

Jeffrey A. Meyers Commissioner

Lisa M. Morris Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301 603-271-4501 1-800-852-3345 Ext. 4501 Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

March 12, 2019

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a **sole source** amendment to an existing agreement with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, Vendor #161611-B001, 501 South Street, 2nd Floor, Bow, NH 03304 to provide a broad range of support services across a number of public health programs by increasing the price limitation by \$342,125 from \$1,578,580 to \$1,920,705, effective upon date of Governor and Council approval, with no change to the completion date of June 30, 2019. 81.61% Federal Funds, 12.54% General Funds, and 5.85% Other Funds.

The original contract was approved by the Governor and Executive Council on June 21, 2017 (Item #51), as amended (Amendment #1) and approved by the Governor and Executive Council on February 21, 2018 (Item #8).

Funds are available in the following accounts in State Fiscal Year (SFY) 2018 and 2019, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office without approval from Governor and Executive Council, if needed and justified.

FISCAL DETAILS ATTACHED.

EXPLANATION

This request is **sole source** because the amount of additional funding exceeds ten percent (10%) of the original contract value and because the Department is adding to the current scope of work for the contract period. These additional services are required to effectively implement activities included in the Division's federal funding agreements for the current state fiscal year.

The funding contained in this Contract will pay for implementing a statewide opioid related vulnerability assessment as part of the Department's response to the opioid crisis; facilitate meetings of the Home Visiting Task Force and its workgroups; conduct 10 (ten) jurisdictional risk assessments addressing public health emergencies; procure and distribute additional HIV testing supplies based on an increase in need; distribute funding to support 13 (thirteen) regional

His Excellency, Governor Christopher T. Sununu and the Honorable Council Page 2 of 3

Medical Reserve Corps units and 2 (two) Regional Public Health Networks to regional priorities addressing environmental public health issues; and develop outreach materials to support the Regional Public Health Networks.

The Contractor currently provides a broad range of public health professional support services including, but not limited to developing and implementing risk and needs assessments; training programs; developing educational materials; planning for large statewide conferences as well as smaller meetings and conferences; serving as a fiscal agent for the Department, including entering into subcontracts; providing technical assistance to local partners; and providing subject matter expertise.

The funding provided through this amendment will be used to fund and expand the following support services:

- Opioid Assessment services: The contractor will conduct a statewide HIV and viral hepatitis community vulnerability assessment in order to identify areas of the state that can be targeted for services to prevent the transmission of these infections in people with substance use disorder. This activity is a requirement of federal opioid crisis funding.
- Public Health Emergency Preparedness services: The contractor will conduct Jurisdictional Risk Assessments in collaboration with at least 10 (ten) public health preparedness coordinators from the 13 (thirteen) organizations funded to provide Public Health Network services. These assessments will be used to identify the public health threats of greatest concern in each region and to develop strategies to mitigate them. This activity is a requirement of federal preparedness funding. The contractor will also increase the amount of funding in current subcontracts that support 13 (thirteen) regional Medical Reserve Corps units.
- HIV Prevention services: The contractor will purchase and distribute additional HIV testing supplies to community partners to meet an increase in need due to the opioid epidemic. Early diagnosis and treatment of people infected with HIV helps to prevent further transmission of this virus in the community and improves health outcomes for people living with HIV. In addition, funds will be utilized to bring together community stakeholders to address the goals of the NH HIV Integrated Plan to end HIV in NH and to support targeted media and marketing efforts to promote the prevention of HIV among those at highest risk of acquiring the infection.
- Environmental Public Health Tracking services: The contractor will increase the
 amount of funding in current subcontracts with 2 (two) Regional Public Health
 Networks to develop and distribute training materials related to reducing health
 risks from the environment and utilize these materials during in-person trainings
 and workshops with regional partners.
- Maternal, Infant and Early Childhood Home Visiting Grant Program services: The
 contractor will facilitate and provide logistical support to Home Visiting Task Force
 Meetings and participation in workgroup meetings, such as Data System, Strategic
 Planning, and Communications workgroups; conduct a strategic planning session

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

- of the Parent Advisory Council; and increase the current technical assistance and accreditation support for Home Visiting Programs funded by the Department.
- Prevéntative Health and Services Block Grant programs: The contractor will develop outreach materials to increase the level of awareness of the Regional Public Health Networks.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, the Department may amend the current agreement, 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, the Department will lack the ability to collect and analyze data necessary to conduct jurisdictional risk assessments in accordance with CDC requirements, procure and distribute necessary additional HIV testing supplies, conduct a statewide opioid related vulnerability assessments in accordance with CDC requirements; support an increased level of activity in the 13 (thirteen) Medical Reserve Corps units and 3 (three) Regional Public Health Networks addressing environmental health problems; and support the Home Visiting Task Force and Parent Advisory Council.

Area served: Statewide.

Source of Funds: Funds being added are 81.61% Federal (the Public Health Emergency Preparedness Program, the Hospital Preparedness Program, the Environmental Public Health Tracking Program, the Maternal, Infant and Early Childhood Home Visiting Grant Program, the Preventative Health and Services Block Grant Program, the HIV Integrated Prevention and Surveillance Program, and the Opioid Assessment Program), 12.54% General (the Public Health Emergency Preparedness Program), and 5.85% Other (Pharmaceutical Rebates).

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

Respectfully submitted,

Jeffrey A. Meyers Commissioner

Public Health Professional Support Services Fiscal Details

05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY PREPAREDNESS, 67% Federal, 33% General

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90077410	\$115,000	0	\$115,000
2019	102-500731	Contracts for Prog Svc	90077410	\$115,000	\$130,000	\$245,000
		<u> </u>	Sub Total	\$230,000	\$130,000	\$360,000

05-95-90-902510-2239 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, HOSPITAL PREPAREDNESS, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified \(^\) Amount
2018	102-500731	Contracts for Prog Svc	90077700	\$70,000	0	\$70,000
2019	102-500731	Contracts for Prog Svc	90077700	\$70,000	· 0	\$70,000
			Sub Total	\$140,000	0	\$140,000

05-95-90-902510-5178 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, IMMUNIZATION PROGRAM, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90023320	\$65,000	0	\$65,000
2019	102-500731	Contracts for Prog Svc	90023320	\$65,000	0	\$65,000
-			Sub Total	\$130,000	0	\$130,000

05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PHARMACEUTICAL REBATES, 100% Other

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90024600	\$183,800	0	\$183,800
2019	102-500731	Contracts for Prog Svc	90024600	\$113,800	\$20,000	\$133,800
			Sub Total	\$297,600	\$20,000	\$317,600

05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD PROTECTION 37% General, 63% Other

SFY	Class / Account	Class Title	Job Number	Current/ Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90000022	\$18,000	0	\$18,000
2019	102-500731	Contracts for Prog Svc	90000022	\$18,000	0	\$18,000
	,		Sub Total	\$36,000	0	\$36,000

05-95-90-900510-5173 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFORMATICS, ENVIRONMENTAL PUBLIC HEALTH TRACKING, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90041000	\$50,000	0	\$50,000
2019	102-500731	Contracts for Prog Svc	90041000	\$50,000	\$20,000	\$70,000
			Sub Total	\$100,000	\$20,000	\$120,000

05-95-90-901510-7964 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, LEAD PROTECTION, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90003600	\$36,000	0	\$36,000
	102-500731	Contracts for Prog Svc	90038000	\$50,000	0	\$50,000
•			Sub Total SFY 2018	\$86,000	0	\$86,000
2019	102-500731	Contracts for Prog Svc	90003600	\$9,000	0	\$9,000
	102-500731	Contracts for Prog Svc	90038000	\$40,000	0	\$40,000
			Sub Total SFY 2019	\$49,000	0	\$49,000
		<u> </u>	Sub Total	\$135,000	0	\$135,000

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, ACA HOME VISITING X02 FORMULA GRANT, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90083200	\$221,990	0	\$221,990
2019	102-500731	Contracts for Prog Svc	90083200	\$221,990	\$25,579	\$247,569
			Sub Total	\$443,980	\$25,579	\$469,559

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, MATERNAL - CHILD HEALTH, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90080001	\$24,000	0	\$24,000
2019	102-500731	Contracts for Prog Svc	90080001	\$24,000	0	\$24,000
			Sub Total	\$48,000	0	\$48,000

05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, RADIOLOGICAL EMERGENCY RESPONSE, 100% Other

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90030000	9,000	0	\$9,000_
2019	102-500731	Contracts for Prog Svc	90030000	9,000	0	\$9,000
			Sub Total	\$18,000	\$0	\$18,000

05-95-90-902510-7536 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, STD/HIV PREVENTION, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	9002400	0	0	0
2019	102-500731	Contracts for Prog Svc	9002400	0	\$75,000	\$75,000
			Sub Total	0	\$75,000	\$75,000

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05-95-90-901010-5362 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH SYSTEMS, POLICY, AND PERFORMANCE, 100% Federal

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	9001022	0	0	0
2019	102-500731	Contracts for Prog Svc	9001022	0	\$15,000	\$15,000
			Sub Total	0	\$15,000	\$15,000

05-95-90-902510-7039 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PUBLIC HEALTH CRISIS RESPONSE, 100% Federal

SFY	FY Class / Class Title		Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90703903	Ö	0	0
2019	102-500731	Contracts for Prog Svc	90703903	0	\$56,546	\$56,546
			Sub Total	0	\$56,546	\$56,546
			TOTAL	\$1,578,580	\$342,125	\$1,920,705

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STATE OF NEW HAMPSHIRE

DEPARTMENT OF INFORMATION TECHNOLOGY

27 Hazen Dr., Concord, NH 03301
Fax: 603-271-1516 TDD Access: 1-800-735-2964
www.nh.gov/doit

Denis Goulet Commissioner

March 18, 2019

Jeffrey A. Meyers, Commissioner Department of Health and Human Services State of New Hampshire 29 Hazen Drive Concord, NH 03301

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to amend an existing contract with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, of Bow, NH, as described below and referenced as DoIT No. 2018-029B.

The purpose of this contract amendment is for JSI Research and Training Institute, Inc., to continue to provide a broad range of programmatic support services across a number of public health programs including, but not limited to; developing and implementing a statewide opioid related vulnerability assessment to inform the implementation of prevention and intervention services as part of the Department of Health and Human Services response to the opioid crisis.

The funding amount for this amendment is \$342,125, increasing the current contract from \$1,578,580, to an amount not to exceed \$1,920,705 and is effective upon the date of Governor and Council approval, with no change to the completion date of June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerely,

Denis Goulet

DG/kaf DoIT #2018-029B

cc: Bruce Smith, IT Manager, DoIT



State of New Hampshire Department of Health and Human Services Amendment #2 to the Public Health Professional Support Services

This 2nd Amendment to the Public Health Professional Support Services contract (hereinafter referred to as "Amendment #2") dated this 12th day of October, 2018, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and JSI Research and Training Institute, Inc., d/b/a Community Health Institute, (hereinafter referred to as "the Contractor"), a nonprofit agency with a place of business at 501 South Street, 2nd Floor, Bow, NH 03304.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 21, 2017 (Item #51), and as amended (Amendment #1) approved by the Governor and Executive Council on February 21, 2018 (Item #8), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may modify the scope of work and the payment schedule of the contract by written agreement of the parties;

WHEREAS, the parties agree to increase the price limitation, and

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

- 1. Amend Form P-37, Block 1.6 Account Number, to read 05-95-90-902510-7545, 05-95-90-902510-2239, 05-95-90-902510-5178, 05-95-90-902510-2229, 05-95-90-902510-5390, 05-95-90-900510-5173, 05-95-90-902510-7964, 05-95-90-902010-5896, 05-95-90-902010-5190, 05-95-90-901510-5299, 05-095-090-902510-7536,05-95-90-901010-5362, & 05-95-90-902510-7039.
- Amend Form P-37, Block 1.8, Price Limitation, to read: \$1.920.705.
- Amend Form P-37, Block 1.9, Contracting Officer for State Agency, to read:
 Nathan D. White, Director.
- 4. Amend Form P-37, Block 1.10, State Agency Telephone Number, to read: 603-271-9631.
- 5. Delete Exhibit A, Scope of Services in its entirety, and replace with Exhibit A, Amendment #2, Scope of Services.
- 6. Delete Exhibit B, Method and Conditions Precedent to Payment in its entirety, and replace with Exhibit B, Amendment #2, Method and Conditions Precedent to Payment.
- 7. Delete Budget for Public Health Professional Support Services Public Health Emergency Preparedness, SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services Public Health Emergency Preparedness, SFY 2019 Amendment #2.



