

Lori A. Shibinette Commissioner

Christine L. Santaziello Director

#### STATE OF NEW HAMPSHIRE

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### DIVISION OF ECONOMIC & HOUSING STABILITY

129 PLEASANT STREET, CONCORD, NH 03301 603-271-9474 1-800-852-3345 Ext. 9474 Fax: 603-271-4230 TDD Access: 1-800-735-2964 www.dhbs.nh.gov

November 18, 2020

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

#### **REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Economic and Housing Stability, to amend an existing Retroactive, Sole Source contract with The Mental Health Center for Southern New Hampshire, d/b/a CLM Center for Life Management (VC#174116-R001), Derry, NH for the ongoing provision of Permanent Housing and Supportive Services to individuals and families who are experiencing homelessness through the Federal Continuum of Care Program, by exercising a renewal option by increasing the price limitation by \$403,069 from \$576,904 to \$979,973 and by extending the completion date from June 30, 2021 to July 31, 2021, effective retroactive to August 1, 2020, upon Governor and Council approval. 100% Federal Funds.

The original contract was approved by Governor and Council on June 19, 2019, item #46 and most recently amended with Governor and Council approval on May 6, 2020, item #37.

Funds are available in the following account for State Fiscal Years 2021 and 2022, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

05-95-42-423010-7927 HEALTH & SOCIAL SERVICES, DEPARTMENT OF HEALTH AND HUMAN SERVICES, HHS: HUMAN SERVICES, HOMELESS & HOUSING, HOUSING-SHELTER PROGRAM

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Prog Svc	TBD	\$273,230	\$0	\$273,230
2021	102-500731	Contracts for Prog Svc	TBD	\$303,674	\$348,704	\$652,378
2022	102-500731	Contracts for Prog Svc	TBD	\$0	\$54,365	\$54,365
			Total	\$576,904	\$403,069	\$979,973

#### **EXPLANATION**

This request is Retroactive because the Department is required to align the contract effective date and completion date with the start and end date of the new consolidation grant, as

determined by the U.S. Department of Housing and Urban Development (HUD). This request is **Sole Source** because the contract was originally approved as sole source and MOP 150 requires any subsequent amendments to be labelled as sole source.

The purpose of this request is to consolidate multiple Permanent Housing Programs, under one contract, to continue to provide rental assistance, service access and supportive services to individuals, and families who are experiencing homelessness.

The program facilitates the movement of homeless and chronically homeless individuals and families to permanent housing and maximum self-sufficiency. Approximately fifty-two (52) households experiencing homelessness with a focus on families, those experiencing chronic homelessness, mental illness, or developmental disabilities in Western Rockingham county and Coos county will be served from July 1, 2020 to July 31, 2021.

Using the Housing First model and the development of Stabilization and Crisis Management plans, the vendor will facilitate the movement of each participant into sustained permanent housing while providing connections to community and mainstream services to maximize each participant's ability to live more independently.

The Department will monitor contracted services using the following reports and information:

- Annual reviews relating to compliance with administrative rules and contractual agreements.
- Semi-annual statistical reports, including various demographic information, as well as income and expense reports, to include match dollars.
- Data entry into the New Hampshire Homeless Management Information System, which is the primary reporting tool for outcomes and activities of shelter and housing programs.

As referenced in Exhibit C-1, Revisions to Standard Contract Language, Section 2., Renewal., of the original contract, the parties have the option to extend the agreement for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for one (1) month of the remaining one (1) year available.

Should the Governor and Council not authorize this request, there will be fewer permanent housing options and homeless outreach services available, leaving individuals and families who are vulnerable in unsafe and potentially deadly situations. Additionally, if data is not collected as required by the contract, the Department will be in non-compliance with federal regulations, which could result in a loss of federal funding for homeless and permanent housing supportive services.

Area served: Western Rockingham county and Coos county

Source of Funds: CFDA #14.267, FAIN #NH0014L1T001912

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

Respectfully submitted,

Weaver

Lori A. Shibinette Commissioner



### State of New Hampshire Department of Health and Human Services Amendment #2 to the Continuum of Care, CLM Supportive Housing Contract

This 2nd Amendment to the Continuum of Care, CLM Supportive Housing Contract, (formerly known as the Continuum of Care, Permanent Housing I Contract), (hereinafter referred to as "Amendment #2") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and The Mental Health Center for Southern New Hampshire, d/b/a CLM Center for Life Management, (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 10 Tsienneto Rd. Derry, NH, 03038.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #46), as amended on May 6, 2020 (Item #37) the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to Standard Contract Language, Section 2., Renewal, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

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

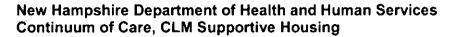
NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

- Form P-37 General Provisions, Block 1.7, Completion Date, to read: July 31, 2021.
- Form P-37, General Provisions, Block 1.8, Price Limitation, to read: \$979.973.
- 3. Remove all references to "Permanent Housing I" and replace with "CLM Supportive Housing" throughout the Agreement.
- 4. Modify Exhibit A, Scope of Services by replacing in its entirety with Exhibit A Amendment #2, Scope of Services, which is attached hereto and incorporated by reference herein.
- 5. Modify Exhibit B, Methods and Conditions Precedent to Payment, Section 1. Permanent Housing Program Funding, Subsection 1.2., Paragraph 1.2.4. to read:
  - 1.2.4. Grant Numbers:
    - 1.2.4.1. NH0014L1T001811 (SFY 2020; July 1, 2019 June 30, 2020) 1.2.4.2 NH0014L1T001912 (SFY 2021; July 1, 2020 – June 30, 2021)
    - 1.2.4.3. NH0014L1T001912 (SFY 2022; July 1, 2021 July 31, 2021)
- 6. Modify Exhibit B, Methods and Conditions Precedent to Payment, Section 1. Permanent Housing Program Funding, Subsection 1.2., Paragraph 1.2.7., to read:

The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management SS-2020-BHS-04-PERMA-04-A02 Amendment #2

Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_





- 1.2.7. Total Amount Continuum of Care;
  - 1.2.7.1. Not to exceed: \$979,973
- 7. Modify Exhibit B, Methods and Conditions Precedent to Payment, Section 1. Permanent Housing Program Funding, Subsection 1.2., Paragraph 1.2.8, to read:
  - 1.2.8. Funds allocation under this agreement for the Continuum of Care Program:

		July 1, 2019 - June 30, 2020	July 1, 2020 - June 30, 2021	July 1, 2021 - July 31, 2021
1.2.8.1.	Rental Assistance:	\$221,592	\$589,226	\$49,102
1.2.8.2.	Supportive Services:	\$39,600	\$41,538	\$3462
1.2.8.3.	Administrative Services:	\$6,638	\$21,614	\$1801
1.2.8.4.	Operations:	\$0	\$0	\$0
1.2.8.5.	Total Program Amount:	\$273,230	\$652,378	\$54,365

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All terms and conditions of the Contract not inconsistent with this Amendment #2 remain in full force and effect. This amendment shall be effective retroactively to August 1, 2020, upon Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

10/27/2020

Chistine Santaniello
Name: Christine Santaniello
Title: Director

The Mental Health Center for Southern New Hampshire, d/b/a CLM Center for Life Management

10/26/2020

Date

10/26/2020

Date

State of New Hampshire
Decusigned by:
Chistine Santaniello
Name: Christine Santaniello
Title: Director

The Mental Health Center for Southern New Hampshire, d/b/a CLM Center for Life Management

10/26/2020

Title: President/CEO



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

OFFICE OF THE ATTORNEY GENERAL

11/12/2020

Date

Name: Catherine Pinos
Title: Attorney

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

OFFICE OF THE SECRETARY OF STATE

Date

Name: Title:



#### Exhibit A – Amendment #2

#### **SCOPE OF SERVICES**

#### **Permanent Supportive Housing Program**

#### 1. Provisions Applicable to All Services

1.1. The Contractor shall submit a detailed description of the language assistance services they will provided to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date; submitted to:

NH DHHS Bureau of Housing Supports 129 Pleasant Street Concord, NH 03301

- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the services described herein, the State, through the Bureau of Housing Supports (BHS), has the right to modify service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. Notwithstanding any provisions of this Agreement to the contrary, all obligations of the State are contingent upon receipt of federal funds under the Continuum of Care (CoC) Grant. The State, as the Collaborative Applicant for the Balance of State CoC, and/or, the recipient of the CoC funding, has applied for the CoC Grant and will continue to perform due diligence in the application process. However, the State makes no representation that it will receive the funds. In no event shall the State be liable for costs incurred or payment of any services performed by the Contractor prior to the State's receipt of federal funds applied for in the CoC Grant.
- 1.4. For the purposes of this agreement, the Department has identified the Contractor as a subrecipient, in accordance with 2 CFR 200.0. et seq.
- 1.5. Notwithstanding the confidentiality procedures established under 24 CFR Part 578.103(b), US Department of Housing and Urban Development (HUD), the HUD Office of the Inspector General, and the Comptroller General of the United States, or any of their authorized representatives, must have the right of access to all books, documents, papers, or other records of the Contractor that are pertinent to the CoC grant, in order to make audits, examinations, excerpts, and transcripts. These rights of access are not limited to the required retention period, but last as long as the records are retained.
- 1.6. The Contractor shall maintain adherence to federal and state financial and confidentiality laws, and agrees to comply with the program narratives, budget detail and narrative, and amendments thereto, as detailed in the 2017 Notice of Funding Available (NOFA) CoC Project Application approved by HUD.
- 1.7. The Contractor shall provide services according to HUD regulations outlined in Public Law 102-550 and 24 CFR Part 578: CoC Program and other written, appropriate HUD policies/directives.
- 1.8. All programs shall be licensed to provide client level data into the New Hampshire Homeless Management Information System (NH HMIS). Programs shall follow NH HMIS policy, including specific information required for data entry, accuracy of data entered, and time required for data entry. Refer to Exhibit K for Information Security requirements and Exhibit I for Privacy requirements.
- 1.9. The Contractor shall cooperate fully with and answer all questions, related to this contract, of representatives of the State or Federal agencies who may conduct a periodic review of performance or an inspection of records.

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#### Exhibit A – Amendment #2

1.10. The Contractor shall support the primary goal of this program which is to facilitate the movement of homeless and chronically homeless individuals and families to permanent housing and maximum self-sufficiency.

#### 2. Scope of Services

- 2.1. The Contractor shall implement a Coordinated Entry System (CES) for all projects funded by the CoC Program, Emergency Solutions Grants (ESG) Program, and Housing Opportunities for Persons with AIDS (HOPWA) Program, in accordance with CoC interim rule, 24 CFR Part 578.
- 2.2. The Contractor shall provide a Permanent Supportive Housing Program that is targeted to serve fifty-two (52) households experiencing homelessness with a focus on families, those experiencing chronic homelessness, mental illness, or developmental disabilities in Western Rockingham county and Coos county, and which includes, but is not limited to:
  - 2.2.1. The utilization of the "Housing First" model, ensuring barriers to entering housing are not imposed beyond those required by regulation or statute, and will only terminate project participation for the most severe reasons, once available options have been exhausted to help a participant maintain housing.
  - 2.2.2. The development of a stabilization plan and crisis management plan with the participant, at intake and, at a minimum, annually. An ongoing Assessment of Housing and Supportive Services is required, with the ultimate goal being assistance to the participant in obtaining the skills necessary to live in the community independently.
- 2.3. The Contractor shall establish and maintain standard operating procedures to ensure CoC program funds are used in accordance with 24 CFR 578 and must establish and maintain sufficient records to enable HUD and BHS to determine Contractor requirement compliance, including:
  - 2.3.1. <u>Continuum of Care Records:</u> The Contractor shall maintain the following documentation related to establishing and operating a CoC:
    - 2.3.1.1. Records of Homeless Status. The Contractor shall maintain acceptable evidence of homeless status in accordance with 24 CFR 576.500(b).
    - 2.3.1.2. Records of at Risk of Homelessness Status: The Contractor shall maintain records that establish "at risk of homelessness" status of each individual or family who receives CoC homelessness prevention assistance, as identified in 24 CFR 576.500(c).
    - 2.3.1.3. Records of Reasonable Belief of Imminent Threat of Harm. The Contractor shall maintain documentation of each program participant who moved to a different CoC due to imminent threat of further domestic violence, dating violence, sexual assault, or stalking, as defined in 24 CFR 578.51(c)(3). The Contractor shall retain documentation that includes, but is not limited to:
      - 2.3.1.3.1 The original incidence of domestic violence, dating violence, sexual assault, or stalking, only if the original violence is not already documented in the program participant's case file. This may be written observation of the housing or service provider; a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom the victim has sought assistance; medical or dental records; court records or law enforcement records; or written certification by the program participant to whom the violence occurred or by the head of household.
      - 2.3.1.3.2 The reasonable belief of imminent threat of further domestic violence, dating, violence, or sexual assault or stalking, which would include threats from a third-party, such as a

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#### Exhibit A - Amendment #2

friend or family member of the perpetrator of the violence. This may be written observation by the housing or service provider; a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom the victim has sought assistance; current restraining order; recent court order or other court records; law enforcement report or records; communication records from the perpetrator of the violence or family members or friends of the perpetrator of the violence, including emails, voicemails, text messages, and social media posts; or a written certification by the program participant to whom the violence occurred or the head of household.

- 2.3.1.4. Records of Annual Income. For each program participant who receives housing assistance where rent or an occupancy charge is paid by the program participant, the Contractor must keep the following documentation of annual income:
  - 2.3.1.4.1. Income evaluation form specified by HUD and completed by the Contractor; and
  - 2.3.1.4.2. Source documents (e.g., most recent wage statement, unemployment compensation statement, public benefits statement, bank statement) for the assets held by the program participant and income received before the date of the evaluation;
  - 2.3.1.4.3. To the extent that source documents are unobtainable, a written statement by a relevant third party (e.g., employer, government benefits administrator) or the written certification by the Contractor's intake staff of the oral verification by the relevant third party of the income the program participant received over the most recent period; or
  - 2.3.1.4.4. To the extent that source documents and third-party verification are unobtainable, the written certification by the program participant of the amount of income that the program participant is reasonably expected to receive over the three (3) month period following the evaluation.
- 2.3.1.5. <u>Program Participant Records.</u> In addition to evidence of homelessness status or at-risk-of-homelessness status, as applicable, the Contractor must keep records for each program participant that document:
  - 2.3.1.5.1. The services and assistance provided to that program participant, including evidence that the Contractor has conducted an annual assessment of services for those program participants that remain in the program for more than a year and adjusted the service package accordingly, and including case management services as provided in 24 CFR 578.37(a)(1)(ii)(F); and
  - 2.3.1.5.2. Where applicable, compliance with the termination of assistance requirement in 24 CFR 578.91.
- 2.3.1.6. <u>Housing Standards.</u> The Contractor must retain documentation of compliance with the housing standards in 24 CFR 578.75(b), including inspection reports.
- 2.3.1.7. <u>Services Provided.</u> The Contractor must document the types of supportive services provided under the Contractor's program and the amounts spent on those services. The Contractor must keep documentation that these records were reviewed at least annually and that the service package offered to program participants was adjusted as necessary.
- 2.4. The Contractor shall maintain records that document compliance with:
  - 2.4.1. The Organizational conflict-of-interest requirements in 24 CFR 578.95(c).
  - 2.4.2. The Continuum of Care Board conflict-of-interest requirements in 24 CFR 578.9

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Date 10/26/2020



#### Exhibit A - Amendment #2

- 2.4.3. The Other Conflicts requirements in 24 CFR 578.95(d).
- 2.5. The Contractor shall develop, implement and retain a copy of the personal conflict-of-interest policy that complies with the requirements in 24 CFR 578.95, including records supporting any exceptions to the personal conflict-of-interest prohibitions.
- 2.6. The Contractor shall comply and retain documentation of compliance with:
  - 2.6.1. The Homeless Participation requirements in accordance with 24 CFR 578.75(g).
  - 2.6.2. The Faith-based Activities requirements in accordance with 24 CFR 578.87(b).
  - 2.6.3. <u>Affirmatively Furthering Fair Housing</u> by maintaining copies of all marketing, outreach, and other materials used to inform eligible persons of the program in accordance with 24 CFR 578.93(c).
  - 2.6.4. Other Federal Requirements in 24 CFR 578.99, as applicable.
  - 2.6.5. Other Records Specified by HUD. The Contractor must keep other records as specified by HUD.
  - 2.6.6. The Contractor must retain copies of all procurement contracts and documentation of compliance with the <u>Procurement Requirements</u> in 24 CFR 85.36 and 24 CFR part 84.
- 2.7. <u>Confidentiality.</u> In addition to meeting the specific confidentiality and security requirements for HMIS data (76 FR 76917), the Contractor shall develop and implement written procedures to ensure:
  - 2.7.1. All records containing protected identifying information of any individual or family who applies for and/or receives Continuum of Care assistance shall be kept secure and confidential as required by this Agreement and state and federal laws and regulations;
  - 2.7.2. The address or location of any family violence project assisted with Continuum of Care funds shall not be made public, except with written authorization of the person responsible for the operation of the project; and
  - 2.7.3. The address or location of any housing of a program participant will not be made public, except as provided under a preexisting privacy policy of the recipient or subrecipient and consistent with State and local laws regarding privacy and obligations of confidentiality;
- 2.8. Period of Record Retention. The Contractor shall ensure all records, originals or copies made by microfilming, photocopying, or other similar methods, pertaining to Continuum of Care funds are retained for five (5) years following the Contract Completion Date and receipt of final payment by the Contractor unless records are otherwise required to be maintained for a period in excess of the five (5) year period according to state or federal law or regulation.

#### 3. Program Reporting Requirements

- 3.1. The Contractor shall submit the following reports:
  - 3.1.1. Annual Performance Report (APR): Within thirty (30) days after the Contract Completion Date, an APR shall be submitted to BHS that summarizes the aggregate results of the Project Activities, showing in particular how the Contractor is carrying out the project in the manner proposed in the application submitted to HUD for the relevant fiscal year Notice of Funding Availability (NOFA). The APR shall be in the form required or specified by the State, and submitted to the address listed in section 1.1. Exhibit A; and

Contractor Initials 10/26/2020
Date



#### Exhibit A - Amendment #2

3.1.2. Other Reports as requested by the State in compliance with NH HMIS policy.

#### 4. Contract Administration

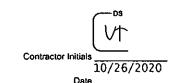
- 4.1. The Contractor shall have appropriate levels of staff to attend all meetings or trainings requested by BHS, including training in data security and confidentiality, according to state and federal laws. To the extent possible, BHS shall notify the Contractor of the need to attend such meetings five (5) working days in advance of each meeting.
- 4.2. The Contractor shall inform BHS of any staffing changes within thirty (30) days of the change.

#### 5. Performance Measures

- 5.1. The Contractor shall adhere to all terms and conditions as set forth in the HUD New Project Application, #SF-424; and
  - 5.1.1. The Contractor shall abide by the performance measures as detailed in all applicable HUD regulations including, but not limited to, those outlined in 24 CFR Part 578: Continuum of Care Program and Public Law 102-550.
  - 5.1.2. The Contractor shall be accountable to all performance measures as detailed in the Annual Performance Report Section 3.1.1. Exhibit A.
- 5.2. The Bureau Administrator of BHS, or designee, may observe performance, activities and documents under this Agreement.

