

Support staff 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, preparing literature reviews, presentation and other materials, and providing other technical assistance needs.

Bureau of Primary Health Care (BPHC)

Data Coordinator for the Uniform Data System, an initiative that collects information from the BPHC-funded practice sites throughout the country. The data collected provides insight for the financial and operational parameters of the health centers and informs decisions made by legislature. Primary role responsibilities include technical phone assistance for health centers and consultants, software validation testing, resource development, and data management.

Manchester Department of Public Health, Manchester Neighborhood Health Improvement Strategy

Provide project support and final report design to Manchester Department of Public Health in six community forums with community stakeholders and leaders in creation of a Neighborhood Health Improvement Strategy (NHIS).

Granite State Management & Resources, Concord, New Hampshire

Graphic Designer, 2003-2013

Designed and revamped a multitude of print-ready projects including but not limited to corporate identity, brochures, newsletters, reports, posters and booklets. Worked with Marketing Director as well as several internal customers on concept, design and coordination of projects from start to finish.

COMPUTER SKILLS

Microsoft Office

Adobe InDesign

Adobe Photoshop

Adobe Illustrator

Adobe Lightroom

Social Media

Email Marketing Platform (Constant Contact)

CREATIVE SKILLS

Photography Color Matching

Drawing



JSI Research and Training Institute, Inc. d.b.a. Community Health Institute SFY 2017: July 1, 2016 – June 30, 2017 Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Karyn Madore	Projector Director	\$96,500	13%	\$12,062
Martha Bradley	Project Manager	\$89,000	27%	\$23,749
Debbie Love	Project Coordinator	\$49,500	9%	\$ 3,913
Lisa Bryson	Graphic Designer	\$45,000	5%	\$ 2,240

JSI Research and Training Institute, Inc. d.b.a. Community Health Institute SFY 2018: July 1, 2017 – June 30, 2018

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Karyn Madore	Projector Director	\$96,500	5%	\$ 5,034
Martha Bradley	Project Manager	\$89,000	22%	\$19,879
Debbie Love	Project Coordinator	\$49,500	9%	\$ 3,913
Lisa Bryson	Graphic Designer	\$45,000	9%	\$ 4,296



Nicholas A. Toumpas Commissioner

José Thier Montero Director

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



February 11, G&C Approved

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

Date 3/25/15

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into an agreement with the JSI Research and Training Institute, Inc, d/b/a Community Health Institute, (Vendor #161611-B001), 501 South St., 2nd Floor, Bow, NH 03304, to develop, manage and evaluate a media campaign that targets adults at high risk for type 2 diabetes, statewide, in an amount not to exceed \$223,988, effective upon Governor and Executive Council approval through June 30, 2016. 100% Federal Funding.

Funds are available in the following account(s) for SFY 2015. Funds are anticipated to be available in SFY 2016 upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust encumbrances between State Fiscal Years through the Budget Office, without further approval from the Governor and Executive Council, if needed and justified.

05-95-90-902010-1227 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POPULATION HEALTH AND COMMUNITY SERVICES, COMBINED CHRONIC DISEASE

Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
SFY 2015	102-500731	Contracts for Prog Svc.	90017417	\$111,999
SFY 2016	102-500731	Contracts for Prog Svc	90017417	\$111,999
			Sub Total	\$223,988

EXPLANATION

This purpose of this request is to develop and implement a statewide media campaign in order to increase awareness of prediabetes and increase participation in National Diabetes Prevention Programs among New Hampshire adults at high risk for type 2 diabetes. The vendor will develop, manage and evaluate a statewide media campaign utilizing advertising messages and materials created by the Centers for Disease Control and Prevention (CDC) and specifically tested for New Hampshire.

The Centers for Disease Control and Prevention (CDC) estimates that 37% of American adults and half of those aged 65 years and older have prediabetes. However, very few adults with prediabetes – only about 11% - are aware of their condition. Prediabetes is a medical condition where

Her Excellency, Governor Margaret Wood Hassan and the Honorable Council February 11, 2015 Page 2

an individual's blood sugar is higher than normal, but not yet high enough to be diagnosed with diabetes. Without intervention, 15% to 30% of individuals who have prediabetes will likely develop type 2 diabetes within five years. Type 2 diabetes is a serious condition that can lead to heart attack; stroke; blindness; kidney failure; or loss of toes, feet or legs.

