



Lori A. Shihinette
Commissioner

Katja S. Fox
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH

129 PLEASANT STREET, CONCORD, NH 03301
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April 18, 2022

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division for Behavioral Health, to enter into a **Retroactive, Sole Source** amendment to an existing cooperative project agreement with University of New Hampshire (VC#177867-B046), Durham, NH 03824 for the continued provision of a substance use disorder workforce development plan, by increasing the price limitation by \$425,592 from \$803,843 to \$1,229,435 and by extending the completion date from September 29, 2021, to March 14, 2023, effective retroactive to September 29, 2021, upon Governor and Council approval. 100% Federal Funds.

The original contract was approved by Governor and Council on June 6, 2018, item #19 and most recently amended with Governor and Council approval on February 17, 2021, item #16.

Funds are available in the following accounts for State Fiscal Years 2022 and 2023, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

See attached fiscal details.

EXPLANATION

This request is **Retroactive** because the Department was notified by the Federal awarding agency of the ability to expend funds beyond the original contract completion date after the contract already expired. Once notified about the ability to continue to expend funds, the Department needed additional time to review and modify the contract to ensure all State Opioid Response (SOR) requirements were included. The amendment was further delayed when Supplemental Substance Use Disorder (SUD) Block Grant funding was identified for this scope of work in January 2022 and added to the contract. The addition of the SUD Block Grant funding provides an opportunity to solidify and expand the number of treatment sites using The Seven Challenges evidenced-based practice, while strengthening and expanding the four (4) established Alternative Peer Groups for adolescent recovery.

This request is **Sole Source** because the Department is seeking to extend the contract approximately 18 months beyond the completion date and only 12 months of renewal are available. Part of this request includes funding to build upon and complete work began by the Contractor that can only be expended through September 2022. Given the limited timeframe, the Department would not be able to re-procure for those services. Additionally, the Connection Connects NH (CCNH) program is the only program in the state for 12-25 year olds with substance use disorder and co-occurring mental health disorder (SUD/COD) to receive treatment with the

evidence-based practices (EBP), including The Seven Challenges. The Contractor therefore is uniquely experienced and qualified to support these services, which continue to be in high demand service at six (6) sites, including five (5) Community Mental Health Centers.

The purpose of this request is for the Contractor to continue expanding access to substance use treatment services for youth and young adults by increasing the state infrastructure to improve workforce development; streamlining funding policies; implementing identified evidence-based practices; and providing access to direct services for youth and young adults. The Contractor will continue providing training and technical assistance to six (6) treatment provider sites focused on Substance Use Disorder and Substance Use Disorder with Co-Occurring Disorders.

Approximately 100 individuals will be served during State Fiscal Years 2022 and 2023.

The Contractor will continue creating and implementing a research-based screening tool and assessment; research-based treatment and services consistent with the System of Care values; and research-based peer-to-peer recovery support services that incorporate Recovery Coaching, Family Support groups, and Youth Peer Support and Alternative Peer Groups.

The Department will monitor services by reviewing the monthly, quarterly, and annual reports submitted by the Contractor.

As referenced in Exhibit A, Item B, Project Period of the original Cooperative Project Agreement, the parties have the option to extend the agreement for up to 12 months, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is seeking to extend the contract for 18 months and only 12 months are available.

Should the Governor and Council not authorize this request, the infrastructure of the Continuum of Care for youth may be jeopardized, which may result in the Department not being in compliance with RSA 135:F Children's System of Care law. Furthermore, a reduction of these essential services at a time when the volume of substance misuse is on the rise among youth and youth adults due to the negative ripple effects of the COVID-19 pandemic, leaves these individuals at a higher risk of continued use of dangerous substances and/or relapse, resulting in increased mental health symptoms and possible loss of life.

Area served: Statewide

Source of Federal Funds: Assistance Listing Number #93.788, FAIN #H79TI083326

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

Respectfully submitted,



Lori A. Shibinette
Commissioner

Fiscal Details
RFP-2018-DBH-08-WORKF-01-A02

05-95-092-921010-2059 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF CHILDRENS BEHAVIORAL HEALTH, STATE YOUTH TREATMENT PLANNING

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2018	102-500731	Contracts for Prog Svc	92102059	\$70,000	\$0	\$70,000
2019	102-500731	Contracts for Prog Svc	92102059	\$140,000	\$0	\$140,000
2020	102-500731	Contracts for Prog Svc	92102059	\$140,000	(\$21,086)	\$118,914
2021	102-500731	Contracts for Prog Svc	92102059	\$244,639	\$0	\$244,639
2022	102-500731	Contracts for Prog Svc	92102059	\$72,744	\$0	\$72,744
			Subtotal	\$667,383	(\$21,086)	\$646,297

05-95-092-921010-2059 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF CHILDRENS BEHAVIORAL HEALTH, STATE YOUTH TREATMENT PLANNING – TA FUNDS

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2021	102-500731	Contracts for Prog Svc	92112059	\$21,659	(\$15,285)	\$6,374
2022	102-500731	Contracts for Prog Svc	92112059	\$3,108	\$0	\$3,108
			Subtotal	\$24,767	(\$15,285)	\$9,482

05-95-92-920510-70400000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, BUREAU OF DRUG & ALCOHOL SERVICES, STATE OPIOID RESPONSE GRANT

Fiscal Details
RFP-2018-DBH-08-WORKF-01-A02

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2021	102-500731	Contracts for Prog Svc	92057048	\$110,117	\$0	\$110,117
2022	102-500731	Contracts for Prog Svc	92057048	\$1,576	\$0	\$1,576
2022	102-500731	Contracts for Prog Svc	92057048	\$0	\$111,963	\$111,963
			Subtotal	\$111,693	\$111,963	\$223,656

05-95-92-920510-19810000 HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF, HHS: BEHAVIORAL HEALTH DIV OF, BUREAU OF DRUG & ALCOHOL SERVICES, SABG ADDITIONAL

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2022	074-500585	Grants for Pub Asst and Relief	92055502	\$0	\$214,129	\$214,129
2023	074-500585	Grants for Pub Asst and Relief	92055502	\$0	\$135,871	\$135,871
			Subtotal	\$0	\$350,000	\$350,000
			Total	\$803,843	\$425,592	\$1,229,435

AMENDMENT #2 to
COOPERATIVE PROJECT AGREEMENT
between the
STATE OF NEW HAMPSHIRE, Department of Health and Human Services
and the
University of New Hampshire of the UNIVERSITY SYSTEM OF NEW HAMPSHIRE

The Cooperative Project Agreement, approved by the State of New Hampshire Governor and Executive Council on 6/6/18, item # 19, and as amended and approved on 2/17/21, item #16, for the Project titled “Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I) Grant (RFP-2018-DBH-08-WORKF),” Campus Project Director, JoAnne Malloy, is and all subsequent properly approved amendments are hereby modified by mutual consent of both parties for the reason(s) described below:

Purpose of Amendment (Choose all applicable items):

- Extend the Project Agreement and Project Period end date, at no additional cost to the State.
- Provide additional funding from the State for expansion of the Scope of Work under the Cooperative Project Agreement.
- Other:

Therefore, the Cooperative Project Agreement is and/or its subsequent properly approved amendments are amended as follows (Complete only the applicable items):

- Article A. is revised to replace the State Department name of N/A with N/A and/or USNH campus from N/A to N/A.
- Article B. is revised to replace the Project End Date of 9/29/2021 with the revised Project End Date of 3/14/2023, and Exhibit A, article B is revised to replace the Project Period of 6/6/2018 – 9/29/2021 with 9/30/2021 – 3/14/2023.
- Article C. is amended to expand Exhibit A by including the proposal titled, “N/A,” dated N/A.
- Article D. is amended to change the State Project Administrator to N/A and/or the Campus Project Administrator to N/A.
- Article E. is amended to change the State Project Director to N/A and/or the Campus Project Director to N/A.
- Article F. is amended to add funds in the amount of \$425,592 and will read:

Total State funds in the amount of \$1,229,435 have been allotted and are available for payment of allowable costs incurred under this Project Agreement. State will not reimburse Campus for costs exceeding the amount specified in this paragraph.

- Article F. is amended to change the cost share requirement and will read:
Campus will cost-share % of total costs during the amended term of this Project Agreement.
- Article F. is amended to change the source of Federal funds paid to Campus and will read:

Federal funds paid to Campus under this Project Agreement as amended are from Grant/Contract/Cooperative Agreement No. H79TI083326 from Substance Abuse and Mental Health Services Administration under CFDA# 93.788. Federal regulations required to be passed

Campus Authorized Official KJ
Date 4/20/2022

through to Campus as part of this Project Agreement, and in accordance with the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, are attached to this document as **revised** Exhibit B, the content of which is incorporated herein as a part of this Project Agreement.

- Article G. is exercised to amend Article(s) **N/A** of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, as follows:

Article is amended in its entirety to read as follows:
Article is amended in its entirety to read as follows:

- Article H. is amended such that:

- State has chosen **not to take** possession of equipment purchased under this Project Agreement.
- State has chosen **to take** possession of equipment purchased under this Project Agreement and will issue instructions for the disposition of such equipment within 90 days of the Project Agreement's end-date. Any expenses incurred by Campus in carrying out State's requested disposition will be fully reimbursed by State.

- Exhibit A is amended as attached.
- Exhibit B is amended as attached.

All other terms and conditions of the Cooperative Project Agreement remain unchanged.

This Amendment, all previous Amendments, the Cooperative Project Agreement, and the Master Agreement constitute the entire agreement between State and Campus regarding the Cooperative Project Agreement, and supersede and replace any previously existing arrangements, oral and written; further changes herein must be made by written amendment and executed for the parties by their authorized officials.

This Amendment and all obligations of the parties hereunder shall become effective on the date the Governor and Executive Council of the State of New Hampshire or other authorized officials approve this Amendment to the Cooperative Project Agreement.

IN WITNESS WHEREOF, the following parties agree to this **Amendment #2** to the Cooperative Project Agreement.

**By An Authorized Official of:
University of New Hampshire**

Name: Karen M. Jensen
 Title: Director, Pre-Award
 Signature and Date: Karen Jensen 4/20/2022
BDC22BEAF87B404...

**By An Authorized Official of:
Department of Health and Human
Services**

Name: Katja S. Fox
 Title: Director, Division for Behavioral Health
 Signature and Date: Katja S. Fox 4/20/2022
ED9D65D94663442...

**By An Authorized Official of: the New
Hampshire Office of the Attorney General**
Name: Takhmina Rakhmatova

Title: Attorney
 Signature and Date: Takhmina Rakhmatova 4/20/2022
PDF321C629C34AC...

**By An Authorized Official of: the New
Hampshire Governor & Executive Council**

Name: _____
 Title: _____
 Signature and Date: _____

EXHIBIT A

- A. Project Title:** Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I) Grant
- B. Project Period:** This amendment shall be retroactively effective to September 29, 2021 upon the date of Governor and Executive Council approval through March 14, 2023.
- C. Objectives:** This contract is for the provision of the implementation of a substance use disorder workforce development plan that will expand access to substance use treatment services for youth and young adults, ages as specified by DHHS.

D. Scope of Work:

Modify Exhibit A, Item D-1, Amendment #1, Scope of Services, Section 4., Reporting Requirements, by adding Section 4.6. to read:

- 4.6. The Contractor may be required to collect and share other key data and metrics with the Department in a format specified by the Department that includes, but is not limited to:
- 4.6.1. SOR monthly reporting.

Modify Exhibit A, Item D-1, Amendment #1, Scope of Services, Section 5., Additional Terms, by adding Section 5.3., to read:

5.3. State and Federal

5.3.1. The Contractor shall collaborate with the Department to understand and comply with all appropriate State of New Hampshire, Department of Health and Human Services, Substance Abuse Mental Health Services Administration, and other Federal terms, conditions, and requirements.

E. Deliverables Schedule:

F. Budget and Invoicing Instructions:

Modify Exhibit A, Item F. Budget and Invoicing Instructions, Paragraph 2. to read:

2. Invoicing Instructions:

- 2.1. Campus will submit invoices to the State on regular Campus invoice forms no more frequently than monthly and no less frequently than quarterly. Invoices will be based on actual project expenses incurred during the invoicing period, shall show current and cumulative expenses by major cost categories, shall document cumulative cost sharing through the end of the invoicing period and will certify that the match was not derived from federal funds or used as match against any other state contract or federal program. The State will pay Campus within (30) days of receipt of each approved invoice. Campus will submit its final invoice no later than seventy-five (75) days after the Project end date.
- 2.2. The Contractor shall submit an invoice and supporting backup documentation in a form satisfactory to the Department as specified in 2.1., which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure the invoice is completed, dated and returned to the Department in order to initiate payment. The Contractor shall ensure:
- 2.2.1. Backup documentation includes, but is not limited to:
- 2.2.1.1. Timesheets and/or time cards that support the hours employees worked for wages reported under this contract as per 45 CFR Part 75.430(i)(1).

DS
kj

2.2.1.1.2. Attestation and time tracking templates, which are available to the Department upon request.

2.2.2. Invoices support expenses reported and do not include unallowable expenses including, but not limited to:

2.2.2.1. Amounts belonging to other programs.

2.2.2.2. Amounts prior to effective date of contract.

2.2.2.3. Construction or renovation expenses.

2.2.2.4. Food or water for employees.

2.2.2.5. Directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana.

2.2.2.6. Fines, fees, or penalties.

2.2.2.7. Per SAMSHA requirements, meals are generally unallowable unless they are an integral part of a conference grant or specifically stated as an allowable expense in the FOA. Grant funds may be used for light snacks, not to exceed three dollars (\$3.00) per person for clients.

2.2.2.8. Cell phones and cell phone minutes for clients.

2.2.3. Receipts for expenses within the applicable state fiscal year.

2.3 The Contractor shall be responsible for reviewing, understanding, and complying with further restrictions included in the Funding Opportunity Announcement (FOA).

2.4. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to kyra.c.leonard@dhhs.nh.gov, or invoices may be mailed to:

SOR Financial Manager

Department of Health and Human Services

105 Pleasant Street

Concord, NH 03301

2.5. The Contractor agrees that billing submitted for review after twenty (20) business days of the last day of the billing month may be subject to non-payment.

2.6. The State shall make payment to the Contractor within thirty (30) days of receipt of each invoice, subsequent to approval of the submitted invoice and if sufficient funds are available.

Modify Exhibit A, Item F. Budget and Invoicing Instructions, Paragraph 3. to read:

3. See attached budgets on Exhibit A, Item F-1 through Exhibit A, Item F-10, Amendment #2 SOR Budget.

Modify Exhibit A, Item F-3, Amendment #1 SYT-I Budget by replacing it in its entirety with Item F-3, Amendment #2.