#### 6. Deliverables

- 6.1. The Contractor shall implement a Coordinated Entry System, as detailed in Section 2.1. Exhibit A, in accordance with the CoC Program interim rule, 24 CFR Part 578 and as amended.
- 6.2. The Contractor shall provide a Permanent Supportive Housing program as outlined in Section 2.2. Exhibit A and as outlined in other written HUD policies and directives as appropriate.
  - 6.2.1. Project outcomes shall include, but are not limited to:
    - 6.2.1.1. Participants exit homelessness faster, and once housed, remain stably housed.
    - 6.2.1.2. Participants experience increased connections to:
      - 6.2.1.2.1. Mainstream benefit resources; employment and/or vocational rehab referrals;
      - 6.2.1.2.2. Mental health and/or substance abuse service access and referrals; and
      - 6.2.1.2.3. Service Coordination Partners for educational, vocational, employment and health needs.
- 6.3. The Contractor shall provide accurate and timely reporting as detailed in Section 3., Program Reporting Requirements, Exhibit A.



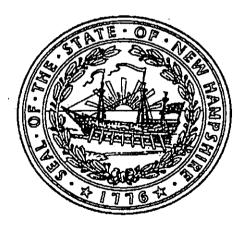
# State of New Hampshire Department of State

#### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 17, 1967. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 61791

Certificate Number: 0004891024



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 13th day of April A.D. 2020.

William M. Gardner

Secretary of State

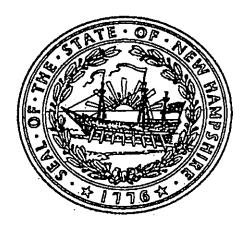
# State of New Hampshire Department of State

#### **CERTIFICATE**

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that CLM CENTER FOR LIFE MANAGEMENT is a New Hampshire Trade Name registered to transact business in New Hampshire on June 30, 2003. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business 1D: 442328

Certificate Number: 0004888012



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 11th day of March A.D. 2020.

William M. Gardner

Secretary of State

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#### **CERTIFICATE OF AUTHORITY**

l,	Susan Davis	hereby certify that:
	(Name of the elected Office	cer of the Corporation/LLC; cannot be contract signatory)
	am a duly elected Clerk/Secre	etary/Officer of _The Mental Health Center for Southern New Hampshire
	•	(Corporation/LLC Name)
	d on <u>[10-26]</u> , 202	a vote taken at a meeting of the Board of Directors/shareholders, duly called and . 20, at which a quorum of the Directors/shareholders were present and voting. Date)
VO	TED: ThatVic Topo, Pre	sident/CEO(may
	more than one person)	(Name and Title of Contract Signatory)
	nter for Life Management	The Mental Health Center for Southern New Hampshire d/b/a CLM to enter into contracts or agreements with the State Name of Corporation/ LLC)
doc	uments, agreements and oth	its agencies or departments and further is authorized to execute any and a er instruments, and any amendments, revisions, or modifications thereto, which the purpose of this vote.
date thir Nev pos limit	e of the contract/contract ame  ty (30) days from the date of  W Hampshire will rely on this  ition(s) indicated and that the	has not been amended or repealed and remains in full force and effect as of the endment to which this certificate is attached. This authority <b>remains valid for</b> this Certificate of Authority. I further certify that it is understood that the State of a certificate as evidence that the person(s) listed above currently occupy the ey have full authority to bind the corporation. To the extent that there are any d individual to bind the corporation in contracts with the State of New Hampshire, stated herein.
Date	ed:_10-26[2020_	•
		Signature of Elected Officer Name: Susan Davis
		Title: Secretary, Board of Directors

Client#: 1485395

#### **MENTAHEA29**

#### ACORD. CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/00/YYYY) 10/01/2020

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s500,000

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s). CONTACT PRODUCER USI Insurance Services LLC PHONE (A/C, No, Ext): 855 874-0123 FAX (AJC, No): 3 Executive Park Drive, Sulte 300 ADDRESS: Bedford, NH 03110 NAIC # INSURER(S) AFFORDING COVERAGE 855 874-0123 INSURER A: Philadelphia Indemnity Insurance Co. 18058 NONAIC INSURED INSURER B : Granite State Healthcare & Human Svc WC The Mental Health Center for Southern INSURER C NH DBA CLM Center for Life Management INSURER D : 10 Tsienneto Rd INSURER E : Derry, NH 03038 INSURER F COVERAGES CERTIFICATE NUMBER: **REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR TYPE OF INSURANCE **POLICY NUMBER** COMMERCIAL GENERAL LIABILITY 10/01/2020 10/01/2021 EACH OCCURRENCE s1,000,000 PHPK2186877 A DAMAGE TO RENTED PREMISES (Ea occurrence) s 250,000 CLAIMS-MADE occus s10,000 MED EXP (Any one person) s1,000,000 PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER: s 3,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG POLICY s OTHER 10/01/2020 10/01/2021 COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY PHPK2186883 £1.000.000 BODILY INJURY (Per person) ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS ONLY OWNED AUTOS ONLY BODILY INJURY (Per accident) | \$ PROPERTY DAMAGE (Per accident) HIRED AUTOS ONLY s X UMBRELLA LIAB X X OCCUR PHUB740169 10/01/2020 10/01/2021 EACH OCCURRENCE s5,000,000

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

HCHS20200000366

PHPK2186877

CERTIFICATE HOLDER	CANCELLATION
State of NH  Department of Health & Human Services  129 Pleasant St.	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Concord, NH 03301	AUTHORIZED REPRESENTATIVE
	C

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**AGGREGATE** 

E.L. EACH ACCIDENT

\$1,000,000

\$3,000,000

E.L. DISEASE - EA EMPLOYEE \$500,000

E.L. DISEASE - POLICY LIMIT | \$500,000

10/01/2020 02/01/2021 X PER STATUTE

10/01/2020 10/01/2021

EXCESS LIAB

WORKERS COMPENSATION

AND EMPLOYERS' LIABILITY

(Mandatory in NH)

Professional Liab

DED X RETENTION \$10000

ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?

If yes, describe under DESCRIPTION OF OPERATIONS bel

CLAIMS-MADE

N

#### **MISSION STATEMENT**

To promote the health and well-being of individuals, families and organizations. We accomplish this through professional, caring and comprehensive behavioral health care services and by partnering with other organizations that share our philosophy.

#### **VISION STATEMENT**

Together, we can evolve from being primarily a treatment focused behavioral health organization to one that values whole health and wellness.

#### **OUR PEOPLE**

Fostering initiative and creativity through freedom of expression, action and risk taking.

Promoting teamwork, both formally and informally, clear communication and cooperation throughout the organizations.

Attracting and retaining the highest quality staff by providing innovative recruitment, training and compensation strategies.

#### **OUR PRINCIPLES**

We believe...

- The community is only as strong as its most vulnerable citizen.
- The ideal system of care is recovery focused and integrated with community.
- In the value of taking our expertise to where our consumers live, learn, work and socialize.
- Services should be provided in a respectful and confidential manner.
- We exemplify the above through honest, caring and trusting collaborative relationships.

THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES

CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION Years ended June 30, 2019 and 2018

# THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

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159 River Road Essex Jct., VT 05452 T 802.879.1055 F 802.876.5020

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#### Independent Auditor's Report

To the Board of Directors of The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and Affiliates

#### Report on the Financial Statements

We have audited the accompanying consolidated financial statements of The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and Affiliates (a nonprofit organization), which are comprised of the consolidated statements of financial position as of June 30, 2019 and 2018, and the related consolidated statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

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

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

#### Auditor's Responsibility

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

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

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

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and Affiliates as of June 30, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

#### Other Matters

#### Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary information on pages 16-22 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

#### Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated September 17, 2019, on our consideration of The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and Affiliates internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and Affiliates internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and Affiliates internal control over financial reporting and compliance.

#### Change in Accounting Principle

As described in Note 2 of the financial statements, in 2019, the organization adopted ASU 2016-14, Notfor-Profit Entities (Topic 958): Presentation of Financial Statements of Not-for-Profit Entities. Our opinion is not modified with respect to this matter.

Essex Junction, Vermont

Registration number VT092.0000684

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September 17, 2019

### DocuSign Envelope ID: 9E11B1E1-28D6-4C22-8DFE-616137B4F5EC THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES

#### Consolidated Statements of Financial Position June 30, 2019 and 2018

#### **ASSETS**

<u> A55E15</u>				
		<u>2019</u>		<u>2018</u>
Current assets:				
Cash and cash equivalents	\$	1,662,875	\$	1,640,075
Accounts receivable, net		943,181		864,230
Other receivables		284,929		144,815
Prepaid expenses		93,768		80,753
Security deposit	_	11,087		11,087
Total current assets		2,995,840		2,740,960
Property and equipment, net	_	3,715,469	_	3,656,665
Other assets				
Interest rate swap agreement	_	58,030		48,533
Total assets	<u>\$</u>	6,769,339	\$	6,446,158
<u>LIABILITIES AND NET ASSETS</u>				
Current liabilities:				
Current portion of long term debt	\$	93,538	\$	88,538
Accounts payable		76,558		53,554
Accrued payroll and payroll liabilities		402,801		375,055
Accrued vacation		372,138		327,657 <sup>-</sup>
Accrued expenses		18,961		13,319
Deferred revenue	_	11,980		7,580
Total current liabilities		975,976		865,703
Long term liabilities				
PMPM reserve		225,000		112,737
Long term debt, less current portion		2,215,250		2,308,819
Total long term liabilities	_	2,440,250		2,421,556
Total liabilities		3,416,226		3,287,259
Net assets without donor restrictions		3,353,113	_	3,158,899
Total liabilities and net assets	<u>\$</u>	6,769,339	\$	6,446,158

### THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES

### Consolidated Statements of Activities Years ended June 30, 2019 and 2018

	·	
	<u>2019</u>	<u>2018</u>
Public support and revenues:	•	•
Public support:		
Federal	\$ 893,941	\$ 1,005,755
State of New Hampshire - BBH	258,681	316,921
State and local funding	43,601	43,602
Other public support	<u>224,837</u>	131,172
Total public support	1,421,060	1,497,450
Revenues:		•
Program service fees, net	13,076,818	12,364,822
Other service income	647,329	467,403
Rental income	5,188	4,985
Other	158,841	39,231
Gain on sale of assets	10,000	
Total revenues	13,898,176	12,876,441
Total public support and revenues	15,319,236	14,373,891
Operating expenses:	•	
BBH funded programs:		
Children	5,157,438	4,859,070
Elders	501,342	282,131
Vocational	266,091	234,156
Multi-Service	2,971,434	
Acute Care	932,421	775,806
Independent Living	2,334,134	2,226,618
Assertive Community Treatment	734,195	835,083
Non-Specialized Outpatient	1,063,655	980,645
Non-BBH funded program services	213,421	132,495
Total program expenses	14,174,131	12,935,381
Administrative expenses	960,388	1,049,580
Total expenses	15,134,519	13,984,961
Change in net assets from operations	184,717	388,930
Non-operating expenses:	·	ŕ
Fair value gain (loss) on interest rate swap	9,497	85,586
Change in net assets	194,214	474,516
Net assets without donor restrictions, beginning of year	3,158,899	2,684,383
Net assets without donor restrictions, end of year	\$ 3,353,113	\$ 3,158,899

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Consolidated Statements of Functional Expenses Years ended June 30, 2019 and 2018

	2019			2018			
	Program <u>Services</u>	Administrative	<u>Total</u>	Program Services	Administrative	<u>Total</u>	
Personnel costs:							
Salaries and wages	\$ 8,963,460	<b>S</b> 604,197	\$ 9,567,657	\$ 8,271,397	\$ 679,212	\$ 8,950,609	
Employee benefits	1,947,562	131,727	2,079,289	1,770,356	136,304	1,906,660	
Payroll taxes .	623,425	41,859	665,284	589,194	48,580	637,774	
Accounting/audit fees	56,277	5,753	62,030	50,511	4,910	55,421	
Advertising	32,756	3,376	36,132	18,548	2,626	21,174	
Conferences, conventions and meetings	18,606	9,597	28,203	27,262	11,456	38,718	
Depreciation	188,646	15,339	203,985	186,697	18,240	204,937	
Equipment maintenance	34,553	2,524	37,077	14,183	1,385	15,568	
Equipment rental	37,204	2,280	39,484	38,062	2,996	41,058	
Insurance	73,278	5,836	79,114	64,120	6,898	71,018	
Interest expense	101,605	8,264	109,869	96,382	9,417	105,799	
Legal fees	25,302	1,890	27,192	43,606	4,071	47,677	
Membership dues	45,470	6,663	52,133	48,330	8,218	56,548	
Occupancy expenses	1,007,337	10,369	1,017,706	896,640	10,055	906,695	
Office expenses	219,960	20,386	240,346	193,164	20,508	213,672	
Other expenses	76,453	17,615	94,068	55,224	17,866	73,090	
Other professional fees	378,017	57,890	435,907	273,798	55,732	329,530	
Program supplies	156,066	12,646	168,712	84,240	8,943	93,183.	
Travel	188,154	2,177	190,331	213,667	2,163	215,830	
•	14,174,131	960,388	15,134,519	12,935,381	1,049,580	13,984,961	
Administrative allocation	960,388	(960,388)		1,049,580	(1,049,580)		
Total expenses	15,081,580	s -	\$ 15,134,519	\$ 13,984,961	<u>s</u> -	\$ 13,984,961	

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#### Consolidated Statements of Cash Flows Years ended June 30, 2019 and 2018

		<u> 2019</u>		<u>2018</u>
Cash flows from operating activities:				
Increase (decrease) in net assets	\$	194,214	\$	474,516
Adjustments to reconcile increase (decrease) in net		•		
assets to net cash provided by operating activities:				
Depreciation		203,985		204,937
Amortization of loan origination fees included				
in interest expense		18,930		18,929
Gain on sale of assets		(10,000)		-
Fair value (gain) loss on interest rate swap		(9,497)		(85,586)
(Increase) decrease in:				
Accounts receivable, net		(78,951)		10,155
Other receivables		(140,114)		(28,652)
Prepaid expenses		(13,015)		12,496
Increase (decrease) in:				
Accounts payable and accrued expenses		100,873		18,172
Deferred revenue		4,400		-
PMPM reserve	_	112,263		112,737
Net cash provided by operating activities		383,088		737,704
Cash flows from investing activities:				
Proceeds from sale of assets		10,000		-
Purchases of property and equipment	_	(262,788)		(52,938)
Net cash (used) provided by investing activities	_	(252,788)		(52,938)
Cash flows from financing activities:				
Net principal payments on long term debt		(107,500)		(105,000)
Net cash used in financing activities -		(107,500)		(105,000)
Net increase (decrease) in cash and cash equivalents		22,800		579,766
Cash and cash equivalents, beginning of year		1,640,075		1,060,309
Cash and cash equivalents, end of year	<u>\$</u>	i,662,875	<u>\$</u>	1,640,075
Supplemental cash flow disclosures:				
Cash paid during the year for interest	<u>\$</u>	109,869	<u>\$</u>	105,799

## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 1. Nature of organization

The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management (the "Agency") is a not-for-profit corporation, organized under New Hampshire law to provide services in the areas of mental health and related non-mental health programs.

During 2006, the Center for Life Management Foundation (the "Foundation") was established to act for the benefit of, to carry out the functions of, and to assist the Agency. It is affiliated with The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management through common board members and management. In addition, the Agency is the sole member.

The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and the Center for Life Management Foundation are collectively referred to the "Organization".

#### Basis of consolidation

The consolidated financial statements include the accounts of The Mental Health Center for Southern New Hampshire d/b/a CLM Center for Life Management and the Center for Life Management Foundation. All intercompany transactions have been eliminated in consolidation.

#### Note 2. Basis of accounting and summary of significant accounting policies

#### Basis of accounting

The financial statements are prepared on the accrual basis of accounting. Under this basis, revenues, other than contributions, and expenses are reported when incurred, without regard to date of receipt or payment of cash. Contributions are reported in accordance with FASB Accounting Standards Codification ("ASC") Accounting for Contributions Received and Contributions Made.

#### Basis of presentation

The Organization's financial statements have been prepared in accordance with U.S. generally accepted accounting principles ("US GAAP"), which require the Organization to report information regarding its financial position and activities according to the following net asset classifications:

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

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

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

### THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES

Years ended June 30, 2019 and 2018

#### Note 2. Basis of accounting and summary of significant accounting policies (continued)

At June 30, 2019 and 2018, the Organization only had net assets without donor restrictions of \$3,353,113 and \$3,158,899, respectively.

#### General

The significant accounting policies of the Organization are presented to assist in understanding the Organization's financial statements. The financial statements and the notes are representations of the Organization's management. The Organization is responsible for the integrity and objectivity of the financial statements.

#### Use of estimates

Management uses estimates and assumptions in preparing these financial statements in accordance with generally accepted accounting principles. Those estimates and assumptions affect the reported amount of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenue and expenses. Actual results could vary from the estimates that were used.

#### Cash and cash equivalents

The Organization considers all highly liquid investments purchased with an original maturity of three months or less to be cash and cash equivalents.

#### Accounts receivable

Accounts receivable are stated at the amount management expects to collect from outstanding balances. Management writes off accounts when they are deemed uncollectible and establishes an allowance for doubtful accounts for estimated uncollectible amounts. The Organization had an allowance for doubtful accounts of \$242,758 and \$224,548 as of June 30, 2019 and 2018, respectively. Refer to Note 3 for additional discussion of accounts receivable.

#### Property

Property is recorded at cost, except for donated assets which are recorded at estimated fair value at the date of donation. Depreciation is computed on the straight line basis over the estimated useful lives of the related assets as follows:

> Buildings and improvements 15 - 40 years Automobiles 3 – 15 years 5 - 7 years Equipment

All equipment valued at \$500 or more is capitalized. Expenditures for repairs and maintenance are expensed when incurred and betterments are capitalized. Assets sold or otherwise disposed of are removed from the accounts, along with the related accumulated depreciation, and any gain or loss is recognized.

Depreciation expense was \$203,985 and \$204,937 for the years ended June 30, 2019 and 2018, respectively.

#### Finance costs

Financing costs are recorded on the statement of position net of accumulated amortization. In accordance with generally accepted accounting principles, the unamortized financing costs are reported as a reduction in long term debt - see Note 7. The costs are amortized over the term of the respective financing arrangement.

## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 2. Basis of accounting and summary of significant accounting policies (continued)

#### Vacation pay and fringe benefits

Vacation pay is accrued and charged to programs when earned by the employee. Fringe benefits are allocated to the appropriate program expense based on the percentage of actual time spent on programs.

#### Fair value measurements and financial instruments

The Company adopted FASB ASC 820, Fair Value Measurements and Disclosures, for assets and liabilities measured at fair value on a recurring basis. The codification established a common definition for fair value to be applied to existing generally accepted accounting principles that requires the use of fair value measurements, establishes a framework for measuring fair value, and expands disclosure about such fair value measurements.

FASB ASC 820 defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Additionally, FASB ASC 820 requires the use of valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs. These inputs are prioritized as follows:

- Level 1: Observable market inputs such as quoted prices (unadjusted) in active markets for identical assets or liabilities;
- Level 2: Observable market inputs, other than quoted prices in active markets, that are observable either directly or indirectly; and
- Level 3: Unobservable inputs where there is little or no market data, which require the reporting entity to develop its own assumptions.

The Organization's financial instruments consist primarily of cash, accounts receivables, accounts payable and accrued expenses. The carrying amount of the Organization's financial instruments approximates their fair value due to the short-term nature of such instruments. The carrying value of long-term debt approximates fair value due to their bearing interest at rates that approximate current market rates for notes with similar maturities and credit quality.

The Organization's interest rate swap agreements are classified as level 2 in the hierarchy, as all significant inputs to the fair value measurement are directly observable, such as the underlying interest rate assumptions.

#### Third-party contractual arrangements

A significant portion of revenue is derived from services to patients insured by third-party payers. Reimbursements from Medicare, Medicaid, and other commercial payers are at defined service rates for services rendered to patients covered by these programs. The difference between the established billing rates and the actual rate of reimbursement is recorded as an allowance when received. A provision for estimated contractual allowances is provided on outstanding patient receivables at the statement of financial position date.