Media messages will encourage New Hampshire residents to learn about their risk for diabetes and prediabetes and to participate in activities such as National Diabetes Prevention Programs, if appropriate. The National Diabetes Prevention Program is proven to prevent or delay type 2 diabetes in people at high risk for the disease. It is estimated that nationwide implementation of the National Diabetes Prevention Program could save the United States health care system \$5.7 billion and prevent about 885,000 future cases of type 2 diabetes.

A Request for Proposals was posted on the Department of Health and Human Services' web site from November 24, 2014 through January 2, 2015. Two proposals were received in response to the Request for Proposals. Three reviewers who work for the Department reviewed the proposals. The reviewers represent seasoned public health professionals who have between six to nine years of experience managing agreements with vendors for various public health programs. JSI Research and Training Institute, Inc., d/b/a Community Health Institute, was selected for this project through a competitive bid process. The Bid Summary is attached.

The vendor will create a Campaign Advisory Board to identify Diabetes Prevention Ambassadors in each geographic are of the State and to review pre-developed messages and materials. The board will include representatives from existing National Diabetes Prevention Programs, diabetes educators and other specialists working in the chronic disease field. The vendor will collaborate with the advisory board to adapt existing materials and messages based on format need and to develop new materials, as needed, based on media placement.

Media placement will include radio, print, websites, mobile messaging, promotional social media postings and out of home and community outreach. The vendor will prepare media buy plans for the Department's review, which includes, but is not limited to negotiating media placement rates to provide added value for each media buy. The vendor will also extend campaign reach after the paid media runs out through collaboration with healthcare and community partners as identified by the Department.

The vendor will determine the success of the campaign to increase traffic to National Diabetes Prevention Programs by obtaining participation data and activity detail from each National Diabetes Prevention Program in the State to document current and past participation. Documenting participation rates will enable the Department to compare numbers of enrollees on a regular basis to determine the effectiveness of the campaign in various areas of the State.

Should Governor and Executive Council not authorize this Request, individuals at risk for type 2 diabetes may not realize the programs and tools available that could prevent progression to this chronic disease. Without this public awareness campaign, there will be an increase in the number of individuals that will progress from prediabetes to type 2 diabetes. The result will be an unnecessary increase in New Hampshire's health and economic burden, which will negatively impact the citizens, statewide.

Her Excellency, Governor Margaret Wood Hassan and the Honorable Council February 11, 2015 Page 3

Area served: Statewide.

Source of Funds: 100% Federal Funds from the U.S. Centers for Disease Control and Prevention.

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

Respectfully submitted,

José Thier Montero, MD, MHCDS

Director

Approved by:

Nicholas A. Toumpas

Commissioner

New Hampshire Department of Health and Human Services Office of Business Operations Contracts & Procurement Unit Summary Scoring Sheet

Prediabetes Media Development and Placement Services

RFP Name

JSI Research and Training Institute, Inc.

Bidder Name

2. Millennium Intergrated Marketing, LLC

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15-DHHS-DPHS-CCD-10

RFP Number

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2. Lissa Sirois, Health Promotion Advisor

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Shelley Swanson, Administrator III		
Swanson,		•
Shelley		

Subject:

Prediabetes Media Development and Placement Services

AGREEMENT

The State of New Hampshire and the Contractor hereby mutually agree as follows:

GENERAL PROVISIONS

1. IDENTIFICATION.

1.1 St	tate Agency Name		1.2	State Agency Address	
Departm	ent of Health & Human	Services	129 P	leasant Street	
, ,	of Public Health Service			ord, NH 03301	
1.3 C	ontractor Name	,	1.4	Contractor Address	
ISI Reas	earch & Training Institut	e Inc. d/b/a	501.5	outh Street, 2 nd Floor	
1	nity Health Institute			NH 03304	
1	ontractor Phone	1.6 Account Number	1.7	Completion Date	1.8 Price Limitation
(603) 573	umber 3_3300	05-95-90-902010-1227	June 3	30, 2016	\$223,988
(003) 37.	3 - 3300 .	03-75-90-902010-1227	June	50, 2010	\$223,700
1.9 C	ontracting Officer for S	tate Agency	1.10	State Agency Telephon	e Number
r	_ ·		((02)	271 0550	
Eric D. B	Sortin /	,	(603)	271-9558	
1.11 Co	ontractor Signature		1.12	Name and Title of Cont	ractor Signatory
	11111		_		
	$\prec \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel \parallel$		Jona	athan Stewart, Directo	r
1.13 Ac	cknowledgement. State of	of NH_, County of Merrimac	k		
On 2/4/1	1,5 before the undersigned	officer, personally appeared the p	person i	dentified in block 1.12, or	satisfactorily proven to be the
person w	hose name is signed in bl	ock 1.11, and acknowledged that	s/he exc	ecuted this document in the	capacity indicated in block
1.12.					
	Shabu	blic or Justice of the Peace			
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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, this Agreement, and all obligations of the parties hereunder, shall not become effective until the date the Governor and Executive Council approve this Agreement ("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. 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.