- Add Budget for Public Health Professional Support Services HIV Prevention, SFY 2019 Amendment #2.
- Delete Budget for Public Health Professional Support Services Pharmaceutical Rebates SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services – Pharmaceutical Rebates – SFY 2019 Amendment #2.
- Delete Budget for Public Health Professional Support Services EPHT, SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services – EPHT, SFY 2019 Amendment #2.
- 11. Delete Budget for Public Health Professional Support Services Home Visiting, SFY 2019 in its entirety, and replace with Budget for Public Health Professional Support Services Home Visiting, SFY 2019 Amendment #2.
- 12. Add Budget for Public Health Professional Support Services PHHS Block Grant, SFY 2019

 Amendment #2.
- 13. Add Budget for Public Health Professional Support Services Opioid Assessment, SFY 2019
 Amendment #2.



This amendment shall be effective upon the date of Governor and Executive Council approval. IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

	State of New Hampshire
	Department of Health and Human Services
2/119 Date	Name: LISA MORRIS Title: DIRECTOR, DPHS
January 24, 2019 Date	JSI Research and Training Institute, Inc., d/b/a Community Health Institute Name: Jonathan/Stevart Title: Regional Director
Acknowledgement of Contractor's signature	2 :
	on January 24, 2019, before the see person identified directly above, or satisfactorily proven to e, and acknowledged that s/he executed this document in the
Alhara	
Signature of Notary Public or Justice of the	Peace
Debra L'ave, Notary Publi	ic
Name and Title of Notary or Justice of the F	-
My Commission Expires:	L. LOVE, Notary Public on Expires September 5, 2023
·-	



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

OFFICE OF THE ATTORNEY GENERAL

3/21/2019 Date	Name: Nancy S. Smithoney General Title: Seniar Asst. Arboney General
I hereby certify that the foregoing Amendme the State of New Hampshire at the Meeting	nt was approved by the Governor and Executive Council o on: (date of meeting)
,	OFFICE OF THE SECRETARY OF STATE
Date	Name: Title:

Scope of Services

1. Provisions Applicable to All Services

- 1.1. The Contractor will 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.
- 1.3. Notwithstanding any other provision of the Contract to the contrary, no services shall continue after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30,2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennia.

2. Scope of Services

The Contractor shall:

- 2.1. Provide a broad range of public health professional support services including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS) contractors.
- 2.2. Increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens and ensure successful outcomes across this range of services and program areas that include: transparent and informed community planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among DPHS contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.
- 2.3. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 2.3.1. In consultation with DPHS subject matter experts, provide logistical support for ongoing committees/planning groups as defined in Attachment F.
- 2.4. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.4.1. Provide logistical support to the New England Lead Coordinating Committee (NELCC). This includes up to 12 regular meetings of the full NELCC and up to 2 of committee/ workgroup meetings per year. Information about the NELCC is available at: http://www.newenglandlead.org/.



- 2.5. Environmental Public Health Tracking
 - 2.5.1. Provide logistical support to host up to 10 meetings with Regional Public Health Networks to gather feedback on the EPHT Data Portal.
 - 2.5.2. Provide logistical support for up to 5 focus groups to conduct user research of EPHT data and projects.
- 2.6. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.6.1. Provide logistical support to the NH HIV Planning Group (HPG). This includes up to 6 regular meetings of the full HPG and up to 30 of committee/workgroup meetings per year. More information about the HIV HPG is available at: nhhiv.org.
- 2.7. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.7.1. Provide logistical support to quarterly conference calls for three, peer-based caucuses. The caucuses will be role based (e.g. supervisors, home visitors, and quality improvement staff).
 - 2.7.2. Provide logistical support for the Home Visiting Task Force, formerly known as the Home Visiting Coordinating Council at least quarterly. This group serves as the MIECHV Advisory Group and is made up of collaborating partners and others in the state with an interest and background in home visiting.
 - 2.7.3. Participate in Data Systems; Strategic Planning; and Communications workgroup meetings.
- 2.8. Develop and Implement Training Programs
 - 2.8.1. In consultation with DPHS subject matter experts, develop and/or implement training programs based on adult learning theories that use various training modalities (i.e. classroom, web-based, training of trainers, etc.) to maximize the reach of these programs.
 - 2.8.1.1. Food Protection Section (FPS):
 - 2.8.1.1.1. In consultation with Food Protection Staff develop training curricula for three discrete audiences:
 - 2.8.1.1.1.1. DPHS FPS staff and Food Service Establishment (FSE) inspectors in municipalities that regulate FSE. A list of these municipalities is available at: http://www.dhhs.nh.gov/dphs/fp/documents/selfinspect.pdf
 - 2.8.1.1.1.2. Staff from state agencies that conduct food safety inspections as one component of a more comprehensive operational inspection. This includes Department of Environmental Services Youth Camp inspection staff, DHHS Health Facilities Licensing staff (which inspects child care centers, nursing homes and assisted living facilities).

Contractor Initials 1/24/19



- 2.8.1.1.1.3. Food Service Workers including, but not limited to workers in restaurants, retail food stores, schools, and caterers.
- 2.8.1.2. Public Health Emergency Preparedness:
 - 2.8.1.2.1. Develop and implement training programs for two discrete audiences:
 - 2.8.1.2.1.1. RPHN emergency preparedness coordinators
 - 2.8.1.2.1.2. Local municipal officials, healthcare preparedness personnel, volunteers and others engaged in regional PHEP planning and response.
- 2.8.1.3. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.8.1.3.1. Plan and implement the 1-day Renovation, Repair and Painting Training programs in New Hampshire's highest risk communities using the US Environmental Protection Agency curriculum.
- 2.8.1.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.8.1.4.1. In consultation with MIECHV/MCH staff, facilitate a training needs assessment for the 11 MIECHV contracted home visiting sites.
 - 2.8.1.4.2. Develop and implement an annual training plan (which will include site specific training plans), including evaluation, from the information garnered from the training needs assessment. At a minimum, ten (10) training accessible opportunities should be offered per MIECHV funded home visiting site per year. An opportunity is defined as a pre-existing training, which the contractor pays home visiting staff to attend (can be out of state) and trainings which are provided by the contractor. These can be offered electronically (webinars, etc.) or in-person.
- 2.9. Provide Logistical Support for Conferences
 - 2.9.1. In consultation with DPHS subject matter experts, provide logistical support for conferences as defined by the DPHS in the original Request for Proposal.
 - 2.9.1.1. Healthy Homes and Lead Poisoning Prevention Program
 - 2.9.1.1.1. Provide logistical and planning support for the NELCC's annual conference for up to 300 attendees. Provide logistical and planning support for four regional dinner meetings for up to 120 attendees each.
 - 2.9.1.2. Immunization Program
 - 2.9.1.2.1. Provide logistical support for the annual Immunization Conference for approximately 400 attendees.
 - 2.9.1.3. Public Health Emergency Preparedness
 - 2.9.1.3.1. Provide logistical and planning support for the annual NH Statewide Preparedness conference for up to 800 attendees.
 - 2.9.1.4. Infectious Disease Prevention, Investigation & Care Services Section

Contractor Initials

Date 1/24/19



- 2.9.1.4.1. Provide logistical and planning support for the bi-annual NH STD, HIV, Hepatitis, TB conference for up to 250 attendees. Planning support includes provision of continuing education credits.
- 2.9.1.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section
 - 2.9.1.5.1. Provide logistical and planning support, including evaluation, to semi-annual conferences-learning exchanges (fall and spring) for up to 55 staff at MIECHV contracted sites. The spring 2018 training will focus on Healthy Families America required content training for continued certification. The fall training 2018 will be based on findings from the needs assessment.
 - 2.9.1.5.2. Provide logistical and planning support for at least two half or full day inperson statewide and/or regional trainings.
- 2.10. Provide Technical Assistance
 - 2.10.1. Public Health Emergency Preparedness
 - 2.10.1.1. In consultation with DPHS subject matter experts, provide technical assistance to three discrete groups directed toward their meeting the national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (March 2011) and subsequent editions:
 - 2.10.1.1.1 DPHS/Emergency Services Unit (ESU) preparedness staff
 - 2.10.1.1.2. Public health preparedness coordinators at the 13 organizations funded by DPHS to provide Regional Public Health Network services. TA will be available to both individuals and as a group.
 - 2.10.1.1.3. Medical Reserve Corps units recognized by the registered with the U.S. Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps, to support recruitment, training and deployment of the MRC volunteers.
 - 2.10.1.2. Conduct Jurisdictional Risk Assessments in accordance with CDC requirements in collaboration with at least ten (10) public health preparedness coordinators from the thirteen (13) organizations funded to provide Public Health Network services.
 - 2.10.1.3. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.3.1. In consultation with DPHS subject matter experts, identify and coordinate the availability of technical assistance providers to DPHS contractors and service provider agencies.
 - 2.10.1.4. Develop and produce educational materials
 - 2.10.1.4.1 In consultation with DPHS subject matter experts, develop and/or produce educational materials on topics determined by DPHS staff. All materials shall be developed in accordance with CDC recommendations contained in Simply Put: Guide to Developing Easy-To-Understand Materials, CDC July 2010, available at: https://www.cdc.gov/healthliteracy/pdf/Simply_Put.pdf
 - 2.10.1.5. Environmental Public Health Tracking Program (EPHT)
 - 2.10.1.5.1. Develop educational materials targeted to public health professionals, emergency preparedness officials, and local partners to increase knowledge and understanding of the EPHT program at the state and local levels.