#### Advertising expenses

The Organization expenses advertising costs as they are incurred.

### THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 2. Basis of accounting and summary of significant accounting policies (continued)

#### Expense allocation

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

#### Contributions

Contributions received are recorded as net assets without donor restrictions or net assets with donor restrictions, depending on the existence and/or nature of any donor-imposed restrictions. Contributions that are restricted by the donor are reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the contribution is recognized. All other donor restricted contributions are reported as an increase in net assets with donor restrictions, depending on the nature of restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions:

Contributed property and equipment are recorded at fair value at the date of donation. Contributions with donor-imposed stipulations regarding how long the contributed assets must be used are recorded as net assets with donor restrictions; otherwise, the contributions are recorded as net assets without donor restrictions.

#### Interest rate swap

The Organization uses an interest rate swap to effectively convert the variable rate on its State Authority Bond to a fixed rate, as described in Note 8. The change in the fair value of the swap agreement and the payments to or receipts from the counterparty to the swap are netted with the interest expense on the bonds. Cash flows from interest rate swap contracts are classified as a financing activity on the statement of cash flows.

#### Income taxes

The Agency is a non-profit organization exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. The Agency has also been classified as an entity that is not a private foundation within the meaning of 509(a) and qualifies for deductible contributions.

The Foundation is a non-profit organization exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. It is an organization that is organized and operated exclusively for the benefit of the Agency.

These financial statements follow FASB ASC, Accounting for Uncertain Income Taxes, which clarifies the accounting for uncertainty in income taxes and prescribes a recognition threshold and measurement attribute for financial statement recognition and measurement of tax positions taken or expected to be taken in a tax return.

Accounting for Uncertain Income Taxes did not have a material impact on these financial statements as the Organization believes it has taken no uncertain tax positions that could have an effect on its financial statements.

Federal Form 990 (Return of an Organization Exempt from Income Tax) for fiscal years 2016, 2017 and 2018 are subject to examination by the IRS, generally for three years after filing.

## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 2. Basis of accounting and summary of significant accounting policies (continued)

#### Reclassifications

Certain amounts in the prior-year financial statements have been reclassified in order to be comparable with the current year presentation.

#### New Accounting Pronouncement

On August 18, 2016, FASB issued ASU 2016-14, Not-for-Profit Entities (Topic 958) – Presentation of Financial Statements of Not-for-Profit Entities. The update addresses the complexity and understandability of net asset classification, deficiencies in information about liquidity and availability of resources, and the lack of consistency in the type of information provided about expenses and investment return. The Organization has adjusted the presentation of these statements accordingly. The ASU has been applied retrospectively to all periods presented.

#### Subsequent events

The Organization has evaluated all subsequent events through September 17, 2019, the date the financial statements were available to be issued.

#### Note 3. Accounts receivable, net

Accounts receivable consist of the following at June 30,:

	<del></del>	2019			2018	
		Receivable			Receivable	•
Accounts receivable	<u>Receivable</u>	<u>Allowance</u>	<u>Net</u>	<u>Receivable</u>	<b>Allowance</b>	Net
Clients	\$ 319,858 \$	(192,955) \$	126,903	\$ 332,312 \$	(179,244) 5	153,068
Insurance companies	190,094	(4,389)	185,705	144,808	(6,476)	138,332
Medicaid	620,780	(43,187)	577,593	540,750	(35,213)	505,537
Medicare	55,207	(2,227)	52,980	70,908	(3,615)	67,293
	\$ <u>1.185.939</u> \$	<u>(242,758)</u> \$	943.181	\$ <u>1.088.778</u> \$	(224.548)	864,230
				<u>2019</u>	<u>2</u>	2018
Other receivables						
Towns			\$	28,000	\$	18,600
NH Division of Me	ntal Health			125,889	;	87,680
Unemployment tax	refund			12,881		_
Contractual service	S			118,159		38,535
			\$_	284,929		44,815

#### Note 4. Concentrations of credit risk

Financial instruments that potentially subject the Organization to concentrations of credit risk consist of the following:

Receivables primarily for services provided	<u>2019</u>	<u>2018</u>
to individuals and entities located in southern New Hampshire	\$ <u>943,181</u>	\$ <u>864,230</u>
Other receivables due from entities located in New Hampshire	\$ <u>284,929</u>	\$1 <u>44,815</u>

# THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 4. Concentrations of credit risk (continued)

Bank balances are insured by the Federal Deposit Insurance Corporation ("FDIC") for up to the prevailing FDIC limit. At June 30, 2019 and 2018, the Organization had approximately \$1,287,000 and \$1,212,400 in uninsured cash balances.

#### Note 5. Prepaids

D '1	•	_		C 11 .		_
Prenaids	consists	Ot.	the	following	at June 3	O:
p					,	٠.

	<u>2019</u>	<u>2018</u>		
Prepaid insurance	\$ 37,268	\$	32,777	
Prepaid rents	 56,500		47,976	
•	\$ 93,768	\$	80,753	

#### Note 6. Property and equipment

Property and equipment consists of the following at June 30:

		<u> 2019</u> -		<u> 2018</u>
Land	. \$	565,000	\$	565,000
Buildings and improvements		4,036,993		3,977,453
Automobiles		18,800		20,000
Equipment	_	1,630,644	_	1,446,194
		6,251,437		6,008,647
Less: accumulated depreciation	_	(2,535,968)	_	(2,351,982)
Property and equipment, net	\$_	<u>3,715,469</u>	\$_	3,656,665

#### Note 7. Long term debt

Long term debt consists of the following as of June 30:

Long term debt consists of the following as of June 30	),:	
	<u>2019</u>	<u>2018</u>
Series 2015 New Hampshire Health and	•	
Education Facilities Bond -		
Payable through 2036, original principal of		
\$3,042,730, remarketed and sold to People's		
United Bank at a variable rate, with an effective		•
rate of 3.5866% and 2.8169% at June 30, 2019		
and 2018, respectively. Secured by land,		
building, equipment, and certain revenues,		
and is subject to certain financial covenants.		
The note matures August 2025. The		
Organization has entered into an interest rate		
swap agreement to effectively fix the interest		
rate on the note. See Note 9.	2,647,730	2,755,230
Less: unamortized finance costs	(338,942)	<u>(357,873)</u>
Long term debt, less unamortized finance costs	2,308,788	2,397,357
Less: current portion of long term debt	(93,538)	(88,538)
Long term debt, less current portion	\$ <u>2,215,250</u>	\$ <u>2,308,819</u>

## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 7. Long term debt (continued)

In 2017, the Organization retroactively adopted the requirements of FASB ASC 835-30 to present debt issuance costs as a reduction of the carrying amount of debt rather than as an asset.

Amortization of \$18,930 and \$18,929 is reported as interest expense in the consolidated statement of activities for the years ended June 30, 2019 and 2018, respectively.

Future maturities to long term debt are as follows:

	Lo	ong Term Debt		Unamortized		
•		<u>Principal</u>		Finance Costs		<u>Net</u>
Year ending June 30,		<del>-</del>				
2020	\$	112,500	\$	(18,962)	\$	93,538
2021		117,500		(18,962)		98,538
2022		122,500		(18,962)		103,538
2023		127,500		(18,962)		108,538
2024		132,500		(18,962)		113,538
Thereafter		2,035,230	_	(244, 132)		1,791,098
Total	\$	2,647,730	\$_	(338,942)	\$_	2,308,788

#### Note 8. <u>Line of credit</u>

As of June 30, 2019, the Organization had a demand line of credit with People's United Bank with a borrowing capacity of \$850,000, which is available through March 29, 2021. Interest accrued on the outstanding principal balance is payable monthly at the Wall Street Journal Prime plus .50% (effective rate of 6.00% at June 30, 2019). The outstanding balance on the line at June 30, 2019 was \$0. The line of credit is secured by all business assets and real estate.

As of June 30, 2018, the Organization had a demand line of credit with People's United Bank with a borrowing capacity of \$850,000, which was available through March 29, 2019. Interest accrued on the outstanding principal balance was payable monthly at the Wall Street Journal Prime plus 1.50% (effective rate of 6.00% at June 30, 2018). The outstanding balance on the line at June 30, 2018 was \$0. The line of credit was secured by all business assets and real estate.

#### Note 9. Interest rate swap

During 2016, the Organization entered into an interest rate swap agreement with People's United Bank that effectively fixes the interest rate on the outstanding principal of the Banks term note at 3.045%.

Under the arrangement, the notional principal amount is the balance of the note, with the Organization receiving floating payments of one month London InterBank Offered rate ("LIBOR") plus .69% and paying a fixed rate of 3.045%.

The agreement matures August 2025 and has a notional amount of \$2,647,730 and \$2,755,230 at June 30, 2019 and 2018, respectively.

## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 9. <u>Interest rate swap (continued)</u>

In accordance with generally accepted accounting principles, the interest rate swap agreement is recorded at its fair value as an asset or liability, with the changes in fair value being reported as a component of the change in net assets without donor restrictions. For the years ended June 30, 2019 and 2018, the Organization reported an interest rate swap asset of \$58,030 and asset of \$48,533 on the statement of financial position and a fair value gain / (loss) on the interest rate swap of \$9,497 and \$85,586 on the statement of activities, respectively. The fair value gain / (loss) is reported as a non-operating expense of the Organization and is a non-cash transaction.

#### Note 10. Employee benefit plan

Discretionary matching contributions to a tax-deferred annuity plan qualified under Section 403(b) of the Internal Revenue Code are contingent upon financial condition. This program covers eligible regular full-time and part-time employees who have successfully completed at least one year of employment and work at least 20 hours per week. Eligible employees may make contributions to the plan up to the maximum amount allowed by the Internal Revenue Code if they wish. Employer contributions totaled \$109,592 and \$99,861 for the years ended June 30, 2019 and 2018, respectively.

#### Note 11. Commitments and contingencies

The Mental Health Center for Southern New Hampshire, d/b/a CLM Center for Life Management, has entered into an agreement with Parkland Medical Center ("PMC") of Derry, New Hampshire, which requires that CLM provide psychiatric services and consultations to inpatients of PMC for the hospital medical and nursing staff. The consultations are requested by the hospital and responded to by CLM medical staff on an on-call basis.

In addition to the psychiatric services, CLM provides emergency mental health assessments, evaluations, and referral services to the emergency department ("ED") of the hospital. CLM emergency service clinicians are available on a twenty-four hour, seven days a week basis to see patients entering the ED who are experiencing a mental health crisis or psychiatric emergency.

The original agreement expired May 31, 2018, however, a new agreement was effective July 1, 2018. The new agreement is effective for an initial one year term and will be automatically renewed for up to two additional one year terms.

For the years ended June 30, 2019 and 2018, the Agency received approximately 68% and 72%, respectively, of its total revenue in the form of Medicaid reimbursements. Being a State of New Hampshire designated Community Mental Health Center affords the Agency Medicaid provider status. Annual contracting with New Hampshire Department of Health and Human Services-Bureau of Behavioral Health provides a base allocation of state general funds are taken as grant funds which are drawn as related expenses are incurred. Medicaid is comprised of 50% Federal funds and 50% New Hampshire State matching funds.

### THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Years ended June 30, 2019 and 2018

#### Note 12. Lease commitments

The Agency leases facilities and multiple copier agreements under various operating leases. Rent expense recorded under these arrangements was approximately \$196,000 and \$204,000 for the years ended June 30, 2019 and 2018, respectively.

The following details the future minimum lease payments on leases with an initial or remaining term of greater than one year as of June 30, 2019:

Years ending June 30,	
. 2020	\$ 183,924
2021	177,559
2022	181,773
2023	185,987
2024	 190,201
Total	\$ 919,444

#### Note 13. Availability and liquidity

The following represents the Organization's financial assets at June 30,:

	<u> 2019</u>	<u>2018</u>
Financial assets at year end:		
Cash and cash equivalents	\$1,662,875	\$1,640,075
Accounts receivable	943,181	864,230
Other receivable	284,929	144,815
Security deposit	11,087	11,087
Total financial assets	2,902,072	2,660,207
Less amounts not available within one year:		
Security deposit	(11,087)	(11,087)
Financial assets available to meet general		
Expenditures over the next twelve months	\$ <u>2,890,985</u>	\$ <u>2,649,120</u>

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

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

The Organization's primary source of liquidity is its cash and cash equivalents.

In addition to financial assets available to meet general expenditures within one year, the Organization operates with a budget and anticipates collecting sufficient revenue to cover general expenditures not covered by donor-restricted resources.

SUPPLEMENTARY INFORMATION

# DocuSign Envelope ID: 9E11B1E1-28D8-4C22-8DFE-618137B4F5EC THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Consolidating Statement of Position

June 30, 2019 Center for Life

	June 30, 2019 Center for L		CLM							
•		Management		Foundation		Tarel	Eliminations		0	
ASSETS	151	anagement	<u> </u>	Junuation		<u>Total</u>	Cuminati	ons	Consolidated	
<del></del>										
Current assets:										
Cash and cash equivalents	٠S	1,451,648	\$	211,227	\$	1,662,875	S	-	\$ 1,662,875	
Accounts receivable, net		943,181		-		943,181		•	943,181	
Other receivables		284,929		-		284,929		-	284,929	
Prepaid expenses		93,768		•		93,768		-	93,768	
Security deposit		11,087			_	11,087			11,087	
Total current assets		2,784,613		211,227		2,995,840		-	2,995,840	
Property and equipment, net		3,715,469		-		3,715,469		•	3,715,469	
Other assets:										
Interest rate swap agreement		58,030		-		58,030			58,030	
Total assets	<u>\$</u>	6,558,112	<u>\$</u>	211.227	<u>\$</u>	6.769.339	<u>s</u>	<u>-</u>	\$ 6,769,339	
LIABILITIES AND NET ASSETS									•	
Current liabilities:										
Current portion of long-term debt	S	93,538	\$	-	\$	93,538	S		\$ 93,538	
Accounts payable		76,558				76,558			76,558	
Accrued payroll and payroll liabilities		402,801		•		402,801			402,801	
Accrued vacation		372,138		-		372,138		_	372,138	
Accrued expenses		18,961		-		18,961		-	18,961	
Deferred revenue		11,980				11,980			11,980	
Total current liabilities		975,976		-		975,976			975,976	
Long term liabilities:									•	
PMPM reserve		225,000		_		225,000		-	225,000	
Long-term-debt less current portion		2,215,250		-		2,215,250			2,215,250	
Total long term liabilities		2,440,250			_	2,440,250		_	2,440,250	
Total liabilities		3,416,226			_	3,416,226			3,416,226	
Net assets without donor restrictions	_	3,141,886		211,227		3,353,113		-	3,353,113	
Total liabilities and net assets	\$	6,558,112	\$	211,227	\$	6.769.339	S	_	<b>S</b> 6.769.339	

See Independent Auditor's Report

## DocuSign Envelope ID: 9E11B1E1-28D6-4C22-8DFE-616137B4F5EC THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Consolidating Statement of Position June 30, 2018 Center for Life CLM

	Center for Life	CLM			
	Management	<b>Foundation</b>	<u>Total</u>	Eliminations	Consolidated
ASSETS					•
Current assets:					
Cash and cash equivalents	\$ 1,429,298	\$ 210,777	\$ 1,640,075	s -	<b>\$</b> 1,640,075
Accounts receivable, net	864,230	•	864,230	<u>:</u>	864,230
Other receivables	144,815	-	144,815	•	144,815
Prepaid expenses	80,753	-	80,753	-	80,753
Security deposit	11,087		11,087	<u> </u>	11,087
Total current assets	2,530,183	210,777	2,740,960		2,740,960
Property and equipment, net	3,656,665	-	3,656,665	•	3,656,665
Other assets .					
Interest rate swap agreement	48,533		48,533		48,533
Total assets	<u>\$ 6.235.381</u>	<u>\$ 210,777</u>	\$ 6.446.158	<u>s</u> -	\$ 6.446,158
LIABILITIES AND NET ASSETS					
Current liabilities:					
Current portion of long-term debt	\$ 88,538	\$ -	\$ 88,538	\$ -	\$ 88,538
Accounts payable	53,554	•	53,554	-	53,554
Accrued payroll and payroll liabilities	375,055	•	375,055	-	375,055
Accrued vacation	327,657	•	327,657	-	327,657
Accrued expenses	13,319	-	13,319	•	13,319
Deferred revenue	7,580		7,580		7,580
Total current liabilities	865,703	•	865,703	•	865,703
Long term liabilities					
PMPM reserve	112,737		112,737	•	112,737
Long-term-debt less current portion	2,308,819		2,308,819		2,308,819
Total long term liabilities	2,421,556	-	2,421,556		2,421,556
Total liabilities	3,287,259		3,287,259	•	3,287,259
Net assets without donor restrictions	2,948,122	210,777	3,158,899		3,158,899
Total liabilities and net assets	\$ 6,235,381	\$ 210,777	\$ 6,446,158	<u>.</u>	\$ 6.446.158

See Independent Auditor's Report

# DocuSign Envelope ID: 9E11B1E1-28D8-4C22-8DFE-818137B4F5EC THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Consolidating Statement of Activities For the Year Ended June 30, 2019

	Center for Life	CLM			
	Management	Foundation	<u>Total</u>	Eliminations	Consolidated
Public support and revenues:					
Public support:					
Federal	\$ 893,941	<b>S</b> -	\$ 893,941	\$ .	\$ 893,941
State of New Hampshire - BBH	258,681	•	258,681		258,681
State and local funding	43,601	•	43,601		43,601
Other public support	171,448	53,389	224,837	<u>.</u>	224,837
Total public support	1,367,671	53,389	1,421,060	-	1,421,060
Revenues:					
Program service fees, net	13,076,818	-	13,076,818		13,076,818
Other service income	647,329	-	647,329		647,329
Rental income	5.188	-	5.188		5,189
Other	158,841		158,841		158,84
Gain on sale of assets	10,000		10,000		10,000
Total revenues	13,898,176		13,898,176	-	13,898,170
Total public support and revenues	15,265,847	53,389	15,319,236	•	15,319,230
Operating expenses:					
BBH funded programs:					
Children	5,157,438		5,157,438		5,157,438
Elders	501,342		501,342		501,342
Vocational -	266,091		266,091		266,09
Multi-Service	2,971,434		2,971,434		2,971,43
Acute Care	932,421		932,421		932,42
Independent Living	2,334,134		2,334,134	-	2,334,13
Assertive Community Treatment	734,195	-	734,195		734,193
Non-Specialized Outpatient	1,063,655	-	1,063,655		1,063,65
Non-BBH funded program services	160,482	52,939	213,421		213,42
Total program expenses	14,121,192	52,939	14,174,131		14,174,13
Administrative expenses	960,388		960,388		960,38
Total expenses	15.081,580	52,939	15,134,519		15,134,51
Change in net assets from operations	184,267	450	184,717		184,71
Non-operating expenses:					
Fair value gain on interest rate swap	9,497		9,497		9,49
Change in net assets	193,764	450	194,214		194,214
Net assets, beginning of year	2,948,122	210,777	3,158,899		3,158,89
Net assets, end of year	\$ 3,141,886	5 211,227	\$ 3,353,113	5 .	\$ 3,353,113

# DocuSign Envelope ID: 9E11B1E1-28D8-4C22-8DFE-616137B4F5EC THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES Consolidating Statement of Activities For the Year Ended June 30, 2018