Page 2 of 4

Contractor Initials: Date: 2-4-15

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 consent of the N.H. Department of Administrative Services. None of the Services shall be subcontracted by the Contractor without the prior written 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 \$250,000 per claim and \$2,000,000 per occurrence; and
- 14.1.2 fire and extended coverage insurance 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 fifteen (15) 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 endeavor to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than ten (10) 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.
- 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.

Contractor Initials:



Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor shall develop, manage and evaluate a statewide media campaign that targets adults at high risk for type 2 diabetes, statewide utilizing pre-existing materials available through the Centers for Disease Control and Prevention (CDC), or other resources, as identified and approved by the Department.
- 1.2. The Contractor shall test and adapt materials in Section 1.1, as appropriate, for New Hampshire. .
- 1.3. For the purpose of this contract, campaign materials shall be:
 - 1.3.1. Tagged with local National Diabetes Prevention Program site information; the CDC's Diabetes Prevention Program website; or other site approved by the Department.
 - 1.3.2. Approved by the Department and placed based on target audience and media channel demographic.
 - 1.3.3. Design specifically to increase prediabetes awareness among high risk individuals, which include but are not limited to:
 - 1.3.3.1. Adults age 45 years of age or older.
 - 1.3.3.2. Women with a history of gestational diabetes.
 - 1.3.3.3. People diagnosed with prediabetes.
 - 1.3.3.4. Health professionals that serve the above populations.
 - 1.3.3.5. Cities and counties that have an available National Diabetes Prevention Program.
- 1.4. For the purpose of this contract, the National Diabetes Prevention Program (NDPP) is a program that prevents or delays type 2 diabetes in high-risk patients, through group classes led by trained lifestyle coaches.
- 1.5. The Department shall retain sole possession of all materials resulting from this contract.
- 1.6. The Department shall review all co-sponsorship opportunities created on behalf of this project to ensure appropriateness with campaign.

2. Scope of Work

The Contractor shall develop, manage and evaluate a statewide media campaign utilizing advertising messages and materials created by the CDC, as approved by the Department.

2.1. Media Development

- 2.1.1. The Contractor shall create a Campaign Advisory Board to identify "Diabetes Prevention Ambassadors" in each geographic area of the State and review predeveloped messages and materials. The Contractor shall ensure membership includes, but is not limited to: not be limited to:
 - 2.1.1.1. Representatives from existing NDPP programs.

Contractor Initials



- 2.1.1.2. Diabetes educators.
- 2.1.1.3. Other specialists working in the chronic disease field.
- 2.1.2. The Contractor shall create and test media messages and materials for target audience receptivity, as approved by the Department. The Contractor shall collaborate with the campaign advisory board:
 - 2.1.2.1. Adapt existing materials or create new materials based on test results and format need.
 - 2.1.2.2. Develop additional materials, as needed, based on spot placement including, but not limited to vignettes with personal New Hampshire stories.
 - 2.1.2.3. Develop a plan to utilize media in order to increase participation in NDPPs, which includes tagging materials with local program information. The plan must:
 - 2.1.2.3.1. Include a data and evaluation component.
 - 2.1.2.3.2. Be developed in consultation with the Department and local National Diabetes Prevention Programs.

2.2. Media Placement

- 2.2.1. The Contractor shall establish placement of media developed in Section 2.1 above, as approved by the Department, which may include, but is not limited to:
 - 2.2.1.1. Radio.
 - 2.2.1.2. Print.
 - 2.2.1.3. Web.
 - 2.2.1.4. Mobile.
 - 2.2.1.5. Promotional social media postings.
 - 2.2.1.6. Out of home and community outreach.
- 2.2.2. The Contractor shall ensure media placement activities are far reaching in the New Hampshire audience and include, but are not limited to:
 - 2.2.2.1. Preparing media buy plans for Department review and approval.
 - 2.2.2.2. Requesting proposals from media outlets for spot placements.
 - 2.2.2.3. Negotiating media placement rates to provide added value for each media buy.
 - 2.2.2.4. Invoicing media outlets and paying for media buys.
 - 2.2.2.5. Extending campaign reach after the paid media run ends by running public service announcements. The Contractor shall:
 - 2.2.2.5.1. Foster buy-in and a shared mission with all collaborators.

