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STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF HUMAN SERVICES  
*BUREAU OF ELDERLY & ADULT SERVICES*

Jeffrey A. Meyers  
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9203 1-800-351-1888

Maureen U. Ryan  
Director of Human  
Services

Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

September 1, 2016

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of Human Services, Bureau of Elderly and Adult Services to enter into a **sole source** amendment to an existing Agreement with Greater Wakefield Resource Center, 254 Main Street, Union, New Hampshire (Vendor #158408) to continue providing congregate meals to individuals age 60 and older that support seniors and disabled individuals to remain in their homes and community, by increasing the price limitation by \$4,400.00 from \$84,322.30 to an amount not to exceed \$88,722.30, and extending the completion date from September 30, 2016 to December 31, 2016, effective October 1, 2016 upon Governor and Executive Council approval whichever is later. Governor and Executive Council approved the original agreement on July 22, 2011 (Item #197), and amended on July 10, 2013 (Item #55), June 18, 2014 (Item 104), and on June 25, 2015 (Item #62). 60% Federal funds and 40% General funds.

Funds are available in State Fiscal Year 2017 in the following accounts, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

State Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2012	541-500383	Meals - Home Delivered & Congregate	\$15,680.00	\$0.00	\$ 15,680.00
2013	541-500383	Meals - Home Delivered & Congregate	\$15,680.00	\$0.00	\$ 15,680.00
2014	541-500383	Meals - Home Delivered & Congregate	\$13,362.30	\$0.00	\$ 13,362.30
2015	541-500383	Meals - Home Delivered & Congregate	\$17,600.00	\$0.00	\$ 17,600.00
2016	541-500383	Meals - Home Delivered & Congregate	\$17,600.00	\$0.00	\$17,600.00
2017	541-500383	Meals - Home Delivered & Congregate	\$4,400.00	\$4,400.00	\$8,800.00
<b>Total</b>			<b>\$84,322.30</b>	<b>\$4,400.00</b>	<b>\$ 88,722.30</b>

**EXPLANATION**

This amendment is a **sole source** action because the Department wants to ensure the continuation of congregate meals services that enable elderly clients to remain in their homes and communities and maintain their independence. This amendment will provide for continuity of service.

Greater Wakefield Resource Center is the only vendor in the Greater Wakefield area currently providing congregate meal services to elderly clients.

It is the Department's intention to post a Request for Application in the near future to address the ongoing need for these services.

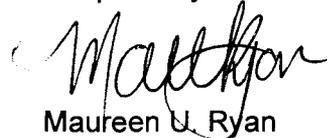
Should the Governor and Council determine to not authorize to amend this existing Agreement, the nutrition services provided to low income, elderly clients will be reduced, or eliminated, to a level that could jeopardize their ability to remain in their home and would likely need more costly long-term care services in traditional nursing homes or community based care programs. Nutrition services, i.e. congregate meals, allow the elderly and disabled adults to secure and maintain independence, health, and quality of life while keeping individuals in their home and community.

Geographic area to be served is Union, New Hampshire and surrounding towns.

Source of Funds for these contracts: 40% General Funds and 60% Federal Funds from the United States Department of Health and Human Services, Administration for Community Living, Older Americans Act Title III – Grants for State and Community Programs on Aging, Catalog of Federal Domestic Assistance #93.045 and Federal Award Identification Number 15AANHT3CM

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

Respectfully submitted,



Maureen U. Ryan  
Director

Approved by:



Jeffrey A. Meyers  
Commissioner



**New Hampshire Department of Health & Human Services  
Nutrition and Transportation Services**

**State of New Hampshire  
Department of Health and Human Services  
Amendment #4 to the Nutrition and Transportation Contract**

This 4th Amendment to the Nutrition and Transportation contract (hereinafter referred to as "Amendment #4") dated this 26<sup>th</sup> day of August 2016, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Greater Wakefield Resource Center Inc. (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 254 Main Street, Union, NH, 03887.

WHEREAS, pursuant to an agreement approved by the Governor and Executive Council on June 22, 2011 (Item #197) (hereinafter referred to as the "Contract"), and amended by an agreement (Amendment #1 to the Contract) approved on July 10, 2013 (Item #55), amended by an agreement (Amendment #2 to the Contract) approved on June 18, 2014 (Item #104), and amended by an agreement (Amendment #3 to the Contract) approved on June 25, 2015 (Item #62) by the Governor and Executive Council, 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, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Agreement may be modified or amended only by written instrument executed by the parties thereto and approved by the Governor and Executive Council.

WHEREAS the parties agree to extend the completion date by an additional three (3) months, and to increase the price limitation; and

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

1. Form P-37, General Provision, Block 1.7, Completion Date, to read:  
December 31, 2016
2. Form P-37, General Provisions, Block 1.8, Price Limitation to read: \$88,722.30.
3. Exhibit A Amendment #1, Scope of Services, Paragraph 2, Contract Period, to read:  
Reserved
4. Exhibit B Amendment #2, Method and Conditions Precedent to Payment, Paragraph 2, to read:
  2. The Contractor shall be reimbursed for providing and delivering the according to the following reimbursement rates and up to the amount of units in table 2.1 below:

<b>2.1 Rate and Units Table</b>			
<b>Reimbursement Rates</b>	<b>Unit Types</b>	<b>State Fiscal Year 2016 Units</b>	<b>State Fiscal Year 2017 Units</b>
\$5.50	Per Congregate Meal	3,200	1,600



**New Hampshire Department of Health & Human Services  
Nutrition and Transportation Services**

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

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

State of New Hampshire  
Department of Health and Human Services

9/2/16  
Date

*Maureen U. Ryan*  
Maureen U. Ryan, Director  
Office of Human Services

Greater Wakefield Resource Center, Inc.

Sept 1, 2016  
Date

*Deborah Gauthier*  
NAME DEBORAH GAUTHIER  
TITLE SECRETARY

**Acknowledgement:**

State of NH, County of Carroll on Aug 3, 2016, before the undersigned officer, personally appeared the person identified above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

*John B. Johnson*  
Name and Title of Notary or Justice of the Peace

**JOHN B. JOHNSON, Notary Public**  
My Commission Expires July 16, 2019

**New Hampshire Department of Health & Human Services  
Nutrition and Transportation Services**



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

OFFICE OF THE ATTORNEY GENERAL

9/8/16  
Date

[Signature]  
Name: Megan H. Yagu  
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

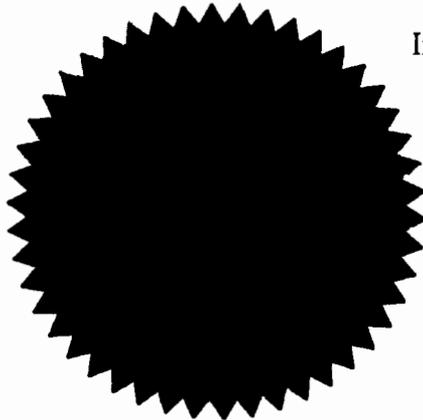
\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:

# State of New Hampshire Department of State

## CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GREATER WAKEFIELD RESOURCE CENTER, INC. is a New Hampshire nonprofit corporation formed October 31, 1997. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



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

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

William M. Gardner  
Secretary of State

- Search
- By Business Name
- By Business ID
- By Registered Agent
- Annual Report
- File Online
- Guidelines
- Name Availability
- Name Appeal Process

**Date:** 8/30/2016 **Filed Documents**  
 (Annual Report History, View Images, etc.)

**Business Name History**

Name	Name Type
GREATER WAKEFIELD RESOURCE CENTER, INC.	Legal

**Non-Profit Corporation - Domestic - Information**

**Business ID:** 282026  
**Status:** Good Standing  
**Entity Creation Date:** 10/31/1997  
**State of Business.:** NH  
**Principal Office Address:** 254 Main StreetPO Box 96  
 Union NH 03887  
**Principal Mailing Address:** 254 Main StreetPO Box 96  
 Union NH 03887  
**Expiration Date:** Perpetual  
**Last Annual Report Filed Date:** 12/2/2015 10:33:56 AM  
**Last Annual Report Filed:** 2015

**Registered Agent**

**Agent Name:**  
**Office Address:** No Address  
**Mailing Address:** No Address

**Important Note: The status reflected for each entity on this website only refers to the status of the entity's filing requirements with this office. It does not necessarily reflect the disciplinary status of the entity with any state agency. Requests for disciplinary information should be directed to agencies with licensing or other regulatory authority over the entity.**

# CERTIFICATE OF VOTE

I, Amanda Bevard, Treasurer, do hereby certify that:  
(Name of the elected Officer of the Agency; cannot be contract signatory)

1. I am a duly elected Officer of Greater Wakefield Resource Center.  
(Agency Name)

2. The following is a true copy of the resolution duly adopted at a meeting of the Board of Directors of  
the Agency duly held on August 12, 2016:  
(Date)

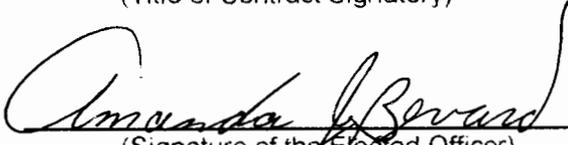
**RESOLVED:** That the Secretary  
(Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to  
execute any and all documents, agreements and other instruments, and any amendments, revisions,  
or modifications thereto, as he/she may deem necessary, desirable or appropriate.

3. The forgoing resolutions have not been amended or revoked, and remain in full force and effect as of  
the 1st day of September, 2016.  
(Date Contract Signed)

4. Deborah Gauthier is the duly elected Secretary  
(Name of Contract Signatory) (Title of Contract Signatory)

of the Agency.

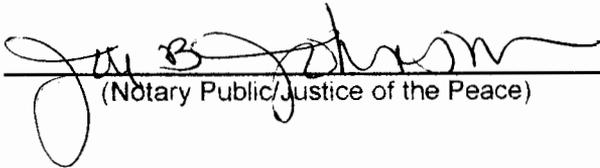
  
(Signature of the Elected Officer)  
Amanda J. Bevard, Treasurer

STATE OF NEW HAMPSHIRE

County of Carroll

The forgoing instrument was acknowledged before me this 31<sup>st</sup> day of Aug., 2016.

By Amanda J. Bevard  
(Name of Elected Officer of the Agency)

  
(Notary Public/Justice of the Peace)

(NOTARY SEAL)

**JOY B. JOHNSON, Notary Public**  
**My Commission Expires July 16, 2019**

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



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/29/2016

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

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425		<b>CONTACT NAME:</b> Fairley Kenneally <b>PHONE (A/C No, Ext):</b> (603) 293-2791 <b>FAX (A/C No):</b> (603) 293-7188 <b>E-MAIL ADDRESS:</b> fairley@esinsurance.com	
<b>INSURED</b> Greater Wakefield Resource Center PO Box 96 254 Main Street Union NH 03887		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Great American Ins Group <b>INSURER B:</b> FirstComp <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	
		<b>NAIC #</b> 27626	

**COVERAGES**

CERTIFICATE NUMBER: 2016

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			MAC2246687-07	6/1/2016	6/1/2017	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE	\$
								AGGREGATE
								\$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N N/A	WC0097474-07	10/18/2015	10/18/2016	<input checked="" type="checkbox"/> PER STATUTE	OTH-ER
							E.L. EACH ACCIDENT	\$ 100,000
							E.L. DISEASE - EA EMPLOYEE	\$ 100,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000

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

**CERTIFICATE HOLDER****CANCELLATION**

State of NH, Dept of Health & Human Serv.  
 129 Pleasant Street  
 Concord, NH 03301

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

F Kenneally/FAIRLE

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## Greater Wakefield Resource Center

### Mission Statement

Our mission is to provide educational and social services to the communities of Wakefield, Farmington, Brookfield, Middleton and Milton, NH. Our goal is to improve the health, education and employment of the citizens of our communities.

11:28 AM  
 08/30/16  
 Accrual Basis

**Greater Wakefield Resource Center**  
**Profit & Loss**  
 January through December 2015

	Jan - Dec 15
Ordinary Income/Expense	
Income	
<b>INCOME</b>	
Beas Congregate	18,320.50
Beas NSIP	3,015.68
Donations & Grants	
Grants	1,000.00
Harvest Donations	1,705.00
Meals on Wheels Donations	25.00
Town Donations	27,500.00
VFW Donations	440.00
Donations & Grants - Other	304.00
<b>Total Donations &amp; Grants</b>	<b>30,974.00</b>
Hall Rental	
Deposits	100.00
Hall Rental - Other	2,185.00
<b>Total Hall Rental</b>	<b>2,285.00</b>
Interest	3.08
Miscellaneous	
Refunds	115.54
<b>Total Miscellaneous</b>	<b>115.54</b>
Office Rental	
Gafney Library	4,644.00
Moose Mt & WaterShed	8,107.82
VFW	550.00
Office Rental - Other	66.30
<b>Total Office Rental</b>	<b>13,368.12</b>
Senior Meal Fund Raisers	
50/50 Raffle	1,716.50
Auction	190.75
Coffee donations	156.82
Lyman Raffle	1,472.30
Meat Raffle	
Meat Raffle 50/50	16.50
Meat Raffle Card Sales	382.00
Meat Raffle Donations	120.00
Meat Raffle Snack Bar Sales	50.00
<b>Total Meat Raffle</b>	<b>568.50</b>
Misc. Donations-Senior Meals	68.50
Muffins	1,265.83
Pastry/Soup Sales	933.50
Shot Gun	814.00
Special Raffles	14.50
Senior Meal Fund Raisers - Other	155.00
<b>Total Senior Meal Fund Raisers</b>	<b>7,356.20</b>
Senior Meals	8,758.00
<b>Total INCOME</b>	<b>84,196.12</b>
<b>Total Income</b>	<b>84,196.12</b>
<b>Gross Profit</b>	<b>84,196.12</b>
Expense	
Business Expenses	
Business Registration Fees	5.00
<b>Total Business Expenses</b>	<b>5.00</b>
Dietitian Fees	40.00
Elevator (Lula) Money Market	200.00
<b>EXPENSES</b>	

11:28 AM  
08/30/16  
Accrual Basis

**Greater Wakefield Resource Center**  
**Profit & Loss**  
January through December 2015

	Jan - Dec 15
Accountant Fees	1,000.00
Bank Service Charge	25.00
Bingo Supplies	609.16
Check Mate Payroll	1,285.95
Depreciation Expense	10,401.00
Fund Raiser Expense	
Meat Raffle-Items Sold at Event	76.94
Meat Raffle-Raffle Items	272.12
Fund Raiser Expense - Other	700.00
<b>Total Fund Raiser Expense</b>	<b>1,049.06</b>
Gift Expense	563.00
Insurance	
Insurance - Liability, D and O	618.00
Liability Insurance	2,084.50
Workmans comp	882.00
<b>Total Insurance</b>	<b>3,584.50</b>
Kitchen Supplies	171.91
License, Fee's & Subscriptions	
Elevator Inspection Fee	300.00
Food License	100.00
State of N.H.	102.00
Water Testing Fee	65.00
License, Fee's & Subscriptions - Other	109.94
<b>Total License, Fee's &amp; Subscriptions</b>	<b>676.94</b>
Maintenance	
Appliance	788.00
Cleaning	935.59
Electrical	230.78
Elevator	480.00
Fire Inspections & Maintenance	598.00
Maint. Expenses	158.24
Septic	751.70
Supplies	101.15
Maintenance - Other	206.00
<b>Total Maintenance</b>	<b>4,249.46</b>
Meal Program Groceries	
Food	6,753.38
Performance Food Group	
Food	5,004.75
Non Food	1,230.02
<b>Total Performance Food Group</b>	<b>6,234.77</b>
Meal Program Groceries - Other	220.09
<b>Total Meal Program Groceries</b>	<b>13,208.24</b>
Office	
Computers	
Computer repair/programs	10.00
Computer Supplies	766.38
<b>Total Computers</b>	<b>776.38</b>
Office supplies	
Postage, Mailing Service	360.09
Office supplies - Other	160.92
<b>Total Office supplies</b>	<b>521.01</b>
Postage	99.22
<b>Total Office</b>	<b>1,396.61</b>
Payroll	
941 Taxes	
Employee FICA Tax	299.96

11:28 AM  
08/30/16  
Accrual Basis

**Greater Wakefield Resource Center**  
**Profit & Loss**  
January through December 2015

	<u>Jan - Dec 15</u>
Employee Medicare	205.95
Employer FICA Tax	299.96
Employer Medicare	205.95
Federal Withholding Employee	380.93
941 Taxes - Other	1,604.41
<b>Total 941 Taxes</b>	<b>2,997.16</b>
Janitorial	931.78
Kitchen Staff	21,353.67
Maint. Payroll	168.46
Office Staff Payroll	14,139.09
Service Fee- Checkmate	193.30
Service Fee - Checkmate	57.84
<b>Total Payroll</b>	<b>39,841.30</b>
Refunds	
Deposit Returned	200.00
<b>Total Refunds</b>	<b>200.00</b>
Utilities	
Fairpoint	1,292.03
Irving Oil	8,462.72
Irving Propane	745.33
PSNH	2,816.00
<b>Total Utilities</b>	<b>13,316.08</b>
<b>Total EXPENSES</b>	<b>91,578.21</b>
Loan Repayment	0.00
Other Types of Expenses	
Advertising Expenses	9.99
<b>Total Other Types of Expenses</b>	<b>9.99</b>
Travel and Meetings	
Travel	73.26
<b>Total Travel and Meetings</b>	<b>73.26</b>
<b>Total Expense</b>	<b>91,906.46</b>
<b>Net Ordinary Income</b>	<b>-7,710.34</b>
<b>Net Income</b>	<b>-7,710.34</b>



# GREATER WAKEFIELD RESOURCE CENTER



254 MAIN STREET, PO BOX 96 UNION, NH 03887 (603)473-8324 *Enrichment activities for a growing community.*

## **GWRC Board Member Contact Information**

April 2016

### **Contact Information**

Name Liz Olimpio, Chairman

Street Address

City ST ZIP Code

Home Phone

Cell Phone

Winter Phone

E-Mail Address

### **Contact Information**

Name Amanda Bevard, Treasurer

Street Address

City ST ZIP Code

Home Phone

Cell Phone

E-Mail Address

### **Contact Information**

Name Deborah Gauthier, Secretary

Street Address

City ST ZIP Code

Home Phone

Cell Phone

E-Mail Address

### **Contact Information**

Name Victor Becker

Street Address

City ST ZIP Code

Home Phone

Cell Phone

E-Mail Address

**Contact Information**

Name Tom Dube

Street Address

City ST ZIP Code

Home Phone

Cell Phone

E-Mail Address

**Contact Information**

Name Robert Wyman

Street Address

City ST ZIP Code

Home Phone

Cell Phone

E-Mail Address

## JOHN P. SHAFFER

**SUMMARY:** A results-oriented manager with over 30 years of Dining Services experience. Proven success in managing high volume dining hall operations. After 25 years at Harvard University I undertook a directorship/rebuilding project at the public school level, taking a traditional service cafeteria to a food court self-service multi-choice healthy dining services operation for a school district in the North Shore of Mass. After moving to Wakefield permanently in 2005 I became the Director of Food Services at a K thru 8 school in Alton. I not only brought technology to the department but brought the level of nutrition up. I was honored to be presented the Director of the Year in 2013. After 10 years at Alton Central School I've decided to retire

**SKILLS:** Proficient in MS Word and Excel, Extensive use of computer for "Nutrakids" module in Food Production, inventory, menu planning, nutritive analysis.

**EXPERIENCE:**

**2005- 2015**

**Director of Food Services, Alton Central School, Alton NH**

Responsible for providing nutritious meals daily to over 600 students.

- Provide over 400 lunches and over 100 breakfasts daily to students in grades Pre K through 8.
- Have introduced the use of computer technology into the Food Service Program, specifically a Point of Service System in which customer information, sales, and accounts are all automated.
- Manage a staff of four employees; plan menus and responsible for purchasing food and supplies.
- Coordinate with faculty and staff to ensure nutritious meals are served in a timely manner.
- Responsible for a \$375k budget, and keeping within guidelines established by the Administration.

**1998 – 2005**

**Director of Food Services, Masconomet Regional School, Topsfield MA**

Directed the reconstruction of the Food Services Department.

- Responsible for design and implementation of the new serving and kitchen areas in a 50+million dollar reconstruction project that involved Middle and High School (as well as the Food Services area).
- Created new menu and services design transforming operation from a traditional cafeteria to a "Food Court" style with 5 separate service stations.
- Involved a total customer driven menu and self service stations
- Took an annual \$190 k operation serving 1700 students to a \$400 k operation that is serving 2100 students and more than 200 faculty / staff at 4 lunch periods daily.
- Developed a catering program that more than tripled previous years preceding my time as Director.
- Managed team of 10 food servers / preparers and utility workers

**1973-1998**

**Harvard University Dining Services, Cambridge, MA**

General Manager, Eliot/Kirkland Dining Halls (1995-1998)

Assistant Manager, Freshman Union Dining Hall (1989-1995)

Food Service Supervisor (1985-1989)

Interim Supervisor, General Cook, Pantry Steward 1973 – 1985

**References available upon request.**

# LURIE A. BIRACREE

**SUMMARY** Extensive financial and risk analysis experience with a comprehensive background in accounting and stellar customer service. Strong internal and external customer loyalty built through personal integrity and knowledge of financial operations. A detail oriented and organized individual with refined analytical, presentation, written and oral skills.

## EXPERIENCE

**August 2013- Present** GREATER WAKEFIELD RESOURCE CENTER, Union, NH  
**Office Manager**

- Provide office management at the Center during hours of operation
- Update Board members, when necessary regarding the Centers programming, tenant activities and building issues
- Provide statistical reports on programs and activities showing participation
- Prepare monthly profit & loss statements and reconcile bank accounts, make daily bank deposit
- Monitor status of income sources, i.e. grants, trusts or donations
- Compile monthly Administrator's report: Summary of objectives accomplished & proposed
- Research and complete grant applications
- Process payroll and keep report of volunteer hours
- Maintain accurate records and reports related to facility activities, contracts and participants
- Prepare for and attend monthly Board meetings (financials, agenda & minutes)
- Work with the Board to develop ideas for new programs, public relations and community outreach
- Handle and report all complaints, inquires, suggestions and incidents to the Board
- Coordinate and schedule the Meals on Wheels program (clients & drivers)
- General office duties, Accounts Payable, Accounts Receivable, check writing, filing
- Complete quarterly State reports, compile data for State contract/budget RFPs
- Work closely with Board to create budget
- Maintain all QuickBooks entries
- Manage content and make updates to the Center's website
- Review insurance policies, monitor hall rentals, monitor tenant lease agreements

**December 2009- February 2011** lululemon athletica, Paramus, New Jersey  
**Store Manager**

- Passionately lead and coached my team by understanding and developing each employee's strengths and goals thus encouraging my staff in the pursuit of these goals
- Proactively recruited to fill the people pipeline and actively participated in training new hires
- Fully accountable for and oversaw the execution of all deliverables to corporate
- Worked closely with management team to produce results which exceeded Company expectations. Responsible for the stores P&L, expense management, and profit/contribution targets
- Present on the floor of store managing and supporting all staff
- Increased store revenues by 15% under my leadership
- Created and rolled out community events

**December 2006- POLYCHRONIS FINANCIAL SERVICES, Dover, New Hampshire**  
**October 2008 Office Manager**

- Review and process new business applications for Life & Health Insurance, Annuities and Mutual Funds
- Field phone calls from clients regarding Life and Health Insurance, IRAs, and Mutual Funds
- Process approved changes to client accounts
- Prepare marketing material and asset portfolios for individual and business clientele
- Manage agency website content

**August 2000- Multiple Locations in San Francisco Bay Area, NYC, Dover, Exeter, Somersworth, Rochester, NH**  
**Present Yoga Instructor**

- Separate Yoga Resume available upon request

**May 2000- SYNOPSIS, Inc., Mountain View, California**  
**August 2005 Senior Financial Analyst**

- Responsible for creation of spending forecasts, variance analysis, and coordination of annual plans at business unit level, as well as worldwide consolidation for corporate earnings model
- Managed business unit spending (\$120M) and implemented controls for cost savings and optimization of budget
- Recognized as the central contact in a liaison role for all international finance operatives
- Provided management with orders & revenue information and contribution margin analysis
- Responsible for successful business unit quarter close, including accurate accruals, resource allocation and preparation of Operations and Board Package
- Financial liaison for FP&A group during SAP 4.6 Implementation and SOX Compliance
- Developed and implemented financial concepts and procedures for planning and control
- Created M&A operating plans and assisted in the integration of acquired staff and financials
- Summarized recommendations for profitability analysis, business plans, acquisition activity, and operating forecasts for presentation to business unit general manager and corporate staff
- Trained new financial analysts on corporate standards and current job processes

**April 1999- ERNST & YOUNG, LLP., Cupertino, California**  
**May 2000 Financial Management Senior Associate**

**November 1996- CALIFORNIA CASUALTY MANAGEMENT CO., San Mateo, California**  
**April 1999 Underwriting and Systems Analyst 11/96-7/98**  
**Senior Business Analyst 7/98-4/99**

**February 1995- CIVIL SERVICE EMPLOYEES INSURANCE CO., San Francisco, California**  
**November 1996 Senior Personal Lines Insurance Underwriter**

**June 1992- LIBERTY MUTUAL INSURANCE CO., Fresno, California**  
**February 1995 Senior Personal Lines Insurance Underwriter**

**EDUCATION BRYANT COLLEGE, Smithfield, Rhode Island**  
**B.S. in Business Administration May 1992 Major: Finance**

**TECHNICAL Applications: QuickBooks, Microsoft Excel, PowerPoint, Word, SAP 4.6, Business Warehouse, Hyperion Pillar, Meeting Software, able to trouble shoot and resolve simple technical problems with printers, networking, and software on MAC and PC platforms**

**PERSONAL SUMMARY Certified yoga instructor who enjoys practicing and teaching yoga, dancing, cooking, international travel and the outdoors: hiking, camping, snowboarding, surfing, and water skiing**

**Antoinette Glidden**

**Experience**

- 1973-1997      **Owned/Operated General Store**  
Purchasing, invoicing, billing, accounts receivable/accounts payable, hiring, inventory and overall management.
- 1978-1981      **Owned/Operated Fast Food Restaurant**  
Management, purchasing, invoicing, billing, accounts receivable/accounts payable, hiring, inventory, stocking, hiring and cooking.
- 1999-2003      **Owned/Operated Choo-Choo Cafe**  
Handled breakfast/lunch, prep of food, ordering, billing, hiring, cooking, accounts receivable/accounts payable, inventory and overall management.

**Education**

- 1957      **East Side High School-Graduated**  
Newark, New Jersey

**Community Participation**

- 6 yrs. Wakefield Budget Committee  
2 yrs. Chairman of the Wakefield Parks & Recreation  
5 yrs. Vice-Chairman of the School Board  
6 yrs. Hospice Volunteer  
7 yrs. Girl Scout Leader  
Presently on the Paul School Building Committee board

## Jennifer Hayward

September 2006-Present

Greater Wakefield Resource Center

- Cook and baker
- General facilities maintenance

August 2005-August 2006

Farmington Recreation Department

- Assisted with children's summer program

**Greater Wakefield Resource Center**

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
John Shaffer	Cook	\$13.50/hr	28%	\$3,297
Jennifer Hayward	Asst. Cook	\$11.00/hr	0	
Ann Glidden	Kitchen & Office Help	\$13.50/hr	0	
Travis Maxfield	Janitorial Help	\$10.00/hr	0	
Laurie Biracree	Admin. Assistant	\$15.00/hr	0	



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**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**DIVISION OF COMMUNITY BASED CARE SERVICES**

**BUREAU OF ELDERLY & ADULT SERVICES**

Nicholas A. Toumpas  
 Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857  
 603-271-9203 1-800-351-1888

Diane Langley  
 Director

Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 20, 2015

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

*Sole Source*

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into a **sole source** amendment to an existing Agreement with Greater Wakefield Resource Center, 254 Main Street, Union, New Hampshire (Vendor #158408) to continue providing congregate meals to individuals age 60 and older that support seniors and disabled individuals to remain in their homes and community, by increasing the price limitation by \$22,000 from \$62,322.30 to an amount not to exceed \$84,322.30, and extending the completion date from June 30, 2015 to September 30, 2016, effective July 1, 2015 or upon Governor and Executive Council approval whichever is later. Governor and Executive Council approved the original agreement on July 22, 2011 (Item #197), and amended on July 10, 2013 (Item #55) and on June 18, 2014 (Item 104). 60% Federal funds and 40% General funds.

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

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

State Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2012	541-500383	Meals - Home Delivered & Congregate	\$15,680.00	\$0.00	\$ 15,680.00
2013	541-500383	Meals - Home Delivered & Congregate	\$15,680.00	\$0.00	\$ 15,680.00
2014	541-500383	Meals - Home Delivered & Congregate	\$13,362.30	\$0.00	\$ 13,362.30
2015	541-500383	Meals - Home Delivered & Congregate	\$17,600.00	\$0.00	\$ 17,600.00
2016	541-500383	Meals - Home Delivered & Congregate	\$0.00	\$17,600.00	\$17,600.00
2017	541-500383	Meals - Home Delivered & Congregate	\$0.00	\$4,400.00	\$4,400.00
<b>Total</b>			\$62,322.30	\$22,000.00	\$ 84,322.30

**EXPLANATION**

This amendment is **sole source** action because the Department wants to ensure the continuation of nutrition services that enable elderly clients to remain in their homes and communities and maintain their independence.

Should the Governor and Council determine to not authorize to amend this existing Agreement, the nutrition services provided to low income, elderly clients will be reduced, or eliminated, to a level that could jeopardize their ability to remain in their home and would likely need more costly long-term care services in traditional nursing homes or community based care programs. Nutrition services allow the elderly and disabled adults to secure and maintain independence, health, and quality of life while keeping individuals in their home and community.

Geographic area to be served is Union, New Hampshire and surrounding towns. The Department contracts with ten (10) other vendors statewide that provide similar nutrition services.

Source of Funds for these contracts: 40% General Funds and 60% Federal Funds from the United States Department of Health and Human Services, Administration for Community Living, Older Americans Act Title III – Grants for State and Community Programs on Aging, Catalog of Federal Domestic Assistance #93.045 and Federal Award Identification Number 15AANHT3CM

In the event that the federal funds become no longer available, general funds will not be requested to support this program.

Respectfully submitted,



Diane Langley  
Director

Approved by:



Nicholas A. Toumpas  
Commissioner



**State of New Hampshire  
Department of Health and Human Services  
Amendment #3 to the Congregate Meal Services Contract**

This third Amendment to the Congregate Meal Services contract (hereinafter referred to as "Amendment #3") dated May 7, 2015, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Greater Wakefield Resource Center Inc., (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 254 Main Street, Union, NH, 03887.

WHEREAS, pursuant to an agreement approved by the Governor and Executive Council on June 22, 2011 (Item #197) (hereinafter referred to as the "Contract"), and amended by an agreement (Amendment #1 to the Contract) approved on July 10, 2013 and (Amendment #2 to the Contract) approved on June 18, 2014 (Item #104) by the Governor and Executive Council, 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, the State and the Contractor have agreed to make changes to the scope of work, payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to the Agreement (section 18 of the General Provisions of the Form P-37), the Agreement may be modified or amended only by written instrument executed by the parties thereto and approved by the Governor and Executive Council;

WHEREAS, the Department and the Contractor agree to extend the completion date by an additional fifteen months, and to increase the price limitation; and

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

1. Except as specifically amended and modified by the terms and conditions in this Amendment #3, the obligations of the parties shall remain in full force and effect in accordance with the terms and conditions set forth in the Contract as referenced above.
2. Amend General Provisions (Form P-37), Block 1.7, Completion Date, by extending the date to September 30, 2016.
3. Amend General Provisions (Form P-37), Block 1.8, Price Limitation, to read: \$84,322.30.
4. Amend General Provisions (Form P-37), Block 1.9, Contracting Officer for State Agency to read: Eric Borrin, Director of Contracts and Procurement.
5. Amend General Provisions (Form P-37), Block 1.10, to read: (603) 271-9558.
6. Delete in its entirety Exhibit A, Scope of Services and replace with Exhibit A Amendment #3, Scope of Services.
7. Delete in its entirety A-1 Geographic Area Form.
8. Delete in its entirety Exhibit A-2 Congregate Site Information.
9. Delete in its entirety Exhibit B, Method and Conditions Precedent to Payment and replace with Exhibit B Amendment #3, Method and Conditions Precedent to Payment.



**New Hampshire Department of Health and Human Services  
Congregate Meal Services**

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10. Delete in its entirety, Exhibit C, Special Provisions and replace with Exhibit C Amendment #1, Special Provisions.
11. Delete in its entirety, Standard Exhibit C-1, Additional Special Provisions and replace with Exhibit C-1 Amendment #1, Revisions To General Provisions.
12. Delete in its entirety Standard Exhibit D, Certification Regarding Drug-Free Workplace Requirements, and replace with Exhibit D Amendment #1, Certification Regarding Drug-Free Workplace Requirements.
13. Delete in its entirety Standard Exhibit E, Certification Regarding Lobbying, and replace with Exhibit E Amendment #1, Certification Regarding Lobbying.
14. Delete in its entirety Standard Exhibit F, Certification Regarding Debarment, Suspension, and Other Responsibility Matters, and replace with Exhibit F Amendment #1, Certification Regarding Debarment, Suspension, and Other Responsibility Matters.
15. Delete in its entirety Standard Exhibit G, Certification Regarding the Americans with Disabilities Act Compliance, and replace with Exhibit G, Certification of Compliance with Requirements Pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower Protections.
16. Delete in its entirety Standard Exhibit H, Certification Regarding Environmental Tobacco Smoke and replace with Exhibit H Amendment #1, Certification Regarding Environmental Tobacco Smoke.
17. Delete in its entirety Standard Exhibit I, Health Insurance Portability and Accountability Act Business Associate Agreement, and replace with Exhibit I Amendment #1, Health Insurance Portability Act Business Associate Agreement.

**New Hampshire Department of Health and Human Services  
Congregate Meal Services**



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

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

5/22/15  
Date

State of New Hampshire  
Department of Health and Human Services  
Mailes Nihan  
Deputy Commissioner  
Diane Langley  
Director

5-8-15  
Date

Greater Wakefield Resource Center Inc.  
J. Liz Olympio  
NAME J. Liz Olympio  
TITLE Chairman of the Board

**Acknowledgement:**

State of New Hampshire County of Carroll on May 8, 2015, before the undersigned officer, personally appeared the person identified above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.  
Signature of Notary Public or Justice of the Peace

Valerie O Eaton  
Name and Title of Notary or Justice of the Peace

**VALERIE O. EATON**  
**Notary Public ~ New Hampshire**  
**My Commission Expires Feb. 22, 2017**



**New Hampshire Department of Health and Human Services  
Congregate Meal Services**

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

OFFICE OF THE ATTORNEY GENERAL

Date 5/27/15

[Signature]  
Name:  
Title:

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

OFFICE OF THE SECRETARY OF STATE

Date \_\_\_\_\_

Name: \_\_\_\_\_  
Title:



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**Scope of Services**

**1. Purpose:**

- 1.1. The contractor will provide congregate meal services by assisting eligible individuals to live as independently as possible in safety and with dignity.
  - 1.1.1. The services in this contract are intended for individuals who are not already receiving the same or similar services funded through other programs such as, but not limited to: the Medicaid State Plan, any of the Home and Community Based Care Waivers administered by the Department's the Medicaid Program, or services provided through the Veterans Administration.

**2. Population and Geographic Area:**

- 2.1. The Contractor will provide congregate meals to individuals who reside in independent living settings and who meet the eligibility criteria as follows:
  - 2.1.1. Title III Individuals who are age 60 and older and with the most economic or social need as described in:
    - 2.1.1.1. Older Americans Act as amended, Section 305,(a)(2)(E) and
    - 2.1.1.2. Title III Older Americans Act Services: Title IIB- Supportive Services, Title IIIC1 and C2 – Nutrition Program Policies, and Title IIID- Disease Prevention and Health Promotion Services, New Hampshire (NH) Administrative Rule He-E 502.
- 2.2. The Contractor will provide congregate meals to eligible clients as defined in paragraph 2.1 above that reside in cities and towns in Carroll County at the meal site defined in paragraph 3.7 below.

**3. Congregate Meal Services**

- 3.1. The Contractor will receive inquiries and applications; determine eligibility; notify applicants of eligibility; maintain records for each recipient; train staff and volunteers; monitor and evaluate services; maintain financial records; submit reports as requested to the Bureau of Elderly and Adult Services.
- 3.2. The Contractor will provide Congregate Meals (Community Dining) (funded through Title III) in community settings, where individuals travel to a designated site to share a meal with other individuals.
- 3.3. The Contractor will not require advance registration and will register individuals when arriving at the meal site.
- 3.4. The Contractor will include in each meal, at least one-third of the recommended daily allowance established by the Food and Nutrition Board of the Institute of Medicine for the National Academy of Sciences, as well as the Dietary guidelines for Americans issued by the Secretaries of the Departments of Health and Human Services and Agriculture.
- 3.5. The Contractor will accommodate a client meal, to the extent possible, the special dietary needs/preferences of the individual including recommendations from the client's licensed practitioner.
- 3.6. The Contractor will comply with regulations regarding safety and sanitary food practice in accordance with state and local health, safety and sanitation requirements.
- 3.7. The Contractor will, within 10 days of the contract effective date submit for Department approval their congregate meal site information.



Exhibit A Amendment #3

- 3.8. The Contractor will provide Congregate Meals funded by Title III according to the rules and policies of the Bureau of Elderly and Adult Services (BEAS), including NH Administrative Rule He-E 502, Older Americans Act Services (Title III), and the Older Americans Act of 1965 as amended, incorporated by reference into this Agreement.

**4. Service Compliance Requirements**

**4.1. Access to Services**

- 7.1.1. Individuals access the services described in this contract through one of two ways. They may apply directly for services to the contractor or be referred to the contractor by the Adult Protective Services Program as a result of a substantiated report of neglect, abuse, or exploitation.
- 7.1.1.1. Client directly applies for services: The Contractor shall determine eligibility for these services in accordance with the rules and requirements of the Title III Programs. The contractor shall determine the eligibility of the individual.
- 7.1.1.2. Client referred by Adult Protective Services (APS): The contractor does not take an application, determine or redetermine the client's eligibility or issue notifications. The client's case will be managed by the APS staff. The referral will a protective services plan that the APS worker puts into place to prevent or ameliorate the circumstances that contribute to the individual's risk of neglect, abuse, or exploitation.

**4.2. Client Application/Request for Services**

The Contractor will sign up participants for the service as a way to request the service. The Contractor submits these signature lists as verification that the service was provided.

**4.3. Client Eligibility**

- 4.3.1. The Contractor will determine eligibility for services and shall be in compliance with Title III requirements regarding eligibility determination. A client must be age 60 or older to be eligible to receive congregate meals. A client must sign up for meals prior to receiving them. In addition to offering congregate meals to individuals who meet the eligibility requirements contained in He-E 502, the Contractor may also offer meals to:
- 4.3.1.1. The spouses of individuals who accompany them to the meal site;
- 4.3.1.2. Individuals providing volunteer services at the congregate meal site during meal hours;
- 4.3.1.3. Individuals with disabilities under the age of 60 who reside at home with an individual who is receiving Title III services; and
- 4.3.1.4. Individuals with disabilities under the age of 60 who reside in housing facilities occupied by older individuals where congregate meals are provided.
- 4.3.2. The Contractor shall submit its policies and procedures for client eligibility determination and redetermination for services to DHHS for review and approval, within 30 days of the start of each State Fiscal Year.
- 4.3.3. If the client is determined to not be eligible for service(s), the notice shall include:
- 4.3.3.1. The reason(s) for the denial;
- 4.3.3.2. A statement regarding the right of the individual or his or her authorized representative to request an informal resolution or appeal of the eligibility determination decision.
- 4.3.3.3. Contact information for requesting an appeal.
- 4.3.4. The Contractor will terminate services when:
- 4.3.4.1. The individual or his or her authorized representative requests that the services be terminated;
- 4.3.4.2. The individual no longer meets the eligibility requirements for services;
- 4.3.4.3. Funding by the State for the service(s) is no longer available;



Exhibit A Amendment #3

- 4.3.4.4. The individual did not reapply for services as required by program rules;
- 4.3.4.5. The individual has been admitted to a nursing home or residential care facility; or
- 4.3.4.6. The individual is deceased.

4.3.5. Service Authorizations for Eligible Clients.

Once the client has been determined eligible to receive congregate meals, the contractor shall obtain a service authorization from DHHS in order to be reimbursed from this contract for allowable costs in providing services to that client.

- 4.3.5.1. The Contractor shall submit a completed Form 3502 "Contract Service Authorization-New Authorization" for each client who has been determined eligible to receive congregate meals services. More than one service may be included on a Form 3502. The completed Form 3502 shall be submitted to:  
Bureau of Data Management  
129 Pleasant Street  
Concord, NH 03301

**4.4. Client Service Provision Log:**

- 4.4.1. The contractor shall keep a service provision log of all meals that includes:
  1. the date of the meal;
  2. the name of the person the meal was provided to; and
  3. Comment on any follow-up service provided.

**4.5. Client Service Record**

- 4.5.1. The Contractor shall maintain a service record for all individuals receiving congregate meals that contains:
  - 4.5.1.1. The individual's name, address and telephone number
  - 4.5.1.2. A notation that the individual meets the congregate meals eligibility requirements
  - 4.5.1.3. An annual notation of the decision to recertify or terminate the individual's on going eligibility
  - 4.5.1.4. The dates of meals provision and the number of meals provided
  - 4.5.1.5. Identification of the individual's communication access needs
  - 4.5.1.6. Any other information/correspondence deemed relevant to service provision

**4.6. Person centered provision of services**

- 4.6.1. The Contractor agrees to incorporate into its agency's functions, policies, staff-client interactions and in the provision of all services in this Agreement the following Guiding Principles for Person-Centered Planning Philosophy:
  - 4.6.1.1. Individuals and families are invited, welcomed, and supported as full participants in service planning and decision-making.
  - 4.6.1.2. Individual's wishes, values, and beliefs are considered and respected.
  - 4.6.1.3. Individual is listened to; needs and concerns are addressed.
  - 4.6.1.4. Individual receives the information he/she needs to make informed decisions.
  - 4.6.1.5. Planning is responsive to the individual. His or her preferences drive the planning process, though the decision making process may need to be accelerated to respond to emergencies.
  - 4.6.1.6. Services are designed, scheduled, and delivered to best meet the needs and preferences of the individual.
  - 4.6.1.7. The system is committed to excellence and quality improvement:
  - 4.6.1.8. Individual rights are affirmed and protected.
  - 4.6.1.9. Individuals are protected from exploitation, abuse, and neglect.
  - 4.6.1.10. The service system is accessible, responsive, and accountable to the individual.



Exhibit A Amendment #3

- 4.6.1.11. Person-centered planning may be incorporated into existing service plans or documents already being used by the contractor.

**4.7. Staffing**

- 4.7.1. The Contractor agrees to adhere to the following staffing requirements:
- 4.7.1.1. Provide sufficient staff to perform all tasks specified in this Agreement. The Contractor shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion for the number of clients and geographic area as identified in this Agreement.
  - 4.7.1.2. Verify and document that all staff and volunteers have appropriate training, education, experience, and orientation to fulfill the responsibilities of their respective positions. This includes keeping up-to-date personnel and training records and documentation of all individuals requiring licenses and/or certifications.
  - 4.7.1.3. Develop a Staffing Contingency Plan and shall submit their written Staffing Contingency Plan to DHHS within thirty days of approval of the Contract Agreement. The plan shall include but not be limited to:
    - 4.7.1.3.1. The process for replacement of personnel in the event of loss of key personnel or other personnel during the period of this Agreement;
    - 4.7.1.3.2. A description of how additional staff resources will be allocated to support this Agreement in the event of inability to meet any performance standard;
    - 4.7.1.3.3. A description of time frames necessary for obtaining staff replacements;
    - 4.7.1.3.4. An explanation of the Contractor's capabilities to provide, in a timely manner, staff replacements/additions with comparable experience; and
    - 4.7.1.3.5. The method of bringing staff replacements/additions up-to-date regarding this Agreement.

**4.8. Service Delivery Verification**

- 4.8.1. The Contractor will report on each performance measure as follows:
- 4.8.2. Eligibility:
- 4.8.2.1. The number of requests for congregate meals;
  - 4.8.2.2. The number and percent of applicants found eligible for each service; and
  - 4.8.2.3. The number and percent of applicants found ineligible for each service.
- 4.8.3. Quality and Appropriateness:
- 4.8.3.1. Experience: The number and percent of individuals surveyed (via telephone, mail, e-mail, or face-to-face) who report their experiences with their services have been satisfactory or better.
  - 4.8.3.2. The contractor will indicate the reasons why:
    - 4.8.3.2.1. The number and percent of individuals surveyed who reported their experiences with their services and providers were not satisfactory or better.
  - 4.8.3.3. The Contractor will describe the quality improvement activity(ies) to be initiated to address identified concerns about the quality and appropriateness of care.
  - 4.8.3.4. The Contractor must survey a sample of participants for each contracted service and provide their survey methodology, in writing, to BEAS.
- 4.8.4. Service Delivery
- 4.8.4.1. The number and percent of days individuals did not receive a congregate meal due to the service(s) not being available due to inadequate staffing or other related provider issue
  - 4.8.4.2. The Contractor will indicate the reasons individuals did not receive their planned services.
  - 4.8.4.3. The Contractor will describe the quality improvement activities to be initiated to address identified concerns about service delivery.



#### 4.9. Reporting Requirements:

- 4.9.1. The Contractor shall complete quarterly reports on a pre-defined electronic form provided by the Department. Quarterly is defined as July 1 to September 30, October 1 to December 31, January 1 to March 31, and April 1 to June 30.
- 4.9.2. The Contractor shall submit the quarterly reports to the Department by October 15, January 15, April 15, and July 15 as applicable to each State Fiscal Year in the contract period.
- 4.9.3. The Contractor will provide the following data, but not be limited to:
  - 4.9.3.1. Expenses by program service provided. Service is defined as, Congregate Meals
  - 4.9.3.2. Revenue, by program service provided, by funding source;
  - 4.9.3.3. Actual Units served, by program service provided, by funding source;
  - 4.9.3.4. Number of unduplicated clients served, by service provided, by funding source;
  - 4.9.3.5. Number of Title III clients served with non-BEAS funds;
  - 4.9.3.6. Unmet need/waiting list; and
  - 4.9.3.7. Lengths of time clients are on a waiting list.

#### 4.10. Client Fees and Donations

- 4.10.1. The Contractor will ask individuals receiving services for a voluntary donation towards the cost of the service and provides guidance for requesting donations, in accordance with the NH Administrative Rule He-E 502.12.
  - 4.10.1.1. The Contractor will communicate to the individuals that the donation is to be purely voluntary, and no one can be refused services if they are unable or unwilling to donate.
- 4.10.2. The Contractor will report the total amount of collected donations on the quarterly report sent to BEAS Finance.

#### 4.11. Adult Protective Services

- 4.11.1. Under RSA 161-F: 42 et seq. BEAS provides protective services to incapacitated adults to prevent neglect, abuse or exploitation. When BEAS determines that an individual needs Adult Protective Services as described in NH Administrative Rules (He-E 700), the Contractor agrees that the payment received from BEAS for the specified services is payment in full for those services, and the provider agrees to refrain from making any attempt to solicit donations or secure additional reimbursement of any type from the individual and/or his or her family members for those services. The Contractor shall make a good faith effort to assure the provision of some level of services to those persons in need of protective services.
- 4.11.2. The Contractor will not charge fees or ask for donations from clients and/or his or her family members referred by the DHHS Adult Protective Services (APS) Program as long as these individuals remain active recipients of adult protective services as verified by Adult Protective Services staff.
- 4.11.3. The Contractor will report suspected abuse, neglect, self-neglect, and/or exploitation of incapacitated adults as required by RSA 161-F: 46 of the Adult Protection law.
- 4.11.4. The Contractor shall make a good faith effort to assure the provision of some level of services to those persons who the Department refers to the contracted agency and identifies the client in need of protective services.
- 4.11.5. The Contractor shall follow the plan of care established by the APS social worker.
- 4.11.6. The contractor is expected to inform the referring APS staff of any changes in the individual's situation or other concerns, and the APS is expected to inform the contractor of any information that may affect service provision.

#### 4.12. E-Studio Electronic Information System

- 4.12.1. The Contractor will use BEAS' E-Studio electronic information system. E-Studio is BEAS' primary vehicle for uploading important information concerning time-sensitive



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announcements, policy releases, administrative rule adoptions, and other critical information. Contractor shall identify all of the key personnel who need to have E-Studio accounts to ensure that information from BEAS can be shared with the necessary agency staff. There is no cost to the contractor for BEAS to create an E-Studio account and no limit on the number of staff an agency identifies to have access to E-Studio. Contractor shall ensure that their E-Studio account(s) are kept current and that BEAS is notified when a staff member is no longer working in the program so his/her account can be terminated.

**4.13. Criminal Background and Adult Protective Service Registry Checks**

- 4.13.1. The contractor's staff members or volunteers who will be interacting with or providing hands-on care to individuals receiving services are required to complete a BEAS State Registry check before the staff member or volunteer begins providing services. In addition, all agency staff must undergo a NH Criminal Records Background check.
  - 4.13.1.1. Contractor shall conduct a New Hampshire criminal background check if a potential applicant for employment or volunteer, funded under this contract, may have client contact.
  - 4.13.1.2. Contractors which are licensed, certified or funded by the DHHS shall meet the requirements of RSA 161-F: 49, which require the submission of the name of a prospective employee who may have client contact, for review against the BEAS State Registry.

**4.14. Grievance and Appeals**

- 4.14.1. The Contractor must maintain a system for tracking, resolving, and reporting client complaints regarding its services, processes, procedures, and staff. The Contractor shall have grievance system in place that includes a grievance process and any grievances filed are to be available to DHHS upon request. At a minimum the process shall include the following:
  - 4.14.1.1. Client name,
  - 4.14.1.2. type of service,
  - 4.14.1.3. date of written grievance,
  - 4.14.1.4. nature/subject of the grievance,
  - 4.14.1.5. who in the agency reconsiders agency decisions,
  - 4.14.1.6. what are the issues that can be addressed in the grievance process, and how consumers are informed of their right to appeal or file grievances.

**4.15. Privacy and Security of Client Information**

- 4.15.1. DHHS is the designated owner of all data and shall approve all access to that data. The Contractor shall not have ownership of State data at any time. The Contractor shall be in compliance with privacy policies established by governmental agencies or by state or federal law. Privacy policy statements may be developed and amended from time to time by the State and will be appropriately displayed on the State portal. The Contractor shall provide sufficient security to protect the State and DHHS data in network, transit, storage and cache. In the event of breach, the contractor shall notify the Department within one day from the date of breach.

**4.16. Culturally and Linguistically Appropriate Standards of Care**

- 4.16.1. The Contractor will submit a detailed description of the language assistance services they will provide to person with Limited English Proficiency to ensure meaningful access to their program and/or series, within ten (10) days of the effective date of this contract



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**4.17. Wait Lists**

- 4.17.1. All services covered by this contract shall be provided to the extent that funds, staff and/or resources for this purpose are available. The contract agency shall maintain a wait list in accordance with NH Administrative Rules He-E 502 when funding or resources are not available to provide the requested services. A wait list includes at a minimum:
- 4.17.1.1. Each contract agency shall include the following information on its wait list:
- 4.17.1.1.1. The individual's full name and date of birth;
  - 4.17.1.1.2. The name of the service being requested;
  - 4.17.1.1.3. The date upon which the individual applied for services which shall be the date the application was received by the contract agency or BEAS;
  - 4.17.1.1.4. The target date of implementing the services based on the communication between the individual and the BEAS/contract agency;
  - 4.17.1.1.5. The individual's assigned priority on the wait list, determined in accordance with (b) below;
  - 4.17.1.1.6. A brief description of the individual's circumstances and the services he or she needs.
- 4.17.1.2. The contract agency shall prioritize each individual's standing on the list by determining the individual's urgency of need in the following order:
- 4.17.1.2.1. Individual is in an institutional setting or is at risk of being admitted to or discharged from an institutional setting;
  - 4.17.1.2.2. Declining mental or physical health of the caregiver;
  - 4.17.1.2.3. Declining mental or physical health of the individual;
  - 4.17.1.2.4. Individual has no respite services while living with a caregiver; and
  - 4.17.1.2.5. Length of time on the wait list.
  - 4.17.1.2.6. When 2 or more individuals on the wait list have been assigned the same service priority, the individual served first will be the one with the earliest application date.
  - 4.17.1.2.7. Individuals who are being served under protective services RSA 161-F: 42-57 shall be given priority status on the waitlist and in accordance with He-E 501.14 (f) and He-E 502.13.
  - 4.17.1.2.8. Individuals with adult protective needs in accordance with RSA 161-F: 42-57 shall be exempt from the wait list.
- 4.17.1.3. When an individual is placed on the wait list, the contract agency will notify the individual in writing.
- 4.17.1.4. The wait list must be maintained during the contract period and available to BEAS upon request.

**4.18. Notice of Failure to meet Service Obligations**

- 4.18.1. In the event that the Contractor for any reason is unable to meet any service obligations prior to the completion date, the Contractor shall give at least a ninety (90) day prior written notice addressed to the Bureau Director, Bureau of Elderly and Adult Services, of such inability to meet service obligations.
- 4.18.1.1. Examples of failure to meet service obligations may include, but are not limited to:
- 4.18.1.1.1. Reducing hours of operation
  - 4.18.1.1.2. Changing a geographic service area
  - 4.18.1.1.3. Closing or opening a site
- 4.18.2. The written notification shall include the following:
- 4.18.2.1. The reasons for the inability to deliver services;
  - 4.18.2.2. How service recipients and the community will be impacted if the contractor is unable to provide services
  - 4.18.2.3. How service recipients and the community will be notified; and



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- 4.18.2.4. The Contractor's plan to transition clients into other services or refer the clients to other agencies.
- 4.18.3. The Contractor shall maintain a plan that addresses the present and future needs of clients receiving services in the event that:
  - 4.18.3.1. Service(s) are terminated or planned to be terminated prior to the termination date of the contract;
  - 4.18.3.2. The contract is terminated or is planned to be terminated prior to the termination date of the contract by the Contractor or the State;
  - 4.18.3.3. The Contractor terminates a services or services for any reason;
  - 4.18.3.4. The Contractor cannot carry out all or a portion of the services terms or conditions outlined in the contract or sub-contracts.

**4.19. Transition Process**

- 4.19.1. The Contractor shall have a transition process for clients in the event that they maybe transitioned between DHHS contracted providers and shall submit their written transition process to DHHS within thirty days of approval of the Contract Agreement. The process will ensure:
  - 4.19.1.1. Uninterrupted delivery of services for clients;
  - 4.19.1.2. A method of notifying clients and/or the community about the transition. A staff member shall be available to address questions about the transition.

**4.20. Compliance with Laws and Regulations**

Services and Administration of the program services shall be provided in accordance with the applicable federal and state laws, Title III rules, policies and regulations adopted by the Department of Health and Human Services currently in effect, and as they may be adopted or amended during the contract period.

**4.21. Contract Monitoring**

The Contractor shall:

- 4.21.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.
- 4.21.2. Ensure the Department is provided with access that includes but is not limited to:
  - a) Data
  - b) Financial records
  - c) Scheduled access to Contractor work sites/locations/work spaces and associated facilities.
  - d) Unannounced access to Contractor work sites/locations/work spaces and associated facilities.
  - e) Scheduled phone access to Contractor principals and staff
  - f) Timely unscheduled phone response by Contractor principals and staff.

**4.22. Financial Integrity Maintenance**

- 4.22.1. Financial Reporting Requirements: In addition to the requirement for the Contractor to provide annual audited financial statements, the Contractor will provide to the State quarterly interim Balance Sheet and Profit and Loss Statements for the Contractor including separate statements for related parties. Quarterly is defined as the period of July 1 to September 30, October 1 to December 31, and January 1 to March 31, and April 1 to June 30. The Contractor shall submit the quarterly statements to the Department by October 31, January 31, April 31, and July 31 as applicable to each State Fiscal Year in the contract period. All statements must be certified by an officer of the reporting entity.



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- 4.22.2. Corrective Action and or Termination: If after review of the contractor submitted information, and based on the following risk assessment, the State at its sole discretion, the State may:
1. Require a corrective action plan for identified deficiencies, or
  2. Terminate the contract for reasons of risk to continued operation, services, or deliverables as required by the terms of the contract.
- 4.22.3. Absence of Risk Conditional Termination: This section does not negate any rights the State may have relative to the contract.
- 4.22.4. Risk Assessment Process:  
 The State will analyze the financial information provided by Contractor. Such analysis will include calculation of the ratios set forth in Table A. The weighted average of the ratios is used to calculate a risk score as follows:
- Low Risk 70% and Above
  - Moderate Risk From 26% to 69%
  - High Risk 25% and Below
- 4.22.5. Weighted Average: The process for the scoring is
1. Calculate the individual ratio for the Contractor
  2. Divide Contractor ratio by the benchmark to determine percentage above or below benchmark
  3. Multiply Contractor percentage by "Percentage Weight of Risk Score"
  4. Add the scores for the ratios as determined for each ratio in Steps 1 to 3.
- 4.22.6. The State will provide, upon request, the Risk calculations for the Contractor.

<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
Liquidity	Current Ratio	This ratio compares the Current Assets with the Current Liabilities.	CURRENT ASSETS / CURRENT LIABILITIES	This ratio measures the Liquidity of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a ratio, and represents 15% of the total risk assessment value.	1.0:1	10.0%
Liquidity	Days Expense in Working Capital	This ratio calculates the number of day's expense that the working capital can support.	(CURRENT ASSETS - CURRENT LIAB) / ((REVENUE - OPERATING INCOME - DEPRECIATION)/365)	This ratio measures the Liquidity of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed in "number of days" and	30	10.0%



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**Table A - Risk Analysis Assessment Ratios Matrix**

<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
				represents 15% of the total risk assessment value.		
Liquidity	Days of Revenue In Accounts Receivable	This ratio calculates the number of days of revenue that are in accounts receivable.	(ACCOUNTS RECEIVABLE) / (REVENUE/365)	This ratio measures the performance of the accounts receivable function and the timeliness of revenue collection. A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed in days.	30	10.0%
Operating Results	Return on Equity	This ratio is a representation of the increase or decrease in net assets from the prior year.	INCREASE IN NET ASSETS / NET ASSETS	This ratio measures the Operating Results of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	5%	10.0%
Operating Results	Operation Income to Revenue	This ratio compares the current year's operating income with the current year's revenue.	OPERATING INCOME / REVENUE	This ratio measures the Operating Results of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk	3%	10.0%



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<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
				assessment value.		
Operating Results	Cash Flow % of Revenue	This ratio calculates the company's cash flow as a percentage of revenue.	(INCREASE IN NET ASSETS + DEPRECIATION) / REVENUE	This ratio measures the Operating Results of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	2%	10.0%
Leverage	Debt to Equity	This ratio compares total debt to equity.	(TOTAL ASSETS - NET ASSETS)/NET ASSETS	This ratio measures Leverage (Relative Debt Level). A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a ratio and represents 5% of the total risk assessment value.	0.7:1	5.0%
Leverage	Long Term Debt to Equity	This ratio compares long term debt to equity.	LONG TERM DEBT / NET ASSETS	This ratio measures Leverage (Relative Debt Level). A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 5% of the total risk assessment value.	100%	5.0%



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<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
Leverage	Debt Ratio	This ratio compares total debt to total assets.	(TOTAL ASSETS - NET ASSETS)/TOTAL ASSETS	This ratio measures Leverage (Relative Debt Level). A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	50%	10.0%
Reserves	Cash Flow to Total Debt	This ratio compares cash flow to total debt.	(OP. SURPLUS + DEPRECIATION) / (TOTAL ASSETS - NET ASSETS)	This ratio measures Reserves. A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	5%	10.0%
Reserves	Days Expense in Available Net Assets	This ratio calculates the number of day's expense that the net assets of the company can support.	NET ASSETS / ((REVENUE - OPERATING INCOME - DEPRECIATION)/365)	This ratio measures Reserves. A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed in "number of days" and this represents 10% of the total risk assessment value.	90	10.0%
						100.0%



### Method and Conditions Precedent to Payment

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, Block 1.8, of the General Provisions (Form P-37) of this Agreement in consideration for the Contractor's compliance with the terms and conditions of this Agreement and for the services provided by the Contractor pursuant to Exhibit A Amendment #3, Scope of Services.
2. The Contractor shall be reimbursed for providing congregate meals according to the following reimbursement rate and up to the amount of units in table 2.1 below:

<b>2.1 Rate and Units Table</b>			
<b>Reimbursement Rate</b>	<b>Unit Type</b>	<b>State Fiscal Year 2016 Units</b>	<b>State Fiscal Year 2017 Units</b>
\$5.50	Per Congregate Meal	3,200	800

3. The General provisions (Form P-37) Block 1.6 Account Numbers are as follows:
  - 3.1. 05-95-48-481010-78720000-541-500383
4. This Contract is funded with federal funds made available under the Catalog of Federal domestic Assistance (CFDA) #'s, for the provision of services pursuant to Exhibit A Amendment #3, Scope of Services as follows:
  - 4.1. 93.045 United States Department of Health and Human Services, Administration for Community Living, Special Programs for the Aging- Title IIC-1
  - 4.2. The Contractor agrees to provide the services in Exhibit A Amendment #3, Scope of Services in compliance with funding requirements.
5. The Contractor shall comply with the necessary steps established by the Department for making payments to vendors using Electronic Funds Transfer (EFT).
6. The DHHS may require certain payments returned to the State of New Hampshire if: 1) the final reconciliation of the payments made by BEAS under this agreement show that the payments exceeded the actual units served; 2) services are not being provided in accordance with the requirements and scope of services in Exhibit A Amendment #3; and Should BEAS choose to execute the right to terminate the contract agreement as stated in Exhibit C-1 Additional Special Provisions.
7. Review of the State Disallowance of Costs: At any time during the performance of the Services, and upon receipt of required reports, or Contractor Site Review Reports, the State may review all units served to clients incurred by the Contractor and all payments made to date. Upon such review the State shall disallow any units served to clients incurred that are not determined to be allowable or are determined to be served to ineligible clients and shall,



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by written notice specifying the disallowed costs, inform the Contractor of any such disallowance. If the State disallows costs for which payment has not yet been made, it shall refuse to pay such costs.

8. Form Submission:

Prior to submittal of an invoice for the following Title III funded services: Congregate Meals the Contractor will complete Form # 3502 (Contract Service Authorization Form), in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services for each client for whom reimbursement will be claimed.

9. Invoice Submission:

9.1. Meals

Title III: The Contractor shall complete and submit a signed CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE for actual meals served during the month specified. The CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE is the Bureau of Elderly and Adult Services generated and preprinted invoice provided to the contractor on a monthly basis by the NH Department of Health and Human Services, Data Management Unit.

A signed cover letter identifying the name of the agency, the type of service and the dates of service may be submitted in lieu of individually signed client specific invoices.

Contract Service Authorization Form (#3502) and Meals Invoices shall be sent to:  
NH Department of Health and Human Services  
Data Management Unit  
129 Pleasant St, P.O. Box 2000  
Concord, NH 03301

9.2. Contractor will have forty-five (45) days from the end of the contract period to submit final invoices to the Department for payment. Any adjustments made to a prior invoice, during these forty-five (45) days, will need to be accompanied by supporting documentation.

9.3. The Contractor shall submit to DHHS the subcontractor's budget for review and approval. The Contractor shall submit to DHHS copies of their subcontractor's invoices for actual units served to clients that support the requests for reimbursement, upon DHHS request.



**SPECIAL PROVISIONS**

Contractors Obligations: The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

1. **Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.
2. **Time and Manner of Determination:** Eligibility determinations shall be made on forms provided by the Department for that purpose and shall be made and remade at such times as are prescribed by the Department.
3. **Documentation:** In addition to the determination forms required by the Department, the Contractor shall maintain a data file on each recipient of services hereunder, which file shall include all information necessary to support an eligibility determination and such other information as the Department requests. The Contractor shall furnish the Department with all forms and documentation regarding eligibility determinations that the Department may request or require.
4. **Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.
5. **Gratuities or Kickbacks:** The Contractor agrees that it is a breach of this Contract to accept or make a payment, gratuity or offer of employment on behalf of the Contractor, any Sub-Contractor or the State in order to influence the performance of the Scope of Work detailed in Exhibit A of this Contract. The State may terminate this Contract and any sub-contract or sub-agreement if it is determined that payments, gratuities or offers of employment of any kind were offered or received by any officials, officers, employees or agents of the Contractor or Sub-Contractor.
6. **Retroactive Payments:** Notwithstanding anything to the contrary contained in the Contract or in any other document, contract or understanding, it is expressly understood and agreed by the parties hereto, that no payments will be made hereunder to reimburse the Contractor for costs incurred for any purpose or for any services provided to any individual prior to the Effective Date of the Contract and no payments shall be made for expenses incurred by the Contractor for any services provided prior to the date on which the individual applies for services or (except as otherwise provided by the federal regulations) prior to a determination that the individual is eligible for such services.
7. **Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the 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;



- 7.3. Demand repayment of the excess payment by the Contractor in which event failure to make such repayment shall constitute an Event of Default hereunder. When the Contractor is permitted to determine the eligibility of individuals for services, the Contractor agrees to reimburse the Department for all funds paid by the Department to the Contractor for services provided to any individual who is found by the Department to be ineligible for such services at any time during the period of retention of records established herein.

RECORDS: MAINTENANCE, RETENTION, AUDIT, DISCLOSURE AND CONFIDENTIALITY:

8. **Maintenance of Records:** In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:
- 8.1. **Fiscal Records:** books, records, documents and other data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor during the Contract Period, said records to be maintained in accordance with accounting procedures and practices which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.
- 8.2. **Statistical Records:** Statistical, enrollment, attendance or visit records for each recipient of services during the Contract Period, which records shall include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.
- 8.3. **Medical Records:** Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.
9. **Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the agency fiscal year. It is recommended that the report be prepared in accordance with the provision of Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non Profit Organizations" and the provisions of Standards for Audit of Governmental Organizations, Programs, Activities and Functions, issued by the US General Accounting Office (GAO standards) as they pertain to financial compliance audits.
- 9.1. **Audit and Review:** During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts.
- 9.2. **Audit Liabilities:** In addition to and not in any way in limitation of obligations of the Contract, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department, all payments made under the Contract to which exception has been taken or which have been disallowed because of such an exception.
10. **Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.

New Hampshire Department of Health and Human Services  
Exhibit C Amendment #1



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

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



more employees, it will maintain a current EEOP on file and submit an EEOP Certification Form to the OCR, certifying that its EEOP is on file. For recipients receiving less than \$25,000, or public grantees with fewer than 50 employees, regardless of the amount of the award, the recipient will provide an EEOP Certification Form to the OCR certifying it is not required to submit or maintain an EEOP. Non-profit organizations, Indian Tribes, and medical and educational institutions are exempt from the EEOP requirement, but are required to submit a certification form to the OCR to claim the exemption. EEOP Certification Forms are available at: <http://www.ojp.usdoj/about/ocr/pdfs/cert.pdf>.

17. **Limited English Proficiency (LEP):** As clarified by Executive Order 13166, Improving Access to Services for persons with Limited English Proficiency, and resulting agency guidance, national origin discrimination includes discrimination on the basis of limited English proficiency (LEP). To ensure compliance with the Omnibus Crime Control and Safe Streets Act of 1968 and Title VI of the Civil Rights Act of 1964, Contractors must take reasonable steps to ensure that LEP persons have meaningful access to its programs.
18. **Pilot Program for Enhancement of Contractor Employee Whistleblower Protections:** The following shall apply to all contracts that exceed the Simplified Acquisition Threshold as defined in 48 CFR 2.101 (currently, \$150,000)

CONTRACTOR EMPLOYEE WHISTLEBLOWER RIGHTS AND REQUIREMENT TO INFORM EMPLOYEES OF WHISTLEBLOWER RIGHTS (SEP 2013)

(a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at 41 U.S.C. 4712 by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR 3.908.

(b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.

(c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.

19. **Subcontractors:** DHHS recognizes that the Contractor may 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

**New Hampshire Department of Health and Human Services  
Exhibit C Amendment #1**



- 19.4. Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed
- 19.5. DHHS shall, at its discretion, review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

**DEFINITIONS**

As used in the Contract, the following terms shall have the following meanings:

**COSTS:** Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

**DEPARTMENT:** NH Department of Health and Human Services.

**FINANCIAL MANAGEMENT GUIDELINES:** Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

**PROPOSAL:** If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

**UNIT:** For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

**FEDERAL/STATE LAW:** Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

**CONTRACTOR MANUAL:** Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act. NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

**SUPPLANTING OTHER FEDERAL FUNDS:** The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.



**REVISIONS TO GENERAL PROVISIONS**

1. Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:
  4. **CONDITIONAL NATURE OF AGREEMENT.**  
Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including without limitation, the continuance of payments, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability of funds affected by any state or federal legislative or executive action that reduces, eliminates, or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope of Services provided in Exhibit A Amendment #3, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.
2. Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language;
  - 10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.
  - 10.2 In the event of early termination, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.
  - 10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.
  - 10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.
  - 10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.
3. Subparagraph 14.1.1 of the General Provisions of this contract, is deleted and the following subparagraph is added:
  - 14.1.1 Comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$1,000,000 per occurrence and \$2,000,000 general aggregate.



**CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

**ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS**

**US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS**  
**US DEPARTMENT OF EDUCATION - CONTRACTORS**  
**US DEPARTMENT OF AGRICULTURE - CONTRACTORS**

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner  
NH Department of Health and Human Services  
129 Pleasant Street,  
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
  - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
    - 1.2.1. The dangers of drug abuse in the workplace;
    - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
    - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
    - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
  - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
    - 1.4.1. Abide by the terms of the statement; and
    - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
  - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

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5-8-15

New Hampshire Department of Health and Human Services  
Exhibit D Amendment #1



- has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- 1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted
    - 1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
    - 1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
  - 1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.
2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

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

Contractor Name:

5-8-15  
Date

Liz Olimpio  
Name: Commonwealth Board of Trustees  
Title: 5-8-15  
Liz Olimpio



**CERTIFICATION REGARDING LOBBYING**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS  
US DEPARTMENT OF EDUCATION - CONTRACTORS  
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

- Programs (indicate applicable program covered):
- \*Temporary Assistance to Needy Families under Title IV-A
  - \*Child Support Enforcement Program under Title IV-D
  - \*Social Services Block Grant Program under Title XX
  - \*Medicaid Program under Title XIX
  - \*Community Services Block Grant under Title VI
  - \*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-I.)
3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Contractor Name:

5-8-15  
Date

Liz Olimpio  
Name: Chairman Board of Trustees  
Title: Liz Olimpio



Exhibit F Amendment #1

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION  
AND OTHER RESPONSIBILITY MATTERS**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

**INSTRUCTIONS FOR CERTIFICATION**

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.
6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and



Exhibit F Amendment #1

information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

- 10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS

- 11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (l)(b) of this certification; and
  - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- 12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

- 13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
  - 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
  - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).
- 14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name:

5-8-15  
Date

J. Liz Olimpio  
 Name: Chairman Board of  
 Title: Trustee  
 Liz Olimpio

Contractor Initials LO  
 Date 5-8-15



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

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;
- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;
- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);
- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;
- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;
- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;
- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;
- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;
- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

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

Exhibit G

Contractor Initials

JLC

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations  
and Whistleblower protections

Date

5-8-15

New Hampshire Department of Health and Human Services  
Exhibit G



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

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

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

Contractor Name:

5-8-15  
Date

Liz Olapio  
Name:  
Title: Chenney Board of Trust  
Liz Olapio

Exhibit G

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower protections

Contractor Initials LO

Date 5-8-15



**CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE**

Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name:

5-8-15  
Date

Liz Olimpio  
Name: Chairman  
Title: Liz Olimpio



**HEALTH INSURANCE PORTABILITY ACT**  
**BUSINESS ASSOCIATE AGREEMENT**

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) **Definitions.**

- a. "**Breach**" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
- b. "**Business Associate**" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- c. "**Covered Entity**" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. "**Designated Record Set**" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. "**Data Aggregation**" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "**Health Care Operations**" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.
- g. "**HITECH Act**" means the Health Information Technology for Economic and Clinical Health Act, Title XIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.
- h. "**HIPAA**" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.
- i. "**Individual**" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).
- j. "**Privacy Rule**" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
- k. "**Protected Health Information**" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

JCU

5-8-15



- i. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.
- m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.
- n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.
- o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.
- p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) **Business Associate Use and Disclosure of Protected Health Information.**

- a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.
- b. Business Associate may use or disclose PHI:
  - I. For the proper management and administration of the Business Associate;
  - II. As required by law, pursuant to the terms set forth in paragraph d. below; or
  - III. For data aggregation purposes for the health care operations of Covered Entity.
- c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.
- d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business



Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

- e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

**(3) Obligations and Activities of Business Associate.**

- a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.
- b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:
- o The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
  - o The unauthorized person used the protected health information or to whom the disclosure was made;
  - o Whether the protected health information was actually acquired or viewed
  - o The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

- c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.
- d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.
- e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (l). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI



- pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.
- f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.
  - g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.
  - h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.
  - i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.
  - j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.
  - k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.
  - l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business



Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

**(4) Obligations of Covered Entity**

- a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.
- b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.
- c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

**(5) Termination for Cause**

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

**(6) Miscellaneous**

- a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.
- b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.
- c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.
- d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

JCC  
5-8-15

New Hampshire Department of Health and Human Services  
 Exhibit I Amendment #1



- e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.
- f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) I, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37), shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health & Human Services  
 The State

Marilee Nihan  
 Signature of Authorized Representative

Marilee Nihan  
 Name of Authorized Representative

Deputy Commissioner  
 Title of Authorized Representative

5/22/15  
 Date

G.W.R.C. Greater Wakefield Resource Center  
Liz (Lizbeth) Olimpio  
 Name of the Contractor

Liz (Lizbeth) Olimpio  
 Signature of Authorized Representative

Liz Olimpio  
 Name of Authorized Representative

Chairman of the Board  
 Title of Authorized Representative

5-8-15  
 Date

SJM

104 SM



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF COMMUNITY BASED CARE SERVICES

BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas  
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9203 1-800-351-1888

Diane Langley, Director  
Sheri Rockburn, Director

Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

May 29, 2014

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

sole source  
62% Federal Funds  
38% General Funds

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into a **sole source** amendment to an existing Agreement with Greater Wakefield Resource Center, 254 Main Street, Union, New Hampshire (Vendor #158408) by extending the contract end date to June 30, 2015 and increasing the price limitation by \$17,600.00 from \$44,722.30 to \$62,322.30 to provide congregate meals to individuals age 60 and older, effective July 1, 2014, or date of Governor and Council approval, whichever is later, through June 30, 2015. The original Agreement was approved by the Governor and Executive Council on June 22, 2011 (Item #197), and subsequently amended on July 10, 2013 (Item # 55).

Funds to support this request are anticipated to be available in the following account in State Fiscal Year 2015.

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

State Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
2012	541-500383	Meals - Home Delivered & Congregate	\$ 15,680.00	\$ 0.00	\$ 15,680.00
2013	541-500383	Meals - Home Delivered & Congregate	\$ 15,680.00	\$ 0.00	\$ 15,680.00
2014	541-500383	Meals - Home Delivered & Congregate	\$ 13,362.30	\$ 0.00	\$ 13,362.30
2015	541-500383	Meals - Home Delivered & Congregate	\$ 0.00	\$ 17,600.00	\$ 17,600.00
<b>Total</b>			<b>\$ 44,722.30</b>	<b>\$ 17,600.00</b>	<b>\$ 62,322.30</b>

**EXPLANATION**

This **sole source** request is being made by the Department because the Greater Wakefield Resource Center failed to respond to emails and the public posting of a Request for Proposals for Nutrition and Transportation services to provide home delivered meals, congregate meals and transportation services that was published on the Department's website November 22, 2013 through February 20, 2014. All known potential bidders, including this agency, were notified of the publication

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
May 29, 2014  
Page 2 of 2

and subsequent publications of addendums and responses to questions regarding the Request for Proposals.

The agency contacted the Department and advised that they had not paid attention to the email notifications it had received and wasn't expecting a Request for Proposals to be published until Spring 2014. The agency requested a renewal of their existing agreement to provide congregate meals. The Department believes it is in the best interest of the citizens served by the agency to renew the agreement and ensure continuity of nutrition services that enable elderly clients to remain in their homes and communities and maintain their independence. Greater Wakefield Resource Center is the only provider of congregate meals in this area.

The purpose of this contract amendment is to provide congregate meals to clients that support their health, independence and ability to remain in their homes and communities. The contractor will obtain client feedback on the quality of the services to ensure services are being delivered satisfactory or better. Additionally, the contractor will be collecting and reporting data on the number of clients served in order for the Department to understand the gaps in service delivery and to be able to have more meaningful discussions about this important service.

Should the Governor and Council determine to not authorize to amend this existing Agreement, the nutrition services provided to low income, elderly clients will be reduced, or eliminated, to a level that could jeopardize their ability to remain in their home and would likely need more costly long-term care services in traditional nursing homes or community based care programs.

Geographic area to be served is Union, New Hampshire and surrounding towns.

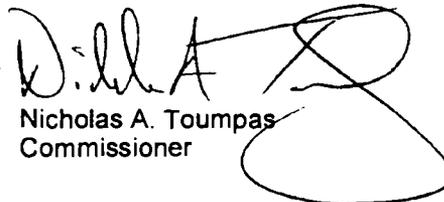
Source of Funds for these contracts: 62% Federal Funds from the Administration for Community Living's Special Programs for the Aging-Title III and 38% General Funds..

Respectfully submitted,



Sheri L. Rockburn  
Director

Approved by:



Nicholas A. Toumpas  
Commissioner



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**State of New Hampshire  
Department of Health and Human Services  
Amendment #2 for Greater Wakefield Resource Center, Inc.**

This second Amendment to the Nutrition services contract (hereinafter referred to as "Amendment #2") dated this 22nd day of May 2014, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Greater Wakefield Resource Center, Inc., (hereinafter referred to as "the Contractor"), a non-profit corporation organized under the laws of the State of New Hampshire, with a place of business at 254 Main Street, Union, NH 03887.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 22, 2011, and amended by an agreement (Amendment #1 to the Contract) approved on July 10, 2013, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties; and

WHEREAS the Department is extending the Contract for one year to continue the delivery of services.

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

- 1) Amendment and modification of P-37 "Agreement";
  - a) Change Completion Date in Block 1.7 of the P-37 to read June 30, 2015.
  - b) Change Price Limitation in Block 1.8 of the P-37 to read \$62,322.30.
- 2) Amendment and modification of Exhibit A.
  - a) Delete Exhibit A paragraph #5 and replace with the following:

Meal providers are required to comply with regulations regarding safety and sanitary food practice in accordance with state and local health, safety and sanitation requirements. The contractor shall provide congregate meals at the location, hours, and days identified in Exhibit A-2.

- b) Delete Exhibit A, Section II Other Terms and Conditions

**State of New Hampshire  
Department of Health and Human Services  
Amendment #2 for Greater Wakefield Resource Center, Inc.**



- 
- c) Replace with Exhibit A, Section II Amendment #2.
  - 3) Add Exhibit A-1 Amendment #2, Geographic Area Form
  - 4) Add Exhibit A-2 Amendment #2, Congregate Site Information
  - 5) Amendment and modification of Exhibit B.
    - a) Delete Exhibit B.
    - b) Replace with Exhibit B Amendment #2.
  - 6) Amendment and modification of Exhibit C-1.
    - a) Delete paragraph #4 from Exhibit C-1 in Amendment #1 and replace with the following:
      - 4. Paragraph "10. Audit:" of Exhibit C Special Provisions
      - #10. In accordance with State of New Hampshire Administrative Rule He-C 1550.04, the Contractor shall submit annual uncertified financial statements and a Certificate of Authenticity, which attests that the financial statements are correct in all materials respects and is signed by an officer of the corporation, partner or owner under penalty of unsworn falsification.

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State of New Hampshire  
Department of Health and Human Services  
Amendment #2 for Greater Wakefield Resource Center, Inc.



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

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

State of New Hampshire  
Department of Health and Human Services

4/3/14  
Date

[Signature]  
Name  
Title Director

Greater Wakefield Resource Center, Inc.

5/28/2014  
Date

[Signature], Chairman of Board  
NAME  
TITLE

Acknowledgement:

State of New Hampshire, County of Carroll on May 28, 2014, before the undersigned officer, personally appeared the person identified above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

Signature of Notary Public or Justice of the Peace

[Signature]  
Name and Title of Notary or Justice of the Peace

ANGIE M. CASPERONIS, Notary Public  
My Commission Expires September 28, 2016





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**SECTION II: OTHER TERMS AND CONDITIONS**

1. Reporting Requirements

Contractor shall complete quarterly reports which will be a pre-defined electronic form supplied by DHHS. The report must be submitted by the 15<sup>th</sup> of the month following the quarter end. The data will include, but not be limited to the following:

- Expenses by program service provided. Service is defined as Congregate Meals;
- Revenue, by program service provided, by funding source;
- Actual Units served, by program service provided, by funding source;
- Number of unduplicated clients served, by service provided, by funding source;
- Number of Title III clients served with non-BEAS funds;
- Unmet need/waiting list; and,
- Lengths of time clients are on a waiting list.

2. Wait List

2.1. All services covered by this contract shall be provided to the extent that funds, staff and/or resources for this purpose are available. For services covered by the Social Services Block Grant, the contract agency shall maintain a wait list in accordance with He-E 501 when funding or resources are not available to provide the requested services. All other services not covered by the Social Services Block Grant, shall also maintain a wait list that includes at a minimum:

- a) Each contract agency shall include the following information on its wait list:
  - i) The individual's full name and date of birth;
  - ii) The name of the service being requested;
  - iii) The date upon which the individual applied for services which shall be the date the application was received by the contract agency or BEAS;
  - iv) The target date of implementing the services based on the communication between the individual and the BEAS/contract agency;
  - v) The date upon which the individual's name was placed on the wait list shall be the date of the notice of decision in which the individual was determined eligible for Title XX services;
  - vi) The individual's assigned priority on the wait list, determined in accordance with (b) below;
  - vii) A brief description of the individual's circumstances and the services he or she needs.
- b) The contract agency shall prioritize each individual's standing on the list by determining the individual's urgency of need in the following order:
  - i) Individual is in an institutional setting or is at risk of being admitted to or discharged from an institutional setting;
  - ii) Declining mental or physical health of the caregiver;
  - iii) Declining mental or physical health of the individual;
  - iv) Individual has no respite services while living with a caregiver; and
  - v) Length of time on the wait list.



Exhibit A Section II Amendment # 2

- vi) When 2 or more individuals on the wait list have been assigned the same service priority, the individual served first will be the one with the earliest application date.
- vii) Individuals who are being served under protective services RSA 161-F: 42-57 shall be given priority status on the waitlist and in accordance with He-E 501.14 (f) and He-E 502.13.
- viii) Individuals with adult protective needs in accordance with RSA 161-F: 42-57 shall be exempt from the wait list.
- c) When an individual is placed on the wait list, the contract agency shall notify the individual in writing
- d) The wait list must be maintained during the contract period and available to BEAS upon request.

3. Notice of Failure to meet Service Obligations

- 1) In the event that the Contractor for any reason is unable to meet any service obligations prior to the completion date, the Contractor shall give at least a ninety (90) day prior written notice addressed to the Bureau Director, Bureau of Elderly and Adult Services, of such inability to meet service obligations.
- 2) Examples of failure to meet service obligations may include, but are not limited to:
  - a) Reducing hours of operation
  - b) Changing a geographic service area
  - c) Closing or opening a site
- 3) The written notification shall include the following:
  - a) The reasons for the inability to deliver services;
  - b) How service recipients and the community will be impacted if the contractor is unable to provide services
  - c) How service recipients and the community will be notified; and
  - d) The Contractor's plan to transition clients into other services or refer the clients to other agencies.
- 4) The Contractor shall maintain a plan that addresses the present and future needs of clients receiving services in the event that:
  - a) Service(s) are terminated or planned to be terminated prior to the termination date of the contract;
  - b) The contract is terminated or is planned to be terminated prior to the termination date of the contract by the Contractor or the State;
  - c) The Contractor terminates a services or services for any reason;
  - d) The Contractor cannot carry out all or a portion of the services terms or conditions outlined in the contract or sub-contracts.

4. Transition Process

The Contractor shall have a transition process for clients in the event that they maybe transitioned between DHHS contracted providers and shall submit their written transition process to DHHS within thirty days of approval of the Contract Agreement. The process shall ensure

- a) Uninterrupted delivery of services for clients;
- b) A method of notifying clients and/or the community about the transition. A staff member shall be available to address questions about the transition.

**New Hampshire Department of Health and Human Services  
Congregate Meals**



**Exhibit A Section II Amendment # 2**

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5. Equal Access to services:

- 5.1. To ensure equal access to quality services, the Contractor, when feasible and appropriate, shall make reasonable efforts to provide clients of limited English proficiency (LEP) with interpretation services. Persons of LEP are defined as those who do not speak English as their primary language and whose skills in listening to, speaking, or reading English are such that they are unable to adequately understand and participate in the care or in the services provide to them without language assistance.
- 5.2. Additionally, the Contractor, when appropriate, shall identify communication access needs (hearing, vision, speech) and develop an individual communication plan for recipients of services provided under this contract.

6. Consumer Grievance Process

The Contractor shall have a grievance process for clients and for individuals who have been denied services, that shall be maintained during the contract period and any grievances filed are to be available to BEAS upon request. At a minimum the process shall include the following:

- 6.1. Client name, type of service, date of written grievance, nature/subject of the grievance, who in the agency reconsiders agency decisions, what are the issues that can be addressed in the grievance process, and how consumers are informed of their right to appeal or file grievances.

7. Adult Protective Services:

In order to meet the requirements of Chapter 161-F Protective Services to Adults, the Contractor shall ensure the provision of services to clients referred by BEAS as persons in need of protective services. . These clients will not be charged a fee or a donation and will not have any financial eligibility requirements.

8. Criminal Background and Adult Protective Service Registry Checks:

- 8.1. Contractor shall conduct a criminal background check if a potential applicant for employment or volunteer, funded under this contract, may have client contact in the client's place of residence.
- 8.2. Contractors which are licensed, certified or funded by the DHHS shall meet the requirements of RSA 161-F: 49 Registry, VII, which requires the submission of the name of a prospective employee who may have client contact, for review against the State Adult Protective Service Registry, effective July 1, 2007.

9. Services and Administration of the program services shall be provided in accordance with the applicable federal and state laws and rules including NH Administrative Rule He-E-502, and policies and regulations adopted by the Department of Health and Human Services currently in effect, and as they may be adopted or amended during the contract period.

10. Contract Monitoring:  
The Contractor shall:

**New Hampshire Department of Health and Human Services  
Congregate Meals**



**Exhibit A Section II Amendment # 2**

- 10.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.
- 10.2. Ensure the Department is provided with access that includes but is not limited to:
- a) Data
  - b) Financial records
  - c) Scheduled access to Contractor work sites/locations/work spaces and associated facilities.
  - d) Unannounced access to Contractor work sites/locations/work spaces and associated facilities.
  - e) Scheduled phone access to Contractor principals and staff
  - f) Timely unscheduled phone response by Contractor principals and staff.

11. Board of Directors

Contractor shall submit to the Bureau of Elderly and Adult Services a list of current Board of Directors, with names, addresses and titles that covers the entire contract period.

12. Agreement Elements:

The Agreement between the parties shall consist of the following: General Provisions (P-37), Exhibit A Scope of Services, Exhibit A-1 Geographic Area, Exhibit A-2 Congregate Site Information, Exhibit B Purchase of Services, Exhibit C Special Provisions, Exhibit C-1 Additional Special Provisions, Exhibit D Certification Regarding Drug-Free Workplace, Exhibit E Certification Regarding Lobbying, Exhibit F Certification Regarding Debarment, Suspension and Other Responsibility Matters, Exhibit G Certification Regarding the American's With Disabilities Act Compliance, Exhibit H Certification Regarding Environmental Tobacco Smoke, Exhibit I Health Insurance Portability and Accountability Act Business Associate Agreement, Exhibit J Certification Regarding The Federal Funding Accountability and Transparency Act Compliance. In the event of any conflict or contradiction between or among the Agreement documents, the documents shall control in the above order of precedence.

13. Financial Integrity Maintenance

- 13.1. Financial Reporting Requirements: In addition to the requirement for Contractor to provide annual audited financial statements, the Contractor agrees to provide quarterly to the State, within thirty (30) days from the last day of the quarter, interim Balance Sheet and Profit and Loss Statements for the Contractor to including separate statements for related parties. All statements must be certified by an officer of the reporting entity.
- 13.2. Corrective Action and or Termination: If after review of the contractor submitted information, and based on the following risk assessment, the State at its sole discretion, may:
- 1. Require a corrective action plan for identified deficiencies, or
  - 2. Terminate the contract for reasons of risk to continued operation, services, or deliverables as required by the terms of the contract.



**Exhibit A Section II Amendment # 2**

- 13.3. Absence of Risk Conditional Termination: This section does not negate any rights the State may have relative to the contract.
- 13.4. Risk Assessment Process:  
 The State will analyze the financial information provided by Contractor. Such analysis will include calculation of the ratios set forth in Table A. The weighted average of the ratios is used to calculate a risk score as follows:
- Low Risk 70% and Above
  - Moderate Risk From 26% to 69%
  - High Risk 25% and Below
- 13.5. Weighted Average: The process for the scoring is
1. Calculate the individual ratio for the Contractor
  2. Divide Contractor ratio by the benchmark to determine percentage above or below benchmark
  3. Multiply Contractor percentage by "Percentage Weight of Risk Score"
  4. Add the scores for the ratios as determined for each ratio in Steps 1 to 3.
- 13.6. The State will provide, upon request, the Risk calculations for the Contractor.

<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
Liquidity	Current Ratio	This ratio compares the Current Assets with the Current Liabilities.	CURRENT ASSETS / CURRENT LIABILITIES	This ratio measures the Liquidity of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a ratio, and represents 15% of the total risk assessment value.	1.0:1	10.0%

Contractors Initial:   
 Date: 5/28/2014

New Hampshire Department of Health and Human Services  
 Congregate Meals



Exhibit A Section II Amendment # 2

<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
Liquidity	Days Expense in Working Capital	This ratio calculates the number of day's expense that the working capital can support.	(CURRENT ASSETS - CURRENT LIAB) / ((REVENUE - OPERATING INCOME - DEPRECIATION) /365)	This ratio measures the Liquidity of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed in "number of days" and represents 15% of the total risk assessment value.	30	10.0%
Liquidity	Days of Revenue In Accounts Receivable	This ratio calculates the number of days of revenue that are in accounts receivable.	(ACCOUNTS RECEIVABLE) / (REVENUE/365)	This ratio measures the performance of the accounts receivable function and the timeliness of revenue collection. A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed in days.	30	10.0%
Operating Results	Return on Equity	This ratio is a representation of the increase or decrease in net assets from the prior year.	INCREASE IN NET ASSETS / NET ASSETS	This ratio measures the Operating Results of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk	5%	10.0%

Contractors Initial: *[Signature]*  
 Date: *5/28/2014*

New Hampshire Department of Health and Human Services  
 Congregate Meals



Exhibit A Section II Amendment # 2

<i>Table A - Risk Analysis Assessment Ratios Matrix</i>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
				assessment value.		
Operating Results	Operation Income to Revenue	This ratio compares the current year's operating income with the current year's revenue.	OPERATING INCOME / REVENUE	This ratio measures the Operating Results of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	3%	10.0%
Operating Results	Cash Flow % of Revenue	This ratio calculates the company's cash flow as a percentage of revenue.	(INCREASE IN NET ASSETS + DEPRECIATION) / REVENUE	This ratio measures the Operating Results of an organization. A ratio equal to or higher than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	2%	10.0%
Leverage	Debt to Equity	This ratio compares	(TOTAL ASSETS - NET	This ratio measures Leverage (Relative	0.7:1	5.0%

Contractors Initial: *DA*  
 Date: *5/28/2014*



Exhibit A Section II Amendment # 2

<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
		total debt to equity.	ASSETS)/NET ASSETS	Debt Level). A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a ratio and represents 5% of the total risk assessment value.		
Leverage	Long Term Debt to Equity	This ratio compares long term debt to equity.	LONG TERM DEBT / NET ASSETS	This ratio measures Leverage (Relative Debt Level). A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 5% of the total risk assessment value.	100%	5.0%
Leverage	Debt Ratio	This ratio compares total debt to total assets.	(TOTAL ASSETS - NET ASSETS)/TOTAL ASSETS	This ratio measures Leverage (Relative Debt Level). A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	50%	10.0%



Exhibit A Section II Amendment # 2

<b>Table A - Risk Analysis Assessment Ratios Matrix</b>						
<b>Category</b>	<b>Name of Ratio</b>	<b>Description</b>	<b>How it is Calculated</b>	<b>What the Ratio Measures</b>	<b>Benchmark</b>	<b>Percentage of Total Risk Assessment</b>
Reserves	Cash Flow to Total Debt	This ratio compares cash flow to total debt.	(OP. SURPLUS + DEPRECIATION) / (TOTAL ASSETS - NET ASSETS)	This ratio measures Reserves. A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed as a percentage and represents 10% of the total risk assessment value.	5%	10.0%
Reserves	Days Expense in Available Net Assets	This ratio calculates the number of day's expense that the net assets of the company can support.	NET ASSETS / ((REVENUE - OPERATING INCOME - DEPRECIATION) / 365)	This ratio measures Reserves. A ratio equal to or lower than the benchmark is considered favorable. The benchmark is expressed in "number of days" and this represents 10% of the total risk assessment value.	90	10.0%
						100.0%

Contractors Initial: GH  
 Date: 5/28/2014







**Exhibit B Amendment # 2**

**Method and Conditions Precedent to Payment**

1. The State shall pay the Contractor an amount not to exceed the Price Limitation, block 1.8, of the General Provisions (P-37) of this Agreement for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
2. Service(s) provided in this Agreement: The Contractor shall be reimbursed for providing and delivering the services identified in Exhibit A. The following terms and conditions detailed below in this Exhibit B shall apply to all services unless expressly stated otherwise.
3. Payment for contracted services for the period beginning July 1, 2014 through June 30, 2015 will be made up to the total maximum allowable funding and based on the following reimbursement rate as identified in Table A below:

<b>Table A</b>			
<b>Funding Source</b>	<b>Service</b>	<b>Reimbursement rate per Congregate Meals</b>	<b>Total Maximum Amount Allowed by Funding</b>
Title III C-1	Congregate Meals	\$5.50	\$17,600

4. The Agreement (P-37) Section 1.6 Account Numbers for funding under this contract including identification of the funding source (name of Grantor and Catalog of Federal Domestic Assistance (CFDA) number) are as follows:

<b>Service</b>	<b>Funding Name</b>	<b>Funding Source</b>	<b>CFDA #</b>	<b>State of NH Account Number</b>
Nutrition Services	Special Programs for the Aging- Title IIIC	ACL	93.045	05-95-48-481010-78720000-541-500383

5. The Contractor shall comply with the necessary steps established by the Department for making payments to vendors using Electronic Funds Transfer (EFT).
6. The DHHS may require certain payments returned to the State of New Hampshire if:
  - 1) the final reconciliation of the payments made by BEAS under this agreement show that the payments exceeded the actual units served;
  - 2) services are not being provided in accordance with the requirements and scope of services in Exhibit A; and
  - 3) Should BEAS choose to execute the right to terminate the contract agreement as stated in Exhibit C-1 Additional Special Provisions.

Contractors: Initials: *GA*  
Date: *5/28/2014*

**New Hampshire Department of Health and Human Services  
Congregate Meals**



**Exhibit B Amendment # 2**

7. **Review of the State Disallowance of Costs:** At any time during the performance of the Services, and upon receipt of required reports, or Contractor Site Review Reports, the State may review all units served to clients incurred by the Contractor and all payments made to date. Upon such review the State shall disallow any units served to clients incurred that are not determined to be allowable or are determined to be served to ineligible clients and shall, by written notice specifying the disallowed costs, inform the Contractor of any such disallowance. If the State disallows costs for which payment has not yet been made, it shall refuse to pay such costs.

8. **Invoice Submission:**

Title III Services The Contractor shall complete and submit a signed CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE for actual services during the month specified. The CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE is the Bureau of Elderly and Adult Services generated and preprinted invoice provided to the contractor on a monthly basis by the NH Department of Health and Human Services, Data Management Unit.

Invoices shall be sent to:

NH Department of Health and Human Services  
Data Management Unit  
129 Pleasant St, P.O. Box 2000  
Concord, NH 03301

8.1. Contractor will have forty-five (45) days from the end of the contract period to submit final invoices to the Department for payment. Any adjustments made to a prior invoice, during these forty-five (45) days, will need to be accompanied by supporting documentation.

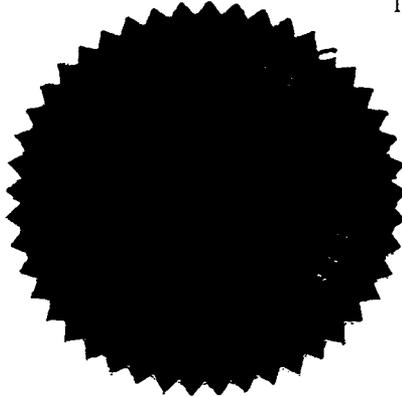
8.2. The Contractor shall submit to DHHS the subcontractor's budget for review and approval. The Contractor shall submit to DHHS copies of their subcontractor's invoices for actual units served to clients that support the requests for reimbursement, upon DHHS request.

Contractors: Initials: DA  
Date: 5/28/2014

State of New Hampshire  
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GREATER WAKEFIELD RESOURCE CENTER, INC. is a New Hampshire nonprofit corporation formed October 31, 1997. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 12<sup>th</sup> day of May A.D. 2014

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

William M. Gardner  
Secretary of State

## CERTIFICATE OF VOTE

I, Deborah Gauthier, Secretary, do hereby certify that:  
(Name of the elected Officer of the Agency, cannot be contract signatory)

1. I am a duly elected Officer of Greater Wakefield Resource Center.  
(Agency Name)

2. The following is a true copy of the resolution duly adopted at a meeting of the Board of Directors of  
the Agency duly held on May 9, 2014:  
(Date)

**RESOLVED:** That the Chairman of the Board  
(Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to  
execute any and all documents, agreements and other instruments, and any amendments, revisions,  
or modifications thereto, as he/she may deem necessary, desirable or appropriate.

3. The forgoing resolutions have not been amended or revoked, and remain in full force and effect as of  
the 28th day of May, 2014.  
(Date Contract Signed)

4. Debra Joyce is the duly elected Chairman of the Board  
(Name of Contract Signatory) (Title of Contract Signatory)

of the Agency.

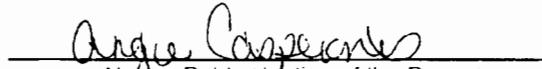
  
(Signature of the Elected Officer)

STATE OF NEW HAMPSHIRE

County of Carroll

The forgoing instrument was acknowledged before me this 28 day of May, 2014.

By Deborah Gauthier  
(Name of Elected Officer of the Agency)

  
(Notary Public/Justice of the Peace)

NOTARY SEAL

Commission Expires: 9/28/2016

**ANGIE M. CASPERONIS, Notary Public**  
My Commission Expires September 28, 2016



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/8/2014

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

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> <b>E &amp; S Insurance Services LLC</b> 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	<b>CONTACT NAME:</b> Fairley Kenneally <b>PHONE (A/C No Ext):</b> (603)293-2791 <b>FAX (A/C, No):</b> (603)293-7188 <b>E-MAIL ADDRESS:</b> fairley@esinsurance.com													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Great American Ins Group</td> <td></td> </tr> <tr> <td>INSURER B: FirstComp</td> <td>27626</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Great American Ins Group		INSURER B: FirstComp	27626	INSURER C:		INSURER D:		INSURER E:		INSURER F:
INSURER(S) AFFORDING COVERAGE	NAIC #													
INSURER A: Great American Ins Group														
INSURER B: FirstComp	27626													
INSURER C:														
INSURER D:														
INSURER E:														
INSURER F:														
<b>INSURED</b> <b>Greater Wakefield Resource Center</b> PO Box 96 254 Main Street Union NH 03887														

**COVERAGES**      **CERTIFICATE NUMBER: 2014**      **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS								
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			MAC2246687-05	6/1/2014	6/1/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000 \$								
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS							COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$							
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$								
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC0097474-05	10/18/2013	10/18/2014	<table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E L EACH ACCIDENT</td> <td>\$ 100,000</td> </tr> <tr> <td>E L DISEASE - EA EMPLOYEE</td> <td>\$ 100,000</td> </tr> <tr> <td>E L DISEASE - POLICY LIMIT</td> <td>\$ 500,000</td> </tr> </table>	WC STATUTORY LIMITS	OTH-ER	E L EACH ACCIDENT	\$ 100,000	E L DISEASE - EA EMPLOYEE	\$ 100,000	E L DISEASE - POLICY LIMIT	\$ 500,000
WC STATUTORY LIMITS	OTH-ER														
E L EACH ACCIDENT	\$ 100,000														
E L DISEASE - EA EMPLOYEE	\$ 100,000														
E L DISEASE - POLICY LIMIT	\$ 500,000														

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

<b>CERTIFICATE HOLDER</b>  NH Dept of Health & Human Services Bureau of Elderly & Adult Services Catherine Cormier, Contract Administrator 129 Pleasant Street Concord, NH 03301-3857	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE  F Kenneally/FAIRLE <i>Fairley Kenneally</i>
---	---

# Certification of Authenticity



In accordance with

State of New Hampshire Administrative Rule He-C 1550-04 (c)(2)

I hereby certify that I am one of the following: officer of the corporation, partner, or owner of  
(organization name):

Greater Wakefield Resource Center

I attest, under penalty of unsworn falsification, that the submitted financial statements for the  
fiscal year(s) ending (Date)(s) December 31, 2013 are correct in all material  
respects.

Name: Debra A. Joyce

Signature and Date: Debra A. Joyce 5/28/2014

Title: Chairman of Board

(Must be signed by corporate officer, partner or owner)

Mailing Address:

Department of Health and Human Services  
Contracts & Procurement  
Financial Compliance Unit  
129 Pleasant St  
Concord, NH 03301-3857

Email: He-C1550@dhhs.state.nh.us

9:33 AM  
 05/28/14  
 Accrual Basis

**Greater Wakefield Resource Center  
 Profit & Loss  
 January through December 2013**

	Jan - Dec 13	Jan - Dec 13
Ordinary Income/Expense		
Income		
Direct Public Grants		
Foundation and Trust Grants	1,500.00	1,500.00
Total Direct Public Grants	1,500.00	1,500.00
INCOME		
BEAS	17,497.40	17,497.40
Beas NSIP	1,994.30	1,994.30
Donations & Grants		
Annual Appeal Donations	1,000.00	1,000.00
Elevator Project	925.00	925.00
Harvest Donations	1,560.00	1,560.00
Meals on Wheels Donations	200.00	200.00
Town Donation-Meals on Wheels	3,000.00	3,000.00
Town Donations	19,360.00	19,360.00
VFW Donations	440.00	440.00
Donations & Grants - Other	500.00	500.00
Total Donations & Grants	26,985.00	26,985.00
Hall Rental		
Deposits	160.00	160.00
Hall Rental - Other	640.00	640.00
Total Hall Rental	800.00	800.00
Interest	14.94	14.94
Miscellaneous		
Refunds	64.00	64.00
Total Miscellaneous	64.00	64.00
Office Rental		
Abundant Harvest	4,192.00	4,192.00
Gafney Library	4,644.00	4,644.00
Moose Mt & WaterShed	7,920.00	7,920.00
VFW	590.00	590.00
Total Office Rental	17,346.00	17,346.00
Senior Meal Fund Raisers		
50/50 Raffle	2,013.75	2,013.75
Auction	529.50	529.50
Coffee donations	273.48	273.48
Lyman Raffle	1,626.00	1,626.00
Misc. Donations-Senior Meals	56.95	56.95
Muffins	1,968.56	1,968.56
Pastry/Soup Sales	671.75	671.75
Senior Meals	8,470.45	8,470.45
Shot Gun	924.50	924.50
Total Senior Meal Fund Raisers	16,534.94	16,534.94
Total INCOME	81,236.58	81,236.58
Rental		
Function Hall Rentals	295.00	295.00
Total Rental	295.00	295.00
Total Income	83,031.58	83,031.58
Gross Profit	83,031.58	83,031.58
Expense		
Business Expenses		
Business Registration Fees	5.00	5.00
Total Business Expenses	5.00	5.00
Contract Services		
Outside Contract Services	653.00	653.00

9:33 AM  
 05/28/14  
 Accrual Basis

**Greater Wakefield Resource Center**  
**Profit & Loss**  
 January through December 2013

	Jan - Dec 13	Jan - Dec 13
Total Contract Services	653.00	653.00
Dietitian Fees	120.00	120.00
Elevator (Lula) Money Market		
Sprinkler Project	7,025.00	7,025.00
Elevator (Lula) Money Market - Other	11,852.92	11,852.92
<b>Total Elevator (Lula) Money Market</b>	<b>18,877.92</b>	<b>18,877.92</b>
<b>EXPENSES</b>		
Accountant Fees	1,000.00	1,000.00
Advertising	461.60	461.60
Afternoon Activities	61.15	61.15
Bank Service Charge	0.25	0.25
Bingo Supplies	678.11	678.11
Check Mate Payroll	258.48	258.48
Computers		
Computer Supplies	641.83	641.83
Computers - Other	513.59	513.59
<b>Total Computers</b>	<b>1,155.42</b>	<b>1,155.42</b>
Fund Raiser Expense		
Lyman Raffle	495.93	495.93
Fund Raiser Expense - Other	200.00	200.00
<b>Total Fund Raiser Expense</b>	<b>695.93</b>	<b>695.93</b>
Gift Expense	970.00	970.00
Insurance		
Liability Insurance	1,614.00	1,614.00
Workmans comp	913.00	913.00
<b>Total Insurance</b>	<b>2,527.00</b>	<b>2,527.00</b>
Kitchen Supplies	301.93	301.93
Liscense, Fee's & Subscriptions		
Food License	100.00	100.00
Labor Law	67.25	67.25
Water Testing Fee	75.00	75.00
Liscense, Fee's & Subscriptions - Other	233.95	233.95
<b>Total Liscense, Fee's &amp; Subscriptions</b>	<b>476.20</b>	<b>476.20</b>
Maintenance		
Appliance	639.00	639.00
Cleaning	819.41	819.41
Electrical	33.96	33.96
Fire Inspections & Maintenance	333.00	333.00
Furnace	2,155.62	2,155.62
Maint. Expences	702.96	702.96
Repairs	733.69	733.69
Supplies	186.22	186.22
Maintenance - Other	250.00	250.00
<b>Total Maintenance</b>	<b>5,853.86</b>	<b>5,853.86</b>
Meal Program Groceries		
Food	6,520.05	6,520.05
Lovell Lake	116.04	116.04
Performance Food Group		
Food	6,447.71	6,447.71
Non Food	751.25	751.25
Performance Food Group - Other	-372.50	-372.50
<b>Total Performance Food Group</b>	<b>6,826.46</b>	<b>6,826.46</b>
<b>Total Meal Program Groceries</b>	<b>13,462.55</b>	<b>13,462.55</b>
Misc. Fee	4.00	4.00
Office		
Computer repair/programs	262.99	262.99
Office supplies	899.66	899.66

9:33 AM  
 05/28/14  
 Accrual Basis

**Greater Wakefield Resource Center**  
**Profit & Loss**  
 January through December 2013

	Jan - Dec 13	Jan - Dec 13
Postage	575.55	575.55
<b>Total Office</b>	<b>1,738.20</b>	<b>1,738.20</b>
<b>Payroll</b>		
941 Taxes	6,504.97	6,504.97
Admin Pay	9,239.04	9,239.04
Janitorial	454.82	454.82
Kitchen Staff	16,849.67	16,849.67
Maint. Payroll	263.20	263.20
Office Staff Payroll	4,797.11	4,797.11
Service Fee- Checkmate	1,124.56	1,124.56
Payroll - Other	0.00	0.00
<b>Total Payroll</b>	<b>39,233.37</b>	<b>39,233.37</b>
<b>Refunds</b>		
Refunds	-76.96	-76.96
<b>Total Refunds</b>	<b>-76.96</b>	<b>-76.96</b>
<b>Taxes</b>	<b>75.00</b>	<b>75.00</b>
<b>Utilities</b>		
AmeriGas Propane	773.66	773.66
D.F. Richard	6,706.64	6,706.64
Fairpoint	1,161.79	1,161.79
PSNH	2,619.21	2,619.21
<b>Total Utilities</b>	<b>11,261.30</b>	<b>11,261.30</b>
<b>Total EXPENSES</b>	<b>80,137.39</b>	<b>80,137.39</b>
<b>Facilities and Equipment</b>		
Rent, Parking, Utilities	32.64	32.64
<b>Total Facilities and Equipment</b>	<b>32.64</b>	<b>32.64</b>
<b>Operations</b>		
Postage, Mailing Service	18.40	18.40
<b>Total Operations</b>	<b>18.40</b>	<b>18.40</b>
<b>Other Types of Expenses</b>		
Advertising Expenses	210.44	210.44
Memberships and Dues	190.00	190.00
Staff Development	175.00	175.00
<b>Total Other Types of Expenses</b>	<b>575.44</b>	<b>575.44</b>
<b>Travel and Meetings</b>		
Conference, Convention, Meeting	200.00	200.00
Travel	25.00	25.00
<b>Total Travel and Meetings</b>	<b>225.00</b>	<b>225.00</b>
<b>Total Expense</b>	<b>100,644.79</b>	<b>100,644.79</b>
<b>Net Ordinary Income</b>	<b>-17,613.21</b>	<b>-17,613.21</b>
<b>Net Income</b>	<b>-17,613.21</b>	<b>-17,613.21</b>

11:46 AM

05/28/14

Accrual Basis

**Greater Wakefield Resource Center**  
**Balance Sheet**  
As of December 31, 2013

Dec 31, 13

<b>ASSETS</b>	
Current Assets	
Checking/Savings	
GWRC	15,450.71
Meals on Wheels	62.41
Money Market	3,628.62
Petty Cash - Office Expences	-7.47
<b>Total Checking/Savings</b>	<u>19,134.27</u>
<b>Total Current Assets</b>	19,134.27
Fixed Assets	
Accumulated Depreciation	-68,710.00
Building Improvements	342,449.79
Kitchen Equipment	9,679.33
Office Equipment	1,977.91
Office Furniture	3,109.92
<b>Total Fixed Assets</b>	<u>288,506.95</u>
<b>TOTAL ASSETS</b>	<u><b>307,641.22</b></u>
<b>LIABILITIES &amp; EQUITY</b>	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	17.90
<b>Total Accounts Payable</b>	<u>17.90</u>
<b>Total Current Liabilities</b>	<u>17.90</u>
<b>Total Liabilities</b>	17.90
Equity	
Fund Balance	302,220.87
Opening Bal Equity	23,015.66
Net Income	-17,613.21
<b>Total Equity</b>	<u>307,623.32</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><b>307,641.22</b></u>

**Greater Wakefield Resource Center  
Operating Budget FY 2014**

**INCOME**

BEAS	14,000
BEAS NSIP	2,200
Harvest Pledge Drive	2,000
Grants	5,000
Hall Rental	1,500
Office Rental	17,552
Senior Meals	8,000
Senior Meal Fund Raisers	12,500
Town Donation	22,000
Town Donation for MOW	1,000
Town Donation for Sn Meals	2,000
<b>Total Income</b>	<b>87,752</b>
Contingency Fund	5,000
(used only if needed)	92,752

**EXPENSES**

Accountant Fees	4,000
Advertising	500
Bank Service Chg.	50
Bingo Supplies	700
Kitchen Supplies	450
Insurance	3,300
Licenses & Fees	550
Maintenance	5,000
Meal Program Groceries & Paper Products	14,500
Office Supplies	1,200
Payroll	
Payroll	35,000
941 Taxes	5,000
Subscriptions	125
Utilities (oil, gas, tel., elec.)	16,000
Volunteer & Staff Appreciation	400
Month and Christmas	
Workman's Comp.	1,000
<b>Total Expenses</b>	<b>87,775</b>
Contingency Fund	5,000
(used only if needed)	92,775



STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 DIVISION OF COMMUNITY BASED CARE SERVICES  
 BUREAU OF ELDERLY & ADULT SERVICES

Nicholas A. Toumpas  
 Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857  
 603-271-9203 1-800-351-1888

Nancy L. Rollins  
 Associate  
 Commissioner

Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

June 21, 2013

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

APPROVED BY \_\_\_\_\_  
 DATE 7/10/13  
 PAGE 7  
 ITEM # 55

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into **retroactive** and **sole source** amendments with multiple vendors by increasing the price limitation by \$138,931.42 in the aggregate from \$293,965.94 to \$432,897.36 in the aggregate, for a continuum of home and community based services to support the elderly and the disabled to remain in their homes and community, and extending the completion date from June 30, 2013 to June 30, 2014, effective retroactively to July 1, 2013 upon date of Governor and Council approval.

Summary of contracted amounts by vendor:

Vendor	Amount
Greater Wakefield Resource Center	\$13,362.30
Lake Sunapee Community Health Services	\$53,048.06
North Conway Community Center	\$13,542.30
The Visiting Nurse Association of Franklin	\$58,978.76
<b>Total</b>	<b>\$138,931.42</b>

Funds to support this request are anticipated to be available in the following accounts in State Fiscal Year 2014 upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts within the price limitation and amend the related terms of the contract without further approval from Governor and Executive Council.

05-95-48-481010-78720000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS (60.32% Federal and 39.68% General)

05-95-48-481010-92550000 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, SOCIAL SERVICES BLOCK GRANT (44.31% Federal and 55.69% General Funds)

Please see attachment for fiscal details.

### EXPLANATION

These **retroactive** and **sole source** actions are requested so the Department can ensure the continuation of services that enable elderly and/or disabled clients to remain in their homes and communities and maintain their independence while the Department looks for opportunities to further align service delivery to better serve the citizens of the State of New Hampshire. These actions are **retroactive** because these vendors required more time to have the documents signed than the few days required by the Department. The requested action seeks approval for the remaining 4 of 30 agreements that represent \$138,931.42 of the \$16,604,214.77 total anticipated to be spent statewide during this period on a continuum of home and community based services to support the elderly and the disabled to remain in their homes and community via the funding sources listed. A matrix of services provided by vendor is attached.

Twenty-five of the thirty Amendments were approved by the Governor and Executive Council on June 19, 2013, Item # 133D. One other Agreement with Lakes Region Community Services Council, Inc. was submitted separately to Governor and Executive Council and was approved on June 19, 2013, Item # 133B.

These extensions are necessitated because the Department incorporated these services into a statewide Request for Proposals (Issued March 15, 2013) that resulted in proposals that did not align closely enough with Department objectives or expectations that vendors provide proposals that embraced a statewide approach to service delivery. The Department will release a new Request for Proposals within the next six months with the same objectives as the March 15, 2013 Request for Proposals to provide person centered service solutions that ensure statewide coverage and that highlight the Department's core values to:

- Empower older adults, their families, and other consumers to make informed decisions about existing health and Long-term care options;
- Enable older adults to remain in their own homes with high quality of life for as long as possible;
- Empower older adults to stay active and healthy;
- Ensure the rights of older adults and prevent their abuse, neglect, and exploitation;
- Promote and support individual and family direction;
- Improve quality of services;
- Improve outcomes;
- Increase access to needed services; and;
- Establish financial sustainability.

The reissue of the Request for Proposals will allow potential contractors time to:

- Develop their programming solutions to meet the Department's core values for the population being served.
- Develop partnerships/subcontracting arrangements to better meet the requirements in the Request for Proposals.
- Meet the time requirements for contracting prior to the expiration of these extensions.

Should the Governor and Executive Council not authorize these amendments, the social services provided to these elderly and/or disabled clients will be reduced, or eliminated, to a level that could jeopardize their ability to remain in their home. Low-income elderly and/or disabled clients are likely to become eligible for more costly long-term care services in traditional nursing homes or community based care programs. These direct care social services allow the elderly and disabled

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
June 21, 2013  
Page 3

adults to secure and maintain maximum independence, health, and quality of life that support a goal of the Division of Community Based Care Services to keep individuals in the community.

The contractors were originally selected through a competitive bid process.

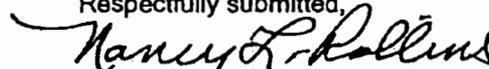
The Bureau of Elderly and Adult Services established performance measures to determine that services purchased by the State and delivered by the contractor were beneficial to the State and the clients by enabling the clients to remain in their home and community and to remain independent based on the federal sourcing requirements. Data from various sources including, but not limited to, contractor reporting, site reviews, and data available through information technology are utilized to determine if the contractor is meeting the performance measures. The Bureau has determined that these Contractors have performed satisfactorily.

Geographic area served is specific per contract.

Source of Funds for this amendment: 51.29% Federal and 48.71% General Funds.

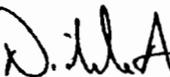
In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Nancy L. Rollins  
Associate Commissioner

Approved by:



Nicholas A. Toumpas  
Commissioner

**State of New Hampshire  
Department of Health and Human Services  
Amendment #1 for Greater Wakefield Resource Center, Inc.**



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**State of New Hampshire  
Department of Health and Human Services  
Amendment #1 for Greater Wakefield Resource Center, Inc.**

This first Amendment to the Nutrition services contract (hereinafter referred to as "Amendment #1") dated this 3<sup>rd</sup> day of June 2013, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Greater Wakefield Resource Center, Inc., (hereinafter referred to as "the Contractor"), a non-profit corporation organized under the laws of the State of New Hampshire, with a place of business at 254 Main Street, Union, NH 03887.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 22, 2011, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18 of the Agreement, the State may amend the Contract by written agreement of the parties; and

WHEREAS the Department is extending the Contract for one year to continue the delivery of services.

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

- 1) Amendment and modification of P-37 "Agreement";
  - a) Change Completion Date in Block 1.7 of the P-37 to read June 30, 2014.
  - b) Change Price Limitation in Block 1.8 of the P-37 to read \$44,722.30.
  
- 2) Amendment and modification of Exhibit A:
  - a) Delete "Contract Period: July 1, 2011 through June 30, 2013."
  
  - b) Delete and replace Section II Other Terms and Conditions.

Contractor's Initials:

Date:

*DA*  
*6/27/2013*

**State of New Hampshire  
Department of Health and Human Services  
Amendment #1 for Greater Wakefield Resource Center, Inc.**



- 
- 3) Delete and Replace Exhibit B Purchase of Services for the period of July 1, 2013 through June 30, 2014.
  - 4) Delete and Replace Standard Exhibit C Special Provisions
  - 5) Amendment and Modification of Exhibit C-1:
    - a) Add Paragraph #4:
      4. Paragraph "10. Audit:" of Exhibit C Special Provisions is deleted and replaced with the following:
        10. Audit: Contractor shall submit an annual audit to the Department within 9 months 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.
  - 6) Contractor agrees to Exhibits C-1 through J extended to June 30, 2014.
  - 7) Add Standard Exhibit I Health Insurance Portability and Accountability Act, Business Associate Agreement.

*Remainder of Page Left Intentionally Blank*

Contractor's Initials:

Date:

DA  
10/24/2012

State of New Hampshire  
Department of Health and Human Services  
Amendment #1 for Greater Wakefield Resource Center, Inc.



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

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

State of New Hampshire  
Department of Health and Human Services

10 June 2013  
Date

Nancy L. Rollins  
Nancy L. Rollins  
Associate Commissioner

Greater Wakefield Resource Center, Inc.

June 7, 2013  
Date

Debra Joyce  
NAME Debra Joyce  
TITLE Chairman of the Board

Acknowledgement:

State of NH, County of CARROLL on June 7, 2013, before the undersigned officer, personally appeared the person identified above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above. Debra Joyce only  
Signature of Notary Public or Justice of the Peace

Antoinette A. Bodah  
Name and Title of Notary or Justice of the Peace

ANTOINETTE A. BODAH, Notary Public  
My Commission Expires 9-23-2014

Contractor's Initials: DJ  
Date: 6/7/2013

State of New Hampshire  
Department of Health and Human Services  
Amendment #1 for Greater Wakefield Resource Center, Inc.



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

OFFICE OF THE ATTORNEY GENERAL

11 JUN. 2013  
Date

Jeanne F. Herlihy  
Name: Jeanne F. Herlihy  
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:

Contractor's Initials: DL  
Date: 6/9/2013

## SECTION II: OTHER TERMS AND CONDITIONS

### 1. Reporting Requirements

- 1.1 The Contractor shall collect and report to DHHS, but not limited to, the following data;
  - 1.1.1. Number of clients served by town, by service, by funding source;
  - 1.1.2. Number of units of service delivered to clients by service
  - 1.1.3. Monthly reporting on the distance and number of transportation trips per client;
  - 1.1.4. Monthly program amount by direct and indirect costs, and matching amounts, by service, and by funding source;
- 1.2 Reporting shall occur for each month of delivered services.
- 1.3 The Contractor shall report the data on a standard template provided by DHHS.

### 2. Wait List

- 2.1. All services covered by this contract shall be provided to the extent that funds, staff and/or resources for this purpose are available. For services covered by the Social Services Block Grant, the contract agency shall maintain a wait list in accordance with He-E 501 when funding or resources are not available to provide the requested services. All other services not covered by the Social Services Block Grant, shall also maintain a wait list that includes at a minimum:
  - 2.1.1. Each contract agency shall include the following information on its wait list:
    - 2.1.1.1. The individual's full name and date of birth;
    - 2.1.1.2. The name of the Title XX service being requested;
    - 2.1.1.3. The date upon which the individual applied for services which shall be the date the application was received by the contract agency or BEAS;
    - 2.1.1.4. The target date of implementing the services based on the communication between the individual and the BEAS/contract agency;
    - 2.1.1.5. The date upon which the individual's name was placed on the wait list shall be the date of the notice of decision in which the individual was determined eligible for Title XX services;
    - 2.1.1.6. The individual's assigned priority on the wait list, determined in accordance with (b) below;
    - 2.1.1.7. A brief description of the individual's circumstances and the services he or she needs.
  - 2.1.2. The contract agency shall prioritize each individual's standing on the list by determining the individual's urgency of need in the following order:
    - 2.1.2.1. Individual is in an institutional setting or is at risk of being admitted to or discharged from an institutional setting;
    - 2.1.2.2. Declining mental or physical health of the caregiver;
    - 2.1.2.3. Declining mental or physical health of the individual;
    - 2.1.2.4. Individual has no respite services while living with a caregiver; and
    - 2.1.2.5. Length of time on the wait list.

2.1.2.6. When 2 or more individuals on the wait list have been assigned the same service priority, the individual served first will be the one with the earliest application date.

2.1.2.7. Individuals with adult protective needs in accordance with RSA 161-F:42-57 shall be exempt from the wait list.

2.1.3. When an individual is placed on the wait list, the contract agency shall notify the individual in writing

2.2. The wait list must be maintained during the contract period and available to BEAS upon request.

3. Equal Access to services:

3.1. To ensure equal access to quality services, the Contractor, when feasible and appropriate, shall make reasonable efforts to provide clients of limited English proficiency (LEP) with interpretation services. Persons of LEP are defined as those who do not speak English as their primary language and whose skills in listening to, speaking, or reading English are such that they are unable to adequately understand and participate in the care or in the services provide to them without language assistance.

3.2. Additionally, the Contractor, when appropriate, shall identify communication access needs (hearing, vision, speech) and develop an individual communication plan for recipients of services provided under this contract.

4. Consumer Grievance Process

The Contractor shall have a grievance process for clients and for individuals who have been denied services, that shall be maintained during the contract period and any grievances filed are to be available to BEAS upon request. At a minimum the process shall include the following:

4.1. Client name, type of service, date of written grievance, nature/subject of the grievance, who in the agency reconsiders agency decisions, what are the issues that can be addressed in the grievance process, and how consumers are informed of their right to appeal or file grievances.

5. Adult Protective Services:

In order to meet the requirements of Chapter 161-F Protective Services to Adults, the Contractor shall ensure the provision of services to clients referred by BEAS as persons in need of protective services. These clients will not be charged a fee or a donation and will not have any financial eligibility requirements.

6. Criminal Background and Adult Protective Service Registry Checks:

6.1. Contractor shall conduct a criminal background check if a potential applicant for employment or volunteer, funded under this contract, may have client contact in the client's place of residence. Contractors who are licensed home health care providers including those that only provide homemaker services, shall meet the requirements of RSA 151:2-d Criminal Record Check Required.

Exhibit A  
Other Terms and Conditions

Contractor's Initials:

Date:

  
Date: 6/7/2013

- 6.2. Contractors which are licensed, certified or funded by the DHHS shall meet the requirements of RSA 161-F: 49 Registry, VII, which requires the submission of the name of a prospective employee who may have client contact, for review against the State Adult Protective Service Registry, effective July 1, 2007.
7. Services shall be provided in accordance with administrative rules and applicable policies and procedures adopted by the Department of Health and Human Services and in effect at any time during the contract period, and as they may be adopted or amended.
8. **Contract Monitoring:**  
State of New Hampshire, Department of Health and Human Services shall monitor the contract by conducting announced and/or unannounced site reviews for compliance with the terms in the agreement for up to four (4) years from the end period of the most recent contract.
9. **Board of Directors**  
  
Contractor shall submit to the Bureau of Elderly and Adult Services a list of current Board of Directors, with names, addresses and titles that covers the entire contract period.
10. **Agreement Elements:**  
  
The Agreement between the parties shall consist of the following: General Provisions (P-37), Exhibit A Scope of Services, Exhibit B Purchase of Services, Exhibit C Special Provisions, Exhibit C-1 Additional Special Provisions, Exhibit D Certification Regarding Drug-Free Workplace, Exhibit E Certification Regarding Lobbying, Exhibit F Certification Regarding Debarment, Suspension and Other Responsibility Matters, Exhibit G Certification Regarding the American's With Disabilities Act Compliance, Exhibit H Certification Regarding Environmental Tobacco Smoke, Exhibit I Health Insurance Portability and Accountability Act Business Associate Agreement, Exhibit J Certification Regarding The Federal Funding Accountability and Transparency Act Compliance. In the event of any conflict or contradiction between or among the Agreement documents, the documents shall control in the above order of precedence.

*The Remainder of the page is left intentionally blank.*

**EXHIBIT B  
PURCHASE OF SERVICES**

1. Subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor for units of service provided to eligible individuals, by the Contractor, as in the Services and Units table below(s):

<b>Services and Units Table</b>			
<b>Service</b>	<b>SFY 2014 Unit Type</b>	<b>SFY 2014 Rate Per Unit</b>	<b>SFY 2014 Units</b>
<b>Funding: ACL Title IIIC</b>			
Nutrition Services: Congregate Meals	Per meal	\$4.90	2,727

2. Notwithstanding paragraph 18 of the P-37, an amendment limited to the terms of Exhibit B, Paragraph 1, to transfer the amount of units from one service to another that are funded within the same account number identified in Paragraph 3 and within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of Governor and Executive Council.
3. The Agreement (P-37) Section 1.6 Account Numbers for funding under this contract including identification of the funding source (name of Grantor and Catalog of Federal Domestic Assistance (CFDA) number) are as follows:

<b>Service</b>	<b>Funding Name</b>	<b>Funding Source</b>	<b>CFDA #</b>	<b>State of NH Account Number</b>
Nutrition Services	Special Programs for the Aging- Title IIIC	ACL	93.045	05-95-48-481010-78720000-541-500383

4. Administration for Community Living, Title IIIB and Title IIIC Matching Requirement. The Contractor is required to fund a minimum 10% match on the amount of the Title IIIB and Title IIIC funding to support the services in this contract. The match is to be calculated over the total program budget including the match. The contractor is required to fund the match, the difference between the total costs of the programs less the State's share. The match cannot be derived from federal sources. Any match has to be in direct support of the particular services in this contract.

5. The Contractor shall submit invoices on a monthly basis in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services and provided to the contractor. The Bureau of Elderly and Adult Services shall pay on actual units served to clients, up to the amount of units identified in this contract by State Fiscal Year and where a service authorization has been completed for each client as required in this contract. The amount of any payment approved by the Bureau of Elderly and Adult Services shall be determined at the sole discretion of the Bureau of Elderly and Adult Services.
6. The Bureau of Elderly and Adult Services will reimburse from one funding source only, i.e. Title XX or Title IIIB for a single unit of service. Contractors must not submit invoices for a single unit of service to more than one funding source.
7. The Contractor shall comply with the necessary steps established by the Department for making payments to vendors using Electronic Funds Transfer (EFT). Exceptions to using EFT for payment shall be made upon prior approval of the BEAS Financial Manager or designee.
8. The Bureau of Elderly and Adult Services may require certain payments returned to the State of New Hampshire if: 1) the final reconciliation of the payments made by BEAS under this agreement show that the payments exceeded the actual units served; 2) services are not being provided in accordance with the requirements and scope of services in Exhibit A; and 3) Should BEAS choose to execute the right to terminate the contract agreement as stated in Exhibit C-1 Additional Special Provisions.
9. **CONTRACT SERVICE NON CLIENT SPECIFIC INVOICES FOR TITLE III AND FOR GENERAL FUNDED MEALS**

The Contractor shall complete and submit a signed original and one copy of a CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE for actual units served during the month specified. The CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE is the Bureau of Elderly and Adult Services generated and preprinted invoice provided to the contractor on a monthly basis by the NH Department of Health and Human Services, Data Management Unit.

Prior to submittal of an invoice for the following Title III funded services: Homemaker, Home Health Aide, Adult Day Services, Adult Non-medical Day Services Home Delivered Meals and Congregate Meals the Contractor will complete Form # 3502 (Contract Service Authorization Form), in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services for each client for whom reimbursement will be claimed.

**Contract Service Authorization Form (#3502) shall be sent to:**

NH Department of Health and Human Services  
Data Management Unit  
129 Pleasant Street, P.O. Box 2000  
Concord, NH 03301

**Contract Service Non Client Specific Invoices shall be sent to:**

Bureau of Elderly and Adult Services  
Finance and Business Operations  
Governor Hugh Gallen Office Park, Brown Building  
129 Pleasant Street  
Concord, N.H. 03301

**10. CONTRACT SERVICE CLIENT SPECIFIC INVOICES (FOR TITLE XX)**

The Contractor shall complete and submit a signed CONTRACT SERVICE CLIENT SPECIFIC INVOICE for actual units served during the month specified for the client identified on the Bureau of Elderly and Adult Services generated and preprinted invoice provided to the contractor on a monthly basis by the NH Department of Health and Human Services, Data Management Unit.

A signed cover letter identifying the name of the agency, the type of service and the dates of service may be submitted in lieu of individually signed client specific invoices.

Prior to submittal of an invoice the Contractor will complete Forms #3000 (Application/Reapplication for Social Services) and #3502 (Contract Service Authorization Form) in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services for each client for whom reimbursement will be claimed. Form #3502 must be submitted to the Department of Health and Human Services, Data Management Unit. Redetermination of client eligibility will be performed through the use of Forms #3000 and #3502 every twelve months thereafter.

Contract Service Authorization Form (#3502) and Contract Service Client Specific Invoices shall be sent to:

NH Department of Health and Human Services  
Data Management Unit  
129 Pleasant Street, P.O. Box 2000  
Concord, NH 03301

\_\_\_\_\_

**NH Department of Health and Human Services**

**STANDARD EXHIBIT C**

**SPECIAL PROVISIONS**

**1. Contractors Obligations:** The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

**2. Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.

**3. 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.

**4. 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.

**5. Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.

**6. 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.

**7. 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.

**8. Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractor's costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party funders for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party funders, the Department may elect to:

**8.1** Renegotiate the rates for payment hereunder, in which event new rates shall be established;

**8.2** Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;

8.3 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:**

**9. 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:

**9.1 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.

**9.2 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.

**9.3 Medical Records:** Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.

**10. Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the Contractor 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.

**10.1 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.

**10.2 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.

**11. Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.

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

**12. Reports: Fiscal and Statistical:** The Contractor agrees to submit the following reports at the following times if requested by the Department.

**12.1 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.

**12.2 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.

**13. 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.

**14. Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:

**14.1** The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.

**15. 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.

**16. 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.

**17. 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:

- Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
- 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

- Monitor the subcontractor's performance on an ongoing basis
- Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed
- DHHS shall review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

**SPECIAL PROVISIONS – DEFINITIONS**

As used in the Contract, the following terms shall have the following meanings:

**COSTS:** Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

**DEPARTMENT:** NH Department of Health and Human Services.

**PROPOSAL:** If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

**UNIT:** For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

**FEDERAL/STATE LAW:** Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

**SUPPLANTING OTHER FEDERAL FUNDS:** The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.

NH Department of Health and Human Services

STANDARD EXHIBIT I  
HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT  
BUSINESS ASSOCIATE AGREEMENT

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 and those parts of the HITECH Act applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

BUSINESS ASSOCIATE AGREEMENT

(1) Definitions

- a. "Breach" shall have the same meaning as the term "Breach" in Title XXX, Subtitle D. Sec. 13400.
- b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- c. "Covered Entity" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. "Designated Record Set" shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. "Data Aggregation" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.
- g. "HITECH Act" means the Health Information Technology for Economic and Clinical Health Act, Title XIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.
- h. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164.
- i. "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 164.501 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 164.501, limited to the information created or received by Business Associate from or on behalf of Covered Entity.
- l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.501.
- 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, unreasonable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.
- p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) **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, the Business Associate shall not, and shall ensure that its directors, officers, employees and agents, do 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 HITECH Act, Subtitle D, Part 1, Sec. 13402 of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.
- d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

Contractor Initials:   DJ    
 Date:   6/7/2013

- 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. Business Associate shall report to the designated Privacy Officer of Covered Entity, in writing, any use or disclosure of PHI in violation of the Agreement, including any security incident involving Covered Entity data, in accordance with the HITECH Act, Subtitle D, Part 1, Sec. 13402.
- b. The Business Associate shall comply with all sections of the Privacy and Security Rule as set forth in, the HITECH Act, Subtitle D, Part 1, Sec. 13401 and Sec.13404.
- c. 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.
- d. 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)b and (3)k herein. The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard provision #13 of this Agreement for the purpose of use and disclosure of protected health information.
- e. 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.
- f. 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.
- g. 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.

Contractor Initials:   DJ  

Date: 6/7/2013

- h. 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.
- i. 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.
- j. 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.
- k. 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 Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

**(4) Obligations of Covered Entity**

- a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.
- b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.
- c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

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

(6) Miscellaneous

- a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, and the HITECH Act as amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.
- b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.
- c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.
- d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule and the HITECH Act.
- e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.
- f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section 3 k, the defense and indemnification provisions of section 3 d and standard contract provision #13, shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

<u>Department of Health &amp; Human Services</u>	<u>Greater Wakefield Resource Center</u>
The State Agency Name	Name of the Contractor
<u>Nancy L. Rollins</u>	<u>Debra Joyce</u>
Signature of Authorized Representative	Signature of Authorized Representative
<u>Nancy L. Rollins</u>	<u>Debra Joyce</u>
Name of Authorized Representative	Name of Authorized Representative
<u>Associate Commissioner</u>	<u>Chairman of the Board</u>
Title of Authorized Representative	Title of Authorized Representative
<u>10 June 2013</u>	<u>June 7, 2013</u>
Date	Date

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting

Of GWRC Board of Directors of The Greater Wakefield Resource Center  
(Name of Governing Board) (Name of Corporation)

On June 7, 2013 which was duly called at which a quorum was

Present:

"On motion duly made and seconded, it was voted to authorize

Chairperson, to accept grants and awards and enter into contracts, and contract amendments from time to time with the New Hampshire Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services, to sign and otherwise fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that (Name of corporate official signing the acceptance or contract)  
Debra Joyce is the duly elected (Title) Chairperson of  
this corporation and is still qualified and serving in such capacity.

6/14/2013  
(Date)

  
Deborah Gauthier, Secretary

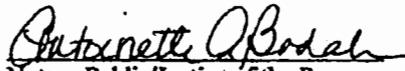
(Imprint seal of corporation. If none, write: "No corporate seal.")

STATE OF NEW HAMPSHIRE

COUNTY OF CARROLL

On June 14, 2013, before the undersigned officer personally appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that S he executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

  
Notary Public/Justice of the Peace

My commission expires: 9-23-2014



Nicholas A. Toumpas  
Commissioner

Nancy L. Rollins  
Associate Commissioner

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF COMMUNITY BASED CARE SERVICES

*BUREAU OF ELDERLY & ADULT SERVICES*

129 PLEASANT STREET, CONCORD, NH 03301-3867  
603-271-4680 1-800-361-1888  
Fax: 603-271-4643 TDD Access: 1-800-735-2964

May 23, 2011

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into an agreement with Greater Wakefield Resource Center, Inc., Union, New Hampshire (Vendor #158408) to provide Congregate Meals, in an amount not to exceed \$31,360.00 effective July 1, 2011 or date of Governor and Council approval, whichever is later, through June 30, 2013. Funds are anticipated to be available in the following accounts in State Fiscal Years 2012 and 2013 upon availability and continued appropriation of funds in the future operating budgets:

05-95-48-481010-7872 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, ADM ON AGING GRANTS

Fiscal Year	Class/Object	Class Title	Amounts
2012	541-500383	Meals-Home Delivered/Congregate	\$15,680.00
2013	541-500383	Meals-Home Delivered/Congregate	\$15,680.00
Total			\$31,360.00

**EXPLANATION**

The purpose of this Requested Action is to purchase direct care social services that allow the elderly and disabled adults to secure and maintain maximum independence and dignity. Participants receiving Congregate Meals will be able to maintain their health, independence and quality of life.

A Request for Proposals for social services funded by Bureau of Elderly and Adult Services was posted on Department of Health and Human Services' web site beginning February 25, 2011 in order to procure direct care services from community vendors. In addition, a notice of the release of the Request for Proposals was sent to all existing Bureau of Elderly and Adult Services' contractors, all potential contract providers known by the Bureau, the Home Care Association of New Hampshire, New Hampshire Adult Day Services Association and the liaisons for the Regional Coordination Councils as part of the statewide Community Transportation Regional Coordination System.

6/22/11  
# 197

His Excellency, Governor John H. Lynch  
and the Honorable Executive Council  
May 23, 2011  
Page 2

Funding for this contract is based on Bureau of Elderly and Adult Services' review of statewide, provider documented client needs as evidenced by State Fiscal Year 2010 and year-to-date State Fiscal Year 2011 contract utilization, quarterly program service reports and information provided in the proposal. This agency submitted a bid to provide Congregate Meals to eligible individuals in the catchment area identified in this contract and was selected to receive funding for SFY 2012 and 2013 under this contract.

The Bureau of Elderly and Adult Services established a team of reviewers with program and/or financial experience from throughout the Department to review the proposal. See attached Scoring Detail for Criteria, Scores and Reviewers Information.

Should the Governor and Executive Council determine to not authorize this contract, the social services provided to these elderly and/or disabled clients will be reduced, or eliminated, to a level that could jeopardize their ability to remain in their home. Low-income elderly and/or disabled clients are likely to become eligible for more costly long-term care services in traditional nursing homes or community based care programs.

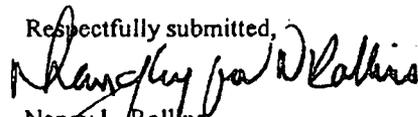
Bureau of Elderly and Adult Services established performance measures to determine that services purchased by the State and delivered by the contractor were beneficial to the State and the client by enabling the client to remain in their home and community and to remain independent based on the federal sourcing requirements. Data from various sources including, but not limited to, contractor reporting, site reviews, and data available through information technology will be utilized to determine if the contractor is meeting the performance measures. Bureau of Elderly and Adult Services expects one hundred percent compliance.

Area served: See attached list of towns/cities served.

Sources of Funds: 57.62% Federal (Administration on Aging and Social Services Block Grant) and 42.38% General Funds.

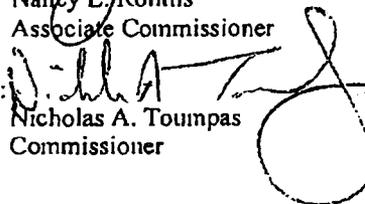
In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Nancy L. Rollins  
Associate Commissioner

Approved by:



Nicholas A. Toumpas  
Commissioner

Request for Proposals Social Services for SFY's 2012 and 2013  
 RFP #12-DCBCS-BEAS-SS-01

Agency Name: Greater Wakefield Resource Center

RFP Criteria	Max. Pts.	RFP Reviewers			Total
		1	2	3	
Agency Capacity	35	Bruce Angus 31	Wayne Carmack 29	Cynthia Carpenter 21	27.0
Response to Scope of Services	40	36	25	29	30.0
Budget & Justification	20	18	18	18	18.0
Format	5	5	5	5	5.0
Total	100	90	77	73	80.0

Reviewers Information:

Job Title	Adult Protective Worker III	Supervisor VI	Program Specialist IV
Dept/Agency	DHHS/DCBCS/BEAS	DHHS/DCBCS/BEAS	DHHS/DCBCS/BEAS
Qualifications	Social worker with DHHS for 11 years. Interacted with numerous agencies providing services to our clients.	Experience as Supervisor for Juvenile Services and and Aging Population	14 years experience with Bureau of Elderly and Adult Services' Office of Finance and Business including financial analysis and contract development and monitoring.



Subject: \_\_\_\_\_

**AGREEMENT**

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

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

<b>1.1 State Agency Name</b> NH Department of Health and Human Services, Division of Community Based Care Services Bureau of Elderly and Adult Services		<b>1.2 State Agency Address</b> 129 Pleasant Street, Brown Building Concord, New Hampshire 03301-3857	
<b>1.3 Contractor Name</b> Greater Wakefield Resource Center, Inc.		<b>1.4 Contractor Address</b> .254 Main Street Union, New Hampshire 03887	
<b>1.5 Contractor Phone Number</b> (603)473-8324	<b>1.6 Account Number</b> See Exhibit B for Account Number	<b>1.7 Completion Date</b> June 30, 2013	<b>1.8 Price Limitation</b> \$31,360.00
<b>1.9 Contracting Officer for State Agency</b> Nancy L. Rollins		<b>1.10 State Agency Telephone Number</b> (603) 271-4394	
<b>1.11 Contractor Signature</b> <i>[Signature]</i>		<b>1.12 Name and Title of Contractor Signatory</b> DONALD SIMON CHAIRMAN (BID) of DIRECTOR	
<b>1.13 Acknowledgement:</b> State of <u>NH</u> County of <u>Sherburne</u> On <u>5-17</u> , before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
<b>1.13.1 Signature of Notary Public or Justice of the Peace</b> [Seal] <i>Susan Hayes</i> My Commission Expires <u>10/30/2015</u>			
<b>1.13.2 Name and Title of Notary or Justice of the Peace</b> <i>Susan Hayes</i>			
<b>1.14 State Agency Signature</b> <i>Nancy L. Rollins</i>		<b>1.15 Name and Title of State Agency Signatory</b> Nancy L. Rollins, Associate Commissioner	
<b>1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)</b> By: _____ Director, On: _____			
<b>1.17 Approval by the Attorney General (Form, Substance and Execution)</b> By: <i>John P. Herica</i> Attorney On: <u>5/29/2011</u>			
<b>1.18 Approval by the Governor and Executive Council</b> By: _____ On: <u>June 22, 2011</u> # <u>197</u>			

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

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**  
3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, this Agreement, and all obligations of the parties hereunder, shall not become effective until the date the Governor and Executive Council approve this Agreement ("Effective Date").  
3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.** Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.**  
5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.  
5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.  
5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

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

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. In addition, the Contractor shall comply with all applicable copyright laws.  
6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.  
6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.  
7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this Agreement. This provision shall survive termination of this Agreement.  
7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

JCO  
15-17-11

**8. EVENT OF DEFAULT/REMEDIES.**

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

- 8.1.1 failure to perform the Services satisfactorily or on schedule;
- 8.1.2 failure to submit any report required hereunder; and/or
- 8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

- 8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;
- 8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;
- 8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or
- 8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

**9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.**

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

**10. TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination

Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

**11. CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

**12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.** The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the N.H. Department of Administrative Services. None of the Services shall be subcontracted by the Contractor without the prior written consent of the State.

**13. INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

**14. INSURANCE.**

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$2,000,000 per occurrence; and

14.1.2 fire and extended coverage insurance covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

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

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than fifteen (15) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each

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Date: 12-17-16

certificate(s) of insurance shall contain a clause requiring the insurer to endeavor to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than ten (10) days prior written notice of cancellation or modification of the policy.

**15. WORKERS' COMPENSATION.**

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("Workers' Compensation").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

**16. WAIVER OF BREACH.** No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

**17. NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

**18. AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire.

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

**20. THIRD PARTIES.** The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

**21. HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

**22. SPECIAL PROVISIONS.** Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

**23. SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

**24. ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.

**EXHIBIT A  
SCOPE OF SERVICES**

**Date:** May 9, 2011

**Contract Period:** July 1, 2011 to June 30, 2013

**Contractor:**

NAME	Greater Wakefield Resource Center, Inc.
ADDRESS	254 Main Street Union, New Hampshire 03887
TELEPHONE	(603) 473-8324
BOARD CHAIRMAN	June Olimpio

**SECTION I.  
NUTRITION SERVICES/ CONGREGATE MEALS**

The Contractor agrees:

**SERVICE/PROGRAM DESCRIPTION**

Nutrition Services/ Congregate meals meet some nutritional needs of elderly adults by providing meals in a group setting which meet the nutritional and programmatic standards of the Title III program as specified in the Older American's Act of 1965 as amended.

**SERVICE/PROGRAM AND ADMINISTRATIVE REQUIREMENTS:**

1. The Contractor agrees to provide the following service/program activities:

Nutrition Services/ Congregate meals shall include the following: provide at least one (1) hot or other appropriate meal per day for five (5) or more days a week; each meal assures a minimum of one-third (1/3) of the daily Recommended Dietary Allowance established by the Food and Nutrition Board of the National Academy of Sciences as well as the Dietary Guidelines for Americans issues by the Secretaries of the Departments of Health and Human Services and Agriculture; meals shall be provided in a congregate setting; additional services may be provided, including special diets and opportunities for social contacts.

The Contractor shall determine eligibility for Title III funded services as specified in The Older American's Act of 1965 as amended.

2. The Contractor agrees to perform the following administrative services: determine eligibility; maintain recipient records; monitor and evaluate services; maintain financial records; submit reports as requested to the Bureau of Elderly and Adult Services.
3. Rules and Policies:

The Contractor shall provide Nutrition Services/ Congregate meals according to the rules and policies of the Bureau of Elderly and Adult Services including the Direct and Purchased Services for

Contractor Initials: JO  
Date: 5-11-11

Adults (PR 88-1: Nutrition Item 222; Sections 3010.3; 3010.4C; 3010.5 A, E, F, G, H, I; 3010.6), which are incorporated by reference into this Agreement.

4. Units of Service:

The Contractor agrees to provide the number of Nutrition Services/Congregate Meals as detailed in Exhibit B Purchase of Services.

5. Location:

Nutrition Services/Congregate meals shall be provided in the town/cities listed in the attached Catchment page, which is incorporated by reference into this Exhibit A.

6. Quality Assurance:

- 1) The Quarterly Program Service Report shall be submitted by the 15th of the month following the State Fiscal Year quarter reported. The Quarterly Program Service Report is to be completed in accordance with instructions provided by the Bureau of Elderly and Adult Services and sent to the Bureau of Elderly and Adult Services, Finance and Business Operations, 129 Pleasant Street, Concord, New Hampshire 03301-0387.
- 2) The Contractor agrees to obtain client feedback as to the quality of services provided and report the outcome to BEAS in the Quarterly Program Service Report due January 15, 2012 and January 15, 2013.
- 3) Contractor agrees to the outcomes, goals, objectives, and performance measures as described herein and assures a plan for monitoring and evaluating progress in meeting these. BEAS expects one hundred percent compliance with meeting the performance measures, by the contractor.

Based on the federal grant requirements, the desired service outcome for Nutrition Services/Congregate meals is as follows:

Outcome: Nutritious meals, nutrition education and other appropriate nutrition services for NH residents help them to maintain health, independence, and quality of life.

BEAS developed four goals that contain objective(s) and performances measures in which to monitor the performance of the contract to assure the desired outcomes.

1. Goal: Eligibility determination

a. Objectives:

- i. All clients served meet eligibility requirements of AoA;
- ii. Agency to identify, locate and serve the people who need and could benefit from services

b. Performance Measures:

- i. Initial application: process is accurate and timely;
- ii. Continued eligibility: continued eligibility is assessed and timely;
- iii. Outreach: There is evidence of outreach; and the designated population is being served.

2. Goal: Service plan/service delivery

a. Objective:

- i. Clients receive services in accordance with needs.

b. Performance Measures:

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- i. Comprehensive, person centered service plans are developed based on established timeframes;
      - ii. Services are available and accessible;
      - iii. Clients participate in planned services;
      - iv. Nutrition Services Only: Meals provide a minimum of one-third (1/3) of the daily Recommended Dietary Allowances.
  - 3. Goal: Agency and provider staff requirements
    - a. Objectives:
      - i. Provider agency is licensed or certified;
      - ii. Agency staff is qualified to provide services/supports.
    - b. Performance Measures:
      - i. Agency meets all applicable federal, state, and local regulations;
      - ii. Staff is qualified to plan and deliver services within scope of contract.
  - 4. Goal: Financial accountability
    - a. Objectives:
      - i. Provider Agency's billing is accurate, complete, and timely, within the contract budget and adheres to state regulations;
      - ii. BEAS pays provider's claims within state regulations and contract guidelines.
    - b. Performance Measure:
      - i. Provider Agency submits invoices for reimbursement that can be substantiated with backup source documents, that are in accordance with BEAS instructions, and consistent with state/federal regulation.
- 4) Contractor agrees to participate in any future Quality Assurance Measures adopted by the Bureau of Elderly and Adult Services.

Remainder of this page intentionally left blank.

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**SECTION II: OTHER TERMS AND CONDITIONS**

**I. Wait List**

1) All services covered by this contract shall be provided to the extent that funds, staff and/or resources for this purpose are available. For services covered by the Social Services Block Grant, the contract agency shall maintain a wait list in accordance with He-E 501 when funding or resources are not available to provide the requested services. All other services not covered by the Social Services Block Grant, shall also maintain a wait list that includes at a minimum:

- a. Each contract agency shall include the following information on its wait list:
  - i. The individual's full name and date of birth;
  - ii. The name of the Title XX service being requested;
  - iii. The date upon which the individual applied for services which shall be the date the application was received by the contract agency or BEAS;
  - iv. The target date of implementing the services based on the communication between the individual and the BEAS/contract agency;
  - v. The date upon which the individual's name was placed on the wait list shall be the date of the notice of decision in which the individual was determined eligible for Title XX services;
  - vi. The individual's assigned priority on the wait list, determined in accordance with (b) below;
  - vii. A brief description of the individual's circumstances and the services he or she needs.
- b. The contract agency shall prioritize each individual's standing on the list by determining the individual's urgency of need in the following order:
  - i. Individual is in an institutional setting or is at risk of being admitted to or discharged from an institutional setting;
  - ii. Declining mental or physical health of the caregiver;
  - iii. Declining mental or physical health of the individual;
  - iv. Individual has no respite services while living with a caregiver; and
  - v. Length of time on the wait list.
  - vi. When 2 or more individuals on the wait list have been assigned the same service priority, the individual served first will be the one with the earliest application date.
  - vii. Individuals with adult protective needs in accordance with RSA 161-F:42-57 shall be exempt from the wait list.
- c. When an individual is placed on the wait list, the contract agency shall notify the individual in writing

2) The wait list must be maintained during the contract period and available to BEAS upon request.

**2. Equal Access to services:**

1) To ensure equal access to quality services, the Contractor, when feasible and appropriate, shall make reasonable efforts to provide clients of limited English proficiency (LEP) with interpretation services. Persons of LEP are defined as those who do not speak English as their primary language and whose skills in listening to, speaking, or reading English are such that they are unable to adequately understand and participate in the care or in the services provided to them without language assistance.

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- 2) Additionally, the Contractor, when appropriate, shall identify communication access needs (hearing, vision, speech) and develop an individual communication plan for recipients of services provided under this contract.

3. Consumer Grievance Process

The Contractor shall have a grievance process for clients and for individuals who have been denied services, that shall be maintained during the contract period and any grievances filed are to be available to BEAS upon request. At a minimum the process shall include the following:

- o Client name, type of service, date of written grievance, nature/subject of the grievance, who in the agency reconsiders agency decisions, what are the issues that can be addressed in the grievance process, and how consumers are informed of their right to appeal or file grievances.

4. Adult Protective Services:

In order to meet the requirements of Chapter 161-F Protective Services to Adults, the Contractor shall ensure the provision of services to clients referred by BEAS as persons in need of protective services for the period July 1, 2011 through June 30, 2013. These clients will not be charged a fee or a donation and will not have any financial eligibility requirements.

5. Sub contracts:

- 1) With prior written approval from BEAS, the Contractor may enter into subcontracts with vendors as needed.
- 2) Prior to entering into subcontracts supported with Federal funds, the Contractor shall consult the ineligible parties list to ensure that potential subcontractors are eligible for participation in Federal assistance programs under Executive Order 12549, "Debarment and Suspension." The list is available on the Web at <http://www/edis.gov>.

6. Compliance with Laws and Regulations:

Contractor shall submit to the Bureau of Elderly and Adult Services proof of current licenses/permits etc., as described in Exhibit C Special Provisions # 15 Operations of Facilities that covers the entire contract period from July 1, 2011 through June 30, 2013. Failure to submit current copies of licenses/permits, etc. may result in the Bureau of Elderly and Adult Services withholding payments until licenses are submitted. Provide BEAS with copies of any inspection deficiency reports and corrective action plans.

7. Criminal Background and Adult Protective Service Registry Checks:

- 1) Contractor shall conduct a criminal background check if a potential applicant for employment or volunteer, funded under this contract, may have client contact in the client's place of residence. Contractors who are licensed home health care providers including those that only provide homemaker services, shall meet the requirements of RSA 151:2-d Criminal Record Check Required.
- 2) Contractors which are licensed, certified or funded by the DHHS shall meet the requirements of RSA 161-F: 49 Registry, VII, which requires the submission of the name of a prospective

Contractor Initials: JCC  
Date: 5-17-11

employee who may have client contact, for review against the State Adult Protective Service Registry, effective July 1, 2007.

8. Services shall be provided in accordance with administrative rules and applicable policies and procedures adopted by the Department of Health and Human Services and in effect at any time during the contract period, and as they may be adopted or amended.
9. Invoices, financial reports, and Quarterly Service Purchase Reports shall be submitted monthly to BEAS as described in Exhibit A Scope of Services and Exhibit B Purchase of Services.
10. Assure appropriate accounting practices, procedures and laws are adhered to and participate in reporting requirements as outlined in the Standard State Contract (P-37) and Exhibits A and B.

11. Audit Requirement

- 1) On or before September 30, 2012 and 2013, the Contractor shall deliver to the State, at the address set forth in Section 1.2 of these General Provisions, an independent audit performed by a Certified Public Accountant, of the Contractor, including the funds received under this Agreement. The Contractor shall provide the State with a copy of their most current independent audit during the entire contract period.
- 2) The following requirement shall apply if the Contractor is a State or Local Government or an Institution of Higher Education or Other Non-Profit Organization: If the federal funds expended under this or any other Agreement from any and all sources exceeds \$500,000 in the aggregate in a one year fiscal period the required audit shall be performed in accordance with the provisions of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations for fiscal years ending on or after December 31, 2003.

12. Contract Monitoring:

State of New Hampshire, Department of Health and Human Services shall monitor the contract by conducting announced and/or unannounced site reviews for compliance with the terms in the agreement for up to four (4) years from the end period of the most recent contract.

13. Board of Directors

Contractor shall submit to the Bureau of Elderly and Adult Services a list of current Board of Directors, with names, addresses and titles that covers the entire contract period.

14. Debarment, Suspension and Other Responsibility Matters

If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with the provisions of Section 319 of the Public Law 101-121, Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions; with the provisions of Executive Order 12549 and 45 CFR Subpart A, B, C, D, and E Section 76 regarding Debarment, Suspension and Other Responsibility Matters, and shall complete and submit to the State the appropriate certificates of compliance upon approval of the Agreement by the Governor and Council.

15. Contract Amendments

- a. The Bureau of Elderly and Adult Services may adjust the contract amount and/or scope of services during the contract period based on program performance, fiscal expenditure, and

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Date: 5-17-11

- federal/state regulatory, policy and program changes. If the action taken requires a contract amendment, it shall be submitted to Governor and Executive Council for approval.
- b. Changes that do not affect its scope, duration, or financial limitations, may be made upon mutual agreement between the contractor and BEAS.

16. Entire Agreement:

The following documents are incorporated by reference into this Agreement and they constitute the entire Agreement between the State and the Contractor: General Provisions (P-37), Exhibit A Scope of Services, Exhibit B Purchase of Services, Exhibit C Special Provisions, Exhibit C-1 Additional Special Provisions, Exhibit D Certification Regarding Drug-Free Workplace, Exhibit E Certification Regarding Lobbying, Exhibit F Certification Regarding Debarment, Suspension and Other Responsibility Matters, Exhibit G Certification Regarding the American's With Disabilities Act Compliance, Exhibit H Certification Regarding Environmental Tobacco Smoke, Exhibit I Health Insurance Portability and Accountability Act Business Associate Agreement (does not apply to this contract), Exhibit J Certification Regarding The Federal Funding Accountability and Transparency Act Compliance, Certificate of Good Standing, Certificate of Vote, Certificate of Proof of Insurance, and Comprehensive General Liability Insurance Acknowledgement Form, the Contractor's mission statement, audited financial statement, list of Board of Directors, list of key personnel and salaries, key resumes, and Catchment area.

Remainder of page intentionally left blank.

Contractor Initials: ALO  
Date: 5-19-11

**EXHIBIT B  
PURCHASE OF SERVICES**

**Contractor Name:** Greater Wakefield Resource Center

**Contract Period:** July 1, 2011 through June 30, 2013

1. Subject to the Contractor's compliance with the terms and conditions of the Agreement, the Bureau of Elderly and Adult Services shall reimburse the Contractor for units of service provided to eligible individuals, by the Contractor, at the following rate(s):

Service	SFY 2012-2013 Unit Type	SFY 2012-2013 Rate Per Unit	SFY 2012 Units	SFY 2012 Cost	SFY 2013 Units	SFY 2013 Cost
<b>Funding: AoA Title IIIC</b>						
Nutrition Services: Congregate Meals	Per meal	\$4.90	3,200	\$15,680.00	3,200	\$15,680.00
			Total SFY 12	\$15,680.00	Total SFY 13	\$15,680.00

2. It is understood that in no event shall the total payments made by the Bureau of Elderly and Adult Services under this Agreement exceed the sum of:

Grand Total SFY 12 and 13: \$31,360.00

3. The Agreement (P-37) Section 1.6 Account Numbers for funding under this contract including identification of the funding source (name of Grantor and Catalog of Federal Domestic Assistance (CFDA) number) are as follows:

Service	Funding Name	Funding Source	CFDA #	State of NH Account Number
Nutrition Services	Special Programs for the Aging- Title IIIC	Administration on Aging	93.045	05-95-48-481010-78720000-541-500383

4. Administration on Aging, Title IIIB and Title IIIC Source of Funds Matching Requirement. Local share of matching funds shall be at a minimum 10% of the Administration on Aging Title IIIB and Title IIIC funds, as identified in this exhibit. The 10% match shall be based on the total amount of requested federal dollars plus the match amount. This amount can be local share, i.e. town, county, United Way, fund raising, client donations toward services provided under Title IIIB and Title IIIC, other or in-kind match. However, in-kind match cannot be more than 50% of the total local share match requirement. Other federal funds, such as Title XX, Title XX client fees and USDA reimbursement cannot be used to meet Title III match requirements.

Contractor Initials: JCO  
Date: 5-19-11

5. The Contractor shall submit invoices on a monthly basis in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services and provided to the contractor. The Bureau of Elderly and Adult Services shall pay the Contractor one twelfth of the contract amount or the amount of the invoice, which has been approved by the Bureau of Elderly and Adult Services. The amount of any payment approved by the Bureau of Elderly and Adult Services shall be determined at the sole discretion of the Bureau of Elderly and Adult Services.
6. The Bureau of Elderly and Adult Services will reimburse from one funding source only, i.e. Title XX or Title III B for a single unit of service. Contractors must not submit invoices for a single unit of service to more than one funding source.
7. Invoices shall be due by the 15th of the month following the month in which services are provided.
8. The Contractor shall comply with the necessary steps established by the Department for making payments to vendors using Electronic Funds Transfer (EFT). Exceptions to using EFT for payment shall be made upon prior approval of the BEAS Financial Manager or designee.
9. The Bureau of Elderly and Adult Services may make an adjustment of the payment amount and/or a suspension of the one twelfth payment amount if any of the following occur: 1) Invoices are received over a two month period after the due date identified in paragraph 6 above; 2) The Quarterly Program Service Reports or missing client invoices are not submitted in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services; 3) Services are not being provided in accordance with the requirements and scope of services in Exhibit A; and 4) Should BEAS choose to execute the right to terminate the contract agreement prior to completion date, as stated in Exhibit C-1 Additional Special Provisions.
10. The Bureau of Elderly and Adult Services may require certain payments returned to the State of New Hampshire if: 1) the final reconciliation of the payments made by BEAS under this agreement show that the payments exceeded the actual units served; 2) services are not being provided in accordance with the requirements and scope of services in Exhibit A; and 3) Should BEAS choose to execute the right to terminate the contract agreement as stated in Exhibit C-1 Additional Special Provisions.
11. CONTRACT SERVICE NON CLIENT SPECIFIC INVOICES FOR TITLE III AND FOR GENERAL FUNDED MEALS.

The Contractor shall complete and submit a signed original and one copy of a CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE for actual units served during the month specified. The CONTRACT SERVICE NON CLIENT SPECIFIC INVOICE is the Bureau of Elderly and Adult Services generated and preprinted invoice provided to the contractor on a monthly basis by the NH Department of Health and Human Services, Data Management Unit.

Prior to submittal of an invoice for the following Title III funded services: Homemaker, Home Health Aide, Adult Day Services, Adult Non-medical Day Services Home Delivered Meals and Congregate Meals the Contractor will complete Form # 3502 (Contract Service Authorization Form), in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services for each client for whom reimbursement will be claimed.

Contract Service Authorization Form (#3502) shall be sent to:

NH Department of Health and Human Services  
Data Management Unit  
129 Pleasant Street, P.O. Box 2000  
Concord, NH 03301

Contractor Initials: YLG  
Date: 5-17-11

Contract Service Non Client Specific Invoices shall be sent to:

Bureau of Elderly and Adult Services  
Finance and Business Operations  
Governor Hugh Gallen Office Park, Brown Building  
129 Pleasant Street  
Concord, N.H. 03301

12. CONTRACT SERVICE CLIENT SPECIFIC INVOICES (FOR TITLE XX)

The Contractor shall complete and submit a signed CONTRACT SERVICE CLIENT SPECIFIC INVOICE for actual units served during the month specified for the client identified on the Bureau of Elderly and Adult Services generated and preprinted invoice provided to the contractor on a monthly basis by the NH Department of Health and Human Services, Data Management Unit.

A signed cover letter identifying the name of the agency, the type of service and the dates of service may be submitted in lieu of individually signed client specific invoices.

Prior to submittal of an invoice the Contractor will complete Forms #3000 (Application/Reapplication for Social Services) and #3502 (Contract Service Authorization Form) in accordance with procedures and instructions established by the Bureau of Elderly and Adult Services for each client for whom reimbursement will be claimed. Form #3502 must be submitted to the Department of Health and Human Services, Data Management Unit. Redetermination of client eligibility will be performed through the use of Forms #3000 and #3502 every twelve months thereafter.

Contract Service Authorization Form (#3502) and Contract Service Client Specific Invoices shall be sent to:

NH Department of Health and Human Services  
Data Management Unit  
129 Pleasant Street, P.O. Box 2000  
Concord, NH 03301

Contractor Initials: JLO  
Date: 5-6-11

NH Department of Health and Human Services

STANDARD EXHIBIT C

SPECIAL PROVISIONS

**1. Contractors Obligations:** The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

**2. Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.

**3. 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.

**4. 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.

**5. Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.

**6. 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.

**7. 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.

**8. Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractor's costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party funders for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party funders, the Department may elect to:

**8.1** Renegotiate the rates for payment hereunder, in which event new rates shall be established;

8.2 Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;

8.3 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:**

**9. 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:

**9.1 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.

**9.2 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.

**9.3 Medical Records:** Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.

**10. 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.

**10.1 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.

**10.2 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.

**11. Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.

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

**12. Reports: Fiscal and Statistical:** The Contractor agrees to submit the following reports at the following times if requested by the Department.

**12.1 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.

**12.2 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.

**13. 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.

**14. Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:

**14.1** The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, \_\_\_\_\_, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.

**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.

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**SPECIAL PROVISIONS – DEFINITIONS**

As used in the Contract, the following terms shall have the following meanings:

**COSTS:** Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

**DEPARTMENT:** NH Department of Health and Human Services.

**FINANCIAL MANAGEMENT GUIDELINES:** Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

**PROPOSAL:** If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

**UNIT:** For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

**FEDERAL/STATE LAW:** Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

**CONTRACTOR MANUAL:** Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act, NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

**SUPPLANTING OTHER FEDERAL FUNDS:** The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.

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**NH Department of Health and Human Services**

**STANDARD EXHIBIT C-1**

**ADDITIONAL SPECIAL PROVISIONS**

1. **Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:**

**4. CONDITIONAL NATURE OF AGREEMENT.**

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

2. **Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language;**

10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.

10.2 In the event of early termination, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.

10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.

Contractor Initials: JCO  
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10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.

10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.

**3. Subparagraph 14.1.1 of the General Provisions of this contract is deleted and the following subparagraph is added:**

14.1.1 comprehensive general liability against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$1,000,000 per occurrence and \$2,000,000 general aggregate; and

Contractor Initials: JLC  
Date: 5-27-11

GREATER WAKEFIELD RESOURCE CENTER, INC

ABSTRACT OF CORPORATE MINUTES

The following is a true abstract from minutes of meeting of BOARD OF DIRECTORS of GREATER WAKEFIELD RESOURCE CENTER, INC on MAY 13, 2011 which was duly called at which a quorum was present:

"On motion duly made and seconded, it was voted to authorize the CHAIRMAN, to accept grants and awards and enter into contracts, and contract amendments from time to time with the New Hampshire Department of Health and Human Services, Bureau of Elderly and Adult Services, to sign and otherwise fully execute such acceptances and contracts, and contract amendments or modifications thereto, and any related documents requested by the Bureau of Elderly and Adult Services; this authorization to continue until revoked by vote of this governing board.

I certify the foregoing vote is still in effect and has not been revoked, rescinded or modified.

I further certify that JUNE OLIMPIO is the duly elected CHAIRMAN of this corporation and is still qualified and serving in such capacity.

5/17/2011  
\_\_\_\_\_  
(Date)

[Signature]  
\_\_\_\_\_  
Secretary

"No corporate seal."

STATE OF NEW HAMPSHIRE

COUNTY OF Carroll

On May 17, 2011, before the undersigned officer personally appeared the person identified in the foregoing certificate, known to me (or satisfactorily proven) to be the Clerk/Secretary of the corporation identified in the foregoing certificate, and acknowledged that 5 he executed the foregoing certificate.

In witness whereof I hereunto set my hand and official seal.

[Signature]  
\_\_\_\_\_  
Notary Public/Justice of the Peace

My commission expires:

My Commission Expires 10/20/2015