	Center for Life Management	CLM Foundation	Total	Eliminations	Consolidated
Public support and revenues:					
Public support:					
Federal	\$ 1.005,755	ς .	\$ 1.005.755	\$	\$ 1,005,755
State of New Hampshire - BBH	316,921	-	316,921	-	316,921
State and local funding	43,602	-	43,602	-	43,602
Other public support	66,499	64,673	131,172		131,172
Total public support	. 1,432,777	64,673	1,497,450	-	1,497,450
Revenues:					
Program service fees, net	12,364,822	•	12,364,822	- •	12,364,822 -
Other service income	467,403		467,403	-	467,403
Rental income	4,985	-	4,985	•	4,985
Other	39,231		39,231		39,231
Total revenues	12,876,441		12,876,441		12.876,441
Total public support and revenues	. 14,309,218	64,673	14,373,891		14,373,891
Operating expenses: BBH funded programs:					
Children	4,859,070	-	4,859,070		4.859.070
Elders	282,131		282,131		282,131
Vocational .	234,156		234,156		234,156
Multi-Service	2,609,377	-	2,609,377		2,609,377
Acute Care	775,806	-	775,806		775,806
Independent Living	2,226,618		2,226,618		2,226,618
Assertive Community Treatment	835,083	-	835,083		835,083
Non-Specialized Outpatient	980,645		980,645		980,645
Non-BBH funded program services	96,069	36,426	132,495		132,495
Total program expenses	12,898,955	36,426	12,935,381		12,935,381
Administrative expenses	1,049,580		1,049,580	-	1,049,580
Total expenses	13,948,535	36,426	13,984,961		13,984,961
Change in net assets from operations	360,683	28,247	388,930	-	388,930
Non-operating expenses;					
Fair value gain on interest rate swap	85,586	-	85,586		85,586
Change in net assets	446,269	28,247	474,516		474,516
Net assets, beginning of year	2,501,853	182,530	2,684,383	•	2,684,383
Net assets, end of year	\$ 2,948,122	\$ 210,777	\$ 3,158,899	<u>s</u> .	\$ 3,158,899

#### DocuSign Envelope ID: 9E11B1E1-28D6-4C22-8DFE-816137B4F5EC THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE D/B/A CLM CENTER FOR LIFE MANAGEMENT AND AFFILIATES

Analysis of Accounts Receivable For the Year Ended June 30, 2019

	R	Accounts eccivable eginning of Year	Gross Fees	Α	ontractual llowances and ther Discounts <u>Given</u>	Ω	ash Receipts		Change in		Accounts eccivable End of Year
Clients	\$	332,312	<b>\$</b> 1,335,372	\$	(356,399)	·s	(991,427)	s	-	S	319,858
Insurance companies		144,808	2,237,147		(1,075,770)		(1,116,091)				190,094
Medicaid		540,750	12,473,046		(2,059,091)		(10,333,925)		-		620,780
Medicare		70,908	617,187		(251,328)		(381,560)				55,207
Allowance Total	<u>s</u>	(224,548) 864,230	\$ 16,662,752	<u>s</u>	(3,742,588)	<u>s</u>	(12,823,003)	<u>-</u>	(18,210) (18,210)	<u>s</u>	(242,758) 943,181

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## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE DIBIA CLM CENTER FOR LIFE MANAGEMENT Schedule of Program Revenues and Expenses For the Year Ended June 30, 2019

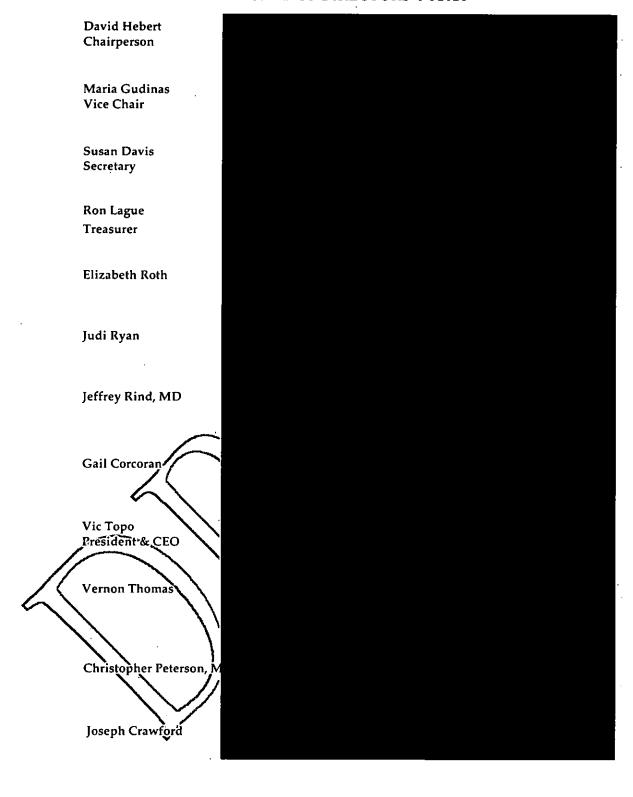
	Children	Elders	Vocational	Multi- Service	Acute <u>Care</u>	Independent <u>Living</u>	Assertive Community Treatment	Non- Specialized Outpatient	Other Non-BBH	Total Program Services	Admin- i <u>strative</u>	Total Agency
Public support and revenues: Public support:											,	
Federal	\$ 2,500	<b>S</b> .	s .	s .	\$ 35,538	\$ 790,502	\$ 62,901	\$ 2,500	<b>S</b> -	\$ 893,941	<b>s</b> .	\$ 393,941
State of New Hampshire - BBH	6,328	-		3,945	86,309	٠.	162,099			258,681		258,681
State and local funding	14,671	-	-	-			-	14,271	14,659	43,601	-	43,601
Other public support	24,900					22,950		1,22,078	520	170,448	1,000	171,448
Total public support	48,399	•	•	3,945	121,847	813,452	225,000	138,849	15,179	1,366,671	1,000	1,367,671
Revenues:												
Program service fees, net	5,692,793	542,785	222,250	3,745,411	524,729	1,267,991	656,375	416,798	7,686	13,076,818	-	13,076,818
Other service income	52,898	49,245	•	880	275,064	1,308	-	219,489	48,445	647,329	-	647,329
Rental income	889		•	1,632	839	889	-	839		5,188		5,188
Other	43,669	2,566	2,103	23,431	6,962	19,206	7,948	13,406	964	120,255	38,586	158,841
Gain on sale of assets	3,484	202	168 -	1,870	556	1,596	599	703	70	9,248	752	10,000
Total revenues	5,793,733	594,798	224,521	3,773,224	808,200	1,290,990	664,922	651,285	57,165	13,858,838	39,338	13,898,176
Total public support and revenues	5,842,132	594,798	224,521	3,777,169	930,047	2,104,442	889,922	790,134	72,344	15,225,509	40,338	15,265,847
Total expenses	5,508,639	535,422	284,175	3,173,379	995,792	2,492,759	784.083	1,135,941	171,390	15,081,580		15,081,580
Change in net assets from operations	333,493	59,376	(59,654)	603,790	(65,745)	(388,317)	105,839	(345,807)	(99,046)	143,929	40,338	184,267
Non-operating expenses:  Fair value gain on interest rate swap	3,308	192	160	1,776	528	1,516	569	663	66	8,783	714	9,497
Change in net assets	\$ 336,801	\$ 59,568	\$ (59,494)	\$ 605,566	\$ (65,217)	\$ (386,801)	\$ 106,408	<u>\$ (345,139)</u>	\$ (98,980)	\$ 152,712	\$ 41,052	<u>\$ 193,764</u>

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## THE MENTAL HEALTH CENTER FOR SOUTHERN NEW HAMPSHIRE DIB/A CLM CENTER FOR LIFE MANAGEMENT Schedule of Program Expenses For the Year Ended June 30, 2019

				Multi-	Acute	Independent	Assertive Community	non- Specialized	Other	Total Program	Admin-	Total
	Children	Elders	<b>Vocational</b>	Service	Care	Living	Treatment	Outpatient	Non-BBH	Services	istrative	<b>ARGINY</b>
Personnel costs:									<u> </u>			
Salaries and wages	\$ 3,449,000	\$ 351.535	\$ 167,769	\$ 2,041,521	\$ 693,535	\$ 1,008,680	\$ 446,541	\$ 698,885	\$ 105,994	\$ 8,963,460	\$ 604,197	\$ 9,567,657
Employee benefits	702,665	93,009	53,845	471,770	87,810	284,070	126,462	107,947	19,984	1,947,562	131,727	2,079,289
Payroll taxes	240,278	24,868	11,643	140,823	49,856	69,022	31,695	48,250	6.990	623,425	41,859	665,284
Accounting/audit fees	21,089	1,223	1,018	11,319	3,366	9,660	3,629	4,257	427	55,988	5,753	61,741
Advertising	12,077	813	67 L	6,443	2,145	5,231	2,081	2,766	529	32,756	3,376	36.132
Conferences, conventions and meetings	4,413	111	744	4,026	533	624	751	7.058	346	18,606	9,597	28,203
Depreciation	71,069	4,121	3,427	38,145	11,341	32,556	12,219	14,340	1,428	188,646	15,339	203,985
Equipment maintenance	11,603	674	563	6,224	1,853	5,308	1,997	2,342	3,989	34,553	2,524	37,077
Equipment rental	15,333	612	509	6.407	3,623	4,839	1,816	3,852	213	37,204	2,230	39,484
Insurance	27,041	1.567	1,303	16,014	4.316	12,388	4,649	5,456	544	73,278	5,836	79,114
Interest expense	38,281	2,218	1,845	20,545	6.107	17,536	6,582	7,719	772	101,605	8,264	109,869
Legal fees	8,757	508	422	4,701	1,398	4,012	3,561	1,767	176	25,302	1,890	27,192
Membership dues	13,998	918	734	9,783	2.636	6,470	2,655	4,568	3,708	45,470	6,663	52,133
Occupancy expenses	180,310	2,787	2,316	45,731	7,665	701,658	9,010	56,897	963	1,007,337	10,369	1,017,706
Office expenses	81,067	3,749	4,322	35,797	13.077	34,483	23,570	21,619	2,276	219,960	20,386	240_346
Other expenses	8,290	385	322	4,354	4,081	3,963	1,206	1,836	908	25,395	17,615	43,010
Other professional fees	131,798	7.311	6,087	72,497	25,597	59,663	21,840	49.084	2,548	376,425	-57,890	434,315
Program supplies	55,575	2.056	2,745	26,900	11,521	14,831	13,014	20,800	8,624	156,066	12,646	168,712
Travel	84,794	2.877	5,806	8,434	1,961	59,140	20,917	4,162	63	188,154	2,177	190,331
	5,157,438	501.342	266,091	2,971,434	932,421	2,334,134	734,195	1,063,655	160,482	14,121,192	960,388	15,081,580
Administrative allocation	351,201	,34,080	18,084	201,945	63,371	158,625	49,888	72,286	10,908	960,388	(960,388)	
Total program expenses	\$ 5,508,639	\$ 535,422	\$ 284,175	\$ 3,173,379	\$ 995,792	\$ 2,492,759	\$ 784,083	\$ 1,135,941	\$ 171,390	\$ 15,081,580	5 .	\$ 15,081,580

#### **BOARD OF DIRECTORS FY2021**



#### **VICTOR TOPO**

#### President/Chief Executive Officer

Successful 32-year career as clinician, manager and CEO in community mental health organizations located in Ohio and New Hampshire. Proven ability to lead board and staff with a persistent focus on mission and achieving results. Talent for exploring new and innovative approaches to delivering traditional and non-traditional behavioral health care. Possess wide range of knowledge and experience with all service populations, especially vulnerable persons at high risk. Strengths include:

- Operations
- Reorganization and reinvention
- Team building and leadership
- Strategic planning
- Collaboration

- Strategic partnerships
- Strong relationship with funders
- Community building
- Innovation

#### **Professional Experience**

## Center for Life Management – Derry, NH President/Chief Executive Officer

1999 - Present

Recruited to manage 501(c) 3 comprehensive community mental health center and its title holding 501(c) 2 corporation, entitled West Rock Endowment Association including two residential facilities.

#### Key results:

- Restructured senior management increasing direct reports from three to six.
- Revenues increased from 6.5 million to 13 million.
- Established closer connection with surrounding community utilizing aggressive public relations strategy while also rebranding CLM in 2004.
- Guided Board of Directors towards more accountability including higher expectation from management and individual board members.
- Initiated and implemented Corporate Compliance Program, including selection of corporate compliance officer
- Increased year after year number of persons served starting with 3,400 to nearly 6,000.
- Created and implemented strategy to integrate behavioral health care with physician healthcare. Integrated behavioral health services into two Primary Care/Pediatric Practices and two Specialty Practices in Southern New Hampshire.
- Consolidated outpatient offices toward design and construction of new state of the art 26,000 square foot facility. Received national awards for design and use of new facility.
- Provided leadership and vision to oversee the development and implementation of an Electronic Health Record (EHR) called webAISCE. Software now includes eprescribing and has begun acquiring Meaningful Use dollars with regular upgrades over course of fifteen years.
- Adopted Neurostar Transcranial Magnetic Stimulation (TMS) in 2010 as newest neuro tech treatment for treatment resistant Major Depressive Disorder. First free standing community mental health center in the U.S. to offer it.

### Pathways, Inc. - Mentor, OH

1988 - 1999

#### **Chief Executive Officer/Executive Director**

Started with managing a small single purpose case management agency with revenues of \$486,000 and over 11 years grew revenues to 4 million by expanding services to chronically mentally ill consumers. Created senior management team and strengthened Board of Directors utilizing shared vision approach.

#### VICTOR TOPO

-Page 2-

#### Key results:

- In collaboration with mental health board designed one of Ohio's first 24 hour 7 days a week in-home crisis stabilization program called C.B.S. (Community Based Stabilization).
- Assumed leadership role in transitioning 32 long-term patients back to our community.
- Positioned organization every year to competitively bid on ever/service provided and be awarded the service contract. Expanded wide range of services that include psychiatry, counseling, emergency services and housing.
- Created county's only Atypical Neuroleptic Medication Program (e.g. Clozaril).
- Pathways' first long range strategic plan in 1992.
- Increased Medicaid revenue from \$38,000 in 1989 to \$431,210 in 1997.

## Community Counseling Center – Ashtabula, OH Case Management Supervisor/Case Manager

1983-1988

Provided direct services and supervision for services to severely mentally disabled persons in the community. Partnered with local private hospital as well as state hospital.

Key results:

- Transitioned consumers back into supervised and independent living.
- Recruited, trained and managed staff of five case managers.
- Designed and implemented agency's first case management program.

#### **EDUCATION**

Master of Social Work (MSW)
West Virginia University, Morgantown, WV

Bachelor of Arts (BA) Siena College, Londonville, NY

Associate of Applied Science (AAS)
Fulton-Montgomery Community College, Johnstown, NY

#### BOARD/LEADERSHIP POSITIONS

Heritage United Way - Board of Directors

Mental Health Commission – Co-Chair Consumers and Families Work Group

Statewide Evidenced Based Practice Committee - Co-Chair

Greater Salem Chamber of Commerce - Board of Directors

Behavioral Health Network - Board of Directors

Greater Derry/Londonderry Chamber of Commerce - Board of Directors

Greater Derry/Salem Regional Transportation Council (RTC) - Chairman, Board of Directors, Derry, NH

Greater Salem Leadership Program - Graduate, Class of 2001

#### DIANA LACHAPELLE, CPA

Strategically focused leader with extensive operations, accounting and financial management experience. Possesses keen business acumen and decision making skill. Proven track record of working collaboratively and driving change to optimize profitability.

#### Core Qualifications

- Strategic Planning
- SOX Compliance
- · Internal Controls

- Revenue Cycle Management
- · Budgeting & Forecasting
- Audit

- Financial Reporting & Analysis
- Contract Negotiations
- · Labor Management

#### PROFESSIONAL EXPERIENCE

#### VICE PRESIDENT - CHIEF FINANCIAL OFFICER

The Mental Health Center for Southern New Hampshire d.b.a. Center for Life Management, Derry, NH March 2020 to present

Provide leadership and direction in the areas of finance, revenue cycle and cash management. Develop, implement and evaluate strategic plans to improve operating performance.

#### CHIEF EXECUTIVE OFFICER

Encompass Health Rehabilitation Hospital (formerly HealthSouth), Concord, NH February 2018 to February 2020

Leader of this for profit, 50-bed, acute care rehabilitation hospital and outpatient treatment center reporting directly to the Regional President. Hospital is part of a publicly traded healthcare system comprised of 133 inpatient rehabilitation hospitals, 245 home health agencies and 82 hospice locations.

#### Key contributions and results:

- Strategic leadership to achieve discharge growth of 15% year over year for two consecutive years in an industry where 3% growth is the norm.
- Financial leadership to realize EBITDA growth year over year of 24% and 19% for 2018 and 2019, respectively.
- Organizational and change management to improve employee engagement results by 16 basis points.
- Process improvement leadership to improve patient outcomes and satisfaction.

#### CONTROLLER/CHIEF FINANCIAL OFFICER

Encompass Health Rehabilitation Hospital (formerly HealthSouth), Concord, NH January 2012 to January 2018

Responsible for all financial aspects of the hospital including the development of the annual operating plan, monthly analysis of results and execution of corrective actions as needed to ensure achievement of planned results. Chief liaison between corporate finance and the hospital.

#### Key contributions and results:

- Implemented cost reduction initiatives to improve profitability by 7%.
- Restructured outpatient operation to create a viable business unit, improving net income by 34%.
- Developed and executed a labor management plan to improve operational efficiency and reduce full time equivalents by 7%.
- Preceptor for newly hired Controllers.

#### **CPA SERVICES**

#### Diana C. Lachapelle, CPA, Bedford, NH 2003-2011

Provided accounting leadership and business solutions to clients including cash management, forecasting, budgeting, financial statement preparation, tax preparation, and development of internal controls.

## DIRECTOR OF WORLDWIDE FOOTWEAR COST & FINANCIAL PLANNING Timberland Corporation, Stratham, NH 1996-1999

- Responsible for all financial aspects of this \$550 million manufacturing and sourcing
  operation including accounting, forecasting, budgeting, reporting, product costing and audit.
- Partnered with the VP of Operations to achieve key cost reductions, as well as, improved
  reliability and quality resulting in actual performance exceeding budget by \$6.9 million.

#### FINANCIAL MANAGER, CONSUMER PRODUCTS GROUP Nashua Corporation, Nashua, NH 1993-1996

#### **AUDITOR**

Ernst & Young, Manchester, NH 1989-1992

#### **EDUCATION & CERTIFICATION**

Bachelor of Science in Business Administration, University of New Hampshire, Durham Certified Public Accountant, State of New Hampshire
Member of the American College of Healthcare Executives and Healthcare Financial
Management Association

#### SYSTEM EXPERIENCE

Oracle Enterprise Performance Management System, Oracle PeopleSoft, Hyperion, Cerner EMR and reporting, E-Time, Attendance Enterprise, Microsoft Office Suite, Ariba Contract Management, Maven, Beacon, Tableau

## Steve Arnault

#### Oblective

To obtain a position where I can maximize my multilayer of management skills, quality assurance, program development, experience as an educator, customer service, and a successful track record in the health care environment.

#### **Professional** Experience

Lead

Healthcare Systems Align, LLC

Nottingham, NH

1/2010 - Present

#### Healthcare Systems Align.com

Provide consultation to agencies, medical practices and practitioners to establish systems of integrated healthcare that includes practice patterns, billing strategies, quality and compliance strategy, policy development, outcome measurement and supervision.