Contractor Initials 2-4-15



- 2.2.2.5.2. Leverage both buy-in and mission to facilitate a change in systems where service providers view the National Diabetes Prevention Program as a valuable referral resource for people with prediabetes.
- 2.2.2.5.3. Ensure the campaign endures after the media buys cease by creating and printing enduring materials including, but not limited to posters, brochures and displays.
- 2.2.2.6. Collaborating with healthcare and community partners, as identified by the Department, to distribute media through their networks.

2.3. Media Evaluation

- 2.3.1. The Contractor shall evaluate the effectiveness of the media campaign by conducting evaluation activities, which shall include, but not be limited to:
 - 2.3.1.1. Using geo-targeting and audience segmentation for analyzing placement opportunities to determine the most cost effective placement that reaches the maximum number of individuals in the target audience(s).
 - 2.3.1.2. Requesting and reviewing affidavits that show:
 - 2.3.1.2.1. Actualized media run.
 - 2.3.1.2.2. Added value delivered.
 - 2.3.1.2.3. Credit received/used.
 - 2.3.1.3. Analyzing media metrics to determine accuracy in reaching target audience(s).
 - 2.3.1.4. Providing customized post-buy reports, presentations, and evaluations to the Department.
 - 2.3.1.5. Evaluating:
 - 2.3.1.5.1. Reach and frequency through media metrics, provided by media vendors and using the industry standard for frequency to determine measure success of the project's statewide distribution.
 - 2.3.1.5.2. Effectiveness of of social media presence through Facebook, Twitter, and YouTube.
 - 2.3.1.5.3. Implementation timelines and project activities through key informant interviews, focus groups and a representative sample survey of individuals from target populations in selected areas.
 - 2.3.1.5.4. The extent to which the campaign impacted knowledge, beliefs and/or attitudes regarding prediabetes and participation in National Diabetes Prevention Programs.

Contractor Initials

Exhibit A

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

Date 2-4-15



- 2.3.1.5.5. Necessary modifications, including but not limited to media buy adjustments based on evaluation information gathered through the:
 - 2.3.1.5.5.1. Tracking of televisions, radio print and PSAs including reach, frequency, number of placements, audience size and location.
 - 2.3.1.5.5.2. Track results of press releases including the number of news stories place, geographic location and circulation of publications.
 - 2.3.1.5.5.3. Tracking the number of public inquiries.
 - 2.3.1.5.5.4. Monthly web statistics and unique visits to websites, number of downloads of publications.
 - 2.3.1.5.5.5. Number of marketing materials ordered.
 - 2.3.1.5.5.6. Number of materials distributed, frequency of inquiries for new materials by partners who use promotional materials.
 - 2.3.1.5.5.7. Survey data about partner satisfaction to identify challenges with campaigns, materials, how/where materials are being used.
- 2.3.1.5.6. Awareness of NDPP among community and other organizations in areas of the state that do not have active programs; and to document initial willingness and readiness to screen for prediabetes and changes in actual screenings following the media campaign, via phone survey.
- 2.3.1.5.7. Attitudes, beliefs, awareness of prediabetes, importance of screening, and NDPP among at-risk populations via focus groups and or targeted surveying before and after the media campaign.
- 2.3.1.6. Conducting data collection using surveys and other methodologies, as approved by the Department, which may include website redirects via Google Analytics.
- 2.3.2. The Contractor shall determine the success of the campaign to increase traffic to local National Diabetes Prevention Programs by obtaining participation data and activity detail from each NDPP in order to document current and past participation. The Contractor shall:

Contractor Initials

Date 2-4-15



- 2.3.2.1. Track information including, but not limited to, participation rates in each key activity in order to compare numbers on a regular basis before the campaign begins and while the campaign is running.
- 2.3.2.2. Capture demographic information and risk factors regarding each participant in the program.
- 2.3.3. The Contractor shall raise awareness of prediabetes in areas of the State without National Diabetes Prevention Programs by forming linkages with community based organizations, health providers/educators and employers, statewide. The Contractor shall:
 - 2.3.3.1. Create messaging customized to the local level by ensuring materials are developed in a template that can easily be adapted to include provider-specific information.