Modify Exhibit A, Item F-5, Amendment #1 SYT-I Budget by replacing it in its entirety with Item F-5, Amendment #2.

Modify Exhibit A, Item F-7, Amendment #1 SOR Budget by replacing it in its entirety with Item F-7, Amendment #2, SOR Budget.

Modify Exhibit A, Item F-8, Amendment #1 APG Budget by replacing it in its entirety with Item F-8, Amendment #2.

Modify Exhibit A, Item F-9, Amendment #1 APG Budget by replacing it in its entirety with Item F-9, Amendment #2.

Add Exhibit A, Item F-10, Amendment #2, SOR Budget.

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I)									
Budget Period: SFY20: 7/1/19 - 6/30/20									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 53,225.00	\$ 13,839.00	\$ 67,064.00	\$ -	\$ -	\$ -	\$ 53,225.00	\$ 13,839.00	\$ 67,064.00
2. Employee Benefits	\$ 17,652.00	\$ 4,590.00	\$ 22,242.00	\$ -	\$ -	\$ -	\$ 17,652.00	\$ 4,590.00	\$ 22,242.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 1,331.00	\$ 346.00	\$ 1,677.00	\$ -	\$ -	\$ -	\$ 1,331.00	\$ 346.00	\$ 1,677.00
7. Occupancy	\$ 2,901.00	\$ -	\$ 2,901.00	\$ -	\$ -	\$ -	\$ 2,901.00	\$ -	\$ 2,901.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 10,265.00	\$ 2,669.00	\$ 12,934.00	\$ -	\$ -	\$ -	\$ 10,265.00	\$ 2,669.00	\$ 12,934.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Support	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Briefs and Reports	\$ 100.00	\$ 26.00	\$ 126.00	\$ -	\$ -	\$ -	\$ 100.00	\$ 26.00	\$ 126.00
Printing/Copying	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Interpreter/Captioning Services	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00	\$ -	\$ -	\$ -	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00
Online Learning TA and Curriculum Development	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 94,974.00	\$ 23,940.00	\$ 118,914.00	\$ -	\$ -	\$ -	\$ 94,974.00	\$ 23,940.00	\$ 118,914.00

Indirect As A Percent of Direct

25.2%

Contractor Initials 

Date 4/20/2022

Exhibit A, Item F-7, Amendment #2, SOR Budget

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

Contractor Name: University of New Hampshire - Institute on Disability

Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)

Budget Period: SFY22 04/01/21-06/30/22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 7,098.00	\$ 1,845.00	\$ 8,943.00	\$ -	\$ -	\$ -	\$ 7,098.00	\$ 1,845.00	\$ 8,943.00
2. Employee Benefits	\$ 2,669.00	\$ 694.00	\$ 3,363.00	\$ -	\$ -	\$ -	\$ 2,669.00	\$ 694.00	\$ 3,363.00
3. Consultants	\$ 302,500.00	\$ 78,650.00	\$ 381,150.00	\$ -	\$ -	\$ -	\$ 302,500.00	\$ 78,650.00	\$ 381,150.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 868.00	\$ 226.00	\$ 1,094.00	\$ -	\$ -	\$ -	\$ 868.00	\$ 226.00	\$ 1,094.00
6. Travel	\$ 200.00	\$ 52.00	\$ 252.00	\$ -	\$ -	\$ -	\$ 200.00	\$ 52.00	\$ 252.00
7. Occupancy	\$ 150.00	\$ -	\$ 150.00	\$ -	\$ -	\$ -	\$ 150.00	\$ -	\$ 150.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing/Copying	\$ 800.00	\$ 208.00	\$ 1,008.00	\$ -	\$ -	\$ -	\$ 800.00	\$ 208.00	\$ 1,008.00
Conferences/Materials	\$ 6,000.00	\$ 1,560.00	\$ 7,560.00	\$ -	\$ -	\$ -	\$ 6,000.00	\$ 1,560.00	\$ 7,560.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 320,285.00	\$ 83,235.00	\$ 403,520.00	\$ -	\$ -	\$ -	\$ 320,285.00	\$ 83,235.00	\$ 403,520.00

Indirect As A Percent of Direct 26.0%

Exhibit A, Item F-8, Amendment #1 APG Budget

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

Contractor Name: University of New Hampshire - Institute on Disability

Budget Request for: Workforce Development Plan for the State Youth Treatment - Implementation (SYT-I)

Budget Period: SFY21 7/1/20-6/30/21

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 2,431.00	\$ 632.00	\$ 3,063.00	\$ -	\$ -	\$ -	\$ 2,431.00	\$ 632.00	\$ 3,063.00
2. Employee Benefits	\$ 1,130.00	\$ 294.00	\$ 1,424.00	\$ -	\$ -	\$ -	\$ 1,130.00	\$ 294.00	\$ 1,424.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 124.00	\$ -	\$ 124.00	\$ -	\$ -	\$ -	\$ 124.00	\$ -	\$ 124.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
APG Program #1 Live Free Recovery	\$ 700.00	\$ 181.00	\$ 881.00	\$ -	\$ -	\$ -	\$ 700.00	\$ 181.00	\$ 881.00
APG Program # 2 Seacoast Outright	\$ 700.00	\$ 182.00	\$ 882.00	\$ -	\$ -	\$ -	\$ 700.00	\$ 182.00	\$ 882.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 5,085.00	\$ 1,289.00	\$ 6,374.00	\$ -	\$ -	\$ -	\$ 5,085.00	\$ 1,289.00	\$ 6,374.00
Indirect As A Percent of Direct		25.3%							

Exhibit A, Item F-10, Amendment #2, SOR Budget

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

Contractor Name: University of New Hampshire - Institute on Disability

Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)

Budget Period: SFY23 07/01/22-03/14/23

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 70,144.00	\$ 18,237.00	\$ 88,381.00	\$ -	\$ -	\$ -	\$ 70,144.00	\$ 18,237.00	\$ 88,381.00
2. Employee Benefits	\$ 26,374.00	\$ 6,857.00	\$ 33,231.00	\$ -	\$ -	\$ -	\$ 26,374.00	\$ 6,857.00	\$ 33,231.00
3. Consultants	\$ 10,000.00	\$ 2,600.00	\$ 12,600.00	\$ -	\$ -	\$ -	\$ 10,000.00	\$ 2,600.00	\$ 12,600.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 409.00	\$ 106.00	\$ 515.00	\$ -	\$ -	\$ -	\$ 409.00	\$ 106.00	\$ 515.00
6. Travel	\$ 193.00	\$ 50.00	\$ 243.00	\$ -	\$ -	\$ -	\$ 193.00	\$ 50.00	\$ 243.00
7. Occupancy	\$ 450.00	\$ -	\$ 450.00	\$ -	\$ -	\$ -	\$ 450.00	\$ -	\$ 450.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Printing/Copying	\$ 357.00	\$ 94.00	\$ 451.00	\$ -	\$ -	\$ -	\$ 357.00	\$ 94.00	\$ 451.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 107,927.00	\$ 27,944.00	\$ 135,871.00	\$ -	\$ -	\$ -	\$ 107,927.00	\$ 27,944.00	\$ 135,871.00
Indirect As A Percent of Direct		25.9%							

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Lori A. Shibaette
Commissioner

Katja S. Fox
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION FOR BEHAVIORAL HEALTH

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

January 19, 2021

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division for Behavioral Health, to enter into a **Retroactive, Sole Source** amendment to a cooperative project agreement with University of New Hampshire (VC#177867-B046), Durham, NH 03824 for the provision of a substance use disorder workforce development plan, by increasing the price limitation by \$243,843 from \$560,000 to \$803,843 effective retroactive to October 1, 2020 upon Governor and Council approval with no change to the contract completion date of September 29, 2021. 100% Federal Funds.

The original contract was approved by Governor and Council on June 6, 2018, item #19.

Funds are available in the following account for State Fiscal Year 2021, and are anticipated to be available in State Fiscal Year 2022, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

05-95-092-921010-2059 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF CHILDRENS BEHAVIORAL HEALTH, STATE YOUTH TREATMENT PLANNING

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2018	102-500731	Contracts for Prog Svc	92102059	\$70,000	\$0	\$70,000
2019	102-500731	Contracts for Prog Svc	92102059	\$140,000	\$0	\$140,000
2020	102-500731	Contracts for Prog Svc	92102059	\$140,000	\$0	\$140,000
2021	102-500731	Contracts for Prog Svc	92102059	\$140,000	\$104,639	\$244,639
2022	102-500731	Contracts for Prog Svc	92102059	\$70,000	\$2,744	\$72,744
			Subtotal	\$560,000	\$107,383	\$667,383

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
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05-95-092-921010-2059 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF CHILDRENS BEHAVIORAL HEALTH, STATE YOUTH TREATMENT PLANNING – TA FUNDS

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2021	102-500731	Contracts for Prog Svc	92112059	\$0	\$21,659	\$21,659
2022	102-500731	Contracts for Prog Svc	92112059	\$0	\$3,108	\$3,108
			<i>Subtotal</i>	\$0	\$24,767	\$24,767

05-95-092-920510-7040 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL SERVICES, STATE OPIOID RESPONSE GRANT

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2021	102-500731	Contracts for Prog Svc	92057046	\$0	\$110,117	\$110,117
2022	102-500731	Contracts for Prog Svc	92057046	\$0	\$1,576	\$1,576
			<i>Subtotal</i>	\$0	\$111,693	\$111,693
			Total	\$560,000	\$243,843	\$803,843

EXPLANATION

This request is **Retroactive** because the contract review and approval process took longer than anticipated. This request is **Sole Source** because MOP 150 requires any amendments that increase the original price limitation by more than 10% to be labelled as sole source.

The purpose of this request is to expand access to substance use treatment services for youth and young adults by increasing the state infrastructure to improve workforce development; streamlining funding policies; implementing identified Evidence Based Practices; and providing access to direct services for youth and young adults. The Contractor will be providing training and technical assistance to three additional substance use treatment sites for youth.

The Contractor will create and implement a research-based screening tool and assessment; research-based treatment and services consistent with the System of Care values; and research-based peer-to-peer recovery support services that incorporate Recovery Coaching, Family Support groups, and Youth Peer Support and Alternative Peer Groups.

The Department will monitor contracted services by reviewing:

- Monthly reporting that identifies program activities, barriers and progress toward training implementation.

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
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- Quarterly reporting on de-identified client data that includes treatment program attendance; individual life plan and safety plan development and implementation rates, in addition to individual engagement.
- Annual reporting that includes a workforce development map indicating types and locations of treatment available to youth and transitional youth.

As referenced in Item B, Project Period of the original Cooperative Project Agreement, the parties have the option to extend the agreement for up to one (1) additional year, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is not exercising its option to renew at this time.

Should the Governor and Council not authorize this request, the infrastructure of the Continuum of Care for youth may be jeopardized, which may result in a reduction of services that are available to adolescents and transitional aged youth with Substance Use Disorder, including Opioid Use Disorder. Without the ability to provide these services, youth are at a higher risk of relapse and/or continued use of dangerous substances resulting in poor educational outcomes, criminal activity, increased mental health symptoms and possible loss of life with untreated Opioid Use Disorder.

Area served: Statewide

Source of Funds: CFDA# 93.243, FAIN# H79TI080192, CFDA# 93.788, FAIN #6H79TI081685-02M003

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

Respectfully submitted,



Lori A. Shabinette
Commissioner

**AMENDMENT #1 to
COOPERATIVE PROJECT AGREEMENT
between the
STATE OF NEW HAMPSHIRE, Department of Health and Human Services
and the
University of New Hampshire of the UNIVERSITY SYSTEM OF NEW HAMPSHIRE**

The Cooperative Project Agreement, approved by the State of New Hampshire Governor and Executive Council on 6/6/18, item # 19, for the Project titled "Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I) Grant (RFP-2018-DBH-08-WORKF)," Campus Project Director, JoAnne Malloy, is and all subsequent properly approved amendments are hereby modified by mutual consent of both parties for the reason(s) described below:

Purpose of Amendment (Choose all applicable items):

- Extend the Project Agreement and Project Period end date, at no additional cost to the State.
- Provide additional funding from the State for expansion of the Scope of Work under the Cooperative Project Agreement.
- Other:

Therefore, the Cooperative Project Agreement is and/or its subsequent properly approved amendments are amended as follows (Complete only the applicable items):

- Article A. is revised to replace the State Department name of _____ with _____ and/or USNH campus from N/A to N/A.
- Article B. is revised to replace the Project End Date of _____ with the revised Project End Date of _____, and Exhibit A, article B is revised to replace the Project Period of _____ - _____ with N/A - N/A.
- Article C. is amended to expand Exhibit A by including the proposal titled, "N/A," dated N/A.
- Article D. is amended to change the State Project Administrator to N/A and/or the Campus Project Administrator to N/A.
- Article E. is amended to change the State Project Director to N/A and/or the Campus Project Director to N/A.
- Article F. is amended to add funds in the amount of \$243,843 and will read:

Total State funds in the amount of \$803,843 have been allotted and are available for payment of allowable costs incurred under this Project Agreement. State will not reimburse Campus for costs exceeding the amount specified in this paragraph.
- Article F. is amended to change the cost share requirement and will read:

Campus will cost-share _____ % of total costs during the amended term of this Project Agreement.
- Article F. is amended to change the source of Federal funds paid to Campus and will read:

Federal funds paid to Campus under this Project Agreement as amended are from Grant/Contract/Cooperative Agreement No. 1H79TI080192-01 and 6H79TI081685-02M003 from Substance Abuse and Mental Health Services Administration under CFDA# 93.243 and 93.788. Federal regulations required to be passed through to Campus as part of this Project

[Handwritten signature]

Agreement, and in accordance with the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, are attached to this document as revised Exhibit B, the content of which is incorporated herein as a part of this Project Agreement.

- Article G. is exercised to amend Article(s) N/A of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, as follows:

Article is amended in its entirety to read as follows:
Article is amended in its entirety to read as follows:

- Article H. is amended such that:

- State has chosen **not to take** possession of equipment purchased under this Project Agreement.
- State has chosen **to take** possession of equipment purchased under this Project Agreement and will issue instructions for the disposition of such equipment within 90 days of the Project Agreement's end-date. Any expenses incurred by Campus in carrying out State's requested disposition will be fully reimbursed by State.

- Exhibit A is amended as attached.
- Exhibit B is amended as attached.

All other terms and conditions of the Cooperative Project Agreement remain unchanged.

This Amendment, all previous Amendments, the Cooperative Project Agreement, and the Master Agreement constitute the entire agreement between State and Campus regarding the Cooperative Project Agreement, and supersede and replace any previously existing arrangements, oral and written; further changes herein must be made by written amendment and executed for the parties by their authorized officials.

This Amendment and all obligations of the parties hereunder shall become effective on the date the Governor and Executive Council of the State of New Hampshire or other authorized officials approve this Amendment to the Cooperative Project Agreement.

IN WITNESS WHEREOF, the following parties agree to this Amendment #1 to the Cooperative Project Agreement.

**By An Authorized Official of:
University of New Hampshire**

Name: Karen M. Jensen
 Title: Director, Research Administration
 Signature and Date: *Karen Jensen* 1/21/2021

By An Authorized Official of: the New Hampshire Office of the Attorney General

Name: Catherine PINOS
 Title: Attorney
 Signature and Date: *Catherine Pinos* 2/1/2021

**By An Authorized Official of:
Department of Health and Human Services**

Name: Katja S. Fox
 Title: Director, Division for Behavioral Health
 Signature and Date: *Katja Fox* 1/22/2021

By An Authorized Official of: the New Hampshire Governor & Executive Council

Name:
 Title:
 Signature and Date:

EXHIBIT A

- A. Project Title:** Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I) Grant
- B. Project Period:** This amendment shall be retroactively effective to October 1, 2020 upon the date of Governor and Executive Council approval through September 29, 2021. The Department reserves the right to renew the Contract for up to one (1) additional year, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.
- C. Objectives:** This contract is for the provision of the implementation of a substance use disorder workforce development plan that will expand access to substance use treatment services for youth and young adults, ages as specified by DHHS.
- D. Scope of Work:**
Modify Exhibit A, Item D-1, Scope of Services by replacing in its entirety with Exhibit A, Item D-1, Amendment #1, which is attached hereto and incorporated by reference herein.
- E. Deliverables Schedule:**
- F. Budget and Invoicing Instructions:**
Modify Exhibit A, Item F. Budget and Invoicing Instructions, Paragraph 3. to read:
3. See attached budgets on Exhibit A, Items F-1 through Exhibit A, Item F-9, Amendment #1 APG Budget.
- Modify Exhibit A, Item F-4 by replacing in its entirety with Exhibit A, Item F-4 Amendment #1, SYTI Budget, which is attached hereto and incorporated by reference herein.
- Modify Exhibit A, Item F-5 by replacing in its entirety with Exhibit A, Item F-5 Amendment #1, SYTI Budget, which is attached hereto and incorporated by reference herein.
- Add Exhibit A, Item F-6, Amendment #1 SOR Budget.
- Add Exhibit A, Item F-7, Amendment #1 SOR Budget.
- Add Exhibit A, Item F-8, Amendment #1 APG Budget.
- Add Exhibit A, Item F-9, Amendment #1 APG Budget

**New Hampshire Department of Health and Human Services
Workforce Development Plan for the State
Youth Treatment-Implementation (SYT-I) Grant
EXHIBIT A, Item D-1 Amendment #1**



Scope of Services

1. Provisions Applicable to All Services

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

2. Scope of Services – Workforce Development Plan

- 2.1. The Contractor shall collaborate with the Department to implement a Workforce Development Plan to expand the activities of the workforce of substance use disorder professionals who provide direct services to youth and young adults, ages as specified by the Department, with a Substance Use Disorder (SUD) or Substance Use Disorder and a Co-Occurring Disorder (SUD/COD), statewide that includes, but is not limited to:
 - 2.1.1. Screening.
 - 2.1.2. Assessment.
 - 2.1.3. Treatment services.
 - 2.1.4. Recovery supports.
- 2.2. The Contractor shall ensure the Workforce Development Plan expands access for the covered population of youth and young adults, ages as specified by the Department, with a SUD or SUD/COD and service providers to include community-based supports and professionals, as identified by the Department. The Contractor shall ensure the Workforce Development Plan activities and milestones include, but are not limited to:
 - 2.2.1. Establishing a State Youth Treatment-Implementation (SYT-I) Workforce Workgroup, consisting of providers and other necessary partners as determined by the Interagency Council and the Contractor, that will determine the mission, tasks, goals, objectives, and timelines for the implementation of the Workforce Plan.
 - 2.2.2. Developing data gathering plans, protocols, and procedures including, but not limited to protocols and procedures necessary to safeguard protected health information (PHI) and SUD data protected by 42 CFR Part 2 as required by state rule, and state and federal laws in collaboration with the Contractor for the Evaluation of the State Youth Treatment Plan.
 - 2.2.3. Conducting focus groups and web-based meetings throughout the State using State SUD, public health, and Youth Risk Behavior

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**New Hampshire Department of Health and Human Services
Workforce Development Plan for the State
Youth Treatment-Implementation (SYT-I) Grant
EXHIBIT A, Item D-1 Amendment #1**



Student Survey (YRBSS) data to enhance discussions. The Contractor shall ensure attendees include, but not be limited to:

- 2.2.3.1. Public Health Networks.
- 2.2.3.2. Trainers.
- 2.2.3.3. Law enforcement.
- 2.2.3.4. University programs.
- 2.2.3.5. Providers.
- 2.2.4. Disseminating core competencies that are part of the training plan and evidence-based practice recommendations to all stakeholder groups listed in Paragraph 2.3.1 through 2.3.8 and conducting a comprehensive review and revision of SYT-I core competencies.
- 2.2.5. Identifying critical barriers in state and federal licensing policies, rules and regulations, including specific requirements for patient consent and notice to share information that interfere with the development of high-quality assessment, treatment, and recovery services for youth and young adults, ages as specified by the Department, with SUD or SUD/COD.
- 2.2.6. Analyzing SUD and SUD/COD reimbursement, insurance plans and other relevant policies as well as identifying policy issues using key informant interviews.
- 2.2.7. Assessing current community-based, in-service training programs in the areas of assessments, screening, treatment and recovery programs as well as gaps in personnel preparation.
- 2.2.8. Assessing current University and college programs of study and confidentiality as well as any gaps in personnel preparation.
- 2.2.9. Developing and implementing a provider learning collaborative to support implementation of evidence-based and youth-focused practices.
- 2.2.10. Researching, identifying, creating, and implementing a training plan that utilizes de-identified and de-aggregated data and includes, but is not limited to:
 - 2.2.10.1. A research-based screening tool based upon the Addiction Severity Index (ASI), Global Appraisal of Identified Needs (GAIN) or equivalent validated tool that is developmentally appropriate for adolescents with SUD/COD.
 - 2.2.10.2. Research-based assessments, including the Child and Adolescent Needs and Strengths (CANS) Checklist that are

**New Hampshire Department of Health and Human Services
Workforce Development Plan for the State
Youth Treatment-Implementation (SYT-I) Grant
EXHIBIT A, Item D-1 Amendment #1**



developmentally appropriate for adolescents with SUD/COD.

2.2.10.3. Research-based treatment and services consistent with System of Care values and principles and American Society of Addiction Medicine (ASAM) continuum of care, and developmentally appropriate for adolescents with SUD/COD which includes, but are not limited to:

2.2.10.3.1. Motivational Interviewing.

2.2.10.3.2. Care Coordination.

2.2.10.3.3. Family- and Youth-Driven Wraparound.

2.2.10.3.4. Resilience, Empowerment, & Natural Supports for Education and Work (RENEW).

2.2.10.3.5. Medication Assisted Treatment.

2.2.10.3.6. Recovery Coaching.

2.2.10.3.7. Other evidence-based programs currently offered for youth and young adults, ages as specified by the Department, with SUD or SUD/COD.

2.2.10.3.8. New practices to fill a major gap or need.

2.2.10.4. Research-based peer-to-peer recovery support services that are developmentally appropriate for adolescents with SUD or SUD/COD, incorporating Recovery Coaching and Family Support groups, Youth Peer Support and Alternative Peer Groups (APG) into the Continuum of recovery supports. The Contractor shall:

2.2.10.4.1. Ensure financial support to any current APGs

2.2.10.4.2. Assist with implementing up to four new APGs in NH.

2.2.10.4.3. Ensure the funding sources are depleted in the following order:

2.2.10.4.3.1. SYTI Technical Assistance;

2.2.10.4.3.2. SOR No Cost Extension; and lastly

2.2.10.4.3.3. SYT-I grant funding.

2.3. The Contractor shall collaborate with its primary partners to develop, procure, and deliver training and technical assistance to the workforce for the target population including, but not limited to:

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**New Hampshire Department of Health and Human Services
Workforce Development Plan for the State
Youth Treatment-Implementation (SYT-I) Grant
EXHIBIT A, Item D-1 Amendment #1**



- 2.3.1. The New Hampshire Bureau of Children's Behavioral Health.
- 2.3.2. The New Hampshire Bureau of Drug and Alcohol Services.
- 2.3.3. The Community Health Institute.
- 2.3.4. Youth M.O.V.E. (Motivating Others through Voices of Experience) New Hampshire.
- 2.3.5. The University of New Hampshire's (UNH's) School of Social Work.
- 2.3.6. The New Hampshire Alcohol and Drug Abuse Counselors Association (NHADACA).
- 2.3.7. Families Advocating Substance Treatment, Education and Recovery (FASTER).
- 2.3.8. National Alliance of the Mentally Ill – New Hampshire (NAMI-NH).
- 2.4. The Contractor shall develop, procure, and deliver training and technical assistance to the workforce including, but not limited to:
 - 2.4.1. Developing modules, in-person trainings and materials that provide content knowledge and skills related to SUD and/or SUD/COD to the workforce serving youth overall and by specific population.
 - 2.4.2. Providing cross-training for staff in other agencies serving youth with SUD or SUD/COD, when cross-training is identified as a need to agencies, which may include, but are not limited to:
 - 2.4.2.1. Schools.
 - 2.4.2.2. Community behavioral health providers.
 - 2.4.2.3. Youth and family serving organizations.
 - 2.4.2.4. DCYF staff.
 - 2.4.2.5. Law enforcement.
- 2.5. The Contractor shall update the Youth SUD/COD Workforce Map to identify the composition and expertise of the statewide workforce who provide for youth and young adults, ages as specified by the Department, with SUD or SUD/COD, as required by the grant or the Substance Abuse and Mental Health Services Administration (SAMHSA). The Contractor shall ensure the update includes:
 - 2.5.1. Identifying stakeholders and partners;
 - 2.5.2. Designing and conducting a survey to identify existing SUD or SUD/COD services and supports;
 - 2.5.3. Analyzing data collected;

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**New Hampshire Department of Health and Human Services
Workforce Development Plan for the State
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- 2.5.4. Identifying service workforce gaps; and
- 2.5.5. Using geographic information system (GIS) mapping to create maps that inform current gaps in services, workforce, and other areas of interest.
- 2.6. The Contractor shall participate in SAMHSA Technical Assistance activities, grantee calls, and required grantee meetings.
- 2.7. The Contractor shall obtain input from and engage stakeholders by conducting web-based listening sessions and/or focus groups to assess knowledge and progress which may include, but are not limited to:
 - 2.7.1. Youth and family stakeholders.
 - 2.7.2. First responders.
 - 2.7.3. The State's seven (7) Integrated Delivery Networks. See Exhibit A, Item D-2.
 - 2.7.4. The State's thirteen (13) Regional Public Health Networks. See Exhibit A, Item D-3.
 - 2.7.5. The New Hampshire Provider Association.
 - 2.7.6. The New Hampshire Drug and Alcohol Counselors Association.
 - 2.7.7. Community SUD and/or SUD/COD providers.
 - 2.7.8. All participating SUD/COD trainers including the contracted trainers and the Department's trainers.
 - 2.7.9. The primary higher education program directors
 - 2.7.10. Other provider and stakeholder networks identified in the State resource map.
- 2.8. The Contractor shall promote the web-based listening sessions and/or focus groups outlined in Section 2.7 by:
 - 2.8.1. Contacting individuals who were involved in the 2017 State Youth Treatment-Planning project, as well as specific populations including, but not limited to:
 - 2.8.1.1. Homeless youth.
 - 2.8.1.2. Lesbian, gay, bi-sexual and transgendered youth.
 - 2.8.2. Contacting organizations that serve youth and young adults, ages as specified by the Department, and collaborating with those organizations to assemble listening sessions and/or focus groups.

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- 2.8.3. Compensating session participants and supporting the organizations through incentives, which may include, but are not limited to, free training slots,) to ensure maximum participation.
- 2.8.4. Assisting the host organizations to promote the sessions to their populations by providing descriptions and supportive materials.
- 2.9. The Contractor shall collaborate with Youth M.O.V.E. NH to conduct three (3) to five (5) focus groups with youth ages sixteen through eighteen (16-18) at least annually. The Contractor shall ensure focus groups:
 - 2.9.1. Are representative of the population of focus.
 - 2.9.2. Are inclusive of the diverse youth population in New Hampshire.
 - 2.9.3. Seek youth opinion regarding the current state of substance use disorder and co-occurring disorder resources.
 - 2.9.4. Seek youth opinion regarding what an effective "stigma campaign" would look like, in order to extract words, phrases, and ideas that would be effective toward the youth population.
 - 2.9.5. Include incentives to youth who participate.
- 2.10. The Contractor shall implement the Workforce Training Implementation Plan that includes, but is not limited to:
 - 2.10.1. Providing content knowledge and skills regarding SUD and SUD/COD to the workforce serving youth and young adults, ages as specified by the Department, which may include populations of focus that include, but are not limited to:
 - 2.10.1.1. Adolescence with opioid use disorders.
 - 2.10.1.2. Transition age youth on probation or parole.
 - 2.10.1.3. Youth attending college.
 - 2.10.2. Providing cross-training to staff in other agencies serving youth with SUD or SUD/COD, as needed.
 - 2.10.3. Preparing faculty in college and education settings to deliver curricula regarding evidence-based practices for transitional-aged youth with SUD or SUD/COD.
 - 2.10.4. Promoting coordination and collaboration with family support organizations to strengthen services for the population of focus.
 - 2.10.5. Engaging with contracted treatment providers to develop and oversee a provider collaborative to ensure providers are trained effectively in selected evidence-based practices (EBPs).

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- 2.10.6. Collaborating with contracted providers identified by the Department and the Evaluation of the State Youth Treatment Plan Contractor regarding:
 - 2.10.6.1. Collection of all data pertinent to implementation, fidelity and sustainability of the plan.
 - 2.10.6.2. Dissemination planning for selected EBPs - evidence-based screeners, assessments and treatment interventions.
 - 2.10.6.3. Fidelity of the selected EBPs.
 - 2.10.6.4. Comprehension of all contractors and providers of the core components of selected EBPs.
 - 2.10.6.5. Coordination of provider training regarding EBPs.
 - 2.10.6.6. Identification of fidelity monitoring tools to:
 - 2.10.6.6.1. Identify any issues that may impact outcomes;
 - 2.10.6.6.2. Make adaptations to EBP implementation as needed; and
 - 2.10.6.6.3. Utilize fidelity monitoring and evaluation outcomes to improve implementation cohorts.
- 2.11. The Contractor shall develop and implement a Sustainability Plan that includes, but is not limited to:
 - 2.11.1. Comparing funding sources with regulations and rates.
 - 2.11.2. Conducting ongoing gap analysis to identify areas of development for sustainability.
 - 2.11.3. Collaborating with the Interagency Council; the Department; identified contracted providers; and the Evaluation Contractor for the State Youth Treatment Plan.
 - 2.11.4. Collaborating with family and youth organizations to ensure their involvement at every stage of implementation and improvement.
- 2.12. The Contractor shall facilitate and coordinate the Interagency Council, which includes, but is not limited to:
 - 2.12.1. Obtaining meeting space.
 - 2.12.2. Note taking.
 - 2.12.3. Recording interagency attendance.
 - 2.12.4. Communication and composition, which must include at least one member with lived experience

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- 2.13. The Contractor shall evaluate and gather data related to the service array developed through the State Youth Treatment-Implementation grant. The Contractor shall ensure the evaluation focuses on:
- 2.13.1. The number of youth who have engaged in treatment with a Substance Use Disorder (SUD) and/or a Substance Use Disorder and Co-Occurring Disorders (SUD/COD);
 - 2.13.2. Youth Peer Support during client's treatment;
 - 2.13.3. The number of youth who have completed treatment;
 - 2.13.4. The number of youth demonstrating improved outcomes in multiple life domains and daily living activities; and
 - 2.13.5. The impact on sustained recovery that Youth Peer Support in conjunction with APGs has on SYTI treatment.

3. Treatment Provider Site Infrastructure Development

- 3.1. The Contractor shall collaborate with Treatment Provider Sites through subcontracts to establish and implement the necessary infrastructure to support treatment options for adolescents and transitional aged youth with SUD/COD in order to coordinate and streamline the necessary services for youth and their families utilizing The Seven Challenges EBP, which will ensure services are available in an equitable manner.
- 3.2. The Contractor shall ensure Treatment Provider Sites offer access to direct services that include, but are not limited to:
- 3.2.1. Screening.
 - 3.2.2. Assessment.
 - 3.2.3. Outpatient treatment services.
 - 3.2.4. Medication Assisted Treatment (MAT).
 - 3.2.5. Recovery Support Services that are provided by a Certified Recovery Support Worker (CRSW) under the supervision of a Licensed Counselor or a Licensed Supervisor.
- 3.3. The Contractor shall ensure treatment providers obtain written consent for treatment from the parent or legal guardian, in accordance with 42CFR Part 2, prior to providing services. The Contractor shall ensure:
- 3.3.1. Clients who are less than twelve (12) years of age, and their parents, are provided with consent forms;
 - 3.3.2. Consent forms contain language for the client, parent or legal guardian, to give consent to share information with social services

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- agencies involved in the client's care, which may include, but are not limited to:
- 3.3.2.1. DCYF.
 - 3.3.2.2. Department of Corrections, Probation and Parole.
 - 3.3.3. Services are not withheld if a client refuses to complete the consent form for information sharing.
 - 3.4. The Contractor shall ensure treatment providers have policies in place that ensure services are provided to an adolescent regardless of:
 - 3.4.1. The parent's inability to pay the fee.
 - 3.4.2. The parent's unwillingness to pay the fee.
 - 3.4.3. The adolescent's decision to receive confidential services pursuant to RSA 318-B: 12-a.
 - 3.5. The Contractor shall ensure treatment providers ensure youth who are uninsured:
 - 3.5.1. Receive services; and
 - 3.5.2. Are assisted with securing Medicaid, as appropriate.
 - 3.6. The Contractor shall ensure treatment providers offer an array of treatment options that:
 - 3.6.1. Include individual, family and/or group counseling, within a recovery-oriented system of care model;
 - 3.6.2. Align with the New Hampshire Revised Statutes Annotated (RSA) 135-F, System of Care for Children's Mental Health.
 - 3.6.3. Include outpatient treatment and recovery supports that remain continuously available, regardless of participation status.
 - 3.7. The Contractor shall ensure treatment providers offer the full spectrum of intensive outpatient services per the Medicaid SUD Benefit in accordance with New Hampshire Administrative Rule He-W 513, Substance Use Disorder (SUD) Treatment and Recovery Support Services, which includes, but is not limited to:
 - 3.7.1. Evidence based SUD/COD treatment services accepted under the ASAM criteria.
 - 3.7.2. Screening and assessment.
 - 3.7.3. Opioid Treatment Services.
 - 3.7.4. Prescribing pharmaceuticals.

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- 3.7.5. Medication Assisted Treatment, in-house or at an off-site location.
- 3.7.6. Outpatient individual treatment.
- 3.7.7. Group treatment.
- 3.7.8. Family treatment.
- 3.7.9. Referrals to intensive outpatient program, partial hospitalization and inpatient services, as appropriate.
- 3.7.10. Peer Recovery Support Services.
- 3.8. The Contractor shall work with treatment providers to ensure efficient intake and delivery of services, which may include an open access or other streamlined intake and assessment model.
- 3.9. The Contractor shall ensure treatment providers utilize an evidence based screening tool approved by the Interagency Council and the Department, which may include:
 - 3.9.1. The Global Appraisal of Individual Needs (GAIN, GAIN-Q3, GAIN Q-3 LITE); or
 - 3.9.2. Child and Adolescent Needs and Strengths (CANS); or
 - 3.9.3. Care, Relax, Alone, Forget, Friends, Trouble (CRAFTT); or
 - 3.9.4. A comparable assessment tool that ensures the treatment provide has the ability to:
 - 3.9.4.1. Quickly identify clients;
 - 3.9.4.2. Determine behavioral health disorders;
 - 3.9.4.3. Determine substance use disorders; and
 - 3.9.4.4. Determine the need to refer clients to appropriate behavioral health services.
- 3.10. The Contractor shall ensure treatment providers utilize the American Society of Addiction Medicine (ASAM) criteria to determine the appropriate level of treatment necessary for each youth. The Contractor shall ensure treatment providers screen for criteria that may include, but are not limited to:
 - 3.10.1. Acute intoxication and/or withdrawal potential.
 - 3.10.2. Biomedical conditions and complications.
 - 3.10.3. Emotional, behavioral, or cognitive conditions and complications.
 - 3.10.4. Readiness and interest in change.
 - 3.10.5. Relapse, continued use or continued problem potential.
 - 3.10.6. Recovery/living environment.

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- 3.11. The Contractor shall ensure treatment providers implement Outpatient and Intensive Outpatient Treatment Plans that are based upon assessment data, and include:
 - 3.11.1. Identification of the client's clinical needs, treatment goals and objectives;
 - 3.11.2. The strategy for providing services to meet client needs, goals and objectives;
 - 3.11.3. The criteria for terminating specific interventions;
 - 3.11.4. Specifications and descriptions of the indicators to be used to assess the individual's progress; and
 - 3.11.5. A discharge plan.
- 3.12. The Contractor shall ensure treatment providers administratively discharge a client from a program only if:
 - 3.12.1. The client's behavior on program premises is abusive, violent, or illegal;
 - 3.12.2. The client is non-compliant with prescription medications;
 - 3.12.3. Clinical staff have documented therapeutic reasons for discharge, which may include the client's continued use of illegal drugs, or an unwillingness to follow appropriate clinical interventions; or
 - 3.12.4. The client violates program rules in a manner that is consistent with the treatment provider's progressive discipline policy.
- 3.13. The Contractor shall ensure treatment providers administer Medication Assisted Treatment in alignment with NH Bureau of Drug and Alcohol Services Guidance Document on Best Practices, Key Components for Delivering Community-Based Medication Assisted Treatment Services for Opioid Use Disorder in New Hampshire, Second Edition, April 2018, and as amended.
- 3.14. The Contractor shall ensure treatment providers provide family or youth peer support, or subcontract with Family Peer Support and Youth Peer Support agencies to provide services to youth in outpatient treatment and their families.
- 3.15. The Contractor shall provide client education on topics that include, but are not limited to:
 - 3.15.1. Substance Use Disorders.
 - 3.15.2. Relapse prevention.
 - 3.15.3. Infectious diseases associated with injection drug use, including, but not limited to, HIV, hepatitis, and TB.
 - 3.15.4. Sexually transmitted diseases.

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- 3.15.5. Emotional, physical, and sexual abuse.
- 3.15.6. Nicotine use disorder and cessation options.
- 3.15.7. The impact of drug and alcohol use during pregnancy, risks to the fetus, and the importance of informing medical practitioners of drug and alcohol use during pregnancy.
- 3.16. The Contractor shall ensure treatment providers maintain an outline of each educational and group therapy session provided.
- 3.17. The Contractor shall ensure treatment providers work in collaboration with all fidelity and quality measurement tools, which may include, but are not limited to:
 - 3.17.1. Training in evidence-based practice, as determined by the Department.
 - 3.17.2. The Seven Challenges and all of its tools.
 - 3.17.3. SAMHSA's Government Performance and Results Act (GPRA) qualitative data tool.
 - 3.17.4. The Screening, Brief Intervention, and Referral to Treatment (SBIRT) assessment.
 - 3.17.5. The Child and Adolescent Needs Assessment.
 - 3.17.6. The Adult Needs and Strengths Assessment.
- 3.18. The Contractor shall ensure treatment providers utilize:
 - 3.18.1. The Seven Challenges evidence based practice model when delivering treatment services to clients.
 - 3.18.2. The Department-defined referral process to ensure referrals to a NH Wraparound program that is local to the client.
- 3.19. The Contractor shall facilitate collaborative efforts between treatment providers, community partners and stakeholders to develop an infrastructure that improves access and streamlines the necessary SUD services for youth and their families. The Contractor shall ensure treatment providers:
 - 3.19.1. Collaborate with stakeholders to meet the unique needs of an adolescent and transitional aged youth population with SUD/COD diagnosis, while aligning those services with the adult services being provided;
 - 3.19.2. Collaborate with stakeholders to improve youth and family outcomes;
 - 3.19.3. Collaborate with the Department and other stakeholders to implement an infrastructure that streamlines services for youth and

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- transitional aged youth with SUD/COD and their families, statewide;
- 3.19.4. Build relationships with other youth-serving agencies at the local level to better support clients served;
 - 3.19.5. Collaborate with the Children's Mental Health Initiative (CMHI) grantee and share in the framework and values of System of Care (SOC);
 - 3.19.5.1. Collaborate with all grant partners for the contract period, which include but are not limited to:
 - 3.19.5.2. Youth M.O.V.E. NH.
 - 3.19.5.3. NAMI NH.
 - 3.19.5.4. SYT-I Interagency Council.
 - 3.19.5.5. NH Care Management Entity.
 - 3.19.5.6. Human Services Research Institute (HSRI), the Grant Evaluation Contractor.
 - 3.19.5.7. University of New Hampshire's Institute on Disability (UNH-IOD), the Grant Workforce Development Contractor.
 - 3.19.6. Have one (1) staff representative participate in the monthly Interagency Council (IAC) meetings;
 - 3.19.7. Participating in a minimum of one (1) focus group and any additional focus groups requested by the Workforce Contractor;
 - 3.19.8. Collaborating with mental health treatment providers currently serving the targeted youth;
 - 3.19.9. Engaging each youth with a mental health treatment provider, should the youth not be associated with one at the onset of SUD treatment;
 - 3.19.10. Collaborating with the approved NH Care Management Entity (CME) to utilize the NH Wraparound approach for a maximum of twenty (20) appropriately identified youth per year;
 - 3.19.11. Continuing existing relationships with other SUD treatment providers to ensure youth have access to the full continuum of care;
 - 3.19.12. Developing a relationship with any local youth serving organizations in order to identify youth in need, education options regarding addiction and outpatient treatment; and connecting to youth enrichment programs for youth in outpatient treatment by identified vendors which include, but are not limited to:

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- 3.19.12.1.1. The YWCA/YMCA.
- 3.19.12.1.2. Boys and Girls Club.
- 3.19.12.1.3. Girls Inc.
- 3.19.13. Fostering connections with the local Integrated Delivery Network (IDN) in New Hampshire to ensure continuity in service delivery for individuals served;
- 3.19.14. Fostering connections with the local and/or regional Doorways for treatment and recovery in order to align treatment modalities;
- 3.19.15. Collaborating with the Residential Adolescent Substance Use Disorder Treatment Facility should a youth required a period of treatment in a residential facility while they are participating in the Vendor's Intensive Outpatient Treatment Plan (IOTP); and
- 3.19.16. Accepting referrals from and prioritize those coming from a Residential Adolescent Substance Use Disorder Treatment Facility for outpatient treatment.
- 3.20. The Contractor shall ensure treatment providers participate in the Provider Collaborative to address services and gaps that exist statewide, and to collaborate on how to best meet the clients' needs.
- 3.21. The Contractor shall ensure a minimum of one (1) staff member or treatment provider attends the Medication Assisted Treatment (MAT) Community of Practice and the accompanying Google Group.
- 3.22. The Contractor shall ensure each treatment provider is trained in the evidence-based practices specified by the Department, both specific to adolescents and transitional aged youth who may have a co-occurring behavioral health disorder.
- 3.23. The Contractor shall ensure each treatment provider identifies one (1) staff who will attend the NH Wraparound training.
- 3.24. The Contractor shall ensure each treatment provider identifies a minimum of one (1) staff member to participate in multiple trainings during the contract period, which shall include, but is not limited to:
 - 3.24.1. Culturally and Linguistically Appropriate Standards (CLAS).
 - 3.24.2. Cultural Diversity.
 - 3.24.3. NH Wraparound.
- 3.25. The Contractor shall ensure treatment providers work with the survey tool, "Government Performance and Results Act (GPRA)" and all other fidelity measures and quality measures as required by the grant, acknowledging that

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reporting data may include, but is not limited to:

- 3.25.1. Services offered;
- 3.25.2. Youth served; and
- 3.25.3. Population Demographics. Of the 200 youth to be served, a breakdown of subpopulations may include, but are not limited to:
 - 3.25.3.1. American Indian/Alaskan Native: 1.
 - 3.25.3.2. Asian or Pacific Islander: 13.
 - 3.25.3.3. Hispanic: 23.
 - 3.25.3.4. Black Non-Hispanic: 8.
 - 3.25.3.5. Multi-Race: 10.
 - 3.25.3.6. LGBT: 20.
- 3.26. The Contractor shall work with treatment providers to gather enrollment data, CLAS and Cultural and Linguistic Competence (CLC) data.
- 3.27. The Contractor shall work with the Department to align data collection with CLC and CLAS standards, including Racial Ethnic and Linguistic (REAL) and Sexual Orientation Gender Identity (SOGI) data collection.
- 3.28. The Contractor shall maintain proper security and privacy controls on its systems to ensure that data is protected throughout its lifecycle.
- 3.29. The Contractor shall de-identify and aggregate data used for reporting to the Department.
- 3.30. The Contractor shall utilize a secure file transfer – as reviewed and approved by the DHHS Information Security Office- to submit data to the Department and/or stakeholders.
- 3.31. The Contractor shall follow the procedure for all data collected as outlined in New Hampshire Administrative Rule He-W 513, Substance Use Disorder (SUD) Treatment and Recovery Support Services, and 42 CFR Part 2, which includes, but is not limited to signed releases and client protection prior to sharing any de-identified and aggregated data.
- 3.32. The Contractor shall subcontract for services related to Alternative Peer Groups (APG). Funding shall support current and new APGs utilizing SYT-I and SOR funding, as outlined in 2.2.10.4.3. Alternative Peer Groups shall include, but are not limited to:
 - 3.32.1. A safe environment where youth can develop trusting relationships and

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feel connected.

- 3.32.2. Group activities that foster a socially reinforcing community.
- 3.32.3. Prosocial skills to help create a community that encourages healthy lifestyles and an environment that is recovery and wellness focused.
- 3.32.4. Leaders with lived experience.
- 3.32.5. Support for caregivers.
- 3.32.6. Education, mentoring and modeling to help youth develop and practice recovery, resiliency and coping skills.

4. Reporting Requirements

- 4.1. The Contractor shall provide monthly reports to the Department no later than the tenth (10th) day of the following month that include, but are not limited to:
 - 4.1.1. Program activities.
 - 4.1.2. Materials developed.
 - 4.1.3. Brief narrative identifying barriers experienced.
 - 4.1.4. Plan to address identified barriers.
 - 4.1.5. Progress towards implementation including, but not limited to:
 - 4.1.5.1. Number of trainings conducted.
 - 4.1.5.2. Number of professionals trained.
 - 4.1.5.3. Topics in which the professionals were trained.
- 4.2. The Contractor shall provide an annual report within twenty (20) days of the close of the Federal Fiscal Year and the contract completion date that includes, but is not limited to:
 - 4.2.1. A workforce development map indicating types and locations of treatment available to youth and transitional aged youth.
 - 4.2.2. A list of services available, by catchment area.
 - 4.2.3. Data to identify the number of professionals participating in all training and implementation activities.
 - 4.2.4. Data to identify the number of providers and their staff participating in

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the learning collaborative.

- 4.2.5. Barriers to accessing workforce development services.
- 4.2.6. Barriers to accessing treatment for the population served.
- 4.2.7. An overall analysis of the project.
- 4.2.8. Suggested actions for the Department to address gaps in services.
- 4.3. The Contractor shall provide the Department with quarterly reports on client attendance, including, but not limited to:
 - 4.3.1. Percentage of clients completing treatment on terms consistent with their plan of care.
 - 4.3.2. The number of follow-ups conducted by treatment providers on clients who did not show up to appointments.
 - 4.3.3. Client adherence to the treatment provider's attendance policy.
 - 4.3.4. Percentage of clients who attended their scheduled intake interview.
- 4.4. The Contractor shall provide the Department with quarterly reports on client life plan and safety plans, as applicable, including, but not limited to:
 - 4.4.1. Percentage of clients who show significant progress toward life plan goals.
 - 4.4.2. Percentage of clients actively participating in life plan creation and the updating process.
 - 4.4.3. Percentage of clients screened positively for suicidality that show improvement.
- 4.5. The Contractor shall provide the Department with quarterly reports on client-family engagement, including, but not limited to:
 - 4.5.1. Percentage of adolescent clients whose family members effectively engage with the client.
 - 4.5.2. Percentage of clients whose family members engage in prescribed family therapy.

5. Additional Terms

5.1. Impacts Resulting from Court Orders or Legislative Changes

- 5.1.1. The Contractor agrees that, to the extent future state or federal legislation or court orders may have an impact on the Services described herein, the State has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

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5.2. Credits and Copyright Ownership

5.2.1. All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement, "The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services."

6. Records

6.1. The Contractor shall keep records that include, but are not limited to:

6.1.1. Books, records, documents and other electronic or physical data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor.

6.1.2. All records must be maintained in accordance with accounting procedures and practices, which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.

6.2. During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts. Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.

Exhibit A, Item F-4 Amendment #1, SYTI

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-4)									
Budget Period: SFY21: 7/1/20 - 6/30/21									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHH5 contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 64,944.00	\$ 16,885.00	\$ 81,829.00	\$ -	\$ -	\$ -	\$ 64,944.00	\$ 16,885.00	\$ 81,829.00
2. Employee Benefits	\$ 22,710.00	\$ 5,905.00	\$ 28,615.00	\$ -	\$ -	\$ -	\$ 22,710.00	\$ 5,905.00	\$ 28,615.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 1,502.00	\$ 391.00	\$ 1,893.00	\$ -	\$ -	\$ -	\$ 1,502.00	\$ 391.00	\$ 1,893.00
7. Occupancy	\$ 3,026.00	\$ -	\$ 3,026.00	\$ -	\$ -	\$ -	\$ 3,026.00	\$ -	\$ 3,026.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 16,500.00	\$ 4,290.00	\$ 20,790.00	\$ -	\$ -	\$ -	\$ 16,500.00	\$ 4,290.00	\$ 20,790.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Support	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Briefs and Reports	\$ 100.00	\$ 26.00	\$ 126.00	\$ -	\$ -	\$ -	\$ 100.00	\$ 26.00	\$ 126.00
Printing/Copying	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Interpreter/Captioning Services	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00	\$ -	\$ -	\$ -	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00
Online Learning TA and Curriculum Development	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
APG Program # 3 Manchester	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00	\$ -	\$ -	\$ -	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00
Pilot Site Program # 1 Community Partners	\$ 8,000.00	\$ 2,080.00	\$ 10,080.00	\$ -	\$ -	\$ -	\$ 8,000.00	\$ 2,080.00	\$ 10,080.00
Pilot Site Program # 2 Manchester MHC	\$ 8,000.00	\$ 2,080.00	\$ 10,080.00	\$ -	\$ -	\$ -	\$ 8,000.00	\$ 2,080.00	\$ 10,080.00
Pilot Site Program # 3 Lakes Region	\$ 8,000.00	\$ 2,080.00	\$ 10,080.00	\$ -	\$ -	\$ -	\$ 8,000.00	\$ 2,080.00	\$ 10,080.00
Training the Seven Challenges- 6 orgs - NHTIAD	\$ 46,000.00	\$ 11,960.00	\$ 57,960.00	\$ -	\$ -	\$ -	\$ 46,000.00	\$ 11,960.00	\$ 57,960.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 194,782.00	\$ 49,857.00	\$ 244,639.00	\$ -	\$ -	\$ -	\$ 194,782.00	\$ 49,857.00	\$ 244,639.00

Indirect As A Percent of Direct 25.6%

Exhibit A, Item F-5 Amendmetn #1, SYTI

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)									
Budget Period: SFY22: 7/1/21 - 9/30/21									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 28,161.00	\$ 7,322.00	\$ 35,483.00	\$ -	\$ -	\$ -	\$ 28,161.00	\$ 7,322.00	\$ 35,483.00
2. Employee Benefits	\$ 7,549.00	\$ 1,963.00	\$ 9,512.00	\$ -	\$ -	\$ -	\$ 7,549.00	\$ 1,963.00	\$ 9,512.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 746.00	\$ 194.00	\$ 940.00	\$ -	\$ -	\$ -	\$ 746.00	\$ 194.00	\$ 940.00
7. Occupancy	\$ 768.00	\$ -	\$ 768.00	\$ -	\$ -	\$ -	\$ 768.00	\$ -	\$ 768.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 17,000.00	\$ 2,860.00	\$ 19,860.00	\$ -	\$ -	\$ -	\$ 17,000.00	\$ 2,860.00	\$ 19,860.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Support	\$ 250.00	\$ 65.00	\$ 315.00	\$ -	\$ -	\$ -	\$ 250.00	\$ 65.00	\$ 315.00
Briefs and Reports	\$ 1,156.00	\$ 300.00	\$ 1,456.00	\$ -	\$ -	\$ -	\$ 1,156.00	\$ 300.00	\$ 1,456.00
Printing/Copying	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Interpreter/Captioning Services	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Online Learning TA and Curriculum Development	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 59,130.00	\$ 13,614.00	\$ 72,744.00	\$ -	\$ -	\$ -	\$ 59,130.00	\$ 13,614.00	\$ 72,744.00

Indirect As A Percent of Direct 23.0%

Exhibit A, Item F-7, Amendment #1, SOR Budget

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

Contractor Name: University of New Hampshire - Institute on Disability

Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)

Budget Period: SFY22 07/01/21-09/30/21

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 847.00	\$ 220.00	\$ 1,067.00	\$ -	\$ -	\$ -	\$ 847.00	\$ 220.00	\$ 1,067.00
2. Employee Benefits	\$ 371.00	\$ 98.00	\$ 469.00	\$ -	\$ -	\$ -	\$ 371.00	\$ 98.00	\$ 469.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Deprecation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 42.00	\$ -	\$ 42.00	\$ -	\$ -	\$ -	\$ 42.00	\$ -	\$ 42.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 1,260.00	\$ 318.00	\$ 1,578.00	\$ -	\$ -	\$ -	\$ 1,260.00	\$ 318.00	\$ 1,578.00
Indirect As A Percent of Direct		25.1%							

Exhibit A, Item F-8, Amendment #1 APG Budget

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

Contractor Name: University of New Hampshire - Institute on Disability

Budget Request for: Workforce Development Plan for the State Youth Treatment - Implementation (SYT-0)

Budget Period: SFY21 7/1/20-6/30/21

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 4,931.00	\$ 1,282.00	\$ 6,213.00	\$ -	\$ -	\$ -	\$ 4,931.00	\$ 1,282.00	\$ 6,213.00
2. Employee Benefits	\$ 2,160.00	\$ 562.00	\$ 2,722.00	\$ -	\$ -	\$ -	\$ 2,160.00	\$ 562.00	\$ 2,722.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 125.00	\$ -	\$ 125.00	\$ -	\$ -	\$ -	\$ 125.00	\$ -	\$ 125.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
APG Program #1 Live Free Recovery	\$ 5,000.00	\$ 1,299.00	\$ 6,299.00	\$ -	\$ -	\$ -	\$ 5,000.00	\$ 1,299.00	\$ 6,299.00
APG Program # 2 Seacoast Outright	\$ 5,000.00	\$ 1,300.00	\$ 6,300.00	\$ -	\$ -	\$ -	\$ 5,000.00	\$ 1,300.00	\$ 6,300.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 17,216.00	\$ 4,443.00	\$ 21,659.00	\$ -	\$ -	\$ -	\$ 17,216.00	\$ 4,443.00	\$ 21,659.00
Indirect As A Percent of Direct			25.8%						

Exhibit A, Item F-9, Amendment #1 APG Budget

New Hampshire Department of Health and Human Services COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD											
Contractor Name: University of New Hampshire - Institute on Disability											
Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-0)											
Project Title											
Budget Period: SFY22 7/1/21-6/30/21											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHEHS contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	\$ 1,693.00	\$ 448.00	\$ 2,133.00	\$ -	\$ -	\$ -	\$ 1,693.00	\$ 448.00	\$ 2,133.00		
2. Employee Benefits	\$ 741.00	\$ 193.00	\$ 934.00	\$ -	\$ -	\$ -	\$ 741.00	\$ 193.00	\$ 934.00		
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
7. Occupancy	\$ 41.00	\$ -	\$ 41.00	\$ -	\$ -	\$ -	\$ 41.00	\$ -	\$ 41.00		
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
12. Subcontracted Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
13. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
TOTAL	\$ 2,475.00	\$ 633.00	\$ 3,108.00	\$ -	\$ -	\$ -	\$ 2,475.00	\$ 633.00	\$ 3,108.00		
Indirect As A Percent of Direct		25.6%									

MAY 01 '18 PM 12:51 DAS

19 mac



Jeffrey A. Meyers
Commissioner

Katja S. Fox
Director

MAY 01 '18 PM 12:50 DAS
STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION FOR BEHAVIORAL HEALTH

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4332 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

April 17, 2018

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division for Behavioral Health, to enter into an agreement with University of New Hampshire, Vendor #177867-B046, 51 College Road, Durham, NH 03824 for the provision of a substance use disorder workforce development plan in an amount not to exceed \$560,000, effective upon Governor and Executive Council approval through September 29, 2021. 100% Federal Funds.

Funds are available in the following account(s) for SFY 2018 and SFY 2019, and are anticipated to be available in SFY 2020, SFY 2021, and SFY 2022, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust encumbrances between State Fiscal Years through the Budget Office without approval from the Governor and Executive Council, if needed and justified.

**05-95-92-921010-2059 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS,
HHS: BEHAVIORAL HEALTH DIV, BUR FOR CHILDRENS BEHAVRL HLTH, STATE YOUTH
TREATMENT PLANNING**

SFY	Class/Account	Class Title	Job Number	Total Amount
2018	102-500731	Contracts for Program Services	92102059	\$70,000
2019	102-500731	Contracts for Program Services	92102059	\$140,000
2020	102-500731	Contracts for Program Services	92102059	\$140,000
2021	102-500731	Contracts for Program Services	92102059	\$140,000
2022	102-500731	Contracts for Program Services	92102059	\$70,000
			Total	\$560,000

EXPLANATION

The purpose of this request is for the implementation of a substance use disorder workforce development plan that will expand access to substance use treatment services for youth and young adults. The goal of the project is to increase state infrastructure developed with funding from the State

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
Page 2 of 2

Youth Treatment-Planning grant including improving workforce development, streamlining funding policies, implementing identified Evidence Based Practices, and providing access to direct services for the population of focus. This project will focus on improving client outcomes including, but not limited to increased rates of abstinence, enrollment in college, vocational training, and/or employment while decreasing criminal and/or juvenile justice involvement. This contractor is also responsible for establishing and overseeing a Provider Learning Collaborative as required by the grant deliverables.

University of New Hampshire was selected for this project through a competitive bid process. A Request for Proposals was posted on the Department of Health and Human Services' web site from December 18, 2017 through January 22, 2018. The Department received one (1) proposal. The proposal was reviewed and scored by a team of individuals with program specific knowledge. The review included a thorough discussion of the strengths and weaknesses of the proposal. The Bid Summary Sheet is attached.

As referenced in the Request for Proposals and in Exhibit A, Item B, Revisions to General Provisions, of this contract, the Department reserves the option to extend contract services for up to one (1) additional year, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Executive Council.

Should the Governor and Executive Council not authorize this request, there will not be the implementation of the substance use disorder workforce development plan which may result in less services being available for transitional-aged youth with a substance use disorder.

Area served: Statewide

Source of Funds: 100% Federal Funds from Substance Abuse Mental Health Service Administration, State Youth Treatment Implementation Grant, CFDA#93.243, FAIN#T1080192

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

Respectfully submitted,



Katja S. Fox
Director

Approved by:



Jeffrey A. Meyers
Commissioner



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

**Workforce Development Plan for the State Youth
Treatment-Implementation (SYT-I) Grant**

RFP-2018-DBH-08-WORKF

RFP Name

RFP Number

Bidder Name

- 1. University of NH Institute on Disability
- 2. 0
- 3. 0

Pass/Fail	Maximum Points	Actual Points
	170	157
	170	0
	170	0

Reviewer Names

- 1. Adele Gallant, Children's Behavioral Health Administrator
- 2. Darrel Tenney, Program Specialist IV, Child Behavioral Health
- 3. Shawn Blakey, Program Specialist IV, Child Behavioral Health
- 4. Erica Ungarelli, Director, Bureau Child Behavioral Hlth, COST
- 5. Tanja Milic, Div Behvt Hlth, Business Administrator II, COST

COOPERATIVE PROJECT AGREEMENT

between the

STATE OF NEW HAMPSHIRE, Department of Health and Human Services

and the

University of New Hampshire of the UNIVERSITY SYSTEM OF NEW HAMPSHIRE

- A. This Cooperative Project Agreement (hereinafter "Project Agreement") is entered into by the State of New Hampshire, **Department of Health and Human Services**, (hereinafter "State"), and the University System of New Hampshire, acting through **University of New Hampshire**, (hereinafter "Campus"), for the purpose of undertaking a project of mutual interest. This Cooperative Project shall be carried out under the terms and conditions of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, except as may be modified herein.
- B. This Project Agreement and all obligations of the parties hereunder shall become effective on the date the Governor and Executive Council of the State of New Hampshire approve this Project Agreement ("Effective date") and shall end on **9/29/21**. If the provision of services by Campus precedes the Effective date, all services performed by Campus shall be performed at the sole risk of Campus and in the event that this Project Agreement does not become effective, State shall be under no obligation to pay Campus for costs incurred or services performed; however, if this Project Agreement becomes effective, all costs incurred prior to the Effective date that would otherwise be allowable shall be paid under the terms of this Project Agreement.
- C. The work to be performed under the terms of this Project Agreement is described in the proposal identified below and attached to this document as Exhibit A, the content of which is incorporated herein as a part of this Project Agreement.

Project Title: **Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I) Grant (RFP-2018-DBH-08-WORKF)**

- D. The Following Individuals are designated as Project Administrators. These Project Administrators shall be responsible for the business aspects of this Project Agreement and all invoices, payments, project amendments and related correspondence shall be directed to the individuals so designated.

State Project Administrator

Name: Erica Ungarelli
 Address: Division of Behavioral Health
105 Pleasant Street/ Main Building
Concord, NH 03301

Phone: 603-271-5006

Campus Project

Administrator Name: Susan
 Address: University of New Hampshire
Sosa Sponsored Programs Administration
51 College Rd.
Durham, NH 03824

Phone: 603-862-4848

- E. The Following Individuals are designated as Project Directors. These Project Directors shall be responsible for the technical leadership and conduct of the project. All progress reports, completion reports and related correspondence shall be directed to the individuals so designated.

State Project Director

Name: Erica Ungarelli
 Address: Division of Behavioral Health
105 Pleasant Street/ Main Building
Concord, NH 03301

Phone: 603-271-5006

Campus Project Director

Name: JoAnne Malloy
 Address: UNH Institue on Disability
Durham, NH 03824

Phone: 603-862-1942

F. Total State funds in the amount of \$560,000 have been allotted and are available for payment of allowable costs incurred under this Project Agreement. State will not reimburse Campus for costs exceeding the amount specified in this paragraph.

Check if applicable

Campus will cost-share _____ % of total costs during the term of this Project Agreement.

Federal funds paid to Campus under this Project Agreement are from Grant/Contract/Cooperative Agreement No. 1H79TI080192-01 from Substance Abuse and Mental Health Services Administration under CFDA# 93.243. Federal regulations required to be passed through to Campus as part of this Project Agreement, and in accordance with the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, are attached to this document as Exhibit B, the content of which is incorporated herein as a part of this Project Agreement.

G. Check if applicable

Article(s) _____ of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002 is/are hereby amended to read:

H. State has chosen not to take possession of equipment purchased under this Project Agreement.
 State has chosen to take possession of equipment purchased under this Project Agreement and will issue instructions for the disposition of such equipment within 90 days of the Project Agreement's end-date. Any expenses incurred by Campus in carrying out State's requested disposition will be fully reimbursed by State.

This Project Agreement and the Master Agreement constitute the entire agreement between State and Campus regarding this Cooperative Project, and supersede and replace any previously existing arrangements, oral or written; all changes herein must be made by written amendment and executed for the parties by their authorized officials.

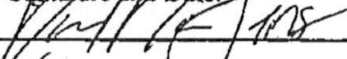
IN WITNESS WHEREOF, the University System of New Hampshire, acting through the University of New Hampshire and the State of New Hampshire, have executed this Project Agreement.

By An Authorized Official of:
University of New Hampshire

Name: Karen M. Jensen

Title: Manager, Sponsored Programs Administration

Signature and Date:

 4/16/18

By An Authorized Official of: the New Hampshire Office of the Attorney General

Name: Megan A. [unclear]

Title: Attorney

Signature and Date:

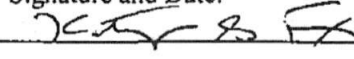
 4/27/18

By An Authorized Official of:
Department of Health and Human Services

Name: Katja S. Fox

Title: Director

Signature and Date:



By An Authorized Official of: the New Hampshire Governor & Executive Council

Name:

Title:

Signature and Date:


Campus Authorized Official 
Date 4/16/18

EXHIBIT A

- A. Project Title:** Workforce Development Plan for the State Youth Treatment-Implementation (SYT-1) Grant
- B. Project Period:** Date of Governor and Executive Council Approval through September 29, 2021. The Department reserves the right to renew the Contract for up to one (1) additional years, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.
- C. Objectives:** This contract is for the provision of the implementation of a substance use disorder workforce development plan that will expand access to substance use treatment services for youth and young adults, ages as specified by DHHS.
- D. Scope of Work:** See attached Exhibit A, Item D-1, D-2, D-3, and D-4.
- E. Deliverables Schedule:** See attached Exhibit A, Item D-1, Section 4.
- F. Budget and Invoicing Instructions:**
1. This contract is funded with funds from the Catalog of Federal Domestic Assistance (CFDA) # 93.243, US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Substance Abuse and Mental Health Services-Project of Regional and National Significance.
 2. Invoicing Instructions:
Campus will submit invoices to the State on regular Campus invoice forms no more frequently than monthly and no less frequently than quarterly. Invoices will be based on actual project expenses incurred during the invoicing period, shall show current and cumulative expenses by major cost categories, shall document cumulative cost sharing through the end of the invoicing period and will certify that the match was not derived from federal funds or used as match against any other state contract or federal program. The State will pay Campus within thirty (30) days of receipt of each approved invoice. Campus will submit its final invoice no later than seventy-five (75) days after the Project end date.
 3. See attached budgets on Exhibit A, Items F-1, F-2, F-3, F4, F-5.

EXHIBIT B

This Project Agreement is funded under a Grant/Contract/Cooperative Agreement to State from the Federal sponsor specified in Project Agreement article F. All applicable requirements, regulations, provisions, terms and conditions of this Federal Grant/Contract/Cooperative Agreement are hereby adopted in full force and effect to the relationship between State and Campus, except that wherever such requirements, regulations, provisions and terms and conditions differ for INSTITUTIONS OF HIGHER EDUCATION, the appropriate requirements should be substituted (e.g., OMB Circulars A-21 and A-110, rather than OMB Circulars A-87 and A-102). References to Contractor or Recipient in the Federal language will be taken to mean Campus; references to the Government or Federal Awarding Agency will be taken to mean Government/Federal Awarding Agency or State or both, as appropriate.

Special Federal provisions are listed here: None or



**New Hampshire Department of Health and Human Services
Workforce Development Plan for the State
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Exhibit A, Item D-1**

Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.

2. Scope of Services

- 2.1. The Contractor shall collaborate with the Department to implement a Workforce Development Plan that will expand the activities of the workforce of substance use disorder professionals who provide direct services to youth and young adults, ages as specified by DHHS, with a Substance Use Disorder (SUD) or Substance Use Disorder and a Co-Occurring Disorder (SUD/COD), statewide which may include, but is not limited to:
 - 2.1.1. Screening.
 - 2.1.2. Assessment.
 - 2.1.3. Treatment services.
 - 2.1.4. Recovery support.
- 2.2. The Contractor shall ensure the Workforce Development Plan expands access for the covered population of youth and young adults, ages as specified by DHHS, with a Substance Use Disorder (SUD) or Substance Use and a Co-Occurring Disorder (SUD/COD) and stakeholders that provide services to them, to include community-based supports and professionals, as identified by the Department. The Workforce Development Plan shall include, but not be limited to the following milestones and activities:
 - 2.2.1. Establishing a State Youth Treatment-Implementation (SYT-I) Workforce Workgroup, consisting of the identified providers and other necessary partners as determined by the Interagency Council and the Contractor, that will determine the mission, tasks, goals, objectives, and timelines for the implementation of the Workforce Plan.
 - 2.2.2. Developing data gathering plans, protocols, and procedures including, but not limited to protocols and procedures necessary to safeguard protected health information (PHI) and SUD data protected by 42 CFR Part 2 as required by state rule, and state and federal laws in collaboration with the Contractor for the Evaluation of the State Youth Treatment Plan.
 - 2.2.3. Conducting focus groups and web-based meetings throughout the State whose attendees shall include, but not be limited to:
 - 2.2.3.1. Public Health Networks.



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Exhibit A, Item D-1**

- 2.2.3.2. Trainers.
- 2.2.3.3. Law enforcement.
- 2.2.3.4. University programs.
- 2.2.3.5. Providers.
- 2.2.4. Using State SUD, public health, and Youth Risk Behavior Student Survey (YRBSS) data to enhance the discussions.
- 2.2.5. Disseminating core competencies that are part of the training plan and evidence-based practice recommendations to all stakeholder groups listed in Section 2.3 and conducting a comprehensive review and revision of SYT-I core competencies.
- 2.2.6. Identifying critical barriers in state and federal licensing policies, rules, and regulations including specific requirements for patient consent and notice to share information that interfere with the development of high-quality assessment, treatment, and recovery services for youth and young adults, ages as specified by DHHS, with SUD or SUD/COD.
- 2.2.7. Analyzing SUD and SUD/COD reimbursement, insurance plans, and other relevant policies and identifying policy issues using key informant interviews.
- 2.2.8. Assessing current community-based, in-service training programs in the areas of assessments, screening, treatment, and recovery programs and gaps in personnel preparation.
- 2.2.9. Assessing current University and college programs of study and confidentiality and any gaps in personnel preparation.
- 2.2.10. Developing and implementing a provider learning collaborative, to support implementation of evidence-based and youth-focused practices.
- 2.2.11. Researching, identifying, creating, and implementing a training plan which utilizes de-identified and de-aggregated data and includes, but is not limited to:
 - 2.2.11.1. A research-based screening tool based upon the Addiction Severity Index (ASI), Global Appraisal of Identified Needs (GAIN) or equivalent validated tool that is developmentally appropriate for adolescents with SUD/COD.
 - 2.2.11.2. Research-based assessments, including the Child and Adolescent Needs and Strengths (CANS) Checklist, that are developmentally appropriate for adolescents with SUD/COD.
 - 2.2.11.3. Research-based treatment and services consistent with System of Care values and principles and American Society of Addiction Medicine (ASAM) continuum of care, and developmentally appropriate for adolescents with SUD/COD which includes, but are not limited to:
 - 2.2.11.3.1. Motivational Interviewing.
 - 2.2.11.3.2. Care Coordination.
 - 2.2.11.3.3. Family- and Youth-Driven Wraparound.



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Exhibit A, Item D-1**

- 2.2.11.3.4. Rehabilitation for Empowerment, Natural Supports, Education, and Work (RENEW).
- 2.2.11.3.5. Medication Assisted Treatment.
- 2.2.11.3.6. Recovery Coaching.
- 2.2.11.3.7. Other evidence-based programs that are already being offered for youth and young adults, ages as specified by DHHS, with SUD or SUD/COD.
- 2.2.11.3.8. New practices to fill a major gap or need.
- 2.2.11.4. Research-based peer-to-peer recovery support services that are developmentally appropriate for adolescents with SUD or SUD/COD, incorporating Recovery Coaching and Family Support groups into the continuum of recovery supports.
- 2.3. The Contractor shall collaborate with its primary partners to develop, procure, and deliver training and technical assistance to the workforce for the target population including, but not limited to:
 - 2.3.1. The New Hampshire Bureau of Children’s Behavioral Health.
 - 2.3.2. The New Hampshire Bureau of Drug and Alcohol Services.
 - 2.3.3. The Community Health Institute.
 - 2.3.4. Youth M.O.V.E. (Motivating Others through Voices of Experience) New Hampshire.
 - 2.3.5. The University of New Hampshire’s (UNH’s) School of Social Work.
 - 2.3.6. The New Hampshire Alcohol and Drug Abuse Counselors Association (NHADACA).
 - 2.3.7. Families Advocating Substance Treatment, Education and Recovery (FASTER).
 - 2.3.8. National Alliance of the Mentally Ill – New Hampshire (NAMI-NH).
- 2.4. The Contractor shall develop, procure, and deliver training and technical assistance to the workforce including, but not limited to:
 - 2.4.1. Developing modules, in-person trainings, and materials providing content knowledge and skills related to SUD and/or SUD/COD to the workforce serving youth overall and by specific population.
 - 2.4.2. Providing cross-training for staff in other agencies serving youth with SUD or SUD/COD, when identified as a need including, but not limited to:
 - 2.4.2.1. Schools.
 - 2.4.2.2. Community behavioral health providers.
 - 2.4.2.3. Youth and family serving organizations.
 - 2.4.2.4. DCYF staff.
 - 2.4.2.5. Law enforcement.
- 2.5. The Contractor shall update the Youth SUD/COD Workforce Map to identify the



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Exhibit A, Item D-1**

composition and expertise of the statewide workforce who provide for youth and young adults, ages as specified by DHHS, with SUD or SUD/COD, as required by the grant or the Substance Abuse and Mental Health Services Administration (SAMHSA). The update will include:

- 2.5.1. Identifying stakeholders and partners.
- 2.5.2. Designing and conducting a survey to identify existing SUD or SUD/COD services and supports.
- 2.5.3. Analyzing data collected.
- 2.5.4. Identifying service workforce gaps.
- 2.5.5. Using geographic information system (GIS) mapping to create maps that inform current gaps in services, workforce, and other areas of interest.
- 2.6. The Contractor shall participate in SAMHSA Technical Assistance activities, grantee calls, and required grantee meetings.
- 2.7. The Contractor shall obtain input from and engage stakeholders by conducting web-based listening sessions and/or focus groups to assess knowledge and progress which may include, but are not limited to:
 - 2.7.1. Youth and family stakeholders.
 - 2.7.2. First responders.
 - 2.7.3. The State's seven (7) Integrated Delivery Networks. See Exhibit A, Item D-2.
 - 2.7.4. The State's thirteen (13) Regional Public Health Networks. See Exhibit A, Item D-3.
 - 2.7.5. The New Hampshire Provider Association.
 - 2.7.6. The New Hampshire Drug and Alcohol Counselors Association.
 - 2.7.7. Community SUD and/or SUD/COD providers.
 - 2.7.8. All participating SUD/COD trainers including the contracted trainers and the Department's trainers.
 - 2.7.9. The primary higher education program directors
 - 2.7.10. Other provider and stakeholder networks identified in the State resource map.
- 2.8. The Contractor shall promote the web-based listening sessions and/or focus groups outlined in Section 2.7 by:
 - 2.8.1. Contacting individuals who were involved in the 2017 State Youth Treatment-Planning project, as well as specific populations including, but not limited to:
 - 2.8.1.1. Homeless youth.
 - 2.8.1.2. Lesbian, gay, bi-sexual, and transgendered youth.
 - 2.8.2. Contacting organizations that serve the youth and young adults, ages as specified by DHHS, and collaborating with those organizations to assemble listening sessions/focus groups.



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- 2.8.3. Paying participants in the sessions and supporting the organizations (with free training slots, for example) to ensure higher rates of participation.
- 2.8.4. Assisting the host organizations to promote the sessions to their populations by providing descriptions and supportive materials.
- 2.9. The Contractor shall collaborate with Youth M.O.V.E. NH to conduct three (3) to five (5) focus groups with youth ages sixteen through eighteen (16-18) at least annually. Focus groups must:
 - 2.9.1. Be representative of the population of focus.
 - 2.9.2. Be inclusive of the diverse youth population in New Hampshire.
 - 2.9.3. Seek youth opinion regarding the current state of substance use disorder and co-occurring disorder resources.
 - 2.9.4. Seek youth opinion regarding what an effective "stigma campaign" would look like, in order to extract words, phrases, and ideas that would be effective toward the youth population.
 - 2.9.5. Provide incentives to youth who participate.
- 2.10. The Contractor shall implement the Workforce Training Implementation Plan which includes, but is not limited to:
 - 2.10.1. Providing content knowledge and skills regarding SUD and SUD/COD to the workforce serving youth and young adults, ages as specified by DHHS. Some example populations of focus may include, but are not limited to:
 - 2.10.1.1. Adolescence with opioid use disorders.
 - 2.10.1.2. Transition age youth on probation or parole.
 - 2.10.1.3. Youth attending college.
 - 2.10.2. Providing cross-training to staff in other agencies serving youth with SUD or SUD/COD, when identified as a need.
 - 2.10.3. Preparing faculty in college and education settings to deliver curricula regarding evidence-based practices for transitional-aged youth with SUD or SUD/COD.
 - 2.10.4. Promoting coordination and collaboration with family support organizations to strengthen services for the population of focus.
 - 2.10.5. Engaging with contracted treatment providers to develop and oversee a provider collaborative to ensure providers are trained effectively in selected evidence-based practices (EBPs).
 - 2.10.6. Collaborating with contracted providers identified by the Department and the Evaluation of the State Youth Treatment Plan Contractor regarding:
 - 2.10.6.1. Collection of all data pertinent to implementation, fidelity, and sustainability of the plan.
 - 2.10.6.2. Dissemination planning for selected EBPs - evidence-based screeners, assessments and treatment interventions.
 - 2.10.6.3. Fidelity of the selected EBPs.

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- 2.10.6.4. Comprehension of all contractors and providers of the core components of selected EBPs.
- 2.10.6.5. Coordination of provider training regarding EBPs.
- 2.10.6.6. Identification of fidelity monitoring tools to identify any issues that may impact outcomes; make adaptations to EBP implementation as needed; and utilize fidelity monitoring and evaluation outcomes to improve implementation cohorts.
- 2.11. The Contractor shall develop and implement a Sustainability Plan that includes, but is not limited to:
 - 2.11.1. Comparing funding sources with regulations and rates.
 - 2.11.2. Conducting ongoing gap analysis to identify areas of development for sustainability.
 - 2.11.3. Collaborating with the Interagency Council, Department offices, identified contracted providers and the Evaluation Contractor for the State Youth Treatment Plan.
 - 2.11.4. Collaborating with family and youth organizations to ensure their involvement at every stage of implementation and improvement.
- 2.12. The Contractor shall facilitate and coordinate the Interagency Council including, but not limited to obtaining meeting space, note taking, and recording interagency attendance, composition, and communication.
- 3. **Reporting**
 - 3.1. The Contractor shall provide monthly reports to the Department no later than the tenth (10th) day of the following month that include, but are not limited to:
 - 3.1.1. Program activities.
 - 3.1.2. Materials developed.
 - 3.1.3. Brief narrative identifying barriers experienced.
 - 3.1.4. Plan to address identified barriers.
 - 3.1.5. Progress towards implementation including, but not limited to:
 - 3.1.5.1. Number of trainings held.
 - 3.1.5.2. Number of professionals trained.
 - 3.1.5.3. Topics in which the professionals were trained.
 - 3.2. The Contractor shall provide an annual report to the Department that includes, but is not limited to:
 - 3.2.1. Workforce development map indicating types and locations of treatment available to youth and transitional aged youth.
 - 3.2.2. List of services available, by catchment area.
 - 3.2.3. Data to identify the number of professionals participating in all training and implementation activities.



**New Hampshire Department of Health and Human Services
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- 3.2.4. Data to identify the number of providers and their staff participating in the learning collaborative.
- 3.2.5. Barriers to accessing workforce development services.
- 3.2.6. Barriers to accessing treatment for the population served.
- 3.2.7. Analysis of overall project.
- 3.2.8. Suggested actions that shall be taken by the Department to address gaps in services.

4. Deliverables

- 4.1. The Contractor shall provide monthly progress reports within ten (10) days following the month being reviewed.
- 4.2. The Contractor shall provide the annual report within twenty (20) days of the close of the Federal Fiscal year, and at the end of the contract.

**Workforce Development Plan for the State
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Integrated Delivery Networks

Administrative Lead Vendor	Integrated Delivery Network Region
Mary Hitchcock Memorial Hospital	Region 1: Greater Monadnock, Greater Sullivan County, Upper Valley
Concord Hospital, Inc.	Region 2: Capital Area
Southern New Hampshire Health	Region 3: Greater Nashua
Catholic Medical Center	Region 4: Greater Derry, Greater Manchester
Lakes Region Partnership for Public Health, Inc.	Region 5: Central NH, Winnepesaukee
County of Strafford, New Hampshire	Region 6: Strafford County, Seacoast
North Country Health Consortium	Region 7: North Country RPHN, Carrol County RPHN

**Workforce Development Plan for the State
Youth Treatment-Implementation (SYT-I) Grant
Exhibit A, Item D-3**

Regional Public Health Networks

1. Capital Area Regional Public Health Network
2. Carroll County Regional Public Health Network
3. Central NH Regional Public Health Network
4. South Central Regional Public Health Network
5. Greater Manchester Regional Public Health Network
6. Greater Sullivan County Regional Public Health Network
7. North Country Regional Public Health Network
8. Seacoast Regional Public Health Network
9. Strafford County Regional Public Health Network
10. Upper Valley Regional Public Health Network
11. Winnepesaukee Regional Public Health Network
12. Greater Monadnock Regional Public Health Network
13. Greater Nashua Regional Public Health Network

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



A. Definitions

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

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, "Breach" shall have the same meaning as the term "Breach" in section 164:402 of Title 45, Code of Federal Regulations.
2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.
3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

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

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

KJ

4/16/18

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

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

I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR

A. Business Use and Disclosure of Confidential Information.

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

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

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

II. METHODS OF SECURE TRANSMISSION OF DATA

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

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

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

III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

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

A. Retention

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

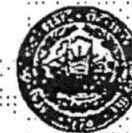
KJ

4/16/18

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

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

B. Disposition

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

IV. PROCEDURES FOR SECURITY

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

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

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

12. Contractor must comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.
13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at <https://www.nh.gov/doi/vendor/index.htm> for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.
14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor must notify the State's Privacy Officer, Information Security Office and Program Manager of any Security Incidents and Breaches within twenty-four (24) hours of identification of a possible issue. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.
15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.
16. The Contractor must ensure that all End Users:
 - a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.
 - b. safeguard this information at all times.
 - c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.
 - d. send emails containing Confidential Information only if encrypted and being sent to and being received by email addresses of persons authorized to receive such information.

[Handwritten signature]

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



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

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

V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer, Information Security Office and Program Manager of any Security Incidents and Breaches within twenty-four (24) hours of identification of a possible issue.

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

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

KS

4/16/19

John S. F.

New Hampshire Department of Health and Human Services

Exhibit A, Item D-4

DHHS Information Security Requirements



Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

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

VI. PERSONS TO CONTACT

A. DHHS contact for Data Management or Data Exchange issues:

DHHSInformationSecurityOffice@dhhs.nh.gov

B. DHHS contacts for Privacy issues:

DHHSPrivacyOfficer@dhhs.nh.gov

C. DHHS contact for Information Security issues:

DHHSInformationSecurityOffice@dhhs.nh.gov

D. DHHS contact for Breach notifications:

DHHSInformationSecurityOffice@dhhs.nh.gov

DHHSPrivacy.Officer@dhhs.nh.gov

KJ

4/16/18

Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)

Exhibit A, Item F-1

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)									
Budget Period: SFY18: 4/1/18 - 6/30/18									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 19,207.00	\$ 4,994.00	\$ 24,201.00	\$ -	\$ -	\$ -	\$ 19,207.00	\$ 4,994.00	\$ 24,201.00
2. Employee Benefits	\$ 5,533.00	\$ 1,439.00	\$ 6,972.00	\$ -	\$ -	\$ -	\$ 5,533.00	\$ 1,439.00	\$ 6,972.00
3. Consultants	\$ 2,300.00	\$ 598.00	\$ 2,898.00	\$ -	\$ -	\$ -	\$ 2,300.00	\$ 598.00	\$ 2,898.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 620.00	\$ 181.00	\$ 781.00	\$ -	\$ -	\$ -	\$ 620.00	\$ 181.00	\$ 781.00
7. Occupancy	\$ 726.00	\$ -	\$ 726.00	\$ -	\$ -	\$ -	\$ 726.00	\$ -	\$ 726.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 19,050.00	\$ 4,953.00	\$ 24,003.00	\$ -	\$ -	\$ -	\$ 19,050.00	\$ 4,953.00	\$ 24,003.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Focus Groups	\$ 650.00	\$ 169.00	\$ 819.00	\$ -	\$ -	\$ -	\$ 650.00	\$ 169.00	\$ 819.00
Briefs and Reports	\$ 819.00	\$ 181.00	\$ 780.00	\$ -	\$ -	\$ -	\$ 819.00	\$ 181.00	\$ 780.00
Printing/Copying	\$ 1,500.00	\$ 390.00	\$ 1,890.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ 390.00	\$ 1,890.00
Interpreter/Captioning Services	\$ 2,500.00	\$ 650.00	\$ 3,150.00	\$ -	\$ -	\$ -	\$ 2,500.00	\$ 650.00	\$ 3,150.00
Online Learning TA and Curriculum Development	\$ 2,000.00	\$ 520.00	\$ 2,520.00	\$ -	\$ -	\$ -	\$ 2,000.00	\$ 520.00	\$ 2,520.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 55,705.00	\$ 14,295.00	\$ 70,000.00	\$ -	\$ -	\$ -	\$ 55,705.00	\$ 14,295.00	\$ 70,000.00

Indirect As A Percent of Direct

25.7%

Contractor Initials *KLS*
Date *4/11/18*

Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I)

Exhibit A, Item F-3

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I)									
Budget Period: SFY20: 7/1/19 - 6/30/20									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 63,225.00	\$ 16,439.00	\$ 79,664.00	\$ -	\$ -	\$ -	\$ 63,225.00	\$ 16,439.00	\$ 79,664.00
2. Employee Benefits	\$ 22,652.00	\$ 5,890.00	\$ 28,542.00	\$ -	\$ -	\$ -	\$ 22,652.00	\$ 5,890.00	\$ 28,542.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 1,331.00	\$ 346.00	\$ 1,677.00	\$ -	\$ -	\$ -	\$ 1,331.00	\$ 346.00	\$ 1,677.00
7. Occupancy	\$ 2,901.00	\$ -	\$ 2,901.00	\$ -	\$ -	\$ -	\$ 2,901.00	\$ -	\$ 2,901.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 12,000.00	\$ 3,120.00	\$ 15,120.00	\$ -	\$ -	\$ -	\$ 12,000.00	\$ 3,120.00	\$ 15,120.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Support	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Briefs and Reports	\$ 100.00	\$ 26.00	\$ 126.00	\$ -	\$ -	\$ -	\$ 100.00	\$ 26.00	\$ 126.00
Printing/Copying	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Interpreter/Captioning Services	\$ 8,500.00	\$ 1,890.00	\$ 10,390.00	\$ -	\$ -	\$ -	\$ 8,500.00	\$ 1,890.00	\$ 10,390.00
Online Learning TA and Curriculum Development	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 111,709.00	\$ 28,291.00	\$ 140,000.00	\$ -	\$ -	\$ -	\$ 111,709.00	\$ 28,291.00	\$ 140,000.00

Indirect As A Percent of Direct

25.3%

Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)

Exhibit A, Item F-4

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment Implementation (SYT-I)									
Budget Period: SFY21: 7/1/20 - 6/30/21									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 60,599.00	\$ 15,756.00	\$ 76,355.00	\$ -	\$ -	\$ -	\$ 60,599.00	\$ 15,756.00	\$ 76,355.00
2. Employee Benefits	\$ 20,807.00	\$ 5,410.00	\$ 26,217.00	\$ -	\$ -	\$ -	\$ 20,807.00	\$ 5,410.00	\$ 26,217.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 1,302.00	\$ 339.00	\$ 1,641.00	\$ -	\$ -	\$ -	\$ 1,302.00	\$ 339.00	\$ 1,641.00
7. Occupancy	\$ 2,901.00	\$ -	\$ 2,901.00	\$ -	\$ -	\$ -	\$ 2,901.00	\$ -	\$ 2,901.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 16,500.00	\$ 4,290.00	\$ 20,790.00	\$ -	\$ -	\$ -	\$ 16,500.00	\$ 4,290.00	\$ 20,790.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Support	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Briefs and Reports	\$ 100.00	\$ 26.00	\$ 126.00	\$ -	\$ -	\$ -	\$ 100.00	\$ 26.00	\$ 126.00
Printing/Copying	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Interpreter/Captioning Services	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00	\$ -	\$ -	\$ -	\$ 6,500.00	\$ 1,690.00	\$ 8,190.00
Online Learning TA and Curriculum Development	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 111,709.00	\$ 28,291.00	\$ 140,000.00	\$ -	\$ -	\$ -	\$ 111,709.00	\$ 28,291.00	\$ 140,000.00

Indirect As A Percent of Direct

25.3%

Contractor Initials *KJ*
Date *4/16/19*

Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I)

Exhibit A, Item F-5

New Hampshire Department of Health and Human Services									
Bidder/Program Name: University of New Hampshire - Institute on Disability									
Budget Request for: Workforce Development Plan for the State Youth Treatment-Implementation (SYT-I)									
Budget Period: SFY22: 7/1/21 - 9/30/21									
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 26,669.00	\$ 6,934.00	\$ 33,603.00	\$ -	\$ -	\$ -	\$ 26,669.00	\$ 6,934.00	\$ 33,603.00
2. Employee Benefits	\$ 6,896.00	\$ 1,793.00	\$ 8,689.00	\$ -	\$ -	\$ -	\$ 6,896.00	\$ 1,793.00	\$ 8,689.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 748.00	\$ 194.00	\$ 940.00	\$ -	\$ -	\$ -	\$ 748.00	\$ 194.00	\$ 940.00
7. Occupancy	\$ 726.00	\$ -	\$ 726.00	\$ -	\$ -	\$ -	\$ 726.00	\$ -	\$ 726.00
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 17,000.00	\$ 2,860.00	\$ 19,860.00	\$ -	\$ -	\$ -	\$ 17,000.00	\$ 2,860.00	\$ 19,860.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Conference/Meeting Costs	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Participant Support	\$ 250.00	\$ 65.00	\$ 315.00	\$ -	\$ -	\$ -	\$ 250.00	\$ 65.00	\$ 315.00
Briefs and Reports	\$ 1,156.00	\$ 301.00	\$ 1,457.00	\$ -	\$ -	\$ -	\$ 1,156.00	\$ 301.00	\$ 1,457.00
Printing/Copying	\$ 500.00	\$ 130.00	\$ 630.00	\$ -	\$ -	\$ -	\$ 500.00	\$ 130.00	\$ 630.00
Interpreter/Captioning Services	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
Online Learning TA and Curriculum Development	\$ 1,000.00	\$ 260.00	\$ 1,260.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 260.00	\$ 1,260.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 56,943.00	\$ 13,057.00	\$ 70,000.00	\$ -	\$ -	\$ -	\$ 56,943.00	\$ 13,057.00	\$ 70,000.00

Indirect As A Percent of Direct 22.9%

Contractor Initials *KJ*
Date *4/16/18*



DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center
Financial Management Portfolio
Cost Allocation Services

26 Federal Plaza, Room 3412
New York, NY 10278
PHONE: (212) 264-2069
FAX: (212) 264-5478
EMAIL: CAS-NY@psc.hhs.gov

March 23, 2017

Ms. Jane Nisbet
Senior Vice Provost for Research
University of New Hampshire
18 Garrison Avenue
Durham, New Hampshire 03824-3547

Dear Ms. Nisbet:

A negotiation agreement is being faxed to you for signature. This agreement reflects an understanding reached between your institution and a member of my staff concerning the rates or amounts that may be used to support your claim for costs on grants and contracts with the Federal Government. The agreement must be signed by a duly authorized representative of your institution and emailed to me; retain a copy for your file. Our email address is cas-ny@psc.hhs.gov. We will reproduce and distribute the agreement to awarding agencies of the Federal Government for their use.

Requirements for adjustments to costs claimed under Federal Grants and Contracts resulting from this negotiation are dependent upon the type of rate contained in the negotiation agreement. Information relating to these requirements is enclosed.

In consideration of this agreement, the following was agreed to:

1. A carry-forward under-recovery of \$15,139,276 resulted from the settlement of the full fringe benefit rate for the fiscal year ended June 30, 2016. This will be evenly split between fiscal years ending June 30, 2018 and 2019. The carry-forward amount of \$7,569,638 must be included in your fringe benefit rate proposals based on actual expenses for fiscal years ending June 30, 2018 and 2019.
2. The carry-forward under-recovery of \$295 resulting from the settlement of the partial fringe benefit rate for fiscal year ended June 30, 2016 was considered in establishing the fixed rate for fiscal year ending June 30, 2018. The carry-forward must be included in your fringe benefit rate proposal based on actual expenses for fiscal year ending June 30, 2018.

Ms. Jan Nisbet

-2-

March 23, 2017

- 3. The carry-forward (over)-recovery of (\$115,785) resulting from the settlement of the basic fringe benefit rate for fiscal year ended June 30, 2016 was considered in establishing the fixed rate for fiscal year ending June 30, 2018. The carry-forward must be included in your fringe benefit rate proposal based on actual expenses for fiscal year ending June 30, 2018.
- 4. A fringe benefit proposal for fiscal year ended June 30, 2017 will be due not later than December 31, 2017.

If you are unable to submit your proposal by the prescribed date, you may request an extension. This request must be submitted prior to the due date of the proposal and must contain a justification for the extension and the date the proposal will be submitted.

In addition, please acknowledge your concurrence with the comments and conditions cited above by signing this letter in the space provided below, and email it to me at cas-ny@psc.hhs.gov with the enclosed negotiation agreement.

Sincerely,

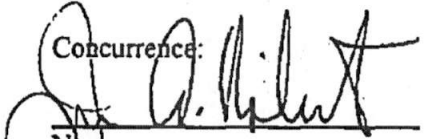
Darryl W. Mayes -A

Digitally signed by Darryl W. Mayes -A
DN: cn=US, ou=U.S. Government, ou=OPS, ou=PSL, ou=People, o=U.S. 2342, 1.9200.100.1.1=20001, 2.1609, cn=Darryl W. Mayes -A
Date: 2017.04.04 08:59:24 -0700

Darryl W. Mayes
Deputy Director
Cost Allocation Services

Enclosures

Concurrence:



Name

Senior Vice Provost for Research

Title

April 7, 2017

Date

COLLEGES AND UNIVERSITIES RATE AGREEMENT

EIN: 1026000618C4

DATE: 03/23/2017

ORGANIZATION:

University of New Hampshire
18 Garrison Avenue
Durham, NH 03824

FILING REF.: The preceding
agreement was dated
02/02/2016

The rates approved in this agreement are for use on grants, contracts and other agreements with the Federal Government, subject to the conditions in Section III.

SECTION I: INDIRECT COST RATES

RATE TYPES:	FIXED	FINAL	PROV. (PROVISIONAL)	PRED. (PREDETERMINED)
	<u>EFFECTIVE PERIOD</u>			
	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>
				<u>APPLICABLE TO</u>
PRED.	07/01/2016	06/30/2017	49.50	On-Campus Research
PRED.	07/01/2017	06/30/2018	50.00	On-Campus Research
PRED.	07/01/2018	06/30/2019	50.50	On-Campus Research
PRED.	07/01/2016	06/30/2019	26.00	Off-Campus Research
PRED.	07/01/2016	06/30/2019	57.50	On-Campus Instruction
PRED.	07/01/2016	06/30/2019	26.00	Off-Campus Instruction
PRED.	07/01/2016	06/30/2019	35.20	On-Campus Other Sponsored Programs
PRED.	07/01/2016	06/30/2019	26.00	Off-Campus Other Sponsored Programs
PROV.	07/01/2019	Until Amended		Use same rates and conditions as those cited for fiscal year ending June 30, 2019.

*BASE

ORGANIZATION: University of New Hampshire

AGREEMENT DATE: 3/23/2017

Modified total direct costs, consisting of all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

ORGANIZATION: University of New Hampshire

AGREEMENT DATE: 3/23/2017

SECTION I: FRINGE BENEFIT RATES**

<u>TYPE</u>	<u>FROM</u>	<u>TO</u>	<u>RATE(%)</u>	<u>LOCATION</u>	<u>APPLICABLE TO</u>
FIXED	7/1/2016	6/30/2017	39.90	All	All Emp. (1,2,4)
FIXED	7/1/2016	6/30/2017	8.30	All	Spec. Remarks (3)
FIXED	7/1/2016	6/30/2017	20.40	All	Post Doc Assoc. (6)
FIXED	7/1/2017	6/30/2018	41.90	All	All Emp. (1,2,4)
FIXED	7/1/2017	6/30/2018	7.80	All	Spec. Remarks (3)
FIXED	7/1/2017	6/30/2018	27.30	All	Post Doc Assoc. (6)
PROV.	7/1/2018	Until amended			Use same rates and conditions as those cited for fiscal year ending June 30, 2018.

** DESCRIPTION OF FRINGE BENEFITS RATE BASE:
Salaries and wages.

See Special Remarks, (1) (2) (3) (4) (6).

ORGANIZATION: University of New Hampshire

AGREEMENT DATE: 3/23/2017

SECTION II: SPECIAL REMARKS

TREATMENT OF FRINGE BENEFITS:

The fringe benefits are charged using the rate(s) listed in the Fringe Benefits Section of this Agreement. The fringe benefits included in the rate(s) are listed below.

TREATMENT OF PAID ABSENCES

Vacation, holiday, sick leave pay and other paid absences are included in salaries and wages and are claimed on grants, contracts and other agreements as part of the normal cost for salaries and wages. Separate claims are not made for the cost of these paid absences.

(1) Fringe benefit rate is not applicable to hourly wages, college work study wages, graduate student salaries, faculty summer salaries.

(2) Fringe benefits include: Eye Care, Early retirement, Additional Retirement Contribution, Earned Time, University Fitness Program, Federal Retirement, Medical Coverage, Other Health Costs, Other Retirement, Other Salary Based, State Retirement, Social Security, Retirement Plan Premiums, Staff and Fac. Tuition Benefits, Workmen's Compensation, Faculty Summer Fellowships, Benefits Administration, ELF, Interim Disability, Sabbatical Leave Salaries and Compensated Absences.

(3) Applicable to Non-Student hourly wages, faculty summer salaries and other exceptions to contract pay. The basic fringe benefit rate is also applicable to FICA eligible graduate student pay.

(4) Applicable to the University System of New Hampshire.

(5) Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year, and an acquisition cost of \$5,000 or more per unit.

(6) Post Doctoral Research and Teaching Associates rate includes item (3) and applicable health benefits.

This rate agreement updates fringe benefit cost rates only.

ORGANIZATION: University of New Hampshire

AGREEMENT DATE: 3/23/2017

SECTION III: GENERAL

A. LIMITATIONS:

The rates in this Agreement are subject to any statutory or administrative limitations and apply to a given grant, contract or other agreement only to the extent that funds are available. Acceptance of the rates is subject to the following conditions: (1) Only costs incurred by the organization were included in its facilities and administrative cost pools as finally accepted; such costs are legal obligations of the organization and are allowable under the governing cost principles; (2) The same costs that have been treated as facilities and administrative costs are not claimed as direct costs; (3) Similar types of costs have been accorded consistent accounting treatment; and (4) The information provided by the organization which was used to establish the rates is not later found to be materially incomplete or inaccurate by the Federal Government. In such situations the rate(s) would be subject to renegotiation at the discretion of the Federal Government.

B. ACCOUNTING CHANGES:

This Agreement is based on the accounting system purported by the organization to be in effect during the Agreement period. Changes to the method of accounting for costs which affect the amount of reimbursement resulting from the use of this Agreement require prior approval of the authorized representative of the cognizant agency. Such changes include, but are not limited to, changes in the charging of a particular type of cost from facilities and administrative to direct. Failure to obtain approval may result in cost disallowances.

C. FIXED RATES:

If a fixed rate is in this Agreement, it is based on an estimate of the costs for the period covered by the rate. When the actual costs for this period are determined, an adjustment will be made to a rate of a future year(s) to compensate for the difference between the costs used to establish the fixed rate and actual costs.

D. USE BY OTHER FEDERAL AGENCIES:

The rates in this Agreement were approved in accordance with the authority in Title 2 of the Code of Federal Regulations, Part 200 (2 CFR 200), and should be applied to grants, contracts and other agreements covered by 2 CFR 200, subject to any limitations in A above. The organization may provide copies of the Agreement to other Federal Agencies to give them early notification of the Agreement.

E. OTHER:

If any Federal contract, grant or other agreement is reimbursing facilities and administrative costs by a means other than the approved rate(s) in this Agreement, the organization should (1) credit such costs to the affected program, and (2) apply the approved rate(s) to the appropriate base to identify the proper amount of facilities and administrative costs allocable to these programs.

BY THE INSTITUTION:

University of New Hampshire

(INSTITUTION)

(SIGNATURE)

(NAME)

(TITLE)

(DATE)

Jane A. Nisbet

Jane A. Nisbet

Senior Vice Provost for Research

April 7, 2017

ON BEHALF OF THE FEDERAL GOVERNMENT:

DEPARTMENT OF HEALTH AND HUMAN SERVICES

(AGENCY)

Darryl W. Mayes - A

(SIGNATURE)

Darryl W. Mayes

(NAME)

Deputy Director, Cost Allocation Services

(TITLE)

3/23/2017

(DATE) 0572

HHS REPRESENTATIVE:

Jeffrey Warren

Telephone:

(212) 264-2069

Digitally signed by Darryl W. Mayes - A
DN: cn=Darryl W. Mayes - A, o=U.S. Government, ou=HHS, email=Darryl.W.Mayes@hhs.gov, c=US