VP of Quality, Compliance

Center for Life Management, Derry, NH www.centerforlifemanagement.org

1/2009 - Present

- Senior management position in mental health center serving 6000 consumers Responsibilities include development, implementation and monitoring of strategies and systems to continuously improve the quality of services to consumers. Assure compliance to state and federal regulations.
- Develop and maintain systems to assure fidelity to evidence based practices.
- Continuous development of EMR and associated staff training.
- Establish and maintain outcome measures and their incorporation into QI/UR initiatives.
- Develop and implement projects to improve the quality of care.
- Chair of agency Safety Committee.

Services

Director, Behavioral Health Portsmouth Regional Hospital Portsmouth, NH

1/2006 - 12/2009

- Responsible for clinical, administrative and fiscal management of service line which includes 22 bed inpatient psychiatric unit, Psychiatric Assessment and Referral Service and interdepartmental service. Supervision of an Assistant Director and Coordinator, Responsible for 85 staff. Oversee the integration of behavioral health into primary care. Manage annual budget of 10.5 million dollars.
- Chair Directors Operations Meeting. Coordinate monthly meeting of hospital departmental directors.
- Co-chair of Patient Flow Committee. Analysis and development of data systems to monitor patient throughput. Develop and implement strategies to improve the efficiency of

## Steve Arnault

Assistant Director of Behavioral Health Services Portsmouth Regional Hospital Portsmouth, NH

4/2005 - 1/2006

- Responsible for the clinical and administrative functioning of the Psychiatric assessment and Referral Service (PARS). Manage annual budget of 600K.
- Supervision of 22 clinicians who provide psychiatric crisis assessments, admissions, intake and referral 24 hours a day.
- Supervision, oversight and development of the Interdepartmental Service: 3 clinicians who
  provide psychiatric assessment, consultation and therapy to patients admitted medically to
  the hospital.

**Director of Adult Services** 

Community Partners; Dover, NH

11/2001 - 4/2005

 Responsible for the clinical, administrative and financial operations of the Adult Outpatient Therapy, EAP, Admissions, Emergency Services, Geriatric and Acute Service programs (PHP/IOP) serving Strafford County. Supervised 4 mangers responsible for 26 staff.
 Manage annual budget of 3 million dollars.

Clinical Director of

Riverbend Community Mental Health Ctr

9/2000 - 11/2001

Community Support Prog. Concord, NH

Responsible for the clinical, administrative and fiscal operations of programs serving 554
consumers with severe and persistent mental illness. Directly supervise 5 managers
responsible for 60 staff. Development and oversight of annual budget of 4 million dollars.

Treatment Team Coordinator

Riverbend Community Mental Health Ctr

8/1996 - 9/2000

Concord, NH

Clinical and administrative supervision of a multidisciplinary team of 12 direct care staff.
 Serving an average of 100 individuals with severe and persistent mental illness.

Team Leader

Strafford Guidance Center; Dover, NH

1/1993 - 8/1996

- Clinical and administrative supervision of 8 direct care staff. Serving an average of 80 individuals with severe and persistent mental illness.
- Developed the first interagency treatment team to serve individuals with severe and persistent mental illness and developmental disabilities in NH.

Clinical Case Manager

Strafford Guldance Center; Dover, NH

1/1992 - 12/1993

 Provided psychotherapy and case management services to individuals with severe and persistent mental illness and substance abuse issues as part of The Continuous Treatment Team study through Dartmouth College.

### Steve Arnault

Assistant Director / **Behavioral Specialist**  Residential Resources; Keene, NH

1/1989 - 1/1992

Directed all administrative, fiscal and clinical activities for 5 group homes and 3 supported living arrangements serving people with developmental disabilities. Provide behavioral consultation to individuals with behavioral/functional challenges.

Behavioral Specialist /

The Center for Humanistic Change

8/1986 - 1/1989

Clinical Supervisor

Manchester, NH

Provide behavioral consultation to individuals facing behavioral/functional challenges in group homes, day programs, vocational and family settings. Supervised 2 clinicians.

House Manager

Greater Lawrence Psychological Center

6/1984 - 8/1986

Lawrence, MA

Administrative, clinical and financial management of a group home serving 4 men with severe and persistent mental illness.

#### Teaching & Educational Experience

**Adjunct Faculty** 

New England College; Henniker, NH

9/1994 - Present

www.nec.edu

Teach graduate and undergraduate courses in psychology, counseling., program development and evaluation

**Director of Masters** 

Degree Program in

New England College; Henniker, NH

1/1998 - 3/2002

Mental Health Counseling

- Developed and implemented curriculum for degree program.
- Oversight of curriculum to insure quality, academic standards and student relention.
- Development and execution of marketing plan.
- Provided academic advising and mentoring to students.
- Faculty recruitment, supervision and monitoring of academic quality

Curriculum Consultant

New England College; Henniker, NH

Fall 2012 -Present

Developed curricula for a certificate and C.A.G.S. in the integration of behavioral health into primary medicine.

### KENNETH M. BROWN, M.D.,M.P.H.

EDUCATION	Child and Adolescent Psychiatry Fellowship
1994-1996	University of Miami/ Jackson Memorial Hospital
1991-1994	Psychiatry Residency Medical University of South Carolina Institute of Psychiatry Charleston, South Carolina
1987-1992	Doctor of Medicine Tulane University School of Medicine Tulane Medical Center Charity Hospital New Orleans, Louisiana
1987-1991	Masters of Public Health Tulane University School of Tropical Medicine and Public Health New Orleans, Louisiana
1983-1987	Bachelor of Science Engineering Major: Biomedical Engineering Tulane University School of Engineering
1985-1986	Tulane University Honor Scholar Junior Year Abroad Major: Engineering University of Southampton Southampton, England

#### **EMPLOYMENT**

2000-Present Medical Director

Hampstead Hospital

Hampstead, New Hampshire

1996-2000 Chief, Child and Adolescent Psychiatrist

Hampstead Hospital

Hampstead, New Hampshire

EMPLOYMENT (cont.)

1996-Present Solo Private Practice (Inpatient and Outpatient)

Child, Adolescent and Adult Psychotherapy and Psychopharmacology

Hampstead Hospital 218 East Road

Hampstead, New Hampshire

1997-2000 Child and Adolescent Psychiatrist

Center for Life Management Community Mental Health Center

Derry, New Hampshire

1991-1994 Court Appointed Expert Witness

Court Appointed Designated Examiner

**Charleston County Court** 

1993-1994 Treating Psychiatrist

South Carolina Department of Mental Health
Dual Diagnoses Community Mental Health Clinic

Charleston, South Carolina

#### **ACADEMIC AFFILIATIONS**

1999-Present Adjunct Professor in Clinical Research

Dartmouth University Hanover, New Hampshire

#### RESEARCH

2001-2003 Sub-investigator

Access Clinical Trials

A Three- Week, Multicenter, Randomized, Double-Blind, Placebo-Controlled, Parallel-Group Safety and Efficacy Study of Extended-Release Carbamazepine in Patients with Bipolar Disorder.

Shire Laboratories

A Three- Week, Multicenter, Randomized, Double-Blind, Placebo-Controlled, Parallel-Group Safety and Efficacy Study of Extended-Release Carbamazepine in Lithium Failure Patients with Bipolar Disorder. Shire Laboratories

A Double-Blind, Parallel Study of the Safety, Tolerability and Preliminary Efficacy of Flutamide Compared to Placebo in Patients with Anorexia.

Nervosa

Vela Pharmaceuticals Inc.

#### RESEARCH (cont.)

A Phase III, Randomized, Double-Blind, Placebo-Controlled Study of Safety and Efficacy of C-1073 (Mifepristone) in Patients with Major Depressive Disorder with Psychotic Features Who are not Receiving Antidepressants or Antipsychotics.

Corcept Therapeutics, Inc.

Olanzapine Versus Ziprasidone in the Treatment of Schizophrenia Eli Lilly and Company

A Multicenter, Randomized, Double-Blind, Study of Aripiprazole Versus Placebo in the Treatment of Acutely Manic Patients with Bipolar Disorder.

Bristol-Myers Squibb Pharmaceutical Research Institute

#### PUBLICATIONS and POSTER PRESENTATIONS

Bupropion Sustained Release in Adolescents With Comorbid Attention-Deficit/ Hyperactivity Disorder and Depression Daviss, Bentivoglio, Racusin, Brown, et al., J. Am. Acad. Child Adolescent Psychiatry, 40:3, March 2001

A Retrospective Study of Citalogram in Adolescents with Depression Bostic J.Q., Prince J., Brown K., Place S. Journal of Child and Adolescent Psychopharmacology 2001; 11; 159-166.

Citalogram for the Treatment of Adolescent Anxiety Disorders: A Pilot Study.

Prince J., Bostic J.Q., Monuteaux M., Brown K., Place S.

Psychopharmacoogy Bulletin 2002; 36: 100-107

- 2001 <u>Citalogram in Adolescents with Mood and Anxiety Disorders: A Chart Review.</u> Presented at the Annual Meeting of the American Psychiatric Association, New Orleans, LA 5/9/2001
- 2001 <u>Citalopram in Adolescents with Mood and Anxiety Disorders.</u>
  Presented at the Annual Meeting of NCDEU,
  Phoenix, AZ 5/29/2001
- 2001 <u>Citalogram in Adolescents with Mood, Anxiety, and Comorbid Conditions.</u> Presented at the Annual Meeting of the American Psychiatric Association 2001 Institute on Psychiatric Services, Orlando, FL 10/11/2001

#### HONORS AND OFFICES HELD

#### **ACADEMIC AWARDS AND OFFICES**

- --Golden Apple Award for Excellence in teaching medical students
- -- Residency Education Committee representative
- -- Vice President Tulane Medical School Class of 1991
- -- President Jewish Medical Student Organization

#### ACADEMIC AWARDS AND OFFICES (cont.)

- -- Tau Beta Pi (engineering honor society)
- --Alpha Eta Mu Beta (biomedical engineering honor society)
- --Alpha Epsilon Delta (premedical honor society)
- --Honor Scholar Junior Year Abroad Program

#### SOCIETY MEMBERSHIPS

- -- American Medical Association
- -- American Psychiatry Association
- -- American Academy of Child and Adolescent Psychiatry
- -- New Hampshire Medical Association
- -New Hampshire Psychiatry Association
- -- New England Society of Child and Adolescent Psychiatry

#### **CERTIFICATIONS**

- --Board Certified General Psychiatry
  American Board of Psychiatry and Neurology, #43597
- --Board Eligible, Child and Adolescent Psychiatry

#### **LICENSES**

-- New Hampshire, Maine, South Carolina, Florida, Louisiana

#### Angela Moran

Objective: Seeking employment in management, human services and customer service.

#### Experience:

Center for Life Management

Derry, NH

July 2017-Present

Interim Director of Housing

2/2019-Present

- Works collaboratively with The Bureau Housing Supports to outreach and assist homeless individuals
- Engage homeless towards finding permanent housing/treatment for mental illness or substance misuse.
- Refer individuals for clinical screening and diagnostics into case management services.
- Participate within the local LSDA, foster cooperation and collaboration between service providers, as well as follow through on referrals made to CLM in regards to possible homeless individuals.
- Follow state and federal regulations regarding use of funds and services for the homeless and mentally ill.
- Adhere to CLM and State of NH regulations regarding documentation and HMIS data collection
- Attend /participate in HMIS data Committee, Advisory Meetings, Housing Action
   Meetings, Balance of State Continuum of Care meetings and various BOSCOC meetings
- Attend /participate in HMIS data Committee, Advisory Meetings, Housing Action
   Meetings, Balance of State Continuum of Care meetings and various BOSCOC meetings
- Assist in the development of NOFA documentation and HMIS Annual Performance Reports
- Update APR's for PATH outreach, All Projects for housed Participants that are in SPC,
   SPC II, PH1 and FH1
- Follow through with Audits preformed on all Projects done by BHS
- Adhere to policies with Rental calculations, Redeterminations, FMR's
- Assist with getting documentation of homelessness for HUD's definition of the Chronically homelessness
- Voucher participants that fall into the HUD's CH definition and assist them with finding housing
- Work with landlords who accept the housing voucher through CLM and BHS to assist with and problem solve issues with participants
- Reports to VP and QA of CLM on a weekly basis

#### **Housing Development Assistant**

#### 10/2018-2/2019

- Works collaboratively with Housing Director to Outreach and assist homeless individuals.
- Engage homeless towards finding permanent housing/treatment for mental illness or substance misuse.
- Refer individuals for clinical screening and diagnostics into case management services.
- Participate within the local LSDA, foster cooperation and collaboration between service providers, as well as follow through on referrals made to CLM in regards to possible homeless individuals.
- Follow state and federal regulations regarding use of funds and services for the homeless and mentally ill.
- Adhere to CLM and State of NH regulations regarding documentation and HMIS data collection
- Attend /participate in HMIS data Committee, Advisory Meetings, Housing Action
   Meetings, Balance of State Continuum of Care meetings and various BOSCOC meetings
- Assist In the development of NOFA documentation and HMIS Annual Performance Reports
- Assist individuals w/ applying for Medicaid and Social Security benefits
- Perform other duties as assigned by Director

#### **PATH Outreach Worker**

7/2017-10/2108

- Coordinate intake and needs for assessments for all clients and work with clients and their barriers to obtain services/housing and/or perform a warm handoff to in-house case manager.
- Perform outreach services, contacting homeless persons in all places where they congregate in our catchment area.
- Provide supportive services in a non-judgmental manner.
- Provide information, referrals, and advocacy to assist clients in accessing services and resources.
- Assist clients with procuring necessary documents and services such as ID card, birth certificate, social security, disability income.
- Assist clients with housing applications, complete supportive and subsidized housing paperwork, and advocate for clients with prospective landlords.

**Work Opportunities Unlimited** 

Dover, NH

2016-2017

Career Resource Specialist Seacoast Area

- Assist clients develop career goals/Work support and assessment
- Intake coordination for DCYF clients
- Create and develop Individual Support Plans/Coaching clients to help maximize success
- Job retention skills/Job coaching skills
- Mock interviewing skills and assessment
- Job Development/Business Development

#### Sutton Hill Center-Genesis Healthcare

North Andover, MA

2016-Present

#### **Recreation Assistant**

- Daily activities for resident-groups of 5-12 residents at a time in groups
- One on One visits offer sensory stimulation
- Prepare progress notes quarterly for resident's progress
- Assist with transporting, communicating and setting up for activity programs

### Rutland Healthcare and Rehabilitation - Genesis Healthcare Rutland, VT

2015-2016

#### **Recreation Assistant**

- Daily activities for resident-groups of 5-12 residents at a time in groups
- One on One visits offer sensory stimulation
- Prepare progress notes quarterly for resident's progress
- Assist with transporting, communicating and setting up for activity programs

#### **Balance Chiropractic PLLC**

Concord, NH

2008-2015

#### Office Manager

- Maintained all charts and intakes for patients
- Scheduling, collecting co-pays, calling insurance companies for benefits
- Following up on charts and following up with payments from patients
- Ordered supplies, supplements, fielding calls to schedule and reschedule patients

#### Children's Place

Manchester, NH

2007-2008

#### Store Manager

- Ran all aspects of the stores operation from scheduling, payroll, shipment, floor sets
- Training all management and part time sales associates
- Customer service

Olympia Sports

Salem, NH

1995-2007

#### Store Manager

- Part time from 1995-1997, Manager Trainee, Store Manager 2000
- Ran all operations of store and maintained good customer service
- Training for all management and part time sales associates
- Made sure to reach sales goals and inventory

#### Volunteer Experience

#### YMCA Allard Center of Goffstown

- Volunteered for co-coaching of competitive swim team (18 kids ages 11-16)
- Volunteered for Kohl's Cares Softball tournament to raise \$500
- Volunteered for Zumba/dance-a-thon to raise over \$200

#### **Education:**

**Rutland High School** 

1997

Seacoast Career School

2006

#### References:

Erin Mitchell- YMCA of Greater Nashua, Director of Achievement

919-518-3415

Kristin Jones, BA- Counselor

603-425-9233

Amanda St. Cyr - Supply Supervisor, Elliot Hospital

603-486-6122

#### **CONTRACTOR NAME:**

## The Mental Health Center for Southern New Hampshire dba CLM Center for Life Management

#### **CLM Supportive Housing Contract**

(formerly known as: Continuum of Care, Permanent Housing I Contract)

#### **Key Personnel**

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Vic Topo	President/CEO	\$176,485	1.5%	\$2,647
Diana Lachapelle	CFO	\$140,000	1.5%	\$2,100
Steven Arnault	VP Operations, Quality & Compliance	\$135,732	1.5%	\$2,036
Kenneth Brown MD	Medical Director	\$260,000	1.5%	\$3,900
Angela Morin	Housing Coordinator	\$42,000	10%	\$14,883



Lori A. Shibinette Commissioner

Christine L. Santaniello Director

# STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF ECONOMIC & HOUSING STABILITY

129 PLEASANT STREET, CONCORD, NH 03301 603-271-9474 1-800-852-3345 Ext. 9474 Fax: 603-271-4230 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

April 22, 2020

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

#### **REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Economic and Housing Stability, to amend existing Sole Source contracts with the vendors listed below to provide Permanent Housing and Coordinated Entry Programs and Supportive Services to individuals and families who are experiencing homelessness through the Federal Continuum of Care Program, by exercising contract renewal options by increasing the total price limitation by \$1,657,969 from \$1,606,764 to \$3,264,733 and by extending the completion dates from June 30, 2020 to June 30, 2021 effective July 1, 2020 or upon Governor and Council approval, whichever is later. The original contracts were approved by Governor and Council on June 19, 2019, item #46, 100% Federal Funds.

Vendor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount
Community Action Partnership Strafford County, Dover, NH	177200- B004	Statewide	\$38,524	\$38,524	\$77,048
Community Action Program Belknap- Merrimack Counties, Inc., Concord, NH	177203- B003	Statewide	\$86,722	\$86,722	\$173,444
FIT/NHNH, Inc., Manchester, NH	157730- B001	Concord	\$99,046	\$101,469	\$200,515
FIT/NHNH, Inc., Manchester, NH	157730- B001	Concord	\$68,585	\$68,585	\$137,170

The Lakes Region Mental Health Center Inc., Laconia, NH	154480- B001	Laconia	\$99,835	\$102,211	\$202,046
Southwestern Community Services, Inc., Keene, NH	177511- R001	Cheshire & Sullivan Counties	\$85,230	\$87,728	\$172,958
Southwestern Community Services, Inc., Keene, NH	177511- R001	Statewide	\$86,552	\$86,552	\$173,104
Southwestern Community Services, Inc., Keene, NH	177511- R001	Cheshire & Sullivan Counties	\$281,824	\$288,544	\$570,368
The Mental Health Center for Southern New Hampshire Derry, NH	174116- R001	Western Rockingham County	\$267,435	\$273,459	\$540,894
The Mental Health Center for Southern New Hampshire Derry, NH	174116- R001	Western Rockingham County	\$273,230	\$303,674	\$576,904
Tri-County Community Action Program Inc., Berlin, NH	177195- B009	Statewide	\$130,822	\$130,822	\$261,644
Tri-County Community Action Program Inc., Berlin, NH	177195- B009	Grafton, Coos, and Carroll Counties	\$88,959	\$89,679	\$178,638
		Total:	\$1,606,764	\$1,657,969	\$3,264,733

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

05-95-42-423010-7927 HEALTH & SOCIAL SERVICES, DEPARTMENT OF HEALTH AND HUMAN SERVICES, HHS: HUMAN SERVICES, HOMELESS & HOUSING, HOUSING-SHELTER PROGRAM

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Prog Svc	TBD	\$1,606,764	\$0	\$1,606,764
2021	102-500731	Contracts for Prog Svc	TBD	\$0	\$1,657,696	\$1,657,696
			Total	\$1,606,764	\$1,657,969	\$3,264,733

#### **EXPLANATION**

This request is **Sole Source** because federal regulations require the Department to specify each vendor's name during the annual, federal Continuum of Care Program renewal application process, prior to the grant award being issued. Annually, the US Department of Housing and Urban Development (HUD) oversees a Continuum of Care Program competitive application process. As part of this process, the Department is required to provide HUD with each potential vendor and HUD evaluates vendor applications. Based on that evaluation process, HUD directs the Department to provide grant awards and the specific amounts to vendors. As previously stated, the original contract was approved by Governor and Council on June 19, 2019, Item #46.

The purpose of this request is to continue providing Permanent Housing and Coordinated Entry Programs that deliver rental and leasing assistance, access to supportive services and other services to individuals who are experiencing homelessness.

Approximately 3,000 individuals will be served from July 1, 2020 to July 1, 2021.

Vendors facilitate movement of participants into sustained permanent housing while providing connections with community and mainstream services in order to maximize participants' abilities to live more independently. The U.S. Department of Housing and Urban Development established the Continuum of Care concept to support communities in their efforts to address the problems of housing and homelessness in a coordinated, comprehensive and strategic manner.

The Department will monitor contracted services using the following performance measures:

- Annual reviews relating to compliance with administrative rules and contractual agreements.
- Semi-annual statistical reports, including various demographic information and income and expense reports, to include match dollars.
- All vendors funded through these contracts will report through the timely and accurate entry of data into the New Hampshire Homeless Management Information

His Excellency, Governor Christopher T. Sununu and the Honorable Council Page 4 of 4

System, unless the vendor is required by law to use an alternate means of data collection. This will be the primary reporting tool for outcomes and activities of shelter and housing programs.

As referenced in Exhibit C-1, Revisions to Standard Contract Language, Section 2., Renewal, of the original contracts, the parties have the option to extend the agreements for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for one (1) of the two (2) years available.

Should the Governor and Executive Council not authorize this request, there will be fewer permanent housing options and homeless outreach services available, leaving individuals and families that are vulnerable in unsafe and deadly situations without a safety net. Additionally, if data is not collected as required by these contracts, the Department will be in non-compliance with federal regulations, which could result in a loss of federal funding for these and other types of homeless and permanent supportive services.

Area served: Statewide

Source of Funds: CFDA# 14.267/FAIN# NH0014L1T001912, NH0057L1T001910, NH0060L1T001907, NH0096L1T001904

Respectfully submitted.

Lori A. Shibinette Commissioner



## New Hampshire Department of Health and Human Services Continuum of Care Program, Permanent Housing I

## State of New Hampshire Department of Health and Human Services Amendment #1 to the Continuum of Care Program, Permanent Housing I

This 1st Amendment to the Continuum of Care Program, Permanent Housing I contract (hereinafter referred to as "Amendment #1") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and The Mental Health Center for Southern New Hampshire, d/b/a CLM Center for Life Management (hereinafter referred to as "the Contractor"), a non-profit corporation with a place of business at 10 Tsienneto Rd, Derry, NH, 03038.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #46), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to Standard Contract Language, Section 2., Renewal., the Contract may be amended and extended upon written agreement of the parties and approval from the Governor and Executive Council; and

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

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

- 1. Form P-37 General Provisions, Block 1.7, Completion Date, to read: June 30, 2021.
- Form P-37, General Provisions, Block 1.8, Price Limitation, to read: \$576.904.
- 3. Exhibit B, Methods and Conditions Precedent to Payment, Section 1. Permanent Housing Program Funding, Subsection 1.2., Paragraph 1.2.4. to read:
  - 1.2.4. Grant Numbers:
    - 1.2.4.1. NH0014L1T001811 (Grant Year 1)
    - 1.2.4.2 NH0014L1T001912 (Grant Year 2)
- 4. Exhibit B, Methods and Conditions Precedent to Payment, Section 1. Permanent Housing Program Funding, Subsection 1.2., Paragraph 1.2.7., Subparagraph 1.2.7.1. to read:
  - 1.2.7.1 Not to exceed \$576,904
- 5. Exhibit B, Methods and Conditions Precedent to Payment, Section 1. Permanent Housing Program, Subsection 1.2., Paragraph 1.2.8., to read:

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1.2.8. Funds allocation under this agreement for Continuum of Care Program;

		Grant Tear I	Glatit Leaf Z
1.2.8.1.	Rental Assistance	\$221,592	\$252,036
1.2.8.2.	Supportive Services	\$39,600	\$45,000
1.2.8.3.	Administrative Expenses	<u>\$6,638</u>	\$6,638
1.2.8.4.	Total Program Amount	\$273,230	\$303,674
1.2.8.5.	Vendor Match (25%)	\$69,967	\$77,577.75

The Mental Health Center for Southern New Hampshire SS-2020-BHS-04-PERMA-04-A01

Amendment #1 Page 1 of 3 Grant Voor 2



## New Hampshire Department of Health and Human Services Continuum of Care Program, Permanent Housing I

All terms and conditions of the Contract not inconsistent with this Amendment #1 remain in full force and effect. This emendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire
Department of Health and Human Services

4/8/W

ame: Christine L. Sarriani

The Mental Health Center for Southern New Hampshire

3/30/20 Date

Name: Title:



## New Hampshire Department of Health and Human Services Continuum of Care Program, Permanent Housing I

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

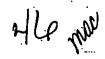
OFFICE OF THE ATTORNEY GENERAL

Name:
Title:

OFFICE OF THE ATTORNEY GENERAL

Name:
Title:

Name:
Title:





Jeffrey A. Meyers Commissioner

Christine L. Santanicilo Director

#### STATE OF NEW HAMPSHIRE

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF ECONOMIC & HOUSING STABILITY

129 PLEASANT STREET, CONCORD, NH 03301 603-271-9474 1-800-852-3345 Ext 9474 Fax: 603-271-4230 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 28, 2019

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

#### REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Economic and Housing Stability, to enter into sole source agreements with the vendors below to provide Permanent Housing and Coordinated Entry Programs and Supportive Services to homeless individuals and families through the Federal Continuum of Care Program in an amount not to exceed \$1,606,764, effective July 1, 2019, upon Governor and Executive Council approval, through June 30, 2020, 100% Federal Funds.

Vendor Name	Project Name	Vendor#	Location	SFY 2020 Amount
Community Action Partnership Strafford County	Coordinated Entry	177200-B004	Statewide	\$38,524
Community Action Program Belknap-Merrimack Counties, Inc.	Coordinated Entry	177203-B003	Statewide	\$86,722
FIT/NHNH, Inc.	Concord Community Leasing II Permanent Housing	157730-B001	Concord	\$99,046
FIT/NHNH, Inc.	Concord Permanent Housing	157730-B001	Concord	\$68,585
The Lakes Region Mental Health Center, Inc.	McGrath Street Permanent Housing	154480-B001	Laconia	\$99,835
Southwestern Community Services, Inc.	Permanent Housing Cheshire County	177511-R001	Cheshire & Sullivan Counties	\$85,230
Southwestern Community Services, Inc.	Coordinated Entry	177511-R001	Statewide	\$86,552
Southwestern Community Services, Inc.	Shelter Plus Care Permanent Housing	177511-R001	Cheshire & Sullivan Counties	\$281,824
The Mental Health Center for Southern New Hampshire dba CLM Center for Life Mänagement	Family Housing I Permanent Housing	174116-R001	Western Rockingham County	\$267,435

Vendor Name	Project Name	Vendor#	Location	SFY 2020 Amount
The Mental Health Center for Southern New Hampshire dba CLM Center for Life Management	Permanent Housing I	174116-R001	Western Rockingham County	\$273,230
Tri-County Community Action Program, Inc.	Coordinated Entry	177195-B009	Statewide	\$130,822
Tri-County Community Action Program, Inc.	Permanent Supportive Housing I, Expansion	177195-B009	Grafton, Coos, and Carroll Counties	\$88,959
<u> </u>	<u> </u>	<del> </del>	Total:	\$1,606,764

Funds are available in the following account for State Fiscal Year 2020, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified.

05-95-42-423010-7927 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: HUMAN SERVICES, HOMELESS & HOUSING, HOUSING- SHELTER PROGRAM

State Fiscal Year	Class/Account	Class Title	Job Number	Amount
2020	102-500731	Contracts for Program Services	TBD	\$1,606,764
			Total	\$1,606,764

#### **EXPLANATION**

These requests are sole source because federal regulations require the Department to specify each vendor's name during the annual, federal Continuum of Care Program renewal application process, prior to the grant award being issued. The U.S. Department of Housing and Urban Development (HUD) reviews the applications and subsequently awards funding based on its criteria. The application process and timing of grant terms do not align with state or federal fiscal years. The start date of a grant is based on the month in which each grant's original federal agreement was issued. This results in Continuum of Care Program grant start dates, and subsequent renewal approval requests, occurring in various months throughout the year.

The attached agreements represent twelve (12) of twenty-nine (29) total agreements, many of which have renewal dates dispersed throughout the calendar year, with vendors who are located throughout the state to ensure ongoing, statewide delivery of housing services through New Hampshire's Continuum of Care Program.

The purpose of these requests is for the provision of Permanent Housing and Coordinated Entry Programs that shall deliver rental/leasing assistance, service access, supportive services and associated administrative services targeted to serve approximately three-thousand (3000) participants from July 1, 2019 through June 30, 2020.

His Excellency, Governor Christopher T. Sununu and the Honorable Council Page 3 of 4

Using the "Housing First" model and the development of Stabilization and Crisis Management plans, the Vendors will facilitate participant's movement into sustained permanent housing while providing connections with community and mainstream services to maximize participant's ability to live more independently.

HUD established the Continuum of Care concept to support communities in their efforts to address the problems of housing and homelessness in a coordinated, comprehensive, and strategic fashion. The Continuum of Care serves three main purposes:

- A strategic planning process for addressing homelessness in the community.
- A process to engage broad-based, community-wide involvement in addressing homelessness on a year-round basis.
- An opportunity for communities to submit an application to the U.S. Department of Housing and Urban Development for resources targeting housing and support services for homeless individuals and families.

The following performance measures/objectives will be used to measure contract compliance and vendor performance:

- Annual compliance reviews shall be performed that include the collection of data relating to compliance with administrative rules and contractual agreements.
- Statistical reports shall be submitted on a semi-annual basis from all funded vendors, including various demographic information and income and expense reports including match dollars.
- All vendors funded for rapid re-housing, transitional, permanent or coordinated entry housing, or outreach/supportive services will be required to maintain timely and accurate data entry in the New Hampshire Homeless Management Information System, unless they are required by law to use an alternate means of data collection. The NH Homeless Management Information System will be the primary reporting tool for outcomes and activities of shelter and housing programs funded through this contract.

As referenced in Exhibit C-1 of each of these contracts, the Department reserves the right to extend each agreement for up to two (02) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Executive Council.

Should the Governor and Executive Council not authorize these requests, Permanent Housing, and Coordinated Entry Programs and Supportive Services for New Hampshire homeless individuals and families may not be available in their communities, and there may be an increase in demand for services placed upon the region's local welfare authorities. It may also cause individuals and/or families to become homeless:

Source of funds: 100% Federal Funds from the U.S. Department of Housing and Urban Development, Office of Community Planning and Development, Catalog of Federal Domestic Assistance Number (CFDA) #14.267.

Area served: Statewide

His Excellency, Governor Christopher T. Sununu and the Honorable Council Page 4 of 4

In the event that the Federal funds become no longer available, General funds will not be requested to support these programs.

Respectfully submitted,

Jeffrey A. Meyers Commissioner

FORM NUMBER P-37 (version 5/8/15)

Subject: Continuum of Care, Permanent Housing J. SS-2020-BHS-04-PERMA-04

Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

#### ACREEMENT

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

#### GENERAL PROVISIONS

1.1. State Agency Name	· · · · · · · · · · · · · · · · · · ·	1.0.0	
1.1 State Agency Name Department of Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301	
CLM Center for Life Manage	ental Health Center for Southern New Hampshire dba		
1.5 Contractor Phone Number	1.6 Account Number	1.7 Completion Date	1.8 Price Limitation
(603) 434-1577 	05-95-42-423010-7927 102-500731	June 30, 2020	\$273,230
1.9 Contracting Officer for S Nathan D. White, Director	State Agency	1.10 State Agency Telephor (603) 271-9631	ne Number
1.11 Contractor Signature	<u> </u>	1.12 Name and Title of Co	nirector Signatory
this Va	no	Vic TOPO, president/ce.z	
1.13 Acknowledgement: St	ale of New Hamph County of K	Rockingham	
on 5/28/19 bel	fore the undersigned officer, persons e name is signed in block 1,11, and	illy appeared the nerron identific	ed in block 1.12, or satisfactorily d this document in the capacity
1.13.1 Signature of Notary P	in Bland	Smile	BICHAUD, Notery Public of Now Maincence in Expired August 23, 2022
1.13.2 Name and Title office	hand Her	Uministrator	`
.14 State Agency Stanature	Date: 5124116	Name and Title of State	anantal Director
.16 Approval by the NH. D	epartment of Administration, Divisi	on of Personnel (if applicable)	MINISTER WHE ! DISTANCE!
By: Director, On:			
.17 Approval by the Astorne	cy General (Form, Substance and Ex	ecution) (if applicable)	<del></del>
ву:	Leeso	On: 6/4/2019	
.18 Approval by the Govern	or and Executive Council (if applic	able)	
Ву:		On:	

2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED. The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

#### 3. EFFECTIVE DATE/COMPLETION OF SERVICES.

- 3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").
- 3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.
- 4. CONDITIONAL NATURE OF AGREEMENT. Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

#### 5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference. 5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract

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

#### 6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws. 6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination. 6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (4) 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

Page 2 of 4

Contractor Initials

Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

### 8. EVENT OF DEFAULT/REMEDIES.

- 8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):
- 8.1.1 failure to perform the Services satisfactorily or on schedule:
- 8.1.2 failure to submit any report required hereunder; and/or 8.1.3 failure to perform any other covenant, term or condition of this Agreement.
- 8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions: 8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;
- 8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;
- 8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or
- 8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both:

### 9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

- 9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.
- 9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.
- 9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

- 10. TERMINATION. In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.
- 11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.
- 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS. The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written
- 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.

notice and consent of the State.

- 14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignce to obtain and maintain in force, the following insurance:
- 14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000per occurrence and \$2,000,000 aggregate; and
- 14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

  14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

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Contractor Initials

Date

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

### 15. WORKERS' COMPENSATION.

- 15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("Workers' Compensation").
- 15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.
- 16. WAIVER OF BREACH. No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.
- 17. NOTICE. Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.
- 18. AMENDMENT. This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no

such approval is required under the circumstances pursuant to State law, rule or policy.

- 19. CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
- 20. TEIRD 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
Date Date

### Exhibit A



### SCOPE OF SERVICES

### Permanent Housing Program

### 1. Provisions Applicable to All Services

1.1. The Contractor shall submit a detailed description of the language assistance services they will provided to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date; submitted to:

NH DHHS Bureau of Housing Supports (BHS) 129 Pleasant Street Concord, NH 03301

- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the services described herein, the State, through the Bureau of Housing Supports, has the right to modify service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. Notwithstanding any provisions of this Agreement to the contrary, all obligations of the State are contingent upon receipt of federal funds under the Continuum of Care (CoC) Grant. The State, as the Collaborative Applicant for the Balance of State CoC, and/or, the recipient of the CoC funding, has applied for the CoC Grant and will continue to perform due diligence in the application process. However, the State makes no representation that it will receive the funds. In no event shall the State be liable for costs incurred or payment of any services performed by the Contractor prior to the State's receipt of federal funds applied for in the CoC Grant.
- 1.4. For the purposes of this agreement, the Department has identified the Contractor as a subrecipient, in accordance with 2 CFR 200.0, et.seq.
- 1.5. Notwithstending the confidentiality procedures established under 24 CFR Part 578.103(b). US Department of Housing and Urban Development (HUD), the HUD Office of the Inspector General, and the Comptroller General of the United States, or any of their authorized representatives, must have the right of access to all books, documents, papers, or other records of the Contractor that are pertinent to the CoC grant, in order to make audits, examinations, excerpts, and transcripts. These rights of access are not limited to the required retention period, but last as long as the records are retained.
- 1.6. The Contractor shall maintain adherence to federal and state financial and confidentiality laws, and agrees to comply with the program narratives, budget detail and narrative, and amendments thereto, as detailed in the 2017 Notice of Funding Available (NOFA) CoC Project Application approved by HUD.
- 1.7. The Contractor shall provide services according to HUD regulations outlined in Public Law 102-550 and 24 CFR Part 578: CoC Program and other written, appropriate HUD policies/directives.
- 1.8. All programs shall be licensed to provide client level data into the New Hampshire Homeless Management Information System (NH HMIS). Programs shall follow NH HMIS policy, including specific information required for data entry, accuracy of data entered, and time required for data entry. Refer to Exhibit K for Information Security requirements and Exhibit I for Privacy requirements.
- 1.9. The Contractor shall cooperate fully with and answer all questions, related to this contract, of representatives of the State or Federal agencies who may conduct a periodic review of performance or an inspection of records.

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### Exhibit A

1.10. The Contractor shall support the primary goal of this program which is to facilitate the movement of homeless and chronically homeless individuals and families to permanent housing and maximum self-sufficiency.

### 2. Scope of Services

- 2.1. The Contractor shall implement a Coordinated Entry System (CES) for all projects funded by the CoC Program, Emergency Solutions Grants (ESG) Program, and Housing Opportunities for Persons with AIDS (HOPWA) Program, in accordance with CoC interim rule, 24 CFR Part 578.
- 2.2. The Contractor shall provide a Permanent Housing program serving approximately twenty (20) homeless individuals experiencing mental health and or substance abuse issues to reside in scattered site apartments within Western Rockingham County, NH., and which includes, but is not limited to:
- 2.2.1. Utilization of the "Housing First" model, ensuring barriers to entering housing are not imposed beyond those required by regulation or statute, and will only terminate project participation for the most severe reasons, once available options have been exhausted to help a participant maintain housing.
- 2.2.2. The development of a stabilization plan and crisis management plan with the participant, at intake and, at a minimum, annually. An ongoing Assessment of Housing and Supportive Services is required, with the ultimate goal being assistance to the participant in obtaining the skills necessary to live in the community independently.
- 2.3. The Contractor shall establish and maintain standard operating procedures to ensure CoC program funds are used in accordance with 24 CFR 578 and must establish and maintain sufficient records to enable HUD and BHS to determine Contractor requirement compliance, including:
  - 2.3.1. Continuum of Care Records: The Contractor shall maintain the following documentation related to establishing and operating a CoC:
    - 2.3.1.1. <u>Records of Homeless-Status</u>. The Contractor shall maintain acceptable evidence of homeless status in accordance with 24 CFR 576.500(b).
    - 2.3.1.2. Records of at Risk of Homelessness Status: The Contractor shall maintain records that establish "at risk of homelessness" status of each individual or family who receives CoC homelessness prevention assistance, as identified in 24 CFR 576.500(c).
    - 2.3.1.3. Records of Reasonable Belief of Imminent Threat of Harm. The Contractor shall maintain documentation of each program participant who moved to a different CoC due to imminent threat of further domestic violence, dating violence, sexual assault, or stalking, as defined in 24 CFR 578.51(c)(3). The Contractor shall retain documentation that includes, but is not limited to:
      - 2.3.1.3.1 The original incidence of domestic violence, dating violence, sexual assault, or stalking, only if the original violence is not already documented in the program participant's case file. This may be written observation of the housing or service provider; a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom the victim has sought assistance; medical or dental records; court records or law enforcement records; or written certification by the program participant to whom the violence occurred or by the head of household.

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### Exhibit A

- 2.3.1.3.2 The reasonable belief of imminent threat of further domestic violence, dating violence, or sexual assault or stalking, which would include threats from a third-party, such as a friend or family member of the perpetrator of the violence. This may be written observation by the housing or service provider; a letter or other documentation from a victim service provider, social worker, legal assistance provider, pastoral counselor, mental health provider, or other professional from whom the victim has sought assistance; current restraining order; recent court order or other court records; law enforcement report or records; communication records from the perpetrator of the violence or family members or friends of the perpetrator of the violence, including emails, volcemails, text messages, and social media posts; or a written certification by the program participant to whom the violence occurred or the head of household.
- 2.3.1.4. Records of Annual Income. For each program participant who receives housing assistance where rent or an occupancy charge is paid by the program participant, the Contractor must keep the following documentation of annual income:
  - 2.3.1.4.1. Income evaluation form specified by HUD and completed by the Contractor; and
  - 2.3.1.4.2. Source documents (e.g., most recent wage statement, unemployment compensation statement, public benefits statement, bank statement) for the assets held by the program participant and income received before the date of the evaluation;
  - 2.3.1.4.3. To the extent that source documents are unobtainable, a written statement by a relevant third party (é.g., employer, government benefits administrator) or the written certification by the Contractor's intake staff of the oral verification by the relevant third party of the Income the program participant received over the most recent period; or
  - 2.3.1.4.4. To the extent that source documents and third-party verification are unobtainable, the written certification by the program participant of the amount of income that the program participant is reasonably expected to receive over the three (3) month period following the evaluation.
- 2.3.1.5. <u>Program Participant Records.</u> In addition to evidence of homelessness status or at-risk-of-homelessness status, as applicable, the Contractor must keep records for each program participant that document:
  - 2.3.1.5.1. The services and assistance provided to that program participant, including evidence that the Contractor has conducted an annual assessment of services for those program participants that remain in the program for more than a year and adjusted the service package accordingly, and including case management services as provided in 24 CFR 578.37(a)(1)(ii)(F); and
  - 2.3.1.5.2. Where applicable, compliance with the termination of assistance requirement in 24 CFR 578.91.
- 2.3.1.6. <u>Housing Standards</u>. The Contractor must retain documentation of compliance with the housing standards in 24 CFR 578.75(b), including inspection reports.
- 2.3.1.7. <u>Services Provided.</u> The Contractor must document the types of supportive services provided under the Contractor's program and the amounts spent on those services. The Contractor must keep documentation that these records were reviewed at least annually and that the service package offered to program participants was adjusted as necessary.
- 2.4. The Contractor shall maintain records that document compliance with:
  - 2.4.1. The Organizational conflict-of-interest requirements in 24 CFR 578.95(c).

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### Exhibit A

- 2.4.2. The Continuum of Care Board conflict-of-Interest requirements in 24 CFR 578.95(b).
- 2.4.3. The Other Conflicts requirements in 24 CFR 578.95(d).
- 2.5. The Contractor shall develop, implement and retain a copy of the personal conflict-of-interest policy that complies with the requirements in 24 CFR 578.95, including records supporting any exceptions to the personal conflict-of-interest prohibitions.
- 2.6. The Contractor shall comply and retain documentation of compliance with:
  - 2:6.1. The Homeless Participation requirements in accordance with 24 CFR 578.75(g).
  - 2.6.2. The Faith-based Activities requirements in accordance with 24 CFR 578.87(b).
  - 2.6.3. <u>Affirmatively Furthering Fair Housing</u> by maintaining copies of all marketing, outreach, and other materials used to inform eligible persons of the program in accordance with 24 CFR 578.93(c).
  - 2.6:4. Other Federal Requirements in 24 CFR 578.99, as applicable.
  - 2.6.5. Other Records Specified by HUD. The Contractor must keep other records as specified by HUD.
  - 2.6.6. The Contractor must retain copies of all procurement contracts and documentation of compliance with the <u>Procurement Requirements</u> in 24 CFR 85.36 and 24 CFR part 84.
- 2.7. <u>Confidentiality.</u> In addition to meeting the specific confidentiality and security requirements for HMIS data (76 FR 76917), the Contractor shall develop and implement written procedures to ensure:
  - 2.7.1. All records containing protected identifying information of any individual or family who applies for and/or receives Continuum of Care assistance shall be kept secure and confidential as required by this Agreement and state and federal laws and regulations;
  - 2.7.2. The address or location of any family violence project assisted with Continuum of Care funds shall not be made public, except with written authorization of the person responsible for the operation of the project; and
  - 2.7.3. The address or location of any housing of a program participant will not be made public, except as provided under a preexisting privacy policy of the recipient or subrecipient and consistent with State and local laws regarding privacy and obligations of confidentiality;
- 2.8. <u>Period of Record Retention.</u> The Contractor shall ensure all records, originals or copies made by microfilming, photocopying, or other similar methods, pertaining to Continuum of Care funds are retained for five (5) years following the Contract Completion Date and receipt of final payment by the Contractor unless records are otherwise required to be maintained for a period in excess of the five (5) year period according to state or federal law or regulation.

### 3. Program Reporting Requirements

- 3.1. The Contractor shall submit the following reports:
  - 3.1.1. Annual Performance Report (APR): Within thirty (30) days after the Contract Completion Date, an APR shall be submitted to BHS that summarizes the aggregate results of the Project Activities, showing in particular how the Contractor is carrying out the project in the manner proposed in the application submitted to HUD for the relevant fiscal year Notice of Funding Availability (NOFA). The APR shall be in the form required or specified by the State, and submitted to the address listed in section 1.1. Exhibit A; and

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### Exhibit A

3.1.2. Other Reports as requested by the State in compliance with NH HMIS policy.

### 4. Contract Administration

- 4.1. The Contractor shall have appropriate levels of staff to attend all meetings or trainings requested by BHS, including training in data security and confidentiality, according to state and federal laws. To the extent possible, BHS shall notify the Contractor of the need to attend such meetings five (5) working days in advance of each meeting.
- 4.2. The Contractor shall inform BHS of any staffing changes within thirty (30) days of the change.

### 5. Performance Measures

- 5.1. The Contractor shall adhere to all terms and conditions as set forth in the HUD New Project Application, federal fiscal year 2018, #SF-424; and
  - 5.1.1. The Contractor shall abide by the performance measures as detailed in all applicable HUD regulations including, but not limited to, those outlined in 24 CFR Part 578: Continuum of Care Program and Public Law 102-550.
- 5.1.2. The Contractor shall be accountable to all performance measures as detailed in the Annual Performance Report Section 3.1.1. Exhibit A.
- 5.2. The Bureau Administrator of BHS, or designee, may observe performance, activities and documents under this Agreement.

### 6. Deliverables.

- 6.1. The Contractor shall implement a Coordinated Entry System, as detailed in Section 2.1. Exhibit A, in accordance with the CoC Program interim rule; 24 CFR Part 578 and as amended.
- 6.2. The Contractor shall provide a Permanent Supportive Housing program as outlined in Section 2.2. Exhibit A and as outlined in other written HUD policies and directives as appropriate.
  - 6.2.1. Project outcomes shall include, but are not limited to:
    - 6.2.1.1. Participants exit homelessness faster, and once housed, remain stably housed.
    - 6.2.1.2. Participants experience increased connections to:
      - 6.2.1.2.1. Mainstream benefit resources; employment and/or-vocational rehab referrals;
      - 6.2.1.2.2. Mental health and/or substance abuse service access and referrals; and
      - 6.2.1.2.3. Service Coordination Partners for educational, vocational, employment and health needs.
- 6.3. The Contractor shall provide accurate and timely reporting as detailed in Section 3., Program Reporting Requirements, Exhibit A.

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Exhibit A

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Exhibit B

### METHOD AND CONDITIONS PRECEDENT TO PAYMENT

### 1. <u>Permanent Housing Program Funding</u>

- 1.1. Subject to the General Provisions of this Agreement and in consideration of the satisfactory completion of the services to be performed under this Agreement pursuant to Exhibit A; Scope of Services, the State agrees to pay the Contractor an amount not to exceed Form P-37, Block 1.8, Price Limitation and for the time period specified below.
- 1.2. This Agreement is funded by the New Hampshire General Fund and/or by federal funds made evallable under the Catalog of Federal Domestic Assistance (CFDA), as follows:

1.2.1. NH General Fund:

0%

1.2.2. Federal Funds:

100%

1.2.3. CFDA #:

14.267

1.2.4. Grant Number: \*\*

NH0014L1T001811

1.2.5. Federal Agency:

U.S. Department of Housing & Urban Development (HUD)

1.2.6. Program Title:

Continuum of Care, Permanent Supportive Housing

1.2.7. Total Amount Continuum of Care;

1.2.7.1. not to exceed \$273,230

1.2.8. Funds allocation under this agreement for Continuum of Care Program;

1.2.8.1. Rental Assistance:

\$221,592

1.2.8.2. Supportive Services:

\$45,000

1.2.8.2.1

Mental Health Services

\$39,600

1.2.8.2.2

Outreach

\$5,400

1.2.8.3. Administrative Expenses:

\$6,638

1.2.8.4. Total program amount:

\$273,230

1.2.8.5. Vendor Match (25%)

\$69,967

1.3. The Contractor agrees to provide the services in Exhibit A, Scope of Service in compliance with funding requirements. Fallure to meet the Scope of Services may jeopardize the Contractor's current and/or future funding.

### 2. Financial Reports

- 2.1. As part of the performance of the Project Activities, the Contractor covenants and agrees to submit the following:
  - 2.1.1. Audited Financial Report: The Audited Financial Report shall be prepared in accordance with 2 CFR part 200.
  - 2.1.2. One (1) copy of the audited financial report within thirty (30) days of the completion of said report to the State at the following address:

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Exhibit B

NH DHHS
Bureau of Housing Supports
129 Pleasant Street
Concord, NH 03301

- 2.2. Conformance to 2 CFR part 200: Grant funds are to be used only in accordance with procedures, requirements, and principles specified in 2 CFR part 200.
- 2.3. If the Contractor is not subject to the requirements of 2 CFR part 200, the Contractor shall submit one (1) copy of an audited financial report to the Department utilizing the guidelines set forth by the Comptroller General of the United States in "Standards for Audit of Governmental Organizations, Program Activities, and Functions," within ninety (90) days after Contract/Grant completion date.

### 3. Project Costs: Payment Schedule; Review by the State

- 3.1. Project Costs: As used in this Agreement, the term "Project Costs" shall mean all expenses directly or indirectly incurred by the Contractor in the performance of the Project Activities, as determined by the State to be eligible and allowable for payment in accordance with Public Law 102-550 as well as allowable cost standards set forth in 2 CFR part 200 as revised from time to time and with the rules, regulations, and guidelines established by the State. Nonprofit subcontractors shall meet the requirements of 2 CFR part 200.
- 3.2. Continuum of Care funds may be used to pay for eligible costs listed in 24 CFR 578.39 through 578.63 when used to establish and operate projects under five program components: permanent housing; transitional housing; supportive services only; HMIS; and, in some cases, homeless prevention. Administrative costs are eligible for all components. All components are subject to the restrictions on combining funds for certain eligible activities in a single project found in 24 CFR 578.87(c).

### 3.3. Match Funds;

- 3.3.1. The Contractor shall provide sufficient matching funds, as required by HUD regulations and policies described in 24 CFR 578.73.
- 3.3.2. Match requirements are to be documented with each payment request:
- 3.3.3. The Contractor must match all grant funds, except for leasing funds, with no less than twenty-five (25) percent of funds or in-kind contributions from other sources. Cash match must be used for the cost of activities that are eligible under subpart D of 24 CFR 578. The Contractor shall:
  - 3.3.3.1. Maintain records of the source and use of contributions made to satisfy the match requirement in 24 CFR 578.73;
  - 3.3.3.2. Ensure records indicate the grant and fiscal year for which each matching contribution is counted;
  - 3.3.3.3. Ensure records include methodologies that specify how the values of third party in-kind contributions were derived; and
  - 3.3.3.4. Ensure records include, to the extent feasible, volunteer services that are supported by the same methods used to support the allocation of regular personnel costs.

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### Exhibit B

### 3.4. Payment of Project Costs:

- 3.4.1. The State agrees to provide payment on a cost reimbursement basis for actual, eligible expenditures incurred in the fulfillment of this Agreement, subject to the availability of sufficient funds.
- 3.4.2. The Contractor shall only be reimbursed for those costs designated as eligible and allowable costs as stated in Section 5. Expense Eligibility, Exhibit B. The Contractor must have written approval from the State prior to billing for any other expenses.
- 3.4.3. Eligible expenditures shall be in accordance with the approved line item not to exceed an amount as specified in this Exhibit, and defined by HUD under the provisions of Public Law 102-550 and other applicable regulations.
- 3.4.4. Payment of Project Costs shall be made through the utilization of funds as provided through the U.S. Department of Housing and Urban Development Title XIV Housing programs under the Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act), Subtitle A-Housing Assistance (Public Law 102-550), in an amount and time period not to exceed as specified in Section 1.2. Exhibit B.

### 3.4.5. Schedule of Payments:

- 3.4.5.1. All reimbursement requests for all Project Costs, including the final reimbursement request for this Contract, shall be submitted by the tenth (10th) day of each month, for the previous month, and accompanied by an invoice from the Contractor for the amount of each requested disbursement along with a payment request form and any other documentation required, as designated by the State, which shall be completed and signed by the Contractor.
- 3.4.5.2. In lieu of hard copies submitted to the address listed in Section 2.1.2. Exhibit B., all invoices may be assigned an electronic signature and emailed to:

housingsupportsinvaices@dhhs.nh.gov

3.4.5.3. The Contractor shall keep records of their activities related to Department programs and services, and shall provide such records and any additional financial information if requested by the State to verify expenses.

### 3.5. Review of the State Disallowance of Costs:

- 3.5.1. At any time during the performance of the Services, and upon receipt of the Annual Performance Report, Termination Report or Audited Financial Report, the State may review all Project Costs incurred by the Contractor and all payments made to date.
- 3.5.2. Upon such review, the State shall disallow any items or expenses that are not determined to be allowable or are determined to be in excess of actual expenditures, and shall, by written notice specifying the disallowed expenditures, inform the Contractor of any such disallowance.
- 3.5.3. If the State disallows costs for which payment has not yet been made, it shall refuse to pay such costs. Any amounts awarded to the Contractor pursuant to this Agreement are subject to recapture.
  - 3.5.4. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Agreement may be withheld, in whole or in part, in the event of non-compliance with

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### Exhibit B

any Federal or State law, rule or regulation applicable to the services provided, or if the said services, products, required report submissions, as detailed in Exhibits A and B, or NH-HMIS data entry requirements have not been satisfactorily completed in accordance with the terms and conditions of this Agreement.

### 4. Use of Grant Funds

4.1. Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made through the Budget Office without obtaining approval of the Governor and Executive Council if needed and justified.

### 5. Expense Eligibility

5.1. Based on the continued receipt/availability of federal funds, the Contractor shall utilize Continuum of Care program funds specified in this Exhibit B from the HUD Continuum of Care Program, for contract services.

### 5.2. Operating Expenses:

- 5.2.1. Eligible operating expenses include:
  - 5.2.1.1. Maintenance and repair of housing;
    - 5.2.1.2. Property taxes and insurance (including property and car):
    - 5.2.1.3. Scheduled payments to reserve for replacement of major systems of the housing (provided that the payments must be based on the useful life of the system and expected replacement cost);
    - 5.2.1.4. Building security for a structure where more than fifty (50) percent of the units or area is paid for with grant funds;
    - 5.2.1.5. Utilities, including electricity, gas and water; and
    - 5.2.1.6. Furniture and equipment.
- 5.2.2. Ineligible costs include:
  - 5.2.2.1. Rental assistance and operating costs in the same project;
  - 5.2.2.2. Operating costs of emergency shelter and supportive service-only facilities; and
  - 5.2.2.3. Maintenance and repair of housing where the costs of maintaining and repairing the housing are included in the lease.

### 5.3. Supportive Services

- 5.3.1. Eligible supportive services costs must comply with all HUD regulations in 24 CFR 578.53, and are available to individuals actively participating in the permanent housing program.
- 5.3.2. Eligible costs shall include:
  - 5.3.2.1. Annual assessment of Service Needs. The costs of assessment required by 578.53(a) (2);

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### Exhibit B

- 5.3.2.2. Assistance with moving costs. Reasonable one-time moving costs are eligible and include truck rental and hiring a moving company;
- 5.3.2.3. Case management. The costs of assessing, arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant(s) are eligible costs:
- 5.3.2.4. Child Care. The costs of establishing and operating child care, and providing child-care vouchers, for children from families experiencing homelessness, including providing meals and snacks, and comprehensive and coordinated developmental activities are eligible;
- 5.3.2.5. Education Services. The costs of improving knowledge and basic educational skills are eligible;
- 5.3.2.6. Employment assistance and job training. The costs of establishing and operating employment assistance and job training programs are eligible, including classroom, online and/or computer instruction, on-the-job instruction, services that assist individuals in securing employment, acquiring learning skills, and/or increasing earning potential. The cost of providing reasonable stipends to program participants in employment assistance and job training programs is also an eligible cost:
- 5.3.2.7. Food. The cost of providing meals or groceries to program participants is eligible;
- 5.3.2.8. Housing search and counseling services. Costs of assisting eligible program participants to locate, obtain, and retain suitable housing are eligible;
- 5.3.2.9. Legal services. Eligible costs are the fees charged by licensed attorneys and by person(s) under the supervision of licensed attorneys, for advice and representation in matters that interfere with homeless individual or family's ability to obtain and retain housing;
- 5.3.2.10. Life Skills training. The costs of teaching critical life management skills that may never have been learned or have been lost during course of physical or mental illness, domestic violence, substance abuse, and homelessness are eligible. These services must be necessary to assist the program participant to function independently in the community. Component life skills training are the budgeting of resources and money management, household management, conflict management, shopping for food and other needed Items, nutrition, the use of public transportation, and parent training;
- 5.3.2.11. Mental Health Services. Eligible costs are the direct outpatient treatment of mental health conditions that are provided by licensed professionals. Component services are crisis interventions; counseling; individual, family, or group therapy sessions; the prescription of psychotropic medications or explanations about the use and management of medications; and combinations of therapeutic approaches to address multiple problems;
- 5.3.2.12. Outpatient health services. Eligible costs are the direct outpatient treatment of medical conditions when provided by licensed medical professionals;
- 5.3.2.13. Outreach Services. The costs of activities to engage persons for the purpose of providing Immediate support and intervention, as well as identifying potential program participants, are eligible;

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- 5.3.2.14. Substance abuse treatment services. The costs of program participant Intake and assessment, outpatient treatment, group and individual counseling, and drug testing are eligible. Inpatient detoxification and other inpatient drug or alcohol treatment are ineligible;
- 5.3.2.15. Transportation Services are described in 24CFR 578(e) (15);
- 5.3.2.16. Utility Deposits. This form of assistance consists of paying for utility deposits. Utility deposits must be one-time, paid to utility companies;
- 5.3.2.17. Direct provision of services. If the service described in 24CFR 578.53(e) (1) (16) of this section is being directly delivered by the recipient or subrecipient, eligible costs for those services are described in 24 CFR 578(e) (17):
- 5.3.2.18. Ineligible costs. Any cost not described as eligible costs under this section is not an eligible cost of providing supportive services using Continuum of Care program funds. Staff training and costs of obtaining professional licensure or certifications needed to provide supportive services are not eligible costs; and
- 5.3.2.19. Special populations. All eligible costs are eligible to the same extent for program participants who are unaccompanied homeless youth; persons living with HIV/AIDS; and victims of domestic violence, dating violence, sexual assault, or stalking.

### 5.4. Rental Assistance

- 5.4.1. Grant funds may be used for rental assistance for homeless individuals and familles.
- 5.4.2. Rental assistance cannot be provided to a program participant who is already receiving rental assistance, or who is living in a housing unit receiving rental assistance or operating assistance through other federal, State, or local sources.
- 5.4.3. Rental assistance must be administered in accordance with the policies and procedures established by the Continuum as set forth in 24 CFR 578.7(a) (9) and 24 CFR 578.51, and may be:
  - 5.4.3.1. Short term, up to 3 months of rent;
  - 5.4.3.2. Medium term, for 3-24 months; or
  - 5.4.3.3. Long-term, for longer than 24 months.
- 5.4.4. Grant funds may be used for security deposits in an amount not to exceed 2 months of rent.
- 5.4.5. An advance payment of the last month's rent may be provided to the landlord, in addition to the security deposit and payment of first month's rent.
- 5.4.6. Rental assistance will only be provided for a unit if the rent is reasonable, as determined by the Contractor, in relation to rents being charged for comparable unassisted units, taking into account the location, size, type, quality, amenities, facilities, and management and maintenance of each unit.
- 5.4.7. The Contractor may use grant funds in an amount not to exceed one month's rent to pay for any damage to housing due to the action of a program participant. For Leasing funds only: Property damages may be paid only from funds paid to the landlord from security deposits.

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- 5.4.8. Housing must be in compliance with all State and local housing codes, licensing requirements, the Lead-Based Paint Poisoning Prevention Act, and any other requirements of the jurisdiction in which the housing is located regarding the condition of the structure and operation of the housing or services.
- 5.4.9. The Contractor must provide one of the following types of rental assistance: Tenant-based, Project-based, or Sponsor-based rental assistance as described in 24 CFR 578.51.
  - 5.4.9.1. Tenant-based rental assistance is rental assistance in which program participants choose housing of an appropriate size in which to reside. When necessary to facilitate the coordination of supportive services, recipients and subrecipients may require program participants to live in a specific area for their entire period of participation, or in a specific structure for the first year and in a specific area for the remainder of their period of participation. Short and medium term rental assistance provided under the Rapid Re-Housing program component must be tenant based rental assistance.
  - 5.4.9.2. Sponsor-based rental assistance is provided through contracts between the reciplent and sponsor organization. A sponsor may be a private, nonprofit organization, or a community mental health agency established as a public nonprofit organization. Program participants must reside in housing owned or leased by the sponsor.
  - 5.4.9.3. Project-based rental assistance is provided through a contract with the owner of an existing structure, where the owner agrees to lease the subsidized units to program participants. Program participants will not retain rental assistance if they move.
  - 5.4.9.4. For project-based, sponsor-based, or tenant-based rental assistance, program participants must enter into a lease agreement for a term of at least one year, which is terminable for cause. The leases must be automatically renewable upon expiration for terms that are a minimum of one month long, except on prior notice by either party.

### 5.5. Administrative Costs:

- 5.5.1. Eligible administrative costs include:
  - 5.5.1.1. The Contractor may use funding awarded under this part, for the payment of project administrative costs related to the planning and execution of Continuum of Care activities. This does not include staff and overhead costs directly related to carrying out activities eligible under 24 CFR 578.43 through 578.57, because those costs are eligible as part of those activities; and
  - 5.5.1.2. General management, oversight, and coordination. Costs of overall program management, coordination, monitoring and evaluation. These costs include, but are not limited to, necessary expenditures for the following:
    - 5.5.1.2.1. Salaries, wages, and related costs of the staff of the contractor's, or other staff engage in program administration.
      - 5.5.1.2.1.1. In charging costs to this category, the contractor may include the entire salary, wages, and related costs allocable to the program of each person whose primary responsibilities with regard to the program, Involve program administration assignments, or the pro rata share of the salary,

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wages, and related costs of each person whose job includes any program administration assignments. The Contractor may only use one of these methods for each fiscal year grant. Program administration assignments include the following:

- 5.5.1.2.1.1.1. Preparing program budgets and schedules, and amendments to those budgets and schedules;
- 5.5.1.2.1.1.2. Developing systems for assuring compliance requirements;
- 5.5,1.2.1,1.3. Developing Interagency agreements and agreements with subrecipients and contractors to carry out program activities;
- 5.5.1.2.1.1.4. Monitoring program activities for progress and compliance with program requirements;
- Preparing reports and other documents related to the program for 5.5.1.2.1.1.5. submission to HUD;
- 5.5.1.2.1.1.6. Coordinating the solution of audit and monitoring findings;
- 5.5.1.2.1.1.7. Preparing reports and other documents directly related to the program submission to HUD:
- 5.5.1.2.1.1.8. Evaluating program results against stated objectives;
- 5.5.1.2.1.1.9. Managing or supervising persons whose primary responsibilities with regard to the program include such assignments as those described in sections 5.5.1.2.1.1.1. through 5.5.1.2.1.1.8. above, Exhibit B.
- 5.5.1.2.1.1.10. Travel costs incurred for official business in carrying out the program;
- 5.5.1.2.1.1.11. Administrative services performed under third party contracts or agreements, including such services as géneral legal services, accounting services, and audit services;
- 5.5.1.2.1.1.12. Other costs for goods and services required for administration of the program, including such goods and services as rental or purchase of equipment, Insurance, utilities, office supplies, and rental and maintenance, but not purchase, of office space;
- 5.5.1.2.1.1.13. Training on Continuum of Care requirements. Costs of providing training on Continuum of Care requirements and attending HUD-Sponsored Continuum of Care trainings; and
- 5.5.1.2.1.1.14. Environmental review. Costs of carrying out the environmental review responsibilities under 24 CFR 578.31.

### 5.6. Leasing:

When the Contractor is leasing the structure, or portions thereof, grant funds may be used to pay for 100 percent of the costs of leasing a structure or structures, or portions thereof. to provide housing or supportive services to homeless persons for up to three (3) years. Leasing funds may not be used to lease units or structures owned by the Contractor, their parent organization, any other related organization(s), or organizations that are members

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of a partnership, where the partnership owns the structure, unless HUD authorized an exception for good cause.

### . 5.6.1. Requirements:

- 5.6.1.1. Leasing structures. When grants are used to pay rent for all or part of a structure or structures, the rent paid must be reasonable in relation to rents being charged in the area for comparable space. In addition, the rent paid may not exceed rents currently being charged by the same owner for comparable unassisted space.
- 5.6.1.2. Leasing individual units. When the grants are used to pay rent for individual housing units, the rent paid must reasonable in relation to rents being charged for comparable units, taking into account the location, size, type, quality, emenities, facilities, and management services. In addition, the rents may not exceed rents currently being charged for comparable units, and the rent paid may not exceed HUD-determined fair market rents.
- 5.6.1.3. Utilities. If electricity, gas, and water are included in the rent, these utilities may be paid from leasing funds. If utilities are not provided by landlord, these utility costs are operating costs, except for supportive service facilities. If the structure is being used as a supportive service facility, then these utility costs are a supportive service cost.
- 5.6.1.4. Security deposits and first and last month's rent. The Contractor may use grant funds to pay security deposits, in an amount not to exceed 2 months of actual rent. An advance payment of last month's rent may be provided to the landlord in addition to security deposit and payment of the first month's rent.
- 5.6.1.5. Occupancy agreements and subleases. Occupancy agreements and subleases are required as specified in 24 CFR 578.77(a).
- 5.6.1.6. Calculation of occupancy charges and rent. Occupancy charges and rent from program participants must be calculated as provided in 24 CFR 578.77.
- 5.6.1.7. Program income Occupancy charges and rent collected from program participants are program income and may be used as provided under 24 CFR 578.97.
- 5.6.1.8. Transition. Refer to 24CFR 578.49(b)(8)
- 5.6.1.9. Rent paid may only reflect actual costs and must be reasonable in comparison to rents charged in the area for similar housing units. Documentation of rent reasonableness must be kept on file by the Contractor.
- 5.6.1.10. The portion of rent paid with grant funds may not exceed HUD-determined fair market rents.
- 5.6.1.11. The Contractor shall pay individual landlords directly; funds may not be given directly to participants to pay leasing costs.
- 5.6.1.12. Property damages may only be paid from money paid to the landlord for security deposits.
- 5.6.1.13. The Contractor cannot lease a building that it already owns to itself.
- 5.6.1.14. Housing must be in compliance with all State and local housing codes, licensing requirements, the Lead-Based Paint Poisoning Prevention Act, and any offer

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requirements of the jurisdiction in which the housing is located regarding the condition of the structure and operation of the housing or services.

- 5.7. The Contractor may charge program participants rent and utilities (heat, hot water); however, the amount charged may not exceed the maximum amounts specified in HUD regulations (24 CFR 578.77). Other services such as cable, air conditioning, telephone, Internet access, cleaning, parking, pool charges, etc. are at the participant's option.
- 5.8. The Contractor shall have any staff charged in full or part to this Contract, or counted as match, complete weekly or bi-weekly timesheets.

### 6. Contractor Financial Management System

- 6.1. Fiscal Control: The Contractor shall establish fiscal control and fund accounting procedures which assure proper disbursement of, and accounting for, grant funds and any required nonfederal expenditures. This responsibility applies to funds disbursed in direct operations of the Contractor.
- 6.2. The Contractor shall maintain a financial management system that complies with 2 CFR part 200 or such equivalent system as the State may require.

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### 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 eforesaid covenants, the Contractor hereby covenants and agrees as follows:

- Compliance with Foderal 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 afair 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;

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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 shallnot 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.

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Notwithstanding anything to the contrary contained herein the covenants and conditions contained in the Paragraph shall survive the termination of the Contract for any reason whatsoever.

- 11. Reports: Fiscal and Statistical: The Contractor agrees to submit the following reports at the following times if requested by the Department.
  - 11.1. Interim Financial Reports: Written interim financial reports containing a detailed description of all costs and non-allowable expenses incurred by the Contractor to the date of the report and containing such other information as shall be deemed satisfactory by the Department to justify the rate of payment hereunder. Such Financial Reports shall be submitted on the form designated by the Department or deemed satisfactory by the Department.
  - 11.2. Final Report: A final report shall be submitted within thirty (30) days after the end of the term of this Contract. The Final Report shall be in a form satisfactory to the Department and shall contain a summary statement of progress toward goals and objectives stated in the Proposal and other information required by the Department.
- 12. Completion of Services: Disallowance of Costs: Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.
- 13. Credits: All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include thefollowing statement:
  - 13.1. The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in particular by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.
- 14. Prior Approval and Copyright Ownership: All materials (written, video, audio) produced or purchased under the contract shall have prior approval from DHHS before printing, production, distribution or use. The DHHS will retain copyright ownership for any and all original materials produced, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports. Contractor shall not reproduce any materials produced under the contract without prior written approval from DHHS.
- 15. Operation of Facilities: Compliance with Laws and Regulations: in the operation of any facilities for providing services, the Contractor shall comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which shall impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit shall be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Contract the facilities shall comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.
- 16. Equal Employment Opportunity Plan (EEOP): The Contractor will provide an Equal Employment Opportunity Plan (EEOP) to the Office for Civil Rights, Office of Justice Programs (OCR), if it has received a single award of \$500,000 or more. If the recipient receives \$25,000 or more and has 50 or

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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.
- 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 whistlablower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.
- (c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.
- 19. Subcontractors: DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.

When the Contractor delegates a function to a subcontractor, the Contractor shall do the following:

- 19.1. Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
- 19.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate
- 19.3. Monitor the subcontractor's performance on an ongoing basis

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- 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.

#### 20. Contract Definitions:

- 20.1. 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.
- 20.2. DEPARTMENT: NH Department of Health and Human Services.
- 20.3. 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 and/or goods to be provided 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.
- 20.4. 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.
- 20.5. 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 time to time.
- 20.6. SUPPLANTING OTHER FEDERAL FUNDS: Funds provided to the Contractor under this Contract will not supplant any existing federal funds available for these services.

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### **REVISIONS TO STANDARD CONTRACT LANGUAGE**

### 1. Revisions to Form P-37, General Provisions

1.1. Section 4, Conditional Nature of Agreement, is replaced as follows:

### 4. CONDITIONAL NATURE OF AGREEMENT.

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including without limitation, the continuance of payments, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability of funds affected by any state or federal legislative or executive action that reduces, eliminates, or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope of Services provided in Exhibit A, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account in the event funds are reduced or unavailable.

- 1.2. Section 10, <u>Termination</u>, 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.

#### 2. Ronowal

2.1. The Department reserves the right to extend this agreement for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, written agreement of the parties and approval of the Governor and Executive Council.

Exhibit C-1 - Revisions/Exceptions to Standard Contract Language Contractor Initials

Page 1 of 1



### CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Vendor 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 5151-5180 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 sward, 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 fleu 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.

**>** 

Vendor Initials

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



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 meintain 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 II if there are workplaces on file that are not identified here.

Vendor Namé:

Name: VIC TOP

Title:

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

CUIOHHS/110713



### **CERTIFICATION REGARDING LOBBYING**

The Vendor 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 \*Medicald 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 of 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-L)
- 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.

Vandor Name

Exhibit E - Certification Regarding Lobbying

CU/DHe/S/110713

Page 1 of 1



## CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

The Vendor 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, fallure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- 3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.
- 4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverege 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).
- 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



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 voluntarity excluded from covered transactions by any Federal department or agency.
  - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity. (Federal, State or local) with commission of any of the offenses enumerated in paragraph (I)(b) of this certification; and
  - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal; State or local) terminated for cause or default.
- 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 voluntarity 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.

Vendor Name

Date

Name: Vic Topo

Vendor Initials

Exhibit F - Certification Regarding Debarment, Suspension And Other Responsibility Matters Page 2 of 2

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### CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND WHISTLEBLOWER PROTECTIONS

The Vendor 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:

Vendor 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 essistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;
- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment. State and local government services, public accommodations, commercial facilities, and transportation;
- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;
- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;
- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations - Nondiscrimination, Equal Employment Opportunity, Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;
- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

Exhibit G

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**€**27/14 Rev. 10/21/14

Page 1 of 2



In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Vendor 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 Vendor agrees to comply with the provisions indicated above.

Vendor Name:

Tale:

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Exhibit G

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Page 2 of 2

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### 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 Medicald funds, and portions of facilities used for inpatient drug or alcohol treatment. Fallure 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 antity.

The Vendor 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:

 By signing and submitting this contract, the Vendor 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.

Vendor Name:

Name: V

Title of y oras

Eichbit H - Certification Regarding Environmental Tobacco Smoke Page 1 of 1 Vendor Initials \_\_\_

Date 128

CU/DH0-S/110713

### HEALTH INSURANCE PORTABLITY ACT BUSINESS ASSOCIATE AGREEMENT

The Vendor 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 Vendor and subcontractors and agents of the Vendor 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: "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
- b. "Business Associate" has the meaning given such term in section 160,103 of Title 45, Code of Federal Regulations.
- c. \*Covered Entity\* has the meaning given such term in section 160.103 of Title 45. Code of Federal Regulations.
- d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. "<u>Data Aggregation</u>" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 184.501.
- g. "HITECH Act" 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. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity:

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Exhibit I Health Insurance Portability Act Business Associate Agreement Page 1 of 6

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#### Exhibiti

- "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.
- m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.
- n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.
- o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.
- 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

Vendor Initiats

Exhibit I
Health Insurance Portability Act
Business Associate Agreement
Page 2 of 6

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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

Exhibit I
Health Insurance Portability Act
Business Associate Agreement
Page 3 of 6

Vendor Initials

3/2014



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.
- 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

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Exhibit 1
Health Insurance Portability Act
Business Associate Agreement
Page 4 of 6

Vendor Initials

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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.

### (6) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may Immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

### (6) Miscellaneous

- a. <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.

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Exhibit I Health Insurance Portability Act Business Associate Agreement Page 5 of 6 Vendor Initials \_

Date V 28

#### Exhibit I

- 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.				
Department of Health and Human Services	Name of the Vendor Life mention	(H)		
The State	_ Name of the Vehiclor	V		
Signature of Authorized Representative	Un Uspa			
Signature of Authorized Representative	Signature of Authorized Representative	•		
Christon-Burkang MD	Vie topo			
Name of Authorized Representative	Name of Authorized Representative			
Driegher Dr. HS	Prisipent/ceo			
Title of Authorized Representative	Title of Authorized Representative			
519617.15	1/28/19			
Date	Date /			

3/2014

Exhibit I Health Insurance Portability Act Business Associate Agreement Page 6 of 5 Vendor Initials Date



### 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
- Program source
- 8. Award title descriptive of the purpose of the funding action
- Location of the entity.
- B. Principle place of performance
- B. 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 emendment is made.

The Vendor 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 Vendor 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.

Vendor Name:

Name:

Title RESTACET/CE

Exhibit J – Certification Regarding the Federal Funding Accountability And Transparency Act (FFATA) Compilance Page 1 of 2 endor initials \_\_

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#### FORM A

As the Vendor identified in Section 1.3 of the	General Provisions, I certify that the responses to the
below listed questions are true and accurate.	

	As the Vendor identified in Section 1.3 of the General Problem listed questions are true and accurate.	
1.	1. The DUNS number for your entity is: 08557	3541
2.	<ol> <li>In your business or organization's preceding comple receive (1) 80 percent or more of your annual gross loans, grants, sub-grants, and/or cooperative agree gross revenues from U.S. federal contracts, subcon cooperative agreements?</li> </ol>	ited fiscal year, did your business or organizatio revenue in U.S. federal contracts, subcontracts, nents, and (2) \$25,000,000 or more in annual
	YES	
	tf the answer to #2 above is NO, stop here	•
	If the answer to #2 above is YES, please answer the	following:
<ol> <li>Does the public have access to information about the compensation of the executive business or organization through periodic reports filed under section 13(a) or 15(d) Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Re 1986?</li> </ol>		ed under section 13(a) or 15(d) of the Securities
	NOYES	
	If the answer to #3 above is YES, atop here	·
	If the answer to #3 above is NO, please answer the	fallowing:
4.	The names and compensation of the five most highly compensated officers in your business or organization are as follows:	
	Name: Amour	ıt:
	Name: Amour	d:
	Name: Amour	it;
	Name: Amour	t:
		it.

Exhibit J – Certification Regarding the Federal Funding Accountability And Transparency Act (FFATA) Compliance Page 2 of 2

Véndor Initiats





#### **DHHS Information Security Requirements**

#### A. Definitions

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

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

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

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

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#### **DHHS Information Security Requirements**

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

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

#### I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

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

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Contractor Initials



#### **DHHS Information Security Regulrements**

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

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

#### METHODS OF SECURE TRANSMISSION OF DATA

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

Exhibit K DHHS Information Security Requirements

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#### **DHHS Information Security Requirements**

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

#### III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

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

#### A. Retention

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

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#### **DHHS Information Security Requirements**

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

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

#### B. Disposition

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

#### IV. PROCEDURES FOR SECURITY

- A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:
  - The Contractor will maintain proper security controls to protect Department confidential Information collected, processed, managed, and/or stored in the delivery of contracted services.
  - 2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

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#### **DHHS Information Security Requirements**

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

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#### **DHHS Information Security Requirements**

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

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

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#### **DHHS Information Security Requirements**

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

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

#### V. LOSS REPORTING

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

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

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

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#### **DHHS Information Security Requirements**

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

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

#### VI. PERSONS TO CONTACT

- A. DHHS Privacy Officer:

  DHHSPrivacyOfficer@dhhs.nh.gov
- B. DHHS Security Officer.

DHHSInformationSecurityOffice@dhhs.nh.gov

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Date 1281