3. Reporting Requirements

3.1. Monthly Reports

- 3.1.1: The Contractor shall provide monthly reports that include, but are not limited to:
 - 3.1.1.1. Costs of advertising versus earned/social media cost.
 - 3.1.1.2. Return on investment.
 - 3.1.1.3. Audience reach.
 - 3.1.1.4. Target segmentation.
 - 3.1.1.5. Demographics.
 - 3.1.1.6. Other metrics as identified by the Department.
- 3.1.2. The Contractor shall provide a narrative summary of the qualitative market research findings to the Department no later than four (4) months from the contract effective date.

4. Requirements of Delivery of Services

4.1. Work Plan

- 4.1.1. The Contractor shall present a finalized Year 1 work plan to the Department no later than thirty (30) days from the contract effective date.
- 4.1.2. The Contractor shall present a draft Year 2 work plan to the Department no later than ninety (90) days prior to the start of Year 2.

4.2. Deliverables

- 4.2.1. The Contractor shall establish a Campaign Advisory Board, as described in Section 2.1.1, no later than sixty (60) days from the contract effective date. The Contractor shall
 - 4.2.1.1. Provide a list of advisory board members with contact information to the Department seven (7) days from the date of advisory board establishment.

Contractor Initials

New Hampshire Department of Health and Human Services Prediabetes Media Development and Placement Services



Exhibit A

4.2.2. The Contractor shall meet all benchmarks, goals and measurable established by the finalized work plan in Section 4.1.1.

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

Exhibit A

Page 6 of 6

Contractor Initials

Date 2-4-15



Method and Conditions Precedent to Payment

- 1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, in accordance with the budget in Exhibit B-1, Budgets for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
 - This contract is funded with federal funds made available under the Catalog of Federal Domestic Assistance, CFDA #93.757, Federal Agency, Centers for Disease Control and Prevention, State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health.
 - 3. Payment for said services shall be made as follows:
 - 3.1.The Contractor will submit an invoice by the tenth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The State shall make payment to the Contractor within thirty (30) days of receipt of each invoice for Contractor services provided pursuant to this Agreement.
 - 3.2. The invoice must be submitted by mail or e-mail to:

Financial Manager
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

dphscontractbilling@dhhs.state.nh.us

- 4. A final payment request shall be submitted no later than sixty (60) days from the Form P37, General Provisions, Contract Completion Date, Bock 1.7.
- 5. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Agreement.
- When the contract price limitation is reached, the program shall continue to operate at full capacity at no charge to the State of New Hampshire for the duration of the contract period.
- 7. Notwithstanding paragraph 18 of the Form P-37, General Provisions, an amendment limited to transfer the funds within the budget in Exhibit B-1 and within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

Contractor Initials

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

Exhibit B

Page 1 of 1

Exhibit B-1 - Budget

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

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

Budget Request for: Prediabetes Media Development and Placement Services

Budget Period: March 1, 2016 - June 30; 2015

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12. Subcontracts/Agreements	\$	S	•		\$. \$	\$	8		
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Indirect As A Percent of Direct			5.1%								

JSI Research & Training Institute, Inc, d/b/a Community Health Institute Exhibit B-1 Page 1 of 2

Contractor Intitials:

Exhibit B-1 Budgets

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

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

Budget Request for: Prediabetes Media Development and Placement Services

Budget Period: July 1, 2015 - June 30, 2016

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TOTAL	\$	107,692.80	\$ 4,306.20	_	\$111,999.00	S.	*	•	•	230	\$107,692.80	\$ 4,306.20		\$111,999.00

JSI Research Training Institute, Inc., d/b/a Community Health Institute Exhibit B-1 Page 2 of 2

Indirect As A Percent of Direct

Date: 2-4-15 Contractor Initials



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:

- 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.
- 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 Contractors 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;

Contractor Initials

Data 2-4-15



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:

- 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.

