

MTT 43



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

Nicholas A. Toumpas
Commissioner

Nancy L. Rollins
Associate Commissioner

BUREAU OF BEHAVIORAL HEALTH
105 PLEASANT STREET, CONCORD, NH 03301
603-271-5000 1-800-852-3345 Ext. 5000
Fax: 603-271-5058 TDD Access: 1-800-735-2964

August 30, 2013

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

RETROACTIVE
SOLE SOURCE

0.5% Other funds
51% General funds
48.5% Federal funds

Requested Action

1. Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, to **amend** an agreement with NFI North, Inc., 40 Park Lane, PO Box 417, Contoocook, New Hampshire 03229, vendor number 177575-B001, by increasing the price limitation by \$1,258,490 from \$15,143,904 to \$16,402,394 to expand the transitional housing program by eight beds for the period October 1, 2013, or date of Governor and Council approval, whichever is later, through June 30, 2015. This agreement was originally approved by Governor and Council on November 9, 2011, Item #110-A. Funding sources (92% Medicaid, 8% GF).
2. Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, to enter into a **retroactive, sole source amendment** with NFI North, Inc., 40 Park Lane, PO Box 417, Contoocook, New Hampshire 03229, vendor number 177575-B001, by increasing the price limitation by \$80,574 from \$16,402,394 to \$16,482,968 to provide vocational development and recycling services for the period January 1, 2012 through June 30, 2015. Funding source (100% Other funds transferred from the Department of Administrative Services to the Department of Health and Human Services).
3. Contingent upon the acceptance of Requested Action #2, authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, to make a payment of \$33,430.50 from the funds referenced in Requested Action #2 to pay for the recycling services performed by the contractor between January 1, 2012, and June 30, 2013.
4. Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavior Health, to **amend** an agreement with NFI North, Inc., 40 Park Lane, PO Box 417, Contoocook, New Hampshire 03229, vendor number 177575-B001, by replacing the current contract language regarding the amount of funds to be collected from clients for food and rent with a client collection policy.

Funds are available in the following accounts in State Fiscal Years 2014 and 2015 with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-92-920010-7010 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS:BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, COMMUNITY MENTAL HEALTH SVCS

Fiscal Year	Class/Object	Class Title	Current/Modified Budget	Increase/(Decrease) Amount	Revised/Modified Budget
2012	502-0891	Payments to Providers	\$ 2,120,558	\$ 0	\$ 2,120,558
2013	502-0891	Payments to Providers	\$ 4,241,116	\$ 0	\$ 4,241,116
2014	502-0891	Payments to Providers	\$ 4,241,115	\$ 579,316	\$ 4,820,431
2015	502-0891	Payments to Providers	<u>\$ 4,241,115</u>	<u>\$ 579,316</u>	<u>\$ 4,820,431</u>
Total			\$14,843,904	\$ 1,158,632	\$16,002,536

05-95-92-920010-5945 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS:BEHAVIORAL HEALTH DIV OF, DIV OF BEHAVIORAL HEALTH, CMH PROGRAM SUPPORT

Fiscal Year	Class/Object	Class Title	Current/Modified Budget	Increase/(Decrease) Amount	Revised/Modified Budget
2012	102-0731	Contracts for Program Services	\$ 150,000	\$ 0	\$ 150,000
2013	102-0731	Contracts for Program Services	\$ 150,000	\$ 0	\$ 150,000
2014	102-0731	Contracts for Program Services	\$ 0	\$ 106,503	\$ 106,503
2015	102-0731	Contracts for Program Services	<u>\$ 0</u>	<u>\$ 73,929</u>	<u>\$ 73,929</u>
Total			\$ 300,000	\$ 180,432	\$ 480,432
Grand Total			\$15,143,904	\$ 1,339,064	\$16,482,968

Explanation

Per Required Action #1, the funds in this amendment will be used to expand the transitional housing program operated on the campus of the Governor Hugh J. Gallen State Office Park by adding an 8-bed residence in Bethlehem, NH. Opening these beds will help alleviate the bed shortage at New Hampshire Hospital. NFI North, Inc. will be accepting New Hampshire Hospital patients who have been stabilized but are not ready to move back into the community, thereby opening up beds at the Hospital for those with more acute needs. There is no cost to the State to acquire this residence as it is owned by NFI North, Inc. They have used their own funding to make renovations. The program will be funded 92% through Medicaid reimbursement.

Should Governor and Council not authorize this request, the State would be foregoing an opportunity to have a much-needed impact on the problem of psychiatric patients backing up in community hospital emergency rooms because of the lack of bed space at New Hampshire Hospital.

Requested Action #2 and #3 are **retroactive** and **sole source** as the amendment affirms and memorializes as contract obligations, the recycling services that NFI North, Inc. has undertaken five days per week as part of its vocational development program continuously since January 1, 2012, the beginning of its original contract. Due to the ongoing status of this arrangement as a private continuation of a former State program and the various social services being provided by NFI North, Inc. in connection therewith, it was not subjected to competitive bidding.

The fees payable under the amendment are based on NFI North, Inc.'s actual costs in the first 12 months of the recycling operation, which totaled \$22,287. The actual costs included in that total figure were hourly wages for program clients and staff, and mileage for the box truck used to collect and transport the recyclable materials. The total fee payable for Fiscal Year 2012 (six months) is \$11,143.50. For Fiscal Year 2013 the total is \$22,287. The total fee for Fiscal Year 2014 will be slightly higher at \$23,143.50 in anticipation of adding the renovated Tobey Building as a new service location in January 2014. The total fee for Fiscal Year 2015 will be \$24,000 as the Tobey Building will be part of the contract for a full 12 months. Upon approval of the amendment, the Bureau will reimburse NFI North, Inc. \$33,430.50 for all of Fiscal Year 2012 and 2013.

August 1, 2013

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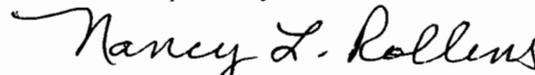
Prior to January 2012, recyclable waste collection and sorting services were provided for each of the buildings located in the Governor Hugh J. Gallen State Office Park, including the New Hampshire Hospital, through a vocational development recycling program by residents of the transitional housing services program, under supervision by State employees from the Department of Health and Human Services. The operating cost of the vocational development recycling program was reimbursed from the State Recycling Fund established and administered pursuant to RSA Chapter 9-C. In 2011 transitional housing services was discontinued as a state-operated program and reestablished effective January 1, 2012 in partnership with the Bureau of Behavioral Health as a government-funded program of NFI North, Inc., a private non-profit human services agency. The intention and effect was to keep the transitional housing services program intact and operating both during and after its privatization. In assuming the management and operation of all facets of the transitional housing services program, NFI North, Inc. took over the vocational development recycling program on the campus at the beginning of January 2012 with the understanding that its recycling program operating costs would be reimbursed just as those of the Department had been prior to the privatization of transitional housing services. It was not until several months later that NFI North, Inc. learned that it would need a contract with the Department of Administrative Services in order to be reimbursed from the State Recycling Fund. The Department of Administrative Services and the Department of Health and Human Services have subsequently drafted a Memorandum of Understanding which must be approved by Governor and Council that allows for the transfer of funds from the State Recycling Fund to the Bureau of Behavioral Health so that NFI North, Inc. can be paid.

Per Requested Action #4, the Bureau wishes to substitute language in the original contract regarding clients' financial responsibility for the cost of food and rent with a policy developed by NFI North, Inc. This policy is more flexible, expansive, and better-tailored to the clients typically seen in the program.

Area served: Statewide.

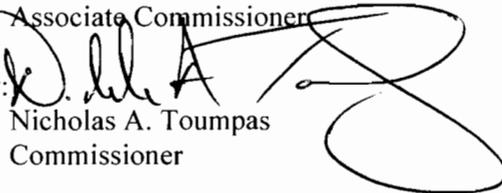
Source of funds: 51.0% General Funds, 48.5% Federal Funds, 0.5% Other Funds.

Respectfully submitted,



Nancy L. Rollins,
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

NLR/pbr/sl
Enclosures

Amendment to Agreement

This Amendment to Agreement (hereinafter called the "Amendment") is dated this 30th day of August 2013, between the State of New Hampshire, Division of Community Based Care Services, Bureau of Behavioral Health of the Department of Health and Human Services (hereinafter called "BBH") and NFI North Inc., a non-profit corporation organized under the laws of the State of New Hampshire with a place of business at 40 Park Lane, Contoocook, New Hampshire 03329 (hereinafter referred to as the "Contractor").

WHEREAS, pursuant to an Agreement dated **October 31, 2011**, the Contractor has agreed to provide certain services upon the terms and conditions specified in the Agreement, in consideration of payment by BBH of certain sums specified therein; and

WHEREAS, pursuant to Paragraph 17. of the Agreement, the Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties thereto and only after approval of such amendment, waiver, or discharge by the Governor and Executive Council of the State of New Hampshire;

WHEREAS, BBH and the Contractor have agreed to amend the Agreement in certain respects;

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

1. Amendment and Modification to Exhibit A ~ Scope of Work

1.1 Add Paragraph 15. WASTE RECYCLING SERVICES directly after Paragraph 14.:

15. WASTE RECYCLING SERVICES

A. Service Locations: Twenty-two (22) buildings situated within the Governor Hugh Gallen State Office Park, located between Pleasant, Fruit, Clinton, and South Spring Streets in Concord, New Hampshire, said buildings to include: New Hampshire Hospital, Department of Revenue Administration, Dolloff Building, Johnson Hall, Main Building, Annex, Walker Building, Thayer Building, Department of Education, Department of Labor, Archives, Electrical Shop, Laundry Building, Parking Garage, Call Center, Howard Recreation, 89 Pleasant Street (Yellow House), 91 Pleasant Street (Brick House), 93 Pleasant Street (Grey House), 125 Pleasant Street (Pond Place), 5 Howard Drive (Bayberry House), Liberty House, and Tobey Building when occupied (anticipated beginning January 2014).

B. Recycling Services: Recycling services shall include collection, sorting, shredding, transportation, and disposal of recyclable waste at designated State locations, such recyclable waste to include mixed paper, cardboard, plastic, aluminum and steel cans, and glass. Every weekday (Monday through Friday, excluding State Employee Holidays) throughout the term of this Agreement the Contractor shall collect recyclable waste from the service locations listed above according to the daily pickup schedule attached hereto and incorporated herein as **EXHIBIT A ~ ATTACHMENT A ~ NFI Recycling Truck Schedule**, sort and shred the materials as appropriate, transport the material to one of two destinations, and dispose of it into one or more containers and/or compactors situated at the disposal destination which were procured by the State for such purpose. The primary disposal destination is located within the Governor Hugh J. Gallen State Office Park. The secondary disposal destination is located at 11 Stickney Avenue in Concord, New Hampshire. The Contractor shall transport all collected recyclable waste to the primary disposal

Contractor Initials: 
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destination except when the containers and/or compactors at said location are full or unavailable due to maintenance, at which time the Contractor shall proceed to the secondary disposal destination. The State reserves the right to designate other disposal locations as it sees fit to replace and/or supplement the primary and secondary disposal destinations described above.

- 1) The Contractor agrees to provide recycling services to the State of New Hampshire, Health and Human Services in accordance with this Agreement. The Contractor hereby agrees to abide by the provisions, terms, and conditions set forth in this Agreement.
- 2) The State of New Hampshire shall have the right to terminate the Agreement at any time by giving the Contractor thirty (30) days advance written notice.
- 3) The Contractor agrees to prepare and maintain the following written records: Timesheets for all personnel performing Contractor obligations under the Agreement, a log of amounts of materials collected (by weight), and a truck mileage log. These records must be submitted to the Department quarterly for review and approval.
- 4) This Agreement shall have a three and one-half (3.5) year term deemed to have commenced January 1, 2012 and ending June 30, 2015.
- 5) This Agreement formalizes an arrangement with the Contractor that commenced on January 1, 2012 to assume responsibility for a vocational program for transitional housing residents that was formerly managed by New Hampshire Hospital.

1.2. Add directly after *Exhibit A, Amendment #1: EXHIBIT A ~ ATTACHMENT A ~ NFI Recycling Truck Schedule.*

EXHIBIT A ~ ATTACHMENT A ~ NFI Recycling Truck Schedule

Monday	APS (New Hampshire Hospital); Department of Revenue Administration; Dolloff Building; THS Residences: Pond Place; Bayberry House Yellow House; Grey House. Brick House, and Howard Recreation.
Tuesday	APS (New Hampshire Hospital); Main Building.
Wednesday	APS (New Hampshire Hospital); Walker Building; Thayer Building.
Wednesday ~ Every Other Week: Annex and Archives.	
Thursday	APS (New Hampshire Hospital) Department of Education; Johnson Hall.
Friday	APS (New Hampshire); Walker Building; Department of Labor; Call Center; Electrical Shop; Liberty House Laundry Building; and Parking Garage.

- The above daily pickup schedule lists the sites in the order that the pickups occur.
- The amounts of recycling materials vary from site to site. Sometimes due to time constraints the truck crew is unable to finish a site during the morning hours of 8:00 AM to 11:00 AM. When a site does not get completed that morning, it is either completed that afternoon or first thing the following morning.
- At times the compactor can be full or down for maintenance. When this occurs, the truck crew will go to an alternative site at Stickney Avenue. This also changes some of the pickup times for various sites.

Contractor Initials: PO
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- 1.3. The contractor will expand the transitional housing program they currently operate on the grounds of the Governor Hugh J. Gallen State Office Park by adding 8 beds in a residence they own at 787 Maple Street, Bethlehem, NH. All appropriate requirements, principles, and standards that are contained in the original contract will apply to the Bethlehem program.
- 1.4. **Delete the language in Exhibit A, Section 11. B. 6) and replace it with the following:** "6) The contractor's policy defining the financial responsibilities of the clients in the transitional housing program are contained in EXHIBIT A ~ ATTACHMENT B ~ NFI Policy On Client Collections (2013). Add this directly after *Exhibit A Amendment #1, ATTACHMENT A ~ NFI Recycling Truck Schedule*.
- 1.5. **Delete the table in Exhibit A, Section 5, entitled "Timeline:" and replace with the following table:**

THS TIMELINE - CLIENTS TO BE SERVED				
Vendor Contract Year	SFY	State Quarter	Number of Clients	Comments
Year 1	SFY 2012	3	50 or current census as of January 1, 2012 down to approximately 40	Vendor assumes control Transition clients to community
Year 1	SFY 2012	4	50 or current census as of January 1, 2012 down to approximately 40	Transition clients to community
SFY 2012 TOTAL				
Year 1	SFY 2013	1	50 or current census as of January 1, 2012 down to approximately 40	Transition clients to community
Year 1	SFY 2013	2	50 or current census as of January 1, 2012 down to approximately 40	Transition clients to community
Year 2	SFY 2013	3	40	
Year 2	SFY 2013	4	40	
SFY 2013 TOTAL				
Year 2	SFY 2014	1	48	8 clients added in Bethlehem (Includes respite)
Year 2	SFY 2014	2	48	
Year 3	SFY 2014	3	48	
Year 3	SFY 2014	4	48	
SFY 2014 TOTAL				
Year 3	SFY 2015	1	48	
Year 3	SFY 2015	2	48	
Year 4	SFY 2015	3	48	
Year 4	SFY 2015	4	48	
SFY 2015 TOTAL				
CONTRACT TOTAL FOR VENDOR (3.5 years)				

2. **Amendment and Modification to Exhibit B ~ Payment Method:**

2.1. **Add Paragraphs 10., 11., and 12. to Exhibit B directly after Paragraph 9.:**

10. The Contractor will be paid for aggregate personnel labor costs and truck mileage accrued in the performance of its obligations at a fixed quarterly rate derived from the applicable annual contract price limitation set forth below for the corresponding fiscal year. Annual contract price limitations (and corresponding fixed quarterly rates) are as follows:

Fiscal Year 2012 \$11,143.50 (actual cost)
 Fiscal Year 2013 \$22,287 (\$5,571.75 per quarter)
 Fiscal Year 2014 \$23,143.50 (\$5,571.75 for quarters 1 & 2, \$6,000 per quarters 3 & 4)*
 Fiscal Year 2015 \$24,000 (\$6,000 per quarter)*

Upon the approval of the amendment by Governor and Council, the Bureau of Behavioral Health will make a payment of \$33,430.50 to the contractor for recycling services performed from January 1, 2012, through June 30, 2013.

*Assumes addition of Tobey Building as a service location in January 2014.

11. Invoices shall be submitted to the Bureau of Behavioral Health quarterly together with the supporting written

Contractor Initials: 
 Date: 8/30/13

records required to be maintained under this Agreement pursuant to Exhibit A. Payment shall be made quarterly in full to the address designated in Section 1.4. of the Agreement within thirty (30) days after receipt of an invoice and the State's approval of the supporting records. Payment for services provided in accordance with the Agreement for the period January 1, 2012 - June 30, 2013 shall be made in full within thirty (30) days after the Agreement has been approved by the Governor and Council.

12. Invoices shall be submitted to the following address:

Donna Walker
 Financial Management
 Bureau of Behavioral Health
 105 Pleasant Street
 Concord NH 03301

2.2. Delete the table in Exhibit B, Section 3, entitled "NFI North, Inc. Transitional Housing Budget Summary" and replace with the following table:

Amendment #1
NFI North, Inc. Transitional Housing Budget Summary

Fiscal Period	Length of Budget Period	Funding Sources		Total
		Medicaid	BBH GF	
FY12 1/1/12 - 6/30/12	6 months	\$2,120,558	\$150,000	\$2,270,558
FY13 7/1/12 - 12/31/12	6 months	\$2,120,558	\$150,000	\$2,270,558
<u>FY13 1/1/13 - 6/30/13</u>	<u>6 months</u>	<u>\$2,120,558</u>	<u>\$0</u>	<u>\$2,120,558</u>
FY13 TOTAL		\$4,241,116	\$150,000	\$4,391,116
FY14 7/1/13 - 6/30/14	12 months	\$4,820,431	\$106,503	\$4,926,934
FY15 7/1/14 - 6/30/15	12 months	\$4,820,431	\$73,929	\$4,894,360
TOTAL CONTRACT	3.5 yrs	\$16,002,536	\$480,432	\$16,482,968

2.3. Make the following changes to Exhibit B, Paragraph 9: Under "NH General Fund", replace the "\$0" next to FY 2014 with "106,503". Replace the "\$0" next to FY 2015 with "73,929". Adjust the total of NH General Fund by deleting "\$300,000" and replacing it with "\$480,432". Under "Federal Funds", replace the "\$4,241,115.00" next to FY 2014 with "4,820,431.00". Replace the "\$4,241,115.00" next to FY 2015 with "4,820,431.00". Adjust the total of Federal Funds by deleting \$14,843,903 and replacing it with "\$16,002,536.00".

2.4. Add the following to the end of Exhibit B, Paragraph 6: "Invoices from the contractor to draw down the general funds identified for the 8-bed transitional housing program expansion in Bethlehem must be approved for payment by the Bureau of Behavioral Health Administrator or his designee."

Contractor Initials: *RD*
 Date: *8/2/13*

- 2.5. Delete the Attachment A in Exhibit B, entitled "THS Authorized Medicaid Services" and replace with the following table:

THS Authorized Medicaid and Medicare Services

	Minimum Staff Qualifications	Service	National Code	Rate	Freq./Duration
1	Bachelors Level Staff	Therapeutic Behavioral Service (TBS) Per Diem	H2020	\$219.00	1 event per day
2	Team, Psychiatrist, RN, Masters, Bachelors	Restorative Partial Hospitalization, Continuous Treatment Team Full Day	H2018	\$99.90	1 event per day
3	Team, Psychiatrist, RN, Masters, Bachelors	Restorative Partial Hospitalization, Continuous Treatment Team, Half Day	H2001	\$69.26	1 event per day
4	Team, Psychiatrist, RN, Masters, Bachelors	Restorative Partial Hospitalization, Full Day	H2018	\$99.90	1 event per day
5	Team, Psychiatrist, RN, Masters, Bachelors	Restorative Partial Hospitalization, Half Day	H2001	\$69.26	1 event per day
6	Bachelors Level Staff	Case Management	T1016	\$358.00	1 per calendar month
7	Bachelors Level Staff	Supported Employment	H2023	\$26.54	15 minute unit
8	Bachelors Level Staff	Psychoeducation (IMR) per 15 minutes	H2027	\$26.54	15 minute unit
9	Bachelors Level Staff	Psychoeducation (IMR) per 15 minutes-Group	H2027-HQ	\$9.19	15 minute unit
10	Masters Level Clinician	Individual Psychotherapy 20-30 minutes	90832	\$33.89	1 event per day
11	Psychiatrist	Individual Psychotherapy 20-30 minutes face to face	90833	\$28.57	1 event per day
12	Masters Level Clinician	Individual Psychotherapy 45-50 minutes	90834	\$50.83	1 event per day
13	Psychiatrist	Individual Psychotherapy 45-50 minutes face to face	90836	\$46.78	1 event per day
14	Masters Level Clinician	Individual Psychotherapy 75-80 minutes	90837	\$76.72	1 event per day
15	Psychiatrist	Individual Psychotherapy 75-80 minutes face to face	90838	\$75.13	1 event per day
16	Masters Level Clinician	Group Psychotherapy	90853	\$10.65	15 minute unit
17	Psychiatrist	Psychiatric Assessment	99213	\$65.98	1 - 99xxx event per day
18	Psychiatrist	New Patient Office or Other outpatient visit - E&M 10 minutes face to face	99201	\$18.05	1 event per day
19	Psychiatrist	New Patient Office or Other outpatient visit - E&M 20 minutes face to face	99202	\$34.21	1 event per day
20	Psychiatrist	New Patient Office or Other outpatient visit - E&M 30 minutes face to face	99203	\$52.12	1 event per day
21	Psychiatrist	New Patient Office or Other outpatient visit - E&M 45 minutes face to face	99204	\$89.11	1 event per day
22	Psychiatrist	New Patient Office or Other outpatient visit - E&M 60 minutes face to face	99205	\$114.52	1 event per day
23	Psychiatrist	Evaluation and management of patient that may not require the presence of a physician, typically 5 minutes face to face	99211	\$6.18	1 event per day
24	Psychiatrist	Evaluation and management of patient, typically 10 minutes face to face	99212	\$17.06	1 event per day
25	Psychiatrist	Evaluation and management of patient, typically 15 minutes face to face	99213	\$34.66	1 event per day
26	Psychiatrist	Evaluation and management of patient, typically 25 minutes face to face	99214	\$53.43	1 event per day
27	Psychiatrist	Evaluation and management of patient, typically 40 minutes face to face	99215	\$75.29	1 event per day

Contractor Initials: 
Date: 5/20/13

3. **Amendment and Modification to Exhibit C Special Provisions:**

3.1. **Replace Section 14.1.1 in its entirety with the following:**

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

4. **Effective Date of Amendment:** The Effective Date of this action is retroactive from January 1, 2012.

5. **Continuance of Agreement:** Except as specifically amended and modified by the terms and conditions of this Agreement, the Agreement and the obligations of the parties there under shall remain in full force and effect in accordance with the terms and conditions set forth therein.

Contractor Initials: 
Date: 8/20/13

IN WITNESS WHEREOF, the parties have hereunto set their hands as of the day and year written above.

NH DHHS/Bureau of Community Based Care Services
The Bureau of Behavioral Health

NFI - North, Inc.

By: Nancy L. Rollins
Nancy L. Rollins
Associate Commissioner

By: Paul Dann
Paul Dann
Executive Director

STATE OF NEW HAMPSHIRE
COUNTY OF MERRIMACK

The forgoing instrument was acknowledged before me this 30th day of August, 2013, by

Paul Dann, Executive Director



Joanne M. Daufen
Notary Public / Justice of the Peace
Commission Expires: July 24, 2018

Approved as to form, execution and substance:

OFFICE OF THE ATTORNEY GENERAL

By: Jeanne Herrick
Jeanne Herrick, Attorney
Date: 9 Sept. 2013

Contractor Initials: RD
Date: 8/31/13

CERTIFICATE OF VOTE

I, Sue Allen, do hereby certify that:
(Board Secretary)

1. I am the duly elected Clerk of NFI North, Inc.
2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of the Corporation duly held on April 15, 2013.

RESOLVED: That this Corporation enter into a contract with the State of New Hampshire, acting through its Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, concerning the following matter:

To Provide: Transitional Housing Program Service and Waste Recycling Services.

RESOLVED: That the President/Executive Director/Assistant Executive Director hereby is authorized on behalf of this Corporation to enter into the said contract with the State and to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as (s)he may deem necessary, desirable or appropriate.

3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of August 30th, 2013

4. **Suanne Nader** is duly elected **President** of the Corporation.
Paul L. Dann is duly elected **Executive Director** of the Corporation.
Karen Cusano is duly elected **Assistant Executive Director** of the Corporation.

(Seal)
(Corporation)

Susan J Allen
(Signature of Board Secretary)

State of **New Hampshire**

County of **Merrimack**

The foregoing instrument was acknowledged before me this 30th day of August, 2013
by Sue Allen
(Board Secretary)



Joanne M Daufen
Name:
Title: Notary Public/Justice of the Peace

Commission Expires: July 24, 2018

EXHIBIT A ~ ATTACHMENT B ~ NFI POLICY ON CLIENT COLLECTIONS (2013)

Consumer Financial Responsibilities

The purpose of this section is to define the resident financial responsibilities and services offered by Transitional Housing Services (THS).

Rent and Services:

Calculation of resident rent: Each resident of supportive housing may be required to pay as rent an amount determined by the recipient, which may not exceed the highest of:

- a. Calculations must be done within five (5) business days of Admission date.
- b. Their income must be re-examined at least annually and/or;
- c. If there is a decrease in the resident's income during the year, an interim re-examination may be requested by the resident and the resident rent adjusted accordingly.
- d. Consumers who receive an increase in income need not have their rent increased until the next scheduled (annual) re-examination.
- e. Consumers must agree to supply such certification, release, information, or documentation as the grantee judges necessary to determine the consumer's income. Self-declaration may be used only if there is no other means of verification available.

Use of rent: Consumers rent may be used in the operation of the project or may be reserved, in whole or in part, to assist consumers of transitional housing in moving to permanent housing.

Fees applied to some consumers but not others: If there is a reasonable basis to charge only some consumers, such as services that apply only to some consumers, then fees can be selectively applied. However, in most cases if a fee were charged, it would be applied to all consumers.

Clothing Allowance:

1. The intent is to create uniformity and predictability as to how requests will be processed and to insure that all consumers have their basic clothing needs met.
2. Consumers are encouraged to work in order to purchase items for personal use.
3. This process is intended to meet basic clothing needs for those who are unemployed or underemployed for various reasons. It is not intended to be a clothing allowance for those who have other resources available to them.
4. All other resources must be used prior to requesting and/or expending these funds.
5. This process was implemented on January 1, 2008 and coincided with the Social Security Administration Cost of Living Adjustment (COLA).
6. Revised rental calculations will be prepared prior to this date and will include the clothing allocation as part of the formulae.
 - a. The allocation will be based on need and subject to the approval of the Director of Transitional Housing Program on a case-by-case basis.
 - b. Each consumer will have a maximum annual clothing allocation of up to \$360, preferably to be accessed twice within a year to accommodate the change in seasons.
 - c. This allocation will be pro-rated up to \$30 monthly from each consumer's benefits.

Contractor Initials: 
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- d. Emergency needs will be determined on an individual basis. The Case Manager will assist the consumer(s) in this process by submitting a special needs form for this purpose to the Director of THS.

Guidelines for Semi-Annual Consumer Clothing Needs

- a. Each consumer shall provide a needed clothing list to the Case Manager.
- b. Case Managers shall review list.
- c. Residential staff shall complete an inventory of current clothing items.
- d. Residential staff shall report findings to Case Manager within one week from inventory date.
- e. Case Manager shall review consumer's previous clothing receipts to ensure the consumer has not already purchased items being requested in the past 12 months.
- f. Case Manager shall calculate estimate based on the standardized clothing price list.
- g. Case Manager shall complete cashiers form with dollar amount and items listed and then make arrangements for shopping to occur.
- h. Once shopping has been completed the receipt shall be photocopied by staff, copy given to Case Manager and original given to the business department. This will provide documentation as to what the consumer has purchased to avoid duplicate purchases.

Food Purchase and Payments:

1. Meal Planning
 - a. Once a week the consumers are encouraged to attend a menu planning meeting for their house. Each consumer is encouraged to plan and cook a meal per week and have input in this meeting.
 - b. A residential supervisor is present for this meeting for support.
 - c. An RN reviews the menus for nutritional needs.
 - d. Residential staff from the menu planning meeting creates a shopping list.
 - e. The consumers attend a Restorative Partial Hospitalization (RPH) day program Monday through Friday where they prepare meals and eat lunch. A menu planning group is also done at RPH and a shopping list is made from that planning.
2. Shopping (Staff):
 - a. Each week on a specified day residential staff and a consumer shop for a specific residence. Staff shops at one of two stores using a store credit card.
 - b. An RPH staff person shops for the program using the same credit card from one of two stores. Often residents accompany staff to shop.
3. Shopping (Residents):
 - a. Two of the residences have residents who do their own shopping using their EBT card. Their food stamps are not taken out of the EBT account, but amounts are recorded.
 - b. The resident picks the card up from the Account Technician and returns the card the next business day.
4. Amounts:
 - a. All consumers are allotted \$38.00 per week or \$2.38 per residence meal.
 - b. All residents/RPH staff are allotted \$10.50 per week or \$2.10 per meal for RPH meal
 - c. The amount is calculated according to the daily census status for the day of shopping.
5. Accounting:
6. Documentation:

Contractor Initials: 
Date: 5/2/13

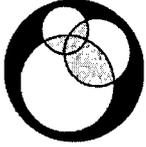
Reallocation of Funds

1. Food and Nutrition
 - a. When a consumer has been admitted to the APS, no food costs shall be applied for the duration of the inpatient stay other than the weekly food already purchased for the residence.
 - b. When a consumer goes on a planned visit and food has not been purchased, the consumer shall be rebated the cost per meal that they will be absent.
 - c. When a consumer is transferred to an alternative community residence they shall be rebated the cost per meal from the balance of the month of any funds deposited for that month.
 - d. These funds are provided at the request of the case manager and released by the Director THS/designee on a case by case basis from their account.

2. Clothing Account
 - a. Requests for reallocation of rent and services charged for basic clothing needs: The intent is to create uniformity and predictability as to how requests will be processed and to insure that all consumers have their basic clothing needs met.
 - b. Consumers are encouraged to work in order to purchase items for personal use. This process is intended to meet basic clothing needs for those who are unemployed or underemployed for various reasons. It is not intended to be a clothing allowance for those who have other resources available to them.
 - c. All other resources must be used prior to requesting and/or expending these funds.
 - d. All funds are a reallocation of rent and service charges.
 - e. All funds from the clothing account, released to the consumer at discharge must be accounted for. An itemized accounting for the total amount requested should be on the Reimbursement Reallocation Request form.

3. Rent and Services
 - a. To facilitate an effective transfer, the Case Manager may request rent and services payments be suspended to be applied to planned housing costs.
 - b. All funds released to the consumer at discharge must be accounted for. An itemize accounting for the total amount requested should be on the Reimbursement Reallocation Request form.
 - c. Rent and utility bills shall be paid by check made out to the vendor.

Example of letter to client/rep payee



NFI NORTH, INC.

40 Park Lane
PO Box 417
Contoocook, NH 03229
Office: 603-746-7550
Fax: 603-746-7544

November 27, 2012

[rep payee and address here]

Re: [client name here] Monthly Charges for NFI North Transitional Housing Services

Welcome to NFI North Transitional Housing Services, an NFI North, Inc. program. This letter is to help you understand how we calculate the monthly charges for consumers of NFI North Transitional Housing Services. From the documentation provided, we show the following amounts received monthly as income.

Social Security Income (SSI):	<u>\$600.00</u>
Social Security Disability (SSDI):	<u>\$</u>
Other Income: Type	<u>\$</u>
Total Monthly Income:	<u>\$</u>
Less any of the applicable expenses:	
Personal Spending Allowance	<u>\$90.00«Personal Spending»</u>
Office of Cost Containment	
<u>\$«Office of Cost Containment»</u>	
Rep Payee Service	<u>\$</u>
Storage	<u>\$</u>
Medicare Premium:	<u>\$</u>
Total Allowed Expenses Charges:	<u>\$</u>
Total Food Charge:	<u>\$«Food»</u>
Total Rent Charge:	<u>\$300.00</u>
Total Ancillary Services:	<u>\$«Ancillary Services»</u>
Total Amount Due to NFI North, Inc.	<u>\$510.00</u>

It is your responsibility to forward copies of any documentation of changes that occur to your monthly income to your NFI North, Inc. Case Manager as soon as you receive them. If you have any questions please feel free to contact the Billing Office of NFI North, Inc. or you can discuss your concerns with Sharon Bilodeau, the Program Director, who can get in contact with us.

Sincerely,

Please remit payment to:

Michelle Korbet
AR Coordinator

NFI North, Inc.
PO Box 417
Contoocook, NH 03229

Cc: Sharon Bilodeau
Client file

Contractor Initials: PD
Date: 8/3/13

Rent Basis:
 «First_Name»«Last_Name»
 Rent Calculation

Budgeted Line Item	Period	Amount	Monthly
Utilities	Annual	\$ 115,000.00	\$ 9,583.33
Building Maintenance	Annual	\$ 25,000.00	\$ 2,083.33
Household Materials	Annual	\$ 35,000.00	\$ 2,916.67
Cable/Internet/phone	Annual	\$ 45,000.00	\$ 3,750.00
Property Insurance (contents only)	Annual/Site	\$ 500.00	\$ 291.67
Depreciated Items (phone/cabling/appliances/home equip/etc)	Depreciated over term of contract (3 1/2 yrs)	\$ 128,000.00	\$ 3,047.62
Indirect/Overhead		\$ -	\$ 3,034.17
			\$24,706.79
Calculated Rent (monthly amt divided by 36 clients)			\$ 686.30

Items deducted from income	Description	Example
Food	Assumed \$210 (same as State until calculated otherwise)	\$ 210.00
Personal Spending/Allowance	Based on Federal Guidelines (reduced by cost containment)	\$ 90.00
Storage Fees	Personal items (some have/some do not)	\$ 85.00
Office of Cost Containment or Department of Corrections	Fees that need to be paid back to NH for legal or other	
Medication co-pays		\$ 15.00
Rep Payee Services	one client pays \$290 though	\$ 38.00

Example 1 - client with \$694 income, \$10 cost containment, rep payee, \$15 medications		
Income (excludes wage earnings)	\$	694.00
Personal Spending	\$	(80.00)
Office of Cost Containment or Department of Corrections	\$	(10.00)
Food	\$	(210.00)
Rep Payee Service	\$	(38.00)
Rent	\$	(356.00)
Services	\$	-
Example 2 - client with \$1094 income, \$0 cost containment, \$38 rep payee, \$40 Storage \$15 medications		
Income (excludes wage earnings)	\$	1,094.00
Personal Spending	\$	(90.00)
Food	\$	(210.00)
Rep Payee Service	\$	(38.00)
Storage	\$	(38.00)
Rent	\$	(686.30)
Services	\$	(31.70)

* this line is reduced by fee below

Non-Clinical Services calculation

Budgeted Line item	Period	Amount	Monthly
Transportation			
Gas/Oil/Maintenance	Annual	\$ 150.00	\$ 12.50
Vehicle Insurance	Annual	\$ 1,100.00	\$ 91.67
Vehicles (3) (leased / depreciated over the term of the contract)	depreciated over the term of the contract	\$ 90,000.00	\$ 2,142.86
Duress System	Annual	\$ 4,200.00	\$ 350.00
Ancillary Support Services			
Psychiatric Consulting (24 hrs per week)	Annual	\$ 280,800.00	\$ 23,400.00
Peer Support Recovery Program	Annual	\$ 93,114.00	\$ 7,759.50
Sex Offender Treatment (Individual & Group)	Annual	\$ 64,800.00	\$ 5,400.00
Purchase of online voc/work assessments, TABE Testing, GED preparation etc. (50% drop in July 2013)	Annual	\$ 6,000.00	\$ 500.00
Medical Supplies (first aid kits and med room items)	Annual	\$ 600.00	\$ 50.00
	Total		\$39,706.52
Non- Clinical Services (monthly amt divided by 36 clients)			\$ 1,102.96

Contractor Initials: 
 Date: 



NFI NORTH, INC.

Financial Statements

June 30, 2012

(With Independent Auditors' Report Thereon)

NFI NORTH, INC.

Financial Statements

June 30, 2012

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KPMG LLP
Two Financial Center
60 South Street
Boston, MA 02111

Independent Auditors' Report

The Board of Directors
NFI North, Inc.:

We have audited the accompanying statement of financial position of NFI North, Inc. (NFIN) as of June 30, 2012, and the related statements of activities, functional expenses, and cash flows for the year then ended. These financial statements are the responsibility of NFIN's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of NFIN's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of NFIN as of June 30, 2012, and the changes in its net assets and its cash flows for the year then ended, in conformity with U.S. generally accepted accounting principles.

In accordance with *Government Auditing Standards*, we have also issued our report dated September 28, 2012 on our consideration of NFIN's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of the internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

KPMG LLP

September 28, 2012

NFI NORTH, INC.
Statement of Financial Position
June 30, 2012

Assets

Current assets:	
Cash and equivalents	\$ 94,249
Accounts receivable, net (note 2)	1,045,332
Prepaid expenses and other current assets	63,608
Due from affiliate (note 7)	7,153
Total current assets	<u>1,210,342</u>
Property and equipment (note 4):	
Land	535,992
Buildings and improvements	6,706,936
Equipment and furnishings	672,054
Motor vehicles	932,444
	<u>8,847,426</u>
Less accumulated depreciation	<u>(3,556,424)</u>
Property and equipment, net	<u>5,291,002</u>
Due from affiliate (note 7)	53,706
Other assets	653,838
Total assets	<u>\$ 7,208,888</u>

Liabilities and Net Assets

Current liabilities:	
Current portion of long-term debt (note 4)	\$ 222,988
Accounts payable	89,797
Line of credit (note 3)	1,349,275
Accrued payroll and related liabilities	570,141
Other accrued expenses	126,384
Deferred revenue	129,124
Total current liabilities	<u>2,487,709</u>
Long-term liabilities:	
Long-term debt, net of current portion (note 4)	<u>3,339,850</u>
Total liabilities	<u>5,827,559</u>
Net assets:	
Unrestricted	1,348,645
Temporarily restricted	32,684
Total net assets	<u>1,381,329</u>
Total liabilities and net assets	<u>\$ 7,208,888</u>

See accompanying notes to financial statements.

NFI NORTH, INC.
Statement of Activities
Year ended June 30, 2012

Changes in unrestricted net assets:	
Revenues and other support:	
Contracts, net (note 2)	\$ 13,420,859
Contributions:	
In-kind	66,649
Other	17,732
Interest and dividends	22,054
Miscellaneous	3,178
	13,530,472
Net assets released from program restrictions	19,376
Total revenues and other support	13,549,848
Expenses:	
Program services	12,776,869
Supporting services (note 7)	1,237,871
Total expenses	14,014,740
Decrease in unrestricted net assets before nonoperating activities	(464,892)
Nonoperating revenues (expenses):	
Gain on disposal of property and equipment	25,292
Other	(14,471)
Decrease in unrestricted net assets	(454,071)
Changes in temporarily restricted net assets:	
Contributions	8,938
Net assets released from program restrictions	(19,376)
Decrease in temporarily restricted net assets	(10,438)
Decrease in net assets	(464,509)
Net assets at beginning of year	1,845,838
Net assets at end of year	\$ 1,381,329

See accompanying notes to financial statements.

NFI NORTH, INC.

Statement of Functional Expenses

Year ended June 30, 2012

	<u>Program services</u>	<u>Supporting services</u>	<u>Total</u>
Personnel expenses:			
Salaries, payroll taxes and employee benefits	\$ 9,896,034	518,475	10,414,509
Other expenses:			
Contracted services	374,073	501,767	875,840
Other direct costs	537,086	86,430	623,516
Occupancy	509,113	13,487	522,600
Consumables	462,651	—	462,651
Transportation	203,601	34,967	238,568
Interest	188,510	35,348	223,858
Equipment	98,296	26,336	124,632
In-kind contributions	66,649	—	66,649
	<u>2,439,979</u>	<u>698,335</u>	<u>3,138,314</u>
Depreciation and amortization	440,856	21,061	461,917
Total expenses	<u>\$ 12,776,869</u>	<u>1,237,871</u>	<u>14,014,740</u>

See accompanying notes to financial statements.

NFI NORTH, INC.
Statement of Cash Flows
Year ended June 30, 2012

Cash flows from operating activities:	
Decrease in net assets	\$ (464,509)
Adjustments to reconcile increase in net assets to net cash used in operating activities:	
Depreciation and amortization	461,917
Gain on sale of property and equipment	(25,292)
Changes in assets and liabilities:	
Accounts receivable, net	(273,514)
Prepaid expenses and other current assets	(6,258)
Other assets	133,226
Accounts payable	32,701
Accrued payroll and related liabilities	121,912
Other accrued expenses	46,399
Deferred revenue	(179,868)
Net cash used in operating activities	<u>(153,286)</u>
Cash flows from investing activities:	
Purchases of property and equipment	(598,015)
Proceeds from sale of property and equipment	25,933
Decrease in due from affiliate	74,607
Net cash used in investing activities	<u>(497,475)</u>
Cash flows from financing activities:	
Issuance of long-term debt	307,026
Repayments of long-term debt	(703,577)
Advances from line of credit	1,374,275
Repayments on line of credit	(325,000)
Net cash provided by financing activities	<u>652,724</u>
Net increase in cash and equivalents	1,963
Cash and equivalents at beginning of year	<u>92,286</u>
Cash and equivalents at end of year	<u>\$ 94,249</u>
Supplemental data:	
Cash paid for interest	\$ 223,858

See accompanying notes to financial statements.

NFI North, Inc.
40 Park Lane
Contoocook, NH 03229

Mission Statement

"NFI's mission is to provide diverse and innovative services for people with an emphasis on autonomy and skill development in a manner that promotes dignity, respect and responsibility so they can live successfully within their own community."

NFI North		
Key Personal	Name	Salary
Executive Director	Paul L. Dann, PhD	136,000.00
Assistant Executive Director	Karen Cusano, MS	108,200.00
Regional Director	Jan Williamson	80,000.00
Business Manager	Jill Dagenais	67,300.00
Program Director THS	Sharon Bilodeau	64,260.00

Paul L. Dann, Ph. D.
W: (603) 746-7550
Email: pauldann@naficom

EMPLOYMENT

Jan. 1993- present NFI North, Contoocook NH

Executive Director

Responsible for the overall management of this private non-profit corporation with a total annual budget of 18+ million dollars. Developed key programs and services to address the need of state mandated child protection, juvenile justice and mental health and educational agencies within the Northern New England area. Worked with Board of Directors, Agency Management and Business Staff to insure corporation's fiscal and programmatic excellence. Provided regular consultation and training to private and public human service organizations.

Sept. 1991- Jan. 1993 NORTH AMERICAN FAMILY INSTITUTE - Concord, NH

Director of Children and Family Services

Responsible for the overall management of children and family services for a large nationally based non-profit human service agency. Developed a cadre of programs serving New Hampshire, Maine and Northern Massachusetts. Directly responsible for oversight of agency supervisors, project development, contract negotiation, training and fiscal operations. Developed core management training for project directors, wrote Proposals resulting in the addition of new projects, developed new and innovative services in the area of wrap around, therapeutic foster care, home based services and residential treatment.

April 1980 - Sept. 1991 - NORTHEASTERN FAMILY INSTITUTE - Danvers, MA

Agency Supervisor for Adolescent Services (3/87 - 9/91)

Promoted to this key management position. Responsible for program supervision, program development, and overall agency management functions including facility siting, community acceptance, facility licensing, fleet management, fiscal management and contract negotiations with various funding sources. Directly responsible for the operations of six projects representing a combined budget of \$3.4 million. Additional responsibilities include the provision of training and support for other agency projects.

Program Director - North Crossing (12/83 - 3/87)

Promoted to develop and manage a residential school emotionally Disturbed adolescents. This project included a staff of 15 and an annual budget of \$380,000. Developed this accredited school from the proposal stage to full operation. Provided training and support to other agency projects as well as the State of Vermont within the areas of program development and staff training. In February of 1985 promoted to supervise 2 additional projects with a staff of 10 and a \$325,000 budget.

Pre-Screener - Crisis Intervention Services (9/83 - 6/86)

Worked as part of a mobile crisis intervention team. Provided crisis intervention services throughout five communities on an open referral basis. Worked with area services, police and community members to provide pre-screening for voluntary and involuntary psychiatric hospitalization, mental status exams, crisis management, referral and consultation. Provided community presentations on the topics of mental health and program services.

Program Director - Community Living Project and Adolescent Day Program (4/81 - 12/83)

Managed 2 mental health programs with combined staff of 10 and a budget of \$335,000. Designed, organized, staffed and supervised a treatment program that achieved a high client success rate. Obtained contract funding from an additional state agency and from the state of Vermont. Consulted to agencies in the states of Maryland and New Hampshire on the development and management of community-based treatment.

Caseworker - Foster Care Program (4/80 - 4/81)

Managed a caseload of adolescents committed to the Department of Youth Services. Provided ongoing counseling and advocacy within the courts and community. Developed a group activity component within the program.

April 1982- NORTH SHORE COMMUNITY MENTAL HEALTH CENTER
June 1983

Intensive Family Treatment Project-Professional Foster Parent

Served as a professional foster parent for youth participating in IFTP. Provided short-term planned and emergency placement for identified clients and siblings of clients. Participated in treatment sessions and treatment planning.

April 1979 - COMMUNITIES FOR PEOPLE SPECIALIZED FOSTER CARE
Sept. 1979

Caseworker

Managed a caseload of previously institutionalized adolescents. Provided ongoing counseling and advocacy work for clients and families. Recruited foster families, participated in public relations work and home studies.

January 1978 -- MALDEN PUBLIC SCHOOLS ALTERNATIVE SCHOOL,
January 1979 LINCOLN ANNEX

Teachers Aid

Taught and worked with emotionally disturbed adolescents. Worked toward developing their academic and social skills. Developed behavior management plans. Planned class work. Provided individual tutoring and crisis intervention.

July 1976 - ROXBURY MUNICIPAL COURT, PROBATION DEPARTMENT
July 1977

Senior Clerk

Responsible for organizing court sessions, recalling warrants, performing investigatory work and interviewing defendants. Additional responsibilities included maintaining a caseload of youthful offenders as well as preparing pre-sentence investigation reports.

EDUCATION

2004 – 2008 Ph.D. in Human and Organizational Development
Fielding Graduate University

2004-2006 M.A. in Human and Organizational Systems
Fielding Graduate University.

1981 - 1983 Earned 30 credits toward a Master of Education in Human Service
Management, Boston University.

1975 - 1979 Bachelor of Science in Human Service with High Honors,
Northeastern University, Dean's List 1975-1979.

HONORS

Foster Parent Award, 1982

Consultant for an introductory text in Human Services

Nominated for Northeastern University Alumnus of the Year, 1981

DonBushnell Scholarship Award for Organizational and Social Change, 2007

OTHER RELATED EXPERIENCE

Institute for Social Innovation Research Fellow 2010 to present

Leadership NH class of 2001

Board Member New Hampshire Association for the Blind, 2012 to present

Board Member Havenwood Heritage Heights, Chair Planning Committee 2002, Vice President of the Board of Directors 2006, President Board of Director 2008 to present
 Board Member Maine Association of Mental Health Services 2001-present
 President Hopkinton Independent School Board of Directors 1999 to present
 Former Secretary Board of Managers Community Provider Network 1999-2003
 Vice Chair Board of Managers Community Provider Network 2003-2006
 Adjunct Faculty, New England College, Henniker NH. 1997-present
 Former Massachusetts Licensed Social Worker - Lic. # 300178
 Clinician, Northeastern Family Center, Melrose Ma. 1988-1989
 Consultant, NECMHS, Amesbury, Ma. 1988-1990
 Trainer, Community Programs Innovations 1986-1993
 Counselor, Share Temporary Shelter, Lowell, Ma. 1978
 Student Advisor, Northeastern University Peer Counseling Center 1977-1978
 Counselor, Project Cope, Lynn, Ma. 1975-1977
 Outreach Worker, Fenway Area Outreach Program, Boston, Ma. 1975-1976

TRAININGS WORKSHOPS AND PRESENTATIONS (partial list)

Cultural Diversity

Merrimack County House of Corrections 2013

Generative Leadership

Tobias Leadership Institute 2012

Emergent Leadership in Nonprofit Organizations

Senior Leadership Conference ACF 2012

Leadership Development

NADI National Conference 2011

Generative Leadership: Exploring Leadership Development Within Organizations and Teams

Senior Leadership Conference 2011

Cultural Diversity in the Classroom

NEC Faculty Development Workshop 2011

Working Alliance within the Classroom

Contoocook School Summer 2008

Leadership Development Seminar

NFI Leadership Development Program Spring/Summer 2008

Behavior Management

NFI North Core Training 2007

Meaning Making within Organizations

NFI North Leadership Professional Development 2006

Reintegrative Services for Youth

DCYF annual Conference 2006

Difficult People and Conflict Management

DCYF Annual Conference 2006

The Role of Story Telling in Leadership

NAFI National Conference 2003

Culture Counts! A Look at the Power of Positive Culture within the Classroom

Southern NH University Howard Gardner Conference 2003

Supervisory Training

NFI North Leadership Training 2003

Culture in the Classroom

Hopkinton Independent School Staff Development Day 2003

An Introduction to the Normative Community Approach

NFI North 2003

Effective Leadership within the Normative Approach

NAFI Conference 2002

Effective Project Development

NAFI National Conference 2001

Leadership 2001

NAFI Conference 2001

Leadership 2000

NAFI Conference 2000

Communication Skills

NFI North Annual Conference 2000

Management, Leadership and Supervisory Skills Training

NAFI National Conference 1999

Effectively Managing Organizational Change

DCYF Annual Conference 1998

COURSES TAUGHT

New England College Graduate & Continuing Studies

Masters in Health Care (all three credit courses)

- Structure of Social Problems
- Long Term Care
- Health Care Management

Masters in Community Mental Health Counseling (three to four credit courses)

- Mental Health Management
- Multicultural Issues in Mental Health Delivery
- Career Development and Counseling
- Research Methods
- Capstone Facilitation

Masters in Business Administration

- Strategic Planning and Policy
- Organizational Management and Leadership
- Strategic Capstone

Masters in Health Care Management

- Dynamics of Nonprofit Governance

KAREN E. CUSANO, M. Ed.
(603) 749-7550 Office
karencusano@nafi.com

AREAS OF EXPERTISE:

Staff Training and Supervision	Community-Based Care
Knowledge of Multiple State Systems	Administration and Management
Project Development and Start-Up	Public Relations

PROFESSIONAL EXPERIENCE:

**8/93 to Present ASSISTANT EXECUTIVE DIRECTOR
NFI NORTH, INC.**

Assist the Director in the overall fiscal, programmatic, and clinical management of a non-profit human service organization. Responsibilities involve all administrative functions and financial responsibility for the entire corporation. This includes routine communication with the Parent Corporation, multi-state authorities, and internal managerial staff.

**4/89 to 8/93 AGENCY SUPERVISOR EXPERIENCES
NORTHEASTERN FAMILY INSTITUTE, INC.**

Responsible for the overall management and supervision of various adolescent and family programs within the agency. This includes the provision of training, staff orientation, clinical and administrative supervision and participation in all aspects of program development.

**4/89 to 8/93 PROGRAM DIRECTOR
NORTHEASTERN FAMILY INSTITUTE, INC.**

INTERMISSION ADOLESCENT ASSESSMENT CENTER

Responsible for the overall management of a DSS funded, coed, secure, ninety-day diagnostic assessment center providing treatment and stabilization to high risk adolescents. Responsibilities included: hiring, training, evaluating and supervising professional staff, design and implementation treatment approaches and behavior management systems. Facilitated all aspects of treatment component including treatment plans, linked families with community resources to facilitate reunification. Represent the agency through participation in the MA, State's Adolescent Network Initiative as well as developing and presenting training.

**4/87 to 4/89 PROGRAM DIRECTOR
NORTHEASTERN FAMILY INSTITUTE, INC.
SIX SEASONS RESIDENTIAL TREATMENT CENTER**

Responsible for the overall management and program startup of a long-term treatment program for six, high risk, young adult males funded by the Department of Mental Health. Responsibilities included job preparation and coaching, job placement, support counseling and preparation of independent living.

**3/82 to 4/87 ASSISTANT DIRECTOR
NORTHEASTERN FAMILY INSTITUTE, INC.
DIVERSION HOUSE**

Assisted the Director in the program operations of a DMH funded short-term crisis intervention program.

EDUCATIONAL BACKGROUND:

1991 to 1993 CAMBRIDGE COLLEGE
CAMBRIDGE, MASSACHUSETTS
Master of Education in Counseling Psychology

1986 to 1988 UNIVERSITY OF MASSACHUSETTS
BOSTON, MASSACHUSETTS
Psychology Major, Undergraduate Study

1984 TO 1986 NORTH SHORE COMMUNITY COLLEGE
BEVERLY, MASSACHUSETTS
Associate of Science in Human Services and Mental Health

MEMBERSHIPS: NEW HAMPSHIRE PARTNERS IN SERVICE (NHPS)

Non-profit association made up of multiple human service provider executives. NHPS works on NH legislative and policy-making initiatives. Former President (5 year term)

SPECIAL HONORS/AWARDS:

SPIRIT OF THE COMMUNITY AWARD

Given to individual who demonstrate high degree of energy and commitment to the betterment of the community at large.

FOSTER FURCOLO SCHOLARSHIP

Awarded full 2-year grant for outstanding academic achievement.

LINK AWARD

Presented due to outstanding volunteerism linking neighborhood communities with educational involvement and awareness.

ADDITIONAL WORK EXPERIENCE:

2002 to 2004 Adjunct Professor
New England College – Dover Campus
Health Care/Human Services Courses
Graduate and Undergraduate Classes

1984 To Present VOLUNTEER
COMMUNITY PROGRAM INNOVATIONS
DANVERS, MASSACHUSETTS

Assisting with workshop preparation, registration and evaluation as well as supervising volunteers at the annual International Conferences dealing with multiple Human Service topics. This firm offers training and consultation to State and private social service agencies.

1986 to 1987 ASSISTANT ACTIVITIES DIRECTOR
NEW ENGLAND HOME FOR THE DEAF
DANVERS, MASSACHUSETTS

Planned and organized activities for senior citizens, participated in fundraising picnic, interpreted for deaf and blind seniors for Boston's Deaf Blind contact & National Conference at Gallaudet College.

JILL D. DAGENAIS
email- jdags@comcast.net

OBJECTIVE

To acquire a finance position that allows me to showcase the experience I've gained from a varied background

EXPERIENCE

09/04 – Present **NFI North, Inc.** **Contoocook, NH**
Business Manager

- Budget development for new programs and budget liaison for existing programs.
- Oversee finance staff in all accounting functions.
- Liaison among all functional areas for monthly/quarterly/ad hoc reporting.
- Analyze monthly financial reports and make appropriate suggestions for changes.
- Implement business, financial, and contract policies.
- Manage capital planning and facility management activities in conjunction with Regional Directors.
- Oversight of billing, collection, and payable functions.
- Oversight of accurate and timely reporting (both internal and external).

05/01 – 09/04 **MetraTech, Corp.** **Waltham, MA**
Financial Analyst

- Liaison among all functional areas for weekly/monthly/quarterly/ad hoc reporting.
- Backup for all accounting rolls within the company.
- Finance contact person for services groups during budgeting process.
- Assist in creation and stress testing of Sales Commission & Bonus Plans.
- Converted company financial system from QuickBooks to Great Plains.
- Create SOP documents for Finance and assist other departments in creating SOPs for their procedures.

02/00 – 05/01 **CUseeMe Networks, Inc.** **Nashua, NH**
Financial Analyst

- Liaison among all functional areas for monthly/quarterly reporting packages.
- Create and analyze financials for US, France, and consolidated company.
- Review staff's journal entries and reconciliations, and analyze all accounts for necessary adjustments/allocations.
- Calculate monthly commissions for sales staff.

04/98 – 11/99 **Vaughn Wedeen Creative, Inc.** **Albuquerque, NM**
Office Administrator

- Run monthly, quarterly, and yearly closes and analyze monthly reports for accuracy and necessary adjustments.
- In charge of all functions related to the daily running of a graphic design firm (including but not limited to AR, AP, GL, Analyzing/Changing telephone contracts, and upkeep and maintenance of office).
- Supervise Receptionist and AP Assistant.

02/96 – 03/98 **Visibility, Inc.** **Wilmington, MA**
General Ledger Accountant

- In charge of running monthly, quarterly, and yearly closes.
- Account reconciliations, revenue and cost recognition, and sales tax filings for both United States and Canada.
- Create general ledger account numbers and linked them into financial statements correctly.

04/95 – 12/96 Sequoia Systems, Inc. Marlborough, MA

Accounts Payable/Payroll Administrator

- Promoted from Accounts Payable Clerk to Accounts Payable/Payroll Administrator in 3 months and hired an employee to assist with Accounts Payable function.
- Processed \$15 million of expenses through Accounts Payable and Payroll Administration.
- Prepared accounts payable and payroll monthly account reconciliations and yearly audit schedules.

10/90 – 04/95 Baird Corporation Bedford, MA

Accounts Receivable/Credit Coordinator

- Promoted from Sr. Accounts Receivable Clerk to Accounts Receivable/Credit Coordinator.
- Responsible for all collections (Reduced over 90 day accounts by 50%), cash applications and related journal entries.
- Instrumental in system conversion from Burroughs to Chess by Xerox.

EDUCATION

Bentley College Waltham, MA
Liberal Arts / Accounting courses (Evening courses).

Saint Anselm College Manchester, NH
Liberal Arts courses / Math Major

TECHNOLOGIES

Microsoft Windows (3.1, 95, 98, 2000 & XP), Mac OS, Microsoft Excel, Word and PowerPoint, Lotus 123, Ceridian Payroll, ADP Payroll, and a variety of accounting software packages (including conversions and upgrades of those packages).

JANICE A. WILLIAMSON
(603) 746-7550 Office
Email: JanWilliamson@naficom

HIGHLIGHTS OF QUALIFICATIONS:

- 30 years of experience with non-profit organizations, the last 25 in management and program administration.
- B.A. in Sociology backed by professional development courses in human services and management.
- Graduate of U.S. Army Command and General Staff College.
- Strong track record in developing and implementing training and support programs.
- Experienced in budget development/administration and grant writing.
- Accustomed to representing agency/participant interests through public speaking and personal representation.
- Extensive experience in developing Individual Service Plans vocational curriculums.
- Extensive experience in developing Individual Educational Plans and alternate school curriculums.
- Extensive experience with administrative functions, including supervision of staff, hiring, terminations, staff development and evaluation.
- Skillful in developing and managing contracts.
- Adept at interpreting and ensuring program compliance with state and federal regulations.
- Adept at interpreting Special Education regulations and managing alternate special education schools.
- Strong leadership qualities and proven willingness to accept responsibilities demonstrated throughout civilian and military careers.
- High level of self-initiative and resourcefulness in achieving managerial objectives.
- Adept at implementing and maintaining the Mental Illness Management Services (MIMS).

EXPERIENCE AND ACCOMPLISHMENTS:

1998 to Present **NFI NORTH, INC.**

Regional Director. Responsible for overseeing the operations of all programs in my region. Provide leadership, supervision, guidance and clinical support. Responsible for communicating all policies and procedures, contract negotiations and development, fiscal planning, and on-call availability.

1994 to 1998 **NFI NORTH, INC.**

Program Director, North Country Shelter, Jefferson, NH. Responsible for total operations of co-ed program for 15 NH court ordered youth and over twenty-five full-time staff. This included placement, counseling, treatment, special education, and all HR functions.

1993 to 1994 **NORTHERN NH DEVELOPMENTAL SERVICES & MENTAL HEALTH, Wolfeboro, NH**

Residential Coordinator of lower Carroll County located at the Carroll County Mental Health Center. Coordinate and implement all residential programs for individuals with a mental illness. Responsible for all ISO/Enhance family care residential programs. Responsible for all compliance with state and federal regulations.

1983 to 1992 **COMMUNITY SERVICES COUNCIL OF MERRIMACK COUNTY, Concord, NH**

Program Administrator of the Traumatic Brain Injury Residential Program and the Vocational Training Program, both located at Franklin Falls Farm - 1989 to May 1992.

Direct all aspects of rehabilitative services for brain-injured adults and progressive vocational programming for the developmentally disabled. Oversee two program managers and a staff of 18 residential and vocational trainers providing services for a caseload of 30. Administer a \$500,000 annual budget.

- Developed a profitable small business program as a vocational training tool for the developmentally disabled.
- Established highly successful, non-traditional alternative vocational programs for those in need of more comprehensive therapeutic programming.
- Planned/supervised programming and staff involved in developing and delivering three separate vocational training programs for the developmentally disabled and mentally ill throughout central New Hampshire.
- Directly involved in agency's receipt of \$200,000 "Mobility Grant" for developing the TBI program.
- Established strong relations with other TBI programs nationwide.
- Introduced the area's first vocational training program for the developmentally disabled by establishing a day program at a local church hall.
- Formulated and implemented all program models and management systems on which the Franklin Falls Farm program was developed.
- Implemented and coordinated services with outside therapists (speech, occupational, physical and behavioral).
- Supervised all job coaches and trainers.

1980 to 1983 **LACONIA STATE SCHOOL AND TRAINING CENTER, Laconia, NH**

Recreational Therapist

TEACHING EXPERIENCE:

1978 to 1979 SAU #4, New Hampshire
Substitute Teacher for Middle-Secondary School

1977 to 1978 HOLBROOK SCHOOL, Holbrook, MA
Substitute Teacher for Middle-Secondary School.

MILITARY EXPERIENCE:

1978 to 1998 **UNITED STATES ARMY NATIONAL GUARD**, Concord, NH
Demonstrated strong leadership and management abilities resulting in career progress from the rank of Private to current rank of Lt. Colonel. Served as the Deputy Director of Personnel overseeing a staff of 20 at the Starc level. One of New Hampshire's first two female soldiers to graduate from Officer Candidate School. 1988 recipient of the NH Army Commendation Medal for Outstanding Service. 1986 recipient of the Army Commendation Medal for Meritorious Achievement. NH's 1985 Junior Officer of the Year. 1993 recipient of the Meritorious Service Medal for Exceptional Meritorious Service.

EDUCATION:

North Adams State College, North Adams, MA. B.A. in Sociology.

PROFESSIONAL DEVELOPMENT:

1984 to Present Completion of many staff development workshops and seminars related to direct care and management within human services.

1995 Facilitator/Trainer of Moderate Level Challenge Course.

1989 to 1993 U.S. ARMY GENERAL COMMAND AND STAFF COLLEGE, Londonderry, NH. Officers training in management, administration, counseling, and executive responsibilities.

1987 U.S. ARMY INSTITUTE FOR PROFESSIONAL DEVELOPMENT, Newport News, VA. Advanced Management, leadership, and administration.

1981 U.S. ARMY, Aberdeen, MD. Officer Basic Course.

Sharon L. Bilodeau

sharon.bilodeau@yahoo.com

An administrator with an established record of responsible decision making in all phases of project and program management. Highly skilled in all aspects of non-profit management. Worked effectively with employees at all levels, strong work ethic, hard working and dependable. Worked with diverse population of people including ages 6 months to elders and a variety of challenges, ensuring an optimal quality of care.

Areas of Expertise

Budget Administration	Customer Service	Training and Development
Program and Project Management	Staff Recruitment	Licensing and Regulatory
Assessment and Service Planning		

Qualifications

- Exceptional skill in personnel supervision and training program coordination
- Effective in budgeting and long-range planning
- Outstanding ability to work with community, governmental and professional groups
- Proficient in prioritizing, organization, delegating and motivating
- Extensive experience in developing programs from concept to ongoing operation
- Excellent computer skills
- Excellent oral and written communication

Relevant Experience and Skills

Management and Administration

- Supervised the daily operation of several programs with a total of 75+ people, staffing, and training to ensure goals are being met
- Assisted in preparation and administration from \$500,000 to \$2 million annual operating budgets maintaining all budget targets
- Designed and implemented Database to assist in tracking clients, service delivery, to ensure client satisfaction and on-time daily product delivery
- Analyzed statistical data and compiled weekly, monthly and annual projection reports, used data to improve organizational performance and lower costs
- Ensuring monthly supervision and meetings provided to all employees to ensure proper communication at all levels

Organizing and Coordinating

- Initiated itemized bidding specification process; evaluated bids and presented recommendations and lower overall costs
- Managed various complex site relocations assuring close out of old sites and the re-establishment of all new systems in the new sites

- Coordinated and developed in-service training programs to improve customer service and keeping staff updated on all policies
- Created time lines to complete special projects

Marketing and Public Relations

- Developed ideas for creating new projects, prioritized work and implemented follow-up procedures resulting in more efficient and profitable work flow
- Conducted cold calling campaign, acquiring new work areas for young entrepreneurs increasing new accounts by 5 % in the first 30 days

Employment History

Program Director NFI North, THS Concord, NH	2012-Present
Business Development Coordinator Resident Care Pharmacy, Methuen, MA	2010-2012
Mental Health Case Manager ESMV, Lawrence, MA	2009-2010
Child Care Provider Koryn's Kiddies, Guildhall, VT	2008-2009
Director Safe Haven, Lancaster, NH	2008-2009
Child Support Services and Special Project Manager GLCAC Inc., Head Start, Lawrence, MA	2003-2008
Program Manager Greater Lawrence Mental Health Center, Lawrence, MA	2000-2002
Project Manager NFI, Danvers, MA	1997-2000
Assessment Social Worker Massachusetts Department of Social Services, Haverhill, MA	1996-1997
Program Director and Consultant NFI Midway and North Country Shelters	1991-1996
Education SPRINGFIELD COLLEGE, Springfield, MA	1996
Master of Science-Human Service Administration UNIVERSITY OF LOWELL, Lowell, MA	1986
B.S. Public Service-Administration of Criminal Justice	

NFI NORTH, INC.

Board of Directors

08-07-13

President

Suanne Nader

Treasurer

Leslie Grant

Clerk/Secretary

Sue Allen

Doug Giles

Jan Arsenault

Heidi Dunn

Lyn Ward Healy

Terms: Until successors are duly elected and qualified.

NOTE: No compensation for Members or Directors as of: 08/07/13

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 NFI NORTH, INC is a New Hampshire nonprofit corporation formed July 6, 1992. 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 4th day of April A.D. 2013

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State

THE STATE OF NEW HAMPSHIRE



THE ATTORNEY GENERAL
REGISTER OF CHARITABLE TRUSTS
STATE HOUSE ANNEX
25 CAPITOL STREET
CONCORD, NEW HAMPSHIRE 03301-6397
(603) 271-3591
TDD Access: Relay NH 1-800-735-2964
FAX (603) 271-2110

CERTIFICATE OF REGISTRATION

Name: _____ NFI NORTH, INC. _____

Address: _____ DANVERS, MASSACHUSETTS _____

is registered as a charitable trust with the Department of the Attorney General, Division of Charitable Trusts pursuant to Chapter 7 Section 19 of the Revised Statutes Annotated of the State of New Hampshire.

Date of Issuance: _____ March 9, 1994 _____

Registration Number: _____ 5270-05270 _____

JEFFREY R. HOWARD
Attorney General

/s/  _____
Registrar of Charitable Trusts

NOTE: THIS CERTIFICATE OF REGISTRATION IS ISSUED TO CHARITABLE TRUSTS IN COMPLIANCE WITH RSA 7:19 RELATIVE TO REGISTRATION REQUIREMENTS. CHARITABLE TRUSTS MUST ALSO COMPLY WITH PERIODIC REPORTING REQUIREMENTS AND OTHER LAWS. CURRENT INFORMATION MAY BE OBTAINED FROM THE REGISTER.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/01/2013

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).

PRODUCER USI Insurance Services LLC PO Box 406 Portland, ME 04112-0406	CONTACT NAME: MaryEllen O'Reilly-Bracey PHONE (A/C, No, Ext): 781 938-7500 E-MAIL ADDRESS:	FAX (A/C, No): 781-376-5035													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Philadelphia Insurance Company</td> <td>23850</td> </tr> <tr> <td>INSURER B: ACE INA Insurance</td> <td>25437</td> </tr> <tr> <td>INSURER C: Travelers Casualty Ins Co of Am</td> <td>19046</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Philadelphia Insurance Company	23850	INSURER B: ACE INA Insurance	25437	INSURER C: Travelers Casualty Ins Co of Am	19046	INSURER D:		INSURER E:		INSURER F:
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INSURER E:															
INSURER F:															
INSURED North American Family 26 Howley Street Peabody, MA 01960															

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

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	X	PHPK960278	01/01/2013	01/01/2014	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		PHPK960278	01/01/2013	01/01/2014	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$10000		PHUB406556	01/01/2013	01/01/2014	EACH OCCURRENCE \$10,000,000 AGGREGATE \$10,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WLRC47320926OS	07/01/2013	07/01/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
A	Professional Liab		PHPK960278	01/01/2013	01/01/2014	Occ \$1,000,000
A	Professional Liab		PHPK960278	01/01/2013	01/01/2014	Agg \$3,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
The Umbrella coverage goes over the general liability coverage limit of \$1 Million/\$3 Million for all scheduled locations.
The general liability policy includes an additional insured endorsement that provides additional insured status to the Certificate holder with regard to work performed on behalf of the named insured.

CERTIFICATE HOLDER Bureau of Behavioral Health 105 Pleasant St Rm 210S Concord, NH 03301	CANCELLATION 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



CERTIFICATE OF LIABILITY INSURANCE

NORTAME-02

JRABTOR

DATE (MM/DD/YYYY)

2/28/2013

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).

PRODUCER USI Insurance Services LLC PO Box 406 Portland, ME 04112	CONTACT NAME: MaryEllen O'Reilly-Bracey
	PHONE (A/C, No, Ext): (800) 723-2877 FAX (A/C, No): (877) 775-0110 E-MAIL ADDRESS: MaryEllen.OReilly-Bracey@usi.biz
INSURER(S) AFFORDING COVERAGE	
INSURER A: Travelers Casualty Insurance Co America	NAIC # 19046
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
 North American Family
 NFI North
 26 Howley Street
 Peabody, MA 01960

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY						EACH OCCURRENCE \$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (PER ACCIDENT) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						AGGREGATE \$
							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS OTH-ER
	<input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$
A	Employee Dishonesty			105701622	10/28/2012	10/28/2013	Limit 1,300,000
A	Employee Dishonesty			105701622	10/28/2012	10/28/2013	Deduct 13,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 This Certificate of Insurance is issued as a matter of information only and confers no rights upon the holder and does not amend, extend or alter the coverage afforded by policies designated on the Certificate.

CERTIFICATE HOLDER State of New Hampshire Administrative Services 25 Capitol Street, Room 212 Concord, NH 03301	CANCELLATION 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 USI Insurance Services LLC
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STATE OF NEW HAMPSHIRE
 DEPARTMENT OF HEALTH AND HUMAN SERVICES
 DIVISION OF COMMUNITY BASED CARE SERVICES

Nicholas A. Toumpas
 Commissioner

Nancy L. Rollins
 Associate Commissioner

BUREAU OF BEHAVIORAL HEALTH

105 PLEASANT STREET, CONCORD, NH 03301
 603-271-5000 1-800-852-3345 Ext. 5000
 Fax: 603-271-5058 TDD Access: 1-800-735-2964

November 1, 2011

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

Approved by G+C
 Date 11-9-11
 Item No. 110-A

Requested Action

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Behavioral Health, to enter into an agreement with NFI North, Inc., 40 Park Lane, PO Box 417, Contoocook, New Hampshire 03229, vendor number 177575 - B001, to develop and operate a transitional housing program on the campus of New Hampshire Hospital in an amount not to exceed \$15,143,904 effective January 1, 2012, or date of Governor and Executive Council approval, whichever is later, through June 30, 2015. Funds are available in the following accounts in State Fiscal Years 2012 and 2013 and are anticipated to be available in State Fiscal Years 2014 and 2015 upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts if needed and justified between State Fiscal Years.

05-95-92-920010-7010 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS:
 BEHAVIORAL HEALTH-DIV OF, DIV OF BEHAVIORAL HEALTH, COMMTY MENTAL HEALTH SVCS

<u>Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>Totals</u>
2012	502-0731	Payments to Providers	92130206	\$ 2,120,558.00
2013	502-0731	Payments to Providers	92130206	4,241,116.00
2014	502-0731	Payments to Providers	92130206	4,241,115.00
2015	502-0731	Payments to Providers	92130206	<u>4,241,115.00</u>
Sub-total				\$14,843,904.00

05-95-92-920010-5945 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS:
 BEHAVIORAL HEALTH-DIV OF, DIV OF BEHAVIORAL HEALTH, CMH PROGRAM SUPPORT

<u>Fiscal Year</u>	<u>Class/Object</u>	<u>Class Title</u>	<u>Activity Code</u>	<u>Totals</u>
2012	102-0731	Contracts for Program Services	92205945	\$ 150,000.00
2013	102-0731	Contracts for Program Services	92205945	150,000.00
2014	102-0731	Contracts for Program Services	92205945	-0-
2015	102-0731	Contracts for Program Services	92205945	<u>-0-</u>
Sub-total				\$ 300,000.00
Total				<u>\$15,143,904.00</u>

Explanation

The State Fiscal Year 2012-2013 New Hampshire state budget called for the closing of the state-operated transitional housing services program on the grounds of New Hampshire Hospital and the development of a new privately-run transitional housing program. The selection of a vendor to develop and operate the new transitional housing program was competitively bid. The Bureau sought a contractor to operate the program for up to 49 adults in year 1 of the contract, and approximately 20-25 adults in year 2 and subsequent years of the contract. These adults are currently served in the state-operated transitional housing services program on the campus of New Hampshire Hospital. Individuals who will be served in the new program all have a severe mental illness, meet eligibility requirements for community mental health services at a community mental health center (as defined in Administrative Rule He-M 401), and also may have co-occurring substance abuse issues, past histories of forensic and legal issues, and for some individuals, a current legal status of Not Guilty by Reason of Insanity. The majority of individuals with past forensic involvement are under court supervision.

The request for proposals was posted on the Department of Health and Human Services' website "Request for Proposal Listing" from April 1, 2011, through April 11, 2011. As a result, two proposals were received: NFI North, Inc. and Harbor Homes, Inc. The proposals were reviewed by an Evaluation Committee consisting of four staff from the Division of Community Based Care Services, Bureau of Behavioral Health, and one staff from the Department of Corrections, Medical and Forensic Services, and was rated on a predetermined formula outlined in the request for proposals. Out of a possible 510 points, NFI North, Inc. received a score of 473 points and Harbor Homes, Inc. received a score of 398 points. NFI North, Inc. sufficiently met the requirements of the request for proposals and submitted the lowest bid. Based on a favorable review of the above by the Department of Health and Human Services and the Department of Corrections staff, the Bureau of Behavioral Health requests this contract be funded to allow NFI North, Inc. to provide these services. The Bid Summary is attached.

NFI North, Inc. will establish the new transitional housing program initially for all individuals currently residing in the state-operated transitional housing services program. During the first year of the contract the vendor will implement a transition plan, developed by the vendor in consultation with the Bureau of Behavioral Health, New Hampshire Hospital, and the Community Mental Health Centers, to transition approximately 50% of the transitional housing services population back to the community. This is part of a larger initiative to provide more opportunities to these individuals in an integrated, community based model of care, and also to more effectively transition individuals to community based services.

Should Governor and Executive Council determine not to approve this Request, there would be no entity and no staff to operate the transitional housing program as of January 1, 2012. The current state-run program is scheduled to close on December 31, 2011, with all staff positions being abolished. The clients currently in the program could not simply be moved back into the community or transferred to New Hampshire Hospital's Acute Psychiatric Service's facility, which is near capacity.

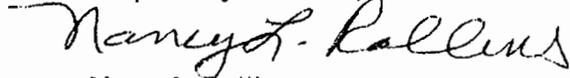
Area served: statewide.

Source of funds: 51% General Funds, 49% Federal Funds.

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

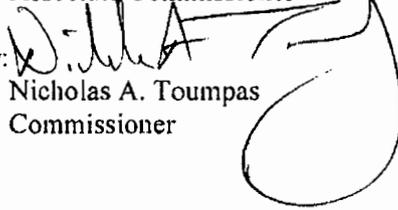
His Excellency, Governor John H. Lynch
and the Honorable Executive Council
November 1, 2011
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Respectfully submitted,



Nancy L. Rollins
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

NLR/PBR/sj
G&C FY12-15 NFI North, Inc.

Enclosures