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- 2.10.1.6. Healthy Homes and Lead Poisoning Prevention Program (HHLPPP)
 - 2.10.1.6.1. Develop educational materials in collaboration with the HHLPPP to target to clinicians, contractors, and families to increase knowledge and understanding of best practices relative to Screening and Management Guidelines, lead-safe work practices, and keeping children safe from lead hazards.
- 2.10.1.7. Immunization Program
 - 2.10.1.7.1. Develop educational materials targeted towards increasing awareness related to the Immunization Information System (IIS).
 - 2.10.1.7.2. Develop educational materials targeted towards increasing awareness related to the benefits of immunizations across the lifespan.
- 2.10.1.8. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.8.1. In consultation with DPHS, maintain and update the NH HIV Planning Group (HPG) website.
- 2.10.1.9. Community Health Development Section
 - 2.10.1.9.1. Develop educational materials to increase awareness of regional Public Health Advisory Councils.
- 2.10.1.10. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section
 - 2.10.1.10.1. Provide Continuous Quality Improvement technical assistance through site visits and phone consultations to support local implementing agencies funded by DPHS that seek accreditation from the Health Families America accreditation board.
- 2.10.2. Develop and Implement Evaluation Plans
 - 2.10.2.1. In consultation with DPHS subject matter experts, develop evaluation plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
 - 2.10.2.2. Environmental Public Health Tracking Program
 - 2.10.2.2.1. Develop and implement a plan to evaluate ongoing EPHT projects that meets criteria outlined by CDC and fulfills federal requirements. This document will facilitate programming planning, implementation, and evaluation.
 - 2.10.2.2.2 Develop and implement a plan to evaluate previously funded HHLPPP projects that addressed dissemination techniques and understanding of the 2015 Lead Surveillance Report and the Childhood Lead Screening and Management Guidelines.
 - 2.10.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.2.3.1. Implement current MIECHV Continuous Quality Improvement Plan
 - 2.10.2.3.2. Participate in updating the MIECHV Continuous Quality Improvement Plan.
- 2.10.3. Update Strategic Plans

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- 2.10.3.1. In consultation with DPHS subject matter experts, update pre-existing strategic plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
- 2.10.3.2. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.3.2.1. Update the 2010 MIECHV Strategic State Plan.
- 2.11. Serve as a Fiscal Agent
 - 2.11.1. As directed by DPHS staff, serve as fiscal agent to maximize the efficient use of resources as follows:
 - 2.11.2. Environmental Public Health Tracking Program
 - 2.11.2.1. Enter into up to 3 mini-grants with vendors funded by DPHS to provide Regional Public Health Networks services. A list of currently funded vendors is available at: http://www.dhhs.nh.gov/dphs/rphn/index.htm.
 - 2.11.2.2. Subcontract with mini-grant recipients funded by DPHS to provide Regional Public Health Networks services in order to increase the amount of funds and amend work plans.
 - 2.11.3. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.11.3.1. Reimburse costs incurred by approximately 5 public members of the HPG to attend out-of-state conferences identified by the DPHS and mileage costs to attend in-state meetings. The purpose is to increase the knowledge and skills of the public members of the HPG.
 - 2.11.3.2. Procure prevention supplies as determined by the IDPICSS to an additional six(6) clinics funded by the IDPICSS to provide testing and treatment for sexually transmitted infections and human immunodeficiency virus.
 - 2.11.3.3. Execute a subcontract with a vendor identified by the DPHS to provide consultation and technical assistance on the production of a digital storytelling project, including coordination, development and implementation of a digital storytelling workshop; production of a digital storytelling electronic file for up to eight stories and training of participants in conducting an engagement session with stakeholders.
 - 2.11.4. Public Health Emergency Preparedness
 - 2.11.4.1. Execute a subcontract with a vendor identified by the DPHS to procure E-Studio, a web-based collaboration system currently in use at DPHS.
 - 2.11.4.2. Subcontract with 13 Medical Reserve Corps units to build capacity to staff emergency response facilities during public health emergencies.
 - 2.11.4.3. Enter into subcontracts with up to 4 individuals identified by the DPHS to participate in radiological emergency planning, training and exercises to build staffing capacity to respond to radiological emergencies.
 - 2.11.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):



- 2.11.5.1. Support at least two MIECHV funded home visiting agency staff selected by the DHHS to attend the annual MIECHV grantee conference.
- 2.11.5.2. Execute a subcontract with a vendor identified by the DPHS to research and identify methods to increase utilization of postpartum visits by home visiting families.
- 2.12. HIV and Hepatitis Community Vulnerability Assessments-
 - 2.12.1. The Contractor shall design methodology, including but not limited to:
 - 2.12.1.1. Working with the Department's Bureau of Infectious Disease Control (BICD) to organize and engage a stakeholder group (Stakeholder Group) to provide input on the vulnerability assessment design, methods, expected output and outcomes;
 - 2.12.1.2. Review current literature describing similar Vulnerability Assessments to inform the study design;
 - 2.12.1.3. Work with the BICD to coordinate technical assistance potentially available from the Center for Disease Control and Prevention for study design and interpretation of results:
 - 2.12.2. The Contractor shall assemble data, including but not limited to:
 - 2.12.2.1. Working with the BICD to develop data use agreements, as applicable, to obtain data for the assessment to include data on:
 - 2.12.2.1.1. Overdose mortality and morbidity;
 - 2.12.2.1.2. Emergency medical service and emergency department utilization;
 - 2.12.2.1.3. Incidence of bloodborne infections associated with non-sterile drug injection;
 - 2.12.2.2. Obtaining other relevant data for the Vulnerability Assessment to include:
 - 2.12.2.2.1. Demographic data, Medication Assisted Treatment capacity;
 - 2.12.2.2.2. Other substance-use related treatment capacity;
 - 2.12.2.2.3. Controlled drug prescription rates; and
 - 2.12.2.2.4. Public safety data;
 - 2.12.2.3. With geographical context, to the extent such data is available, sufficient to conduct analyses to facilitate resource targeting;
 - 2.12.2.4. Any work performed by the Contractor as part of these initiatives shall comply with all state rules, and state and federal laws as required to safeguard the confidentiality of the information, and to comply with 42 CFR part 2 as applicable.
 - 2.12.3. The Contractor shall conduct analyses for the Vulnerability Assessment, including but not limited to:

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- 2.12.3.1. Completing statistical analyses following design and modeling procedures as defined in collaboration with the Stakeholder Group
- 2.12.3.2. Work with the BICD and the Stakeholder Group to review interim findings;
- 2.12.3.3. Refine the analysis as necessary and possible with additional data, methodological variations or innovations;
- 2.12.3.4. Complete the analysis for different sub-geographies of the state as determined in conjunction with BICD and the Stakeholder Group.
- 2.12.4. The Contractor shall disseminate and apply findings of the Vulnerability Assessment by use of the following methods:
 - 2.12.4.1. Produce jurisdictional maps identifying high-risk areas identified through the assessment process;
 - 2.12.4.2. Distribute findings to key stakeholders in formats that support action;
 - 2.12.4.3. Presenting at public health and healthcare provider meetings;
 - 2.12.4.4. Creating fact sheets or report cards for geographic sub-regions of New Hampshire;
 - 2.12.4.5. Publishing findings in professional journals;
 - 2.12.4.6. Use the findings from the assessment to assist the Department in the development of plans that strategically allocate prevention and intervention services.

3. Staffing

The Contractor shall:

- 3.1. Provide sufficient staff to perform all tasks specified in this Contract and shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion to meet the scope of work
- 3.2. Ensure staffing structure includes a contract administrator to administer all scopes of work relative to this Contract, as well as progress and finance reporting.
- 3.3. Ensure that across all funded positions, in addition to subject matter expertise, there is a combined level of expertise, skills and ability to understand data; use data for planning and evaluation; community engagement and collaboration; group facilitation skills; and IT skills in order to function as a team, ideally with complementary skill and abilities across these foundational areas of expertise and abilities.
- 3.4. Ensure that policies and procedures consistent with state and federal laws are in place to adequately and appropriately train staff to safeguard any individual confidential information or protected health information that they may have access to while performing their duties for the Contractor.

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3.5. Ensure that personnel are available during normal business hours, at a minimum Monday through Friday, 8:00 A.M. to 4:00 P.M.

4. Outcomes / Performance Measures

- 4.1. The Contractor shall ensure that following performance outcomes and measures are annually achieved and monitored monthly to measure the effectiveness of the agreement:
- 4.2. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 4.2.1. Environmental Public Health Tracking
 - 4.2.1.1. At least 85% of participants rate the Feedback Sessions as either "excellent" or "very good" in an evaluation survey.
 - 4.2.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.2.2.1. At least 85% of participants rate the regular NELCC meetings as either "excellent" or "very good" in an evaluation survey.
 - 4.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.2.3.1. At least 85% of participants rate the quarterly caucus phone meetings as either "excellent" or "very good" in an evaluation survey.
 - 4.2.3.2. At least 85% of participants rate the quarterly Home Visiting Task Force, formerly known as the Home Visiting Coordinating Council, meetings as either "excellent" or "very good" in an evaluation survey.
- 4.3. Develop and Implement Training Programs
 - 4.3.1. Food Protection Section
 - 4.3.1.1. The training modules are approved rand rated by the DHHS as either "excellent" or "very good"
 - 4.3.1.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.2. Public Health Emergency Preparedness
 - 4.3.2.1. The training modules are rated as either "excellent" or "very good" by DPHS.
 - 4.3.2.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.3. Healthy Homes and Lead Poisoning Prevention Program
 - 4.3.3.1. The training module is rated as either "excellent" or "very good" by DPHS.
 - 4.3.3.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.3.4.1. Needs assessment and training plan (overall and site specific) approved by DPHS.

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- 4.3.4.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey. At least 85% of participants in the Parent Advisory Council trainings rate the training programs as either "excellent" or "very good" in an evaluation survey.
- 4.4. Provide Logistical Support for Conferences
 - 4.4.1. Healthy Homes and Lead Poisoning Prevention Program
 - 4.4.1.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.1.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2. Immunization Program
 - 4.4.2.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3. Public Health Emergency Preparedness
 - 4.4.3.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.4.4.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.4.5.1. At least 85% of learning exchange participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
- 4.5. Provide Technical Assistance
 - 4.5.1. Public Health Emergency Preparedness
 - 4.5.1.1. At least 90% of high-priority technical assistance requests made are met.
 - 4.5.1.2. Publish 10 Jurisdictional Risk Assessment reports.
 - 4.5.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.5.3.
 - 4.5.3.1. At least 90% of high-priority technical assistance requests made are met.
- 4.6. Develop and produce educational materials
 - 4.6.1. Environmental Public Health Tracking Program

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- 4.6.1.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.6.2.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.3. Immunization Program
 - 4.6.3.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.4. Infectious Disease Prevention, Investigation & Care Services Section
 - Approval by the Division of Public Health Services of the content and functionality of the HPG website.
- Develop and Implement Evaluation Plans
 - 4.7.1. Environmental Public Health Tracking Program
 - Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.2. Healthy Homes and Lead Poisoning Prevention Program
 - Approval by the Division of Public Health Services of developed evaluation plan. 4.7.2.1.
 - 4.7.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.7.3.1. Implementation of at least 90% of the current MIECHV Continuous Quality Improvement Plan.
 - 4.7.3.2. Participate in at least 80% of the Continuous Quality Improvement planning meetings.
- 4.8. **Update Strategic Plans**
 - 4.8.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.8.1.1. Approval by the Division of Public Health Services of updated MIECHV Strategic State Plan.
 - 4.8.1.2. At least 85% of participants rate the Home Visiting Task Force strategic planning session as either "excellent" or "very good" in an evaluation survey.
- 4.9 Serve as a Fiscal Agent
 - 4.9.1. Environmental Public Health Tracking Program
 - Subcontracts with RPHNs executed as directed by DPHS.
 - 4.9.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.9.2.1. Target: 95% of HIV and HCV testing and prevention supplies distributed to sites are logged on the appropriate distribution log within one week of distribution.
 - 4.9.2.2. Numerator- The number of HIV and HCV testing and prevention supply distributions listed on the distribution log that were logged within one week of the distribution date.

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- 4.9.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.9.3.1. Subcontract for increase in postpartum visit project executed as directed by DPHS.
- 4.9.4. Public Health Emergency Preparedness
 - Subcontracts with Medical Reserve Corps executed as directed by DPHS/ESU.
 - Subcontract for web-based collaboration system executed as directed by DPHS. 4.9.4.2.
 - 4.9.4.3. Subcontracts with up to four individuals executed as directed by DPHS.
- 4.10. Annually, the Contractor shall develop and submit to the DHHS, a corrective action plan for any performance measure that was not achieved.

5. State and Federal Laws

The Contractor shall:

- 5.1. Be responsible for compliance with all relevant state and federal laws. Special attention is called to the following statutory responsibilities:
- 5.2. Publications funded under this contract shall be responsible to adhere to the requirements in Exhibit C Special Provisions, Paragraph 14. Prior Approval and Copyright Ownership.
- 5.3. The Contractor shall ensure equal access to quality health services and provide culturally and linguistically appropriate services and adhere to the requirements in Exhibit C Special Provisions, Paragraph 16. Limited English Proficiency (LEP).
- 5.4. DHHS recognizes that Contractors may choose to use subcontractors with specific expertise to perform certain services or functions for efficiency or convenience. However, the Contractor shall retain the responsibility and accountability for the function(s) for any services required by this Contract that are provided, in whole or in part, by a subcontracted agency or provider, and adhere to the requirements in Exhibit C Special Provisions, Paragraph 19. Subcontractors of this Contract.
- 5.5. Adhere to the Health Insurance Portability and Accountability Act requirements to maintain the confidentiality of protected health information provided by individuals who contact the poison control center in Exhibit I Health Insurance Portability Act Business Associate and any applicable state rule or other state or federal law.
- 5.6. The Contractor shall ensure that following performance indicators are annually achieved and monitored monthly to measure the effectiveness of the agreement:

Contractor Initials



Method and Conditions Precedent to Payment

- 1) The State shall pay the contractor an amount not to exceed the Form P-37, Block 1.8, Price Limitation for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
 - 1.1. This contract is funded with Funds from:
 - 1.1.1. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA) # 93.069, Federal Award Identification Number (FAIN) # U90TP000535,
 - 1.1.2. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA) # 93.889, Federal Award Identification Number (FAIN) # U90TP000535,
 - 1.1.3. US Centers for Disease Control and Prevention, 2013 Cooperative Agreement Application for the Immunization, Vaccine for Children, Catalog of Federal Domestic Assistance (CFDA) # 93.539, Federal Award Identification Number (FAIN) # 23IP000757,
 - 1.1.4. US Centers for Disease Control and Prevention, Environmental Public Health Tracking Program -Network Implementation, Catalog of Federal Domestic Assistance (CFDA) # 93.070, Federal Award Identification Number (FAIN) # NU38EH000947,
 - 1.1.5. US Centers for Disease Control and Prevention, NH Reduced Lead Poisoning of Children, Catalog of Federal Domestic Assistance (CFDA) # 93.753, Federal Award Identification Number (FAIN) # NUE1EH001271.
 - 1.1.6. US Environmental Protection Agency, Lead 404(g) Training and Certification, Catalog of Federal Domestic Assistance (CFDA) # 66.707, Federal Award Identification Number (FAIN) # 99151215.
 - 1.1.7. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA) # 93.870, Federal Award Identification Number (FAIN) # X10MC29490.
 - 1.1.8. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA) # 93.994, Federal Award Identification Number (FAIN) # BO4MC30627.
 - 1.1.9. US Centers for Disease Control and Prevention, Preventative Health and Health Services Block Grant, Catalog of Federal Domestic Assistance (CFDA) # 93.758, Federal Award Identification Number (FAIN) # NB01OT009141.
 - 1.1.10. Health and Social Services, Department of Health and Human Services, HHS: Division of Public Health, Bureau of Infectious Disease Control, Public Health Crisis Response, Catalog of Federal Domestic Assistance (CFDA) # 93.354, Federal Award Identification Number (FAIN) #U90TP921693.
 - 1.1.11. US Centers for Disease Control and Prevention, PS 18-1802 HIV Integrated Prevention and Surveillance Programs, Catalog of Federal Domestic Assistance (CFDA) #93.940, Federal Award Identification (FAIN) # U62PS9244538.
 - 1.1.12. Other Funds from Pharmaceutical Rebates, Food Protection Fees and Radiological Health Fees
 - 1.1.13. General Funds.
 - 1.2. The Contractor agrees to provide the services in Exhibit A, Amendment #2, Scope of Service in compliance with funding requirements. Failure to meet the scope of services may jeopardize the funded contractor's current and/or future funding.

Contractor Initials

Date 1/24/19



Exhibit B, Amendment #2

- 2) Payment for said services shall be made monthly as follows:
 - 2.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items.
 - 2.2. The Contractor will submit an invoice in a form satisfactory to the State by the twentieth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The invoice must be completed, signed, dated and returned to the Department in order to initiate payment. The Contractor agrees to keep records of their activities related to Department programs and services.
 - 2.3. 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. Contractors will keep detailed records of their activities related to DHHS-funded programs and services.
 - 2.4. The final invoice shall be due to the State no later than forty (40) days after the contract Form P-37, Block 1.7 Completion Date.
 - 2.5. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to DPHScontractbilling@dhhs.nh.gov, or invoices may be mailed to:

Financial Administrator
Department of Health and Human Services
Division of Public Health Services
29 Hazen Drive
Concord, NH 03301

- 2.6. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A, Scope of Services and in this Exhibit B.
- 3) Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

Contractor Initials

Date 1/24/19

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

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support Services - Public Health Emergency

Budget Request for: <u>Preparedness</u>

(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

THE PART CONTRACT OF THE PART	1	Direct (12)	1	Indirect 🧓	2, 3		Allocation Method for			
Line Item	i	ncremental	ه ون ر	Fixed			Indirect/Fixed Cost			
Total Salary/Wages	\$	47,297.30			\$	47,297.30				
Employee Benefits	\$	17,972.97			\$	17,972.97	Negotiated Indirect Cost			
3. Consultants					\$	-	Rate Agreement (NICRA)			
4. Equipment: (includes Rentals,							for JSI Research and			
Repair & Maintenance, Purchase &			ľ		l		Training Institute, Inc. includes fringe benefits			
Depreciation)	\$	1,418.92			\$	1,418.92	. (38% of salary) and other			
Supplies: (includes supplies for							general operating costs to			
Education, Lab, Pharmacy, Medical,			l				support project activities			
Office)	\$	3,310.81			\$	3,310.81	including occupancy,			
6. Travel					\$	•	equipment, general office			
7. Occupancy	69	4,729.73			\$	4,729.73	supplies,			
Current Expenses (includes							telecommunications and			
Telephone, Postage, Subscriptions,					l		other current expenses, information systems,			
Audit & Legal, Insurance, Board					l		accounting and payroll,			
Expenses)	\$	3,783.78			\$	3,783.78	human resources and staff			
9. Software					\$	-	development, and general			
10. Marketing/Communications					\$	-	administrative support			
 Staff Education and Training 	\$	945.95			\$	945.95	costs. The approved			
12. Subcontracts/Agreements					\$	•	basis for application of the			
Other (specific details mandatory):					\$	•	NICRA is on			
Medical Reserve Corps Mini-Grants	_	30,000.00			\$	30,000.00	salary/wages only			
Meeting & Training Supplies	\$	12,500.00				12,500.00	including holiday, sick and vacation.			
Information Systems			\$\$	2,601.35	\$	2,601.35	vacation.			
HR			\$	1,418.92	\$	1,418.92				
Gen Admin			69	1,418.92	\$	1,418.92				
Payroll and Accounting			\$\$	2,601.35	\$\$	2,601.35	-			
					\$		•			
TOTAL	\$	121,959.46	\$	8,040.54	\$1	30,000.00				
Indirect As A Percent of Direct 6.6%										

Contractor Initials: Date: 1/24/19

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JSI Research & Training Institute, inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - HIV Prevention

(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

STATE OF THE STATE	_	Direct	Indirect		Total	Allocation Method for
Line Item		cremental	Fixed			
Total Salary/Wages	\$	9,730.00		\$	9,730.00	The lederally approved
2. Employee Benefits	\$	3,697.40		\$	3,697.40	Negotiated Indirect Cost
3. Consultants				\$	<u>•</u> _	Rate Agreement (NICRA)
Equipment: (includes Rentals, Repair &						for JSI Research and Training Institute, Inc.
Maintenance, Purchase & Depreciation)	\$	291.90		\$	291.90	includes fringe benefits
Supplies: (includes supplies for Education, Lab,						(38% of salary) and other
Pharmacy, Medical, Office)	\$	681.10		\$	681.10	general operating costs to
6. Travel	\$			\$	•	support project activities
7. Occupancy	5 3	973.00		\$	973.00	including occupancy.
Current Expenses (includes Telephone, Postage,						equipment, general office
Subscriptions, Audit & Legal, Insurance, Board						supplies,
Expenses)	\$	778.40		\$	778.40	telecommunications and
9. Software				\$	•	other current expenses,
10. Marketing/Communications				64	-	information systems,
11. Staff Education and Training	4	194.60		\$	194.60	accounting and payroll,
12. Subcontracts/Agreements				\$	-	human resources and staff
 Other (specific details mandatory): 				\$	•	development, and general
HPG Member Reimbursements				\$	•	administrative support costs. The approved
Conference Support			4 1	\$	-	- basis for application of the
Prevention Supplies	\$	13,000.00	-	\$	13,000.00	NICRA is ол
Meeting Expenses	\$	25,440.00		69	25,440.00	salary/wages only
Website Maintenance				\$	-	including holiday, sick and
Subscription Services				\$	-	vacation.
Other Professional Support Services				\$	•	
Special Projects	\$	18,559.50		\$	18,559.50	•
Information Systems			\$535.15	\$	535.15	-
HR			\$291.90	\$	291.90	•
Gen Admin			\$291.90	\$	291.90	•
Payroll and Accounting			\$535.15	\$	535.15	•
	\$		\$ -	\$	-	_
TOTAL	\$	73,345.90	\$ 1,654.10	\$	75,000.00	
Indirect As A Percent of Direct		-	2.3%			

Contractor Initials:

Page 1 of 1

Date: _1/24/19

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Pharmaceutical Rebates (Name of RFP)

Budget Period: SFY 2019 | Amendment #2

建筑大学校、经济设施、经营营业社会	713	Direct	<u> </u>	direct	₹,,	Total	Allocation Method for
Line Item	⊟ln	icremental 🖺	F	ixed -		3 -	Indirect/Fixed Cost
Total Salary/Wages					\$	-	The federally approved
2. Employee Benefits					\$	-	Negotiated Indirect Cost
3. Consultants					\$		Rate Agreement (NICRA)
Equipment: (includes Rentals, Repair &					Γ		for JSI Research and
Maintenance, Purchase & Depreciation)			L		\$		Training Institute, Inc.
Supplies: (includes supplies for Education, Lab,			\Box		Γ		 includes tringe benefits (38% of salary) and other
Pharmacy, Medical, Office)	L		1		\$	-	(38% of salary) and other general operating costs to
6. Travel					\$	_ •	 general operating costs to support project activities
7. Occupancy					\$		_ including occupancy,
8. Current Expenses (includes Telephone, Postage,	Γ_	-			Γ		equipment, general office
Subscriptions, Audit & Legal, Insurance, Board		1	(supplies,
Expenses)	L		L		\$		telecommunications and
9. Software					\$	·	other current expenses,
10. Marketing/Communications					\$		information systems,
11. Staff Education and Training					\$	·	accounting and payroll,
12. Subcontracts/Agreements					\$		human resources and state
13. Other (specific details mandatory):					\$		 development, and genera administrative support
HPG Member Reimbursements					\$		 administrative support costs. The approved
Conference Support					\$		 costs. The approved basis for application of the
Prevention Supplies	\$	10,000.00			\$	10,000.00	NICRA is on
Meeting Expenses					\$	·	salary/wages only
Website Maintenance					\$	-	including holiday, sick and
Subscription Services					\$	-	vacation.
Other Professional Support Services					\$	-	-
Special Projects	\$	10,000.00			\$	10,000.00	-
Information Systems					\$	-	-
HR			\Box		\$	-	-
Gen Admin					\$		-
Payroll and Accounting					\$		-
	\$		\$		\$		-
TOTAL	\$	20,000.00	\$	•		20,000.00	Ţ
Indirect As A Percent of Direct	<u> </u>		<u> </u>	0.0%	_		

Contractor Initials:

Date: 1/24/19

Page 1 of 1

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - EPHT

(Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line Item	•	Direct	Indirect	; ;	.∤Total	Allocation Method for
	<u>.</u> IU	cremental	Fixed		• • ÷ · · · · · · · · · · · · · · · · ·	Indirect/Fixed Cost
Total Salary/Wages				\$	 	The federally approved
2. Employee Benefits				\$	•	Negotiated Indirect Cost
3. Consultants				\$		Rate Agreement (NICRA)
Equipment: (includes Rentals, Repair &			•	l		for JSI Research and
Maintenance, Purchase & Depreciation)				\$	-	Training Institute, Inc. includes tringe benefits
Supplies: (includes supplies for Education, Lab,				l		(38% of salary) and other
Pharmacy, Medical, Office)				\$.	general operating costs to
6. Travel				\$	•	support project activities
7. Occupancy				\$		including occupancy,
8. Current Expenses (includes Telephone, Postage,						equipment, general office
Subscriptions, Audit & Legal, Insurance, Board						supplies,
Expenses)	L			\$	-	telecommunications and
9. Software				\$		other current expenses,
10. Marketing/Communications				\$	-	information systems,
11. Staff Education and Training				\$	•	 accounting and payroll, human resources and staff
12. Subcontracts/Agreements	\$	20,000.00		\$	20,000.00	- numan resources and stati - development, and general
13. Other (specific details mandatory):				\$	-	administrative support
Materials Production				\$	-	costs. The approved
Information Systems				\$		basis for application of the
HR			-	\$	-	NICRA is on
Gen Admin				\$		salary/wages only
Payroll and Accounting				\$	-	including holiday, sick and
				\$		vacation.
				\$	•	-
TOTAL				\$	20,000.00	<u>, </u>

Page 1 of 1

Indirect As A Percent of Direct

#DIV/01

Contractor Initials:

Date: 1/24/19

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Home Visiting (Name of RFP)

Budget Period: SFY 2019 | Amendment #2

Line Item		Direct	إلهام	ndirect		Total 5	Allocation Method for:
Line Item	lr	<u>icremental</u>	!;	Fixed	<u>ز</u> ر. د		ান Indirect/Fixed Cost
Total Salary/Wages	\$	13,826.50			\$	13,826.50	The federally approved
2. Employee Benefits	\$	5,254.06			\$	5,254.06	Negotiated Indirect Cost
3. Consultants					\$	-	Rate Agreement (NICRA)
4. Equipment: (includes Rentals, Repair & Maintenance,	I						for JSI Research and
Purchase & Depreciation)	\$	414.79			\$	414.79	Training Institute, Inc includes fringe benefits
5. Supplies: (includes supplies for Education, Lab,					[•	(38% of salary) and other
Pharmacy, Medical, Office)	\$	967.85			\$	967.85	general operating costs to
6. Travel					\$	-	_ support project activities
7. Occupancy	\$	1,382.65			\$	1,382.65	including occupancy,
Current Expenses (includes Telephone, Postage,							equipment, general office
Subscriptions, Audit & Legal, Insurance, Board	ŀ						supplies,
Expenses)	\$	1,106.12			\$	1,106.12	telecommunications and
9. Software					\$	-	other current expenses,
10. Marketing/Communications					\$	-	information systems,
11. Staff Education and Training	\$	276.53		- 1	\$	276.53	accounting and payroll,
12. Subcontracts/Agreements					\$	_	human resources and staff development, and general
13. Other (specific details mandatory):					\$	-	- administrative support
Learning Exchanges					\$		costs. The approved
Scholarships '					49	÷	basis for application of the
HFA Training & Supports					69	-	NICRA is on
Information Systems			\$	760.46	65	760.46	salary/wages only
HR			\$	414.79	\$	414.79	including holiday, sick and
Gen Admin			\$	414.79	\$	414.79	vacation.
Payroll and Accounting			\$	760.46	\$	760.46	-
TOTAL	\$	23,228.50	\$:	2,350.50	\$	25,579.00	L

Page 1 of 1

Indirect As A Percent of Direct

10.1%

Contractor Initials:

Date: 1/24/19

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - PHHS Block Grant (Name of RFP)

Budget Period: SFY 2019 | Amendment #2

TO KIND OF THE WINDS OF THE PROPERTY OF THE PARTY OF THE		Direct b	ી	ndirect		Total 🐪	Allocation Method for
Line Item	- In	cremental	u	Fixed	++		Indirect/Fixed Cost
1. Total Salary/Wages	\$	5,945.95	\$ -		\$	5,945.95	The federally approved
2. Employee Benefits	\$	2,259.45	\$		SŞ.	2,259.45	Negotiated Indirect Cost
3. Consultants			\$				Rate Agreement (NICRA) for JSI Research and
4. Equipment: (includes Rentals, Repair & Maintenance,							Training Institute, Inc.
Purchase & Depreciation)	\$	178.38	\$ -		\$	178.38	includes fringe benefits
Supplies: (includes supplies for Education, Lab,							(38% of salary) and other
Pharmacy, Medical, Office)	\$	416.22	\$		\$	416.22	general operating costs to
6. Travel			63	•			support project activities
7. Occupancy	\$	594.59	\$		\$	594.59	including occupancy,
8. Current Expenses (includes Telephone, Postage,							equipment, general office
Subscriptions, Audit & Legal, Insurance, Board							supplies,
Expenses)	\$	475.67	\$-		\$	475.67	telecommunications and
9. Software			\$				other current expenses,
10. Marketing/Communications	\$	4,000.00	₩		4	4,000.00	information systems,
11. Staff Education and Training	\$	118.92	\$		\$	118.92	accounting and payroll, human resources and staff
12. Subcontracts/Agreements			\$				development, and general
13. Other (specific details mandatory):			\$				administrative support
			\$-				costs. The approved
			\$	•			basis for application of the
							NICRA is on
Information Systems			\$	327.03	\$	327.03	salary/wages only
HR			\$	178.38	\$	178.38	including hollday, sick and
Gen Admin			\$	178.38	\$	178.38	vacation.
Payroll and Accounting			\$	327.03	\$	327.03	_
TOTAL	\$	13,989.19	\$ 1	1,010.81	\$	15,000.00	

Indirect As A Percent of Direct

Contractor Initials:

7.2%

Date: 1/24/19

Page 1 of 1

JSI Research & Training Institute, Inc.

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Oploid Assessment (Name of RFP)

Budget Period: SFY 2019 | Amendment #2

E THE SECOND SEC	Direct '	Indirect		Total	:Allocation Method for
Line Item	 cremental	Fixed	·· ·	Total	Indirect/Fixed Cost
Total Salary/Wages	\$ 30,400.80	\$ -	\$	30,400.80	The lederally approved
2. Employee Benefits	\$ 11,552.27	\$ -	\$	11,552.27	Negotiated Indirect Cost
3. Consultants	- · · · -	\$ -		·	Rate Agreement (NICRA)
4. Equipment: (includes Rentals, Repair & Maintenance,					for JSI Research and
Purchase & Depreciation)	\$ 912.01	\$ -	\$	912.01	Training Institute, Inc.
5. Supplies: (includes supplies for Education, Lab,					includes fringe benefits
Pharmacy, Medical, Office)	\$ 2,128.06	\$ -	\$	2,128.06	(38% of salary) and other general operating costs to
6. Travel	\$ 300.00	\$ -	\$	300.00	support project activities
7. Occupancy	\$ 3,040.07	\$ -	\$	3,040.07	including occupancy.
8. Current Expenses (includes Telephone, Postage,			Î	•	equipment, general office
Subscriptions, Audit & Legal, Insurance, Board					supplies,
Expenses)	\$ 2,432.02	\$ -	\$	2,432.02	telecommunications and
9. Software		\$-			other current expenses,
10. Marketing/Communications		\$ -			information systems,
11. Staff Education and Training	\$ 608.03	\$ -	\$	608.03	accounting and payroll,
12. Subcontracts/Agreements		\$ -			human resources and staf
13. Other (specific details mandatory):		\$ -			 development, and general administrative support
		\$ -			costs. The approved
		\$ -			basis for application of the
					NICRA is on
Information Systems		\$ 1,673.54		1673.54	
HR		\$ 912.82]	912.82	
Gen Admin		\$ 912.82]	912.82	
Payroll and Accounting	<u> </u>	\$ 1,673.54]	1673.54	
TOTAL	\$ 51,373.26	\$ 5,172.73	. \$	56,546.00	i
Indirect As A Percent of Direct		10.1%			

Page 1 of 1

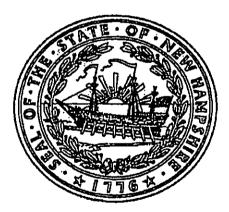
Contractor Initials:

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that COMMUNITY HEALTH INSTITUTE is a New Hampshire Trade Name registered to transact business in New Hampshire on April 12, 2016. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 742096



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 23rd day of May A.D. 2017.

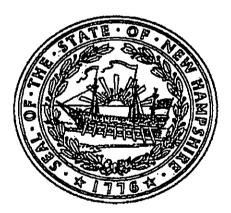
William M. Gardner Secretary of State

State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that JSI RESEARCH & TRAINING INSTITUTE, INC. is a Massachusetts Nonprofit Corporation registered to transact business in New Hampshire on February 17, 2016. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 739507



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 23rd day of May A.D. 2017.

William M. Gardner Secretary of State

CERTIFICATE OF VOTE/AUTHORITY

- I, <u>Joel H. Lamstein</u>, of the <u>JSI Research & Training Institute</u>, Inc., <u>d/b/a Community Health Institute</u>, do hereby certify that:
 - 1. I am the duly elected <u>President of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute;</u>
 - 2. By Unanimous Consent in Writing of the Board of Directors in Lieu of the 2008 Annual Meeting, the following is true copy of one resolution duly adopted by the <u>Board of Directors</u> of the <u>JSI Research & Training Institute</u>, Inc., d/b/a Community Health Institute, duly dated October 24, 2008;

RESOLVED: Appointment of Jonathan Stewart as Director of the Community Health Institute with the authority to enter into contracts and agreements binding the Corporation.

3. I further certify that the foregoing resolutions have not been amended or revoked and remain in full force and effect as of <u>January 24, 2019</u>.

IN WITNESS WHEREOF, I have hereunto set my hand as the <u>President</u> of the <u>JSI Research & Training Institute</u>, <u>Inc., d/b/a Community Health Institute</u> this <u>24th</u> day of <u>January</u>, <u>2019</u>.

Joel H./Lamstein, President

STATE OF New Hampshire

COUNTY OF Merrimack

The foregoing instrument was acknowledged before me this 24th day of January, 2019 by Joel H. Lamstein.

Notary Public/Justice of the Peace DEBRA-L. LOVE, Notary Public My Commission Expires: My Commission Expires September 5, 2023

DMEANEY



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/04/2018

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

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

t	his certificate does not confer rights t	o the	cert	ificate holder in lieu of su								
PRO	DDUCER		CONTACT Judy Yeary									
Mas	son & Mason Technology Insurance S South Ave.	ervic	es, l	nc.	PHONE (AC. No. Ext): (781) 447-5531 FAX (AC. No.: (781) 447-7230							
Wh	Itman, MA 02382				MORESS: jyeary@masoninsure.com							
	·				INSURER(S) AFFORDING COVERAGE NAIC							
					INSURE		20281					
INSI	URED				35181							
"""	JSI d/b/a Community Health			яв: Executi	IVO KISK IIIC	зөпппку			133 10 1			
	501 South Street			INSURER C:								
	2nd Floor		INSURE									
	Bow, NH 03304		INSURE					_	 			
<u>_</u>			INSURE	RF:	<u>.</u>				<u> </u>			
				E NUMBER:				REVISION NUM				
C	HIS IS TO CERTIFY THAT THE POLICI NDICATED. NOTWITHSTANDING ANY F PERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PER POLI	IREMI TAIN, CIES.	ENT, TERM OR CONDITION , THE INSURANCE AFFORI , LIMITS SHOWN MAY HAVE	N OF A	VNY CONTRAI	CT OR OTHER IES DESCRIB	R DOCUMENT WIT JED HEREIN IS SU	TH RESPE	ECT TO	WHICH THIS	
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A								EACH OCCURRENC	E	.	1,000,000	
	CLAIMS-MADE X OCCUR			35873320		09/09/2018	09/09/2019	DAMAGE TO RENTE PREMISES (Ea occu	ED	\$	1,000,000	
				1				MED EXP (Any one p	- 1		10,000	
						!		PERSONAL & ADV I		*	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:			!							2,000,000	
	POLICY PEC X LOC							GENERAL AGGREG		3	Included	
	X OTHER: Combined Agg \$10M							PRODUCTS - COMP	OP AGG	3		
Α	AUTOMOBILE LIABILITY					09/09/2018		COMBINED SINGLE (Ea_accident)_	LIMIT	\$	1,000,000	
	ANY AUTO	73546634		09/09/2019	BODILY INJURY (Pe		r person)	s				
	OWNED X SCHEDULED AUTOS		}					BODILY INJURY (Pe		2		
	X HIRED ONLY X NON-CYNED							PROPERTY DAMAG (Per accident)	E			
	AUTOS CINET							_(r_or_uoonority				
Ā	X UMBRELLA LIAB X OCCUR	Ì						EACH OCCUPATION	<u>-</u>	•	20,000,000	
	EXCESS LIAB CLAIMS-MADE			79861066		09/09/2018	09/09/2019	EACH OCCURRENC	,E		20,000,000	
	DED RETENTION \$	İ					ľ	AGGREGATE		•		
Α	WORKERS COMPENSATION							X PER STATUTE	OTH- ER	\$		
	AND EMPLOYERS' LIABILITY			71733182		09/09/2018	09/09/2019				1,000,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDEN		.\$	1,000,000	
	If ves. describe under							E.L. DISEASE - EA E			1,000,000	
В	DÉSCRIPTION OF OPERATIONS below	<u> </u>	ļ	82120859		11/09/2017	11/09/2018	E.L. DISEASE - POLI		\$		
_	Directors & Officers			81595534		1		EACH OCC/GE	- 1		2,000,000	
Α	Directors & Officers			01090034		11/09/2017	11/09/2018	EACH OCC/GE	N AGG		3,000,000	
IT 13	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC understood and agreed that the State o equired by written contract per the term	TNH	vepa	rtment of Health and Huma	le, may b an Serv	e attached if mor ices is includ	e space is requir led as an add	ed) litional insured a:	s respect	ts Gen	eral Liability	
CE	RTIFICATE HOLDER				CANC	ELLATION		<u></u>				
State of NH Department of Health and Human Services Brown Building 129 Pleasant Street Concord, NH 03301					CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE							
					11/2							

JSI Research and Training Institute, Inc. Mission Statement

JSI Research and Training Institute was incorporated in 1987 as a 501©3 non-profit organization in the Commonwealth of Massachusetts. Our mission is to alleviate public health problems both in the United States and in developing countries around the world through applied research, technical assistance and training.

Community Health Institute Mission Statement

The Community Health Institute's mission is to support and strengthen New Hampshire's health care system by providing coordinated information dissemination and technical assistance resources to health care providers, managers, planners, and policy makers, statewide. Our success translates into improved access to quality health and social services for all New Hampshire residents.

JSI RESEARCH AND TRAINING INSTITUTE, INC. AND AFFILIATE

Audited Consolidated Financial Statements and Reports
Required by Government Auditing Standards and the Uniform Guidance

September 30, 2017

JSI Research and Training Institute, Inc. and Affiliate September 30, 2017

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Norman R. Fougere, Jr. CPA 99 Heritage Lane Duxbury, MA 02332-4334



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

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors

JSI Research and Training Institute, Inc. and Affiliate

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of JSI Research and Training Institute, Inc. and Affiliate (both non-profit organizations), which comprise the consolidated statement of financial position as of September 30, 2017, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Consolidated Financial Statements

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

Auditor's Responsibility

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk

assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

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

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of JSI Research and Training Institute, Inc. and Affiliate as of September 30, 2017, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, is presented for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the consolidated financial statements taken as a whole.

Report on Summarized Comparative Information

We have previously audited the JSI Research and Training Institute, Inc. and Affiliate consolidated financial statements, and we expressed an unmodified opinion on those audited financial statements in our report dated April 26, 2017. In our opinion, the summarized consolidated comparative information presented herein as of and for the year ended September 30, 2016 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued a report dated April 23, 2018, on our consideration of JSI Research and Training Institute, Inc. and Affiliate's internal control over financial reporting and on our tests of their compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of JSI Research and Training Institute, Inc. and Affiliate's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering JSI Research and Training Institute, Inc. and Affiliate's internal control over financial reporting and compliance.

Duxbury, Massachusetts April 23, 2018

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

September 30, 2017 (With Comparative Totals for 2016)

	2017	2016
ASSETS		
Current Assets:		,
Cash and cash equivalents	\$ 74,642,976	\$ 68,620,315
Receivables for program work	19,782,268	18,498,218
Loans receivable - related party		-
Field advances - program	1,697,407	1,670,752
Employee advances	190,500	276,013
Prepaid expenses	67,950	
Total Current Assets	96,381,101	89,065,298
Property and Equipment:		
Furniture and equipment	679,098	636,492
Leasehold improvements	30,355	30,355
	709,453	666,847
Less: Accumulated depreciation	(651,423)	(634,621)
Net Property and Equipment	58,030	32,226
Other Assets	119,888	109,058
TOTAL ASSETS	<u>\$ 96,559,019</u>	\$ 89,206,582
LIABILITIES AND NET ASSETS		
Current Liabilities:		
Accounts payable and payroll withholdings	\$ 11,678,687	\$ 10,873,875
Accrued vacation	1,920,964	1,824,437
Advances for program work	35,095,465	30,642,424
Loans payable - related party	196,828	1,001,492
Notes payable	-	• •
Contingencies	·	
Total Current Liabilities	48,891,944	44,342,228
Net Assets:		
Unrestricted	47,467,027	44,706,560
Temporarily restricted	200,048	157,794
Total Net Assets	47,667,075	44,864,354
TOTAL LIABILITIES AND NET ASSETS	\$ 96,559,019	\$ 89,206,582

JSI Research and Training Institute, Inc. and Affiliate CONSOLIDATED STATEMENT OF ACTIVITIES Year Ended September 30, 2017

(With Comparative Totals for 2016)

UNRESTRICTED NET ASSETS:	2017	2016
Public Support and Revenue		
Public Support:	,	
Government grants and contracts:		•
U.S. Government	\$ 271,426,627	\$ 243,054,246
Commonwealth of Massachusetts	5,258,877	6,069,315
Other grants and contracts	57,926,891	53,310,784
Program income	99,859	186,344
Contributions	332,613	11,700,204
In-kind project contributions	14,444,516	6,852,099
Interest income	121,168	41,432
Total Unrestricted Support and Revenue	349,610,551	321,214,424
Expenses		
Program Services:		•
International programs	293,709,946	256 624 621
Domestic programs	19,653,591	256,624,631
,		18,826,817
Total Program Services	313,363,537	275,451,448
Supporting Services:		
Management and General	33,327,219	31,053,862
Fundraising	149,914	171,766
Total Supporting Services	33,477,133	31,225,628
Total Expenses	-	
•	346,840,670	306,677,076
Increase (Decrease) in Unrestricted Net Assets	2,769,881	14,537,348
TEMPORARILY RESTRICTED NET ASSETS		
Program restricted net assets	32,840	152,794
Increase (decrease) in temporarily restricted net assets	32,840	152,794
·		
Increase (decrease) in net assets	2,802,721	14,690,142
Net Assets at Beginning of Year	44,864,354	30,174,212
Net Assets at End of Year	\$ 47,667,075	\$ 44,864,354

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

Year Ended September 30, 2017 (With Comparative Totals for 2016)

TOTAL PROGRAM SERVICES SUPPORTING SERVICES **EXPENSES** International **Domestic** Management **Programs** Programs Total And General Fundraising Total 2017 2016 Salaries \$ 26,154,724 7,921,065 34,075,789 6,731,319 . \$ S 64,270 6,795,589 40,871,378 38,731,616 Consultants 15,636,684 4,431,853 20,068,537 2,279,342 16,362 2,295,704 22,364,241 22,656,189 Cooperating National Salaries 36,099,944 36,099,944 511,039 511,039 36,610,983 38,733,286 Travel 12,597,149 853,619 13,450,768 643,136 643,462 326 14,094,230 16,170,730 Allowance & Training 9,929,257 61,671 9,990,928 431,836 431,836 10,422,764 10,163,306 Sub-contracts 123,068,419 4,715,999 127,784,418 58,140 8,897 67,037 127,851,455 93,526,758 Equipment, Material and Supplies 13,897,759 84.541 13,982,300 443,184 443,184 14,425,484 6,969,920 Other Costs 41,881,494 1,584,843 43,466,337 22,212,421 60,059 22,272,480 65,738,817 72,857,717 In-kind project expenses 14,444,516 14,444,516 14,444,516 6,852,135~ Depreciation 16,802 16,802 16,802 15,419 **TOTAL EXPENSE** \$ 293,709,946 19.653591 313,363,537 33,327,219 149,914 33,477,133 \$ 346,840,670 \$ 306,677,076

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate CONSOLIDATED STATEMENT OF CASH FLOWS Year Ended September 30, 2017 (With Comparative Totals for 2016)

•	2017	2016
Cash Flows From Operating Activities:		
Increase (Decrease) in net assets	\$ 2,802,721	\$ 14,690,142
Adjustments to reconcile change in net assets to net		
cash provided by operating activities:		
Depreciation	16,802	15,419
(Increase) Decrease in receivables for program work	(1,284,050)	(118,116)
(Increase) Decrease in field advances - program	(26,655)	2,160,324
(Increase) Decrease in employee advances	85,513	(7,586)
(Increase) Decrease in prepaid expenses,	(67,950)	3,700
(Increase) Decrease in other assets	(10,830)	(25,722)
Increase (Decrease) in accounts payable and	• • •	, , ,
payroll withholdings	804,812	4,702,652
Increase (Decrease) in accrued vacation	96,527	242,541
Increase (Decrease) in advances for program work	4,453,041	13,111,616
Net Cash Provided (Used) By		
Operating Activities	6,869,931	34,774,970
Cash Flows From Investing Activities:		
Loans made	(1,001,492)	-
Loans repaid	196,828	1,132,362
Acquisition of property and equipment	(42,606)	(10,579)
Net Cash Provided (Used) By		
Investing Activities	(847,270)	1,121,783
Net Increase (Decrease) in Cash and Cash Equivalents	6,022,661	35,896,753
Cash and Cash Equivalents at Beginning of Year	68,620,315	32,723,562
Cash and Cash Equivalents at End of Year	\$ 74,642,976	\$ 68,620,315

NOTE 1 – ORGANIZATION AND NATURE OF ACTIVITIES

JSI Research and Training Institute, Inc. was incorporated in the Commonwealth of Massachusetts on April 11, 1979. JSI Research and Training Institute, Inc. provides education and research primarily to non-profit health and human service agencies both in the United States and abroad. Current funding is principally from the United States Agency for International Development and the United States Department of Health and Human Services (HHS).

JSI Research and Training Institute, Inc. is the sole member of World Education, Inc. (Affiliate) with such powers as are typically accorded to a sole member including the power of appointment and removal of the World Education, Inc. board of trustees, the right to approve amendments to the bylaws and certificate of incorporation of World Education, Inc., and the right to approve any merger, consolidation, dissolution or transfer of substantial assets of World Education, Inc.

World Education, Inc. (Affiliate) was founded in 1951 and incorporated in the state of New Jersey. Working in partnership with community, national, and international agencies in Asia, Africa, and the United States, it provides professional assistance in the design and implementation of non-formal adult education programs. These programs integrate functional education with relevant problem-solving aspects of individual growth and national development such as health, nutrition, family planning, childcare, refugee education, agricultural practices, literacy, and income generation.

JSI Research and Training Institute, Inc. and its affiliate are tax exempt organizations under 501 (c) (3) of the Internal Revenue Code and file separate unconsolidated tax returns.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Principles of Consolidation

The consolidated financial statements include the accounts of JSI Research and Training Institute, Inc. and World Education, Inc., its affiliate, (collectively referred to as the Organization). Significant intra-entity accounts and transactions have been eliminated in consolidation.

Basis of Accounting

The consolidated financial statements of the Organization have been prepared utilizing the accrual basis of accounting and include the accounts of JSI Research and Training Institute, Inc. and its affiliate in conformity with accounting principles generally accepted in the United States of America.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - continued

Use of Estimates

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Fair Value

The Organization values its qualifying assets and liabilities under a fair value hierarchy that prioritizes the inputs and assumptions used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and liabilities and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Organization uses appropriate valuation techniques based on the available inputs to measure the fair value of its assets and liabilities. When available, the Organization measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

Cash and Cash Equivalents

The Organization considers all monies in banks and highly liquid investments with maturity dates of three months or less to be cash equivalents. The carrying value of cash and cash equivalents approximates fair value because of the short maturities of those financial instruments.

Investments

Investments in marketable securities with readily determinable fair values and all investments in debt securities (marketable investments) are measured at fair values based on quoted market prices in the consolidated statement of financial position. Unrealized gains and losses are included in the statement of activities.

Property and Equipment

Property and equipment is reported on the basis of cost less accumulated depreciation. Acquisitions of property and equipment in excess of \$5,000 are capitalized. Depreciation is computed using the straight-line method calculated to extinguish the book value of the respective assets over their estimated useful lives (5 - 7 years) of the related assets.

Revenue Recognition

The majority of the Organization's revenues are derived from contracts, cooperative agreements, and grants with U.S. government agencies, primarily the United States Agency for International Development and the United States Department of Health and Human Services. Revenues are recognized when the Organization incurs qualifying expenditures that are reimbursable under the terms of the contracts, agreements or grants, or in accordance with the grantor's restrictions.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - continued

Revenue Recognition - continued

Unrestricted and restricted contributions are recognized as revenue at the date the pledge is made or the gift is received, whichever is earlier.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Contributions are reported as temporarily restricted support and are then reclassified to unrestricted net assets upon expiration of the time restriction. Temporarily restricted support, whose restrictions are met in the same reporting period, is shown as unrestricted support.

Donated Materials and Services

Donated materials and services are recorded as in kind project contributions at their estimated fair market value as of the date of receipt and as an expense in the accompanying consolidated statement of activities. Donated services are recognized if the services received create or enhance non-financial assets or require specialized skills that are provided by individuals possessing those skills and would typically need to be purchased if not provided by donation.

Income Taxes

The Organization is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and is not a private foundation as described in Section 509. Accordingly, no provision for income taxes is included in the accompanying consolidated financial statements.

The Organization has evaluated its tax positions and believes that there would be no material changes to the results of its operations or financial position as a result of an audit by the applicable taxing authorities, federal or state. The Organization has filed all of its known and required returns in a timely manner including as permitted allowed extensions. Following administrative practice of the taxing authorities, the tax years 2014, 2015, 2016 and 2017, remain open years subject to examination and review.

JSI Research and Training Institute, Inc. and World Education, Inc. (Affiliate) file separate unconsolidated tax returns. JSI Research and Training Institute, Inc. files tax returns based on a September 30th year end and its affiliate files tax returns based on a June 30th year end.

Functional Allocation of Expenses

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

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - continued

Financial Statement Presentation

In accordance with accounting principles generally accepted in the United States of America, the Organization reports information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets based upon the existence or absence of donor imposed restrictions. For the year ended September 30, 2017 there was no activity in permanently restricted net assets.

Prior Year Comparative Totals

The financial statements include prior-year summarized comparative information in total. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Company's financial statements for the year ended September 30, 2016, from which the summarized information was derived.

Reclassification

Certain amounts for 2016 have been reclassified to conform to current year presentation.

NOTE 3 – CONCENTRATION OF CREDIT RISK

The Organization maintains demand deposits and money market funds at financial institutions. At times, certain balances held in these accounts may not be fully guaranteed by the United States Government. The uninsured portions of cash and money market accounts are backed solely by the assets of the financial institution. Therefore, the failure of a financial institution could result in a financial loss to the Organization. However, the Organization has not experienced losses on these accounts in the past and management believes the risk of loss, if any, to be minimal.

NOTE 4 – INVESTMENTS

Fair Value

In accordance with accounting principles generally accepted in the United States of America, the Organization values its qualifying assets and liabilities under a fair value hierarchy that prioritizes the inputs and assumptions used to measure fair value. The three levels of the fair value hierarchy are as follows:

NOTE 4 - INVESTMENTS - continued

Fair Value - continued

- Level 1 Observable inputs that reflect unadjusted quoted prices in active markets for identical assets or liabilities at the measurement date.
- Level 2 Inputs other than quoted prices in active markets that are observable for the asset either directly or indirectly, including inputs from markets that are not considered to be active.
- Level 3 Unobservable inputs which reflect the Organization's assessment of the assumptions that market participants would use in pricing the asset or liability including assumptions about risk.

A qualifying asset or liability's level within the framework is based upon the lowest level of any input that is significant to the fair value measurement.

The following is a summary of fair values of investments which are measured on a recurring basis using Level 1 inputs as recorded in the Consolidated Statement of Financial Position at September 30, 2017:

Current assets:

Cash and cash equivalents (invested)	\$ 61,271,603

\$ 61,271,603

No assets or liabilities were measured at Level 2 or Level 3.

The following schedule summarizes the investment return and its classification in the Consolidated Statement of Activities for the year ended September 30, 2017:

	<u>Unrestricted</u>
Interest income	\$ 121,168
Total investment return	\$ 121,168

NOTE 5 – RECEIVABLES FOR PROGRAM WORK

Receivables for program work are stated at the amount management expects to collect from outstanding balances. Management provides for probable uncollectable amounts through a provision for bad debt expense and an adjustment to a valuation allowance based on its assessment of the current status of individual accounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. The allowance for doubtful accounts at September 30, 2017 was \$0.

Receivables for program work consist of the following at September 30, 2017:

U.S. Agency for International Development	\$ 11,921,024
U.S. Department of Health and Human Services	814,712
U.S. Department of State	1,306,716
U.S. Department of Labor	111,857
Commonwealth of Massachusetts	584,391
Other - non-governmental	5,043,568
<i>,</i>	<u>\$ 19,782,268</u>

NOTE 6 - LOANS RECEIVABLE - RELATED PARTY

Loans receivable – related party consist of various unsecured short-term loans, due on demand, from John Snow, Inc., a related party (See NOTE 17). No interest is charged on the loans. The loans receivable balance at September 30, 2017 is \$0.

NOTE 7 - PROPERTY AND EQUIPMENT AND ACCUMULATED DEPRECIATION

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

	·	Cost		cumulated preciation		Net
Furniture and equipment Leasehold improvements	\$ 	679,098 30,355	\$	(621,068) (30,355)	\$	58,030
	S	709,453	<u>s</u> _	(651,423)	<u>s</u>	58,030

Depreciation expense was \$16,802 for the year ended September 30, 2017.

NOTE 8 - OTHER ASSETS

Other assets consist of the following at September 30, 2017:

Deposits	1	\$	82,943
Artwork - donated			36,945
		<u>s</u>	119,888

Donated artwork is recorded at a discounted appraised value at the date of gift.

NOTE 9 – ACCRUED VACATION

In accordance with formal policies, vacation was accrued at September 30, 2017 as follows:

World Education, Inc. (Affiliate)	_	292,936
	2	1,920,964

NOTE 10 - ADVANCES FOR PROGRAM WORK

Advances for program work consist of the following at September 30, 2017:

Other - non-governmental

Partnership for Supply Chain Management, Inc. (related party)	\$	91,723
Bill & Melinda Gates Foundation		25,082,446
Other	_	<u>9,921,296</u>

\$ 35,095,465

NOTE 11 - LOANS PAYABLE - RELATED PARTY

Loans payable – related party consist of various unsecured short-term loans, payable on demand, from John Snow, Inc., a related party (See NOTE 17). No interest is charged on the loans. The loans payable balance at September 30, 2017 is \$196,828.

NOTE 12 - NOTES PAYABLE

Citizens Bank

World Education, Inc. (Affiliate) has a revolving line of credit established February 3, 2004 with Citizens Bank of Massachusetts with a borrowing limit of up to \$500,000. The revolving line of credit was renewed on July 11, 2017. The loan is payable on demand. Interest is charged by utilizing a fluctuating rate based on the LIBOR (Advantage) rate plus 2.50%. The line of credit remains in effect until May 31, 2018 and annually thereafter contingent upon performance. The loan is collateralized by a first priority interest in all the assets of World Education, Inc. No funds were borrowed during the year and as a result, as of September 30, 2017, the outstanding balance is \$0 and no interest was incurred on this loan during the year ended September 30, 2017.

NOTE 12 - NOTES PAYABLE - continued

John Snow, Inc.

World Education, Inc. (Affiliate) has an unsecured revolving line of credit established September 1, 2007 with John Snow, Inc. (a related party) with a borrowing limit of up to \$1,000,000. The loan was renewed on July 1, 2016. Interest is charged by utilizing a fluctuating rate based on the current prime rate plus 0.25%. The loan is payable on demand and, in any event, on or prior to June 30, 2017. The loan is not collateralized. No funds were borrowed during the year and as a result, as of September 30, 2017, the outstanding balance is \$0. No interest was incurred on this loan during the year ended September 30, 2017. (See NOTE 17)

NOTE 13 – CONTINGENCIES

In accordance with the terms of its federal and state grants and contracts, the records of the Organization are subject to audit. The Organization is, therefore, contingently liable for any disallowed costs. Management believes that any adjustment, which might result from such an audit, would be immaterial.

JSI Research and Training Institute, Inc. is a co-borrower (with a related party) of a demand loan with no balance due at September 30, 2017. Management believes that the co-borrower is current on the loan and that its collateral exceeds the balance due. (See NOTE 17)

Provisional indirect cost rates are negotiated with the United States Agency for International Development (AID) on an annual basis. As of September 30, 2017, actual indirect cost rates have been approved by AID for JSI Research and Training Institute, Inc. through December 31, 2010 and World Education, Inc. through June 30, 2015. Based on favorable past experience, management believes the effects of changes to the overhead rates, if any, would not be material to the financial statements.

NOTE 14 – TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets are restricted by donors as follows at September 30, 2017:

Program Services		\$	195,048
Time Restrictions	•		5,000
	•	S	200,048

No assets were released from donor restriction by occurrence of events specified by the donor during the year ended September 30, 2017.

NOTE 15 – SURPLUS REVENUE RETENTION

In accordance with the Massachusetts Division of Bureau Services, Regulation 808 CMR 1.03(7), "if, through cost savings initiatives implemented consistent with programmatic and contractual obligations, a non-profit Contractor accrues an annual net surplus from the revenues and expenses associated with services provided to Departments which are subject to 808 CMR 1.00, the Contractor may retain, for future use, a portion of that annual surplus not to exceed 20% of said revenues. Surpluses may be used by the Contractor for any of its established charitable purposes, provided that no portion of the surplus may be used for any non-reimbursable cost set forth in 808 CMR 1.05, the free care prohibition excepted. Operational Services Division shall be responsible for determining the amount of surplus that may be retained by each Contractor in any given year and may determine whether any excess surplus shall be used to reduce future prices or be recouped."

For the year ended September 30, 2017, the organization did not have an annual net surplus that exceeded 20% of relevant Massachusetts revenues.

NOTE 16 - COMMONWEALTH OF MASSACHUSETTS

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

Receivables from program work at October 1, 2016	\$	549,882
Receipts		(5,224,368)
Disbursements/expenditures		5,258,877
Receivables from program work at September 30, 2017	<u>s</u>	584,391

NOTE 17 – RELATED PARTY TRANSACTIONS

John Snow, Inc.

JSI Research and Training Institute, Inc. (an exempt organization) and John Snow, Inc. (a non-exempt corporation) purchase consulting services from each other. Mr. Joel Lamstein is President and Director of both organizations, and is the sole stockholder of John Snow, Inc. The two companies bill each other at the same rates that they bill the federal and state governments.

During the year ended September 30, 2017, John Snow, Inc. billed JSI Research and Training Institute, Inc. \$24,641,616 for consulting services (technical support). This amount is reflected under the program services - consulting line item (\$16,086,359) and program services - other costs line item (\$8,555,257) on the statement of functional expenses. In addition, JSI Research and Training Institute, Inc. performed consulting services (technical support) for John Snow, Inc. totaling \$7,459,675.

The two companies also share facilities and pool various overhead expenses. For the year ended September 30, 2017, JSI Research and Training Institute, Inc. incurred \$25,994,433 of overhead expenses (supporting services), of which \$9,314,712 was its share of John Snow, Inc. incurred costs.

JSI Research and Training Institute, Inc. is a co-borrower with John Snow, Inc. on a commercial demand loan-revolving line of credit with an expiration date of May 31, 2018, which allows for borrowings up to \$6,500,000. The loan is collateralized by a security agreement with a first position lien on all corporate assets of JSI Research and Training Institute, Inc. and John Snow, Inc. including assignment of promissory notes and security documents between the two companies. Interest is charged by utilizing a fluctuating rate based on LIBOR (Advantage) plus two percent (2.00%) payable monthly in arrears, which at September 30, 2017 was 3.235%. At September 30, 2017, a balance of \$0 was outstanding on the loan. Management believes the loan payable will be extended, when due, under similar terms and conditions.

NOTE 17 – RELATED PARTY TRANSACTIONS - continued John Snow, Inc. – continued

During the year, the Company had various loans receivable due from, and various loans payable due to John Snow, Inc. At September 30, 2017, the loan receivable balance is \$0 and the loan payable balance is \$196,828.

World Education, Inc. (Affiliate) has an agreement with John Snow, Inc. whereby John Snow, Inc. will provide administrative and technical support as deemed necessary by World Education, Inc.'s Board of Trustees. Transactions with John Snow, Inc. for the year ended September 30, 2017 are summarized as follows:

Administrative and technical support	\$	1,481,286
Other direct charges (including rent of \$884,924)		1,297,647
•	<u>s</u>	2,778,933

The agreement is on a year-to-year basis and can be terminated by either party upon ninety days written notice to the other.

World Education, Inc. provided services to John Snow, Inc. during the year ended September 30, 2017 totaling \$88,760 and was recorded as revenue in the consolidated statement of activities.

World Education, Inc. has an unsecured line of credit with John Snow, Inc. with a borrowing limit of up to \$1,000,000. (See NOTE 12)

Partnership for Supply Chain Management, Inc.

Partnership for Supply Chain Management, Inc. (PSCM) (an exempt organization) was incorporated on February 14, 2005 by JSI Research and Training Institute, Inc. and Management Sciences for Health, Inc. Each organization has 50% control.

PSCM has been awarded a U.S. government contract to procure and deliver life-saving medicines and medical supplies to treat HIV/AIDS patients worldwide. The contract for the Supply Chain Management System project was awarded through the U.S. Agency for the International Development as part of the U.S. government's \$15 billion President's Emergency Plan for AIDS Relief.

Mr. Joel Lamstein, President and Director of JSI Research and Training Institute, Inc., is President and Director of PSCM.

NOTE 17 - RELATED PARTY TRANSACTIONS - continued Partnership for Supply Chain Management, Inc. - continued

During the year ended September 30, 2017, JSI Research and Training Institute, Inc. billed PSCM \$11,771,551 for services performed with a cost of \$9,926,355 and a fee of \$1,845,196. At September 30, 2017, PSCM advanced the Organization \$91,723 for program work.

Other

The Organization has an agreement with a certain related company to purchase services. Transactions with this company were charged to sub-contracts expense and are as follows:

The Manoff Group, Inc. (a non-exempt corporation; 40% owned by John Snow, Inc.)

\$ 1,061,497

\$ 1,061,497

NOTE 18 - RETIREMENT PLANS

JSI Research and Training Institute, Inc. has a defined contribution profit sharing/401(K) plan covering substantially all its employees. Employee contributions are voluntary. Employer contributions are based on a percentage (10% - 15% depending on length of service) of salary. The Plan was effective April 11, 1979. Pension expense was \$3,612,409 for the year ended September 30, 2017.

World Education, Inc. (Affiliate) provides retirement benefits to substantially all employees under a plan. World Education, Inc.'s contributions of 7 percent of employee salaries are used to purchase individual annuities. Additional voluntary contributions may be made by the employees. Participants of the plan are fully and immediately vested when contributions are made. Pension costs incurred by World Education, Inc. were \$334,310 for the year ended September 30, 2017.

NOTE 19 – COMMITMENTS

Operating Leases

The JSI Research and Training Institute, Inc. leases space for general offices under operating leases expiring from 2017 through 2019. The leases contain renewal options for periods of up to 5 years.

NOTE 19 - COMMITMENTS - continued

During the year ended September 30, 2017, rentals under long-term lease obligations were \$518,335. Future obligations over the primary terms of the Company's long-term leases as of September 30, 2017 are:

Year Ended		
September 30,		
2018	\$	386,434
2019		127,139
	<u>s</u>	513,573

World Education, Inc. (Affiliate) leases space for general offices on a year-to-year basis. Rent expense for the year ended September 30, 2017 was \$884,924.

NOTE 20 – CONCENTRATION OF FUNDING

The Organization receives a majority of its funding through contracts and grants with various departments and agencies of the Federal government.

The Organization received 10% or more of its revenues and support from the following sources for the year ended September 30, 2017:

	Income		% of	
		Received	Total Income	
U.S. Agency for International Development	\$	209,646,197	59.97%	

NOTE 21 - IN KIND PROJECT CONTRIBUTIONS

The Organization receives donated materials and services consisting of commodities, facilities and equipment, and services for use in its programs from overseas collaborative private voluntary organizations and from foundations providing grants directly to a project. Donated materials and services totaled \$14,444,516 for the year ended September 30, 2017, and are reflected as In Kind Project Contributions on the Consolidated Statement of Activities and In Kind Project Expenses on the Consolidated Statement of Functional Expenses.

NOTE 21 - IN KIND PROJECT CONTRIBUTIONS - continued

These contributions satisfy part of the matching requirements needed to obtain full funding on certain U.S. Agency for International Development grants. During the year ended September 30, 2017, the following donated materials and services received by the Organization have been used to fulfill matching requirements on active grants:

36532	Turkmenistan YC	\$ 39,14
36697	SPRING	3,702,019
36895	Mozambique M-SIP	21,75
36991	AIDS FREE	8,507,62
37024	Tanzania CHSS	982,19
37134	Timor Leste RBHS	208,70
37162	Ghana HIV/AIDS	54,044
37186	Madagascar CCH	229,800
37244	Russia P2P	21,234
63101	Senegal/Journalism	90,738
63114	Uganda	75,264
63139	Benin FFE	13,330
64024	Tanzania	21,702
64057	Zimbabwe	61,029
64062	Uganda	192,537
64071	OUTCOMES	136,459
64074	Mozambique	76,471
		\$ 14,434,069

NOTE 22 – SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through April 23, 2018, the date on which the consolidated financial statements were available to be issued. During this period, there were no subsequent events that require adjustment to the consolidated financial statements.

Supplementary Information

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. AGENCY FOR INTERNATIONAL DEVELO	PMENT:			
Direct Grants:				
36521 - Uganda HIV/AIDS/TB	617-A-00-09-00007-00	98.001	\$ 35,943	\$ 478,356
36532 - Turkmenistan YC	120-A-00-09-00029-00	98.001	-	276,323
36662 - Madagascar CBIHP	687-A-00-11-00013-00	98.001	(10,469)	(10,469)
36697 - SPRING	AID-OAA-A-11-00031	98.001	7,483,566	27,002,657
36702 - Nepal CHX Cord Care	AID-OAA-A-11-00073	98.001	-	1,015,986
36747 - Ukraine HWUP	AID-121-A-11-00003	98.001	-	7,656
36800 - Advancing Partners	AID-OAA-A-12-00047	98.001	38,170,434	60,045,239
36845 - Pakistan HSSP	AID-391-A-13-00002	100.89	1,694,570	6,061,436
36895 - Mozambique M-SIP	AID-656-A-13-00006	98.001	-	1,213,872
36932 - Senegal LLP	AID-685-A-14-00001	98.001	12,252	127,675
36991 - AIDSFREE	AID-OAA-A-14-00046	98.001	27,033,705	46,523,456
37024 - Tanzania CHSS	AID-621-A-14-00004	98.001	1,545,547	9,323,796
37129 - Zambia Discover Health	AID-611-A-16-00004	98.001	1,197,619	19,810,322
37134 - Timor Leste RBHS	