Contractor Initials 2-4-15

Exhibit C - Special Provisions

Page 2 of 5



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.
 - 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.
 - Final Report: A final report shall be submitted within thirty (30) days after the end of the term 11.2. 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:
 - The preparation of this (report, document etc.) was financed under a Contract with the State 13.1. 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, bylaws 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

Contractor Initials Date 2-4-15



more employees, it will maintain a current EEOP on file and submit an EEOP Certification Form to the OCR, certifying that its EEOP 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 EEOP Certification Form to the OCR certifying it is not required to submit or maintain an EEOP. Non-profit organizations, Indian Tribes, and medical and educational institutions are exempt from the EEOP requirement, but are required to submit a certification form to the OCR to claim the exemption. EEOP 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 ohoose 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

Contractor Initials

Exhibit C – Special Provisions

Page 4 of 5



- 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.

Contractor Initial

Exhibit C - Special Provisions

Date 2-4-15



REVISIONS TO GENERAL PROVISIONS

- Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:
 - 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. 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 contracted services and Governor and Executive Council approval.



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

Contractor Initials 1

Exhibit D -- Certification regarding Drug Free Workplace Requirements Page 1 of 2

New Hampshire Department of Health and Human Services Exhibit D



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 I if there are workplaces on file that are not identified here.

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

2-4-15

Date

Name: Jonathan Stewart

Title:

Exhibit D – Certification regarding Drug Free Workplace Requirements Page 2 of 2 CU/DHHS/110713

New Hampshire Department of Health and Human Services Exhibit E



· 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 subcontractor), 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: JSI Research & Training Institute, Inc. d/b/a Community Health Institute

2-4-2015

Name: Title:

Exhibit E - Certification Regarding Lobbying



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

- 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," "pnmary covered transaction," "pnncipal," "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

Exhibit F – Certification Regarding Debarment, Suspension And Other Responsibility Matters Page 1 of 2 Contractor Initials 1

CU/DHHS/110713

New Hampshire Department of Health and Human Services Exhibit F



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 penod 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.

2-4-2015	d/b/a Community Health Institute
Date	Name: Jordathan Stewart Title: Director

Exhibit F – Certification Regarding Debarment, Suspension And Other Responsibility Matters Page 2 of 2 Contractor Initials

Date 2-4-15

Contractor Name: JSI Research & Training Institute, Inc.



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.

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

Contractor Initials 2-4-15

New Hampshire Department of Health and Human Services Exhibit G



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:

 By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

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

2-4-2015

Date

Name: Jonathan Stewart

Title: Director



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

2-4-2015

Date

Name: Jonathan Stewar

Exhibit H – Certification Regarding Environmental Tobacco Smoke Page 1 of 1



HEALTH INSURANCE PORTABLITY 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) <u>Definitions</u>.

- a. <u>"Breach"</u> 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.
- <u>"Covered Entity"</u> has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. "<u>Designated Record Set</u>" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. "<u>Data Aggregation</u>" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "<u>Health Care Operations</u>" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.
- g. <u>"HITECH Act"</u> means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, 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. "<u>Protected Health Information</u>" 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.

Exhibit 1

- "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. <u>"Unsecured Protected Health Information"</u> 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; or
 - 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



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;
 - 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



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.
- 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.
- 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

Exhibit I
Health Insurance Portability Act
Business Associate Agreement
Page 4 of 6



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.
- 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) <u>Termination for Cause</u>

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. <u>Definitions and Regulatory References</u>. 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. <u>Amendment</u>. 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. <u>Data Ownership</u>. 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. <u>Interpretation</u>. 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.

- e. <u>Segregation</u>. 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. <u>Survival</u>. 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.

	JSI Research & Training Institute, Inc. d/	/b/a Community Health
The State	Name of the Contractor	Institute
Dn Dox	1/2/	
Signature of Authorized Representative	Signature of Authorized Representative	
Blook 5. Duple	Jonathan Stewart	
Name of Authorized Representative	Name of Authorized Representative	
Bureau chirt	Director	
Title of Authorized Representative	Title of Authorized Representative	
2/18/10	February 4, 2015	
Date	Date	

Exhibit I
Health Insurance Portability Act
Business Associate Agreement
Page 6 of 6

New Hampshire Department of Health and Human Services Exhibit J



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.

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

2-4-2015

Date

Name: Jonathan Stewart

Director

New Hampshire Department of Health and Human Services Exhibit J



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.

-	low listed questions are true and aboutate.
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?
	NOX 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?
	NOXYES
	If the answer to #3 above is YES, stop here
	If the answer to #3 above is NO, please answer the following:
	The names and compensation of the five most highly compensated officers in your business or organization are as follows:
	Name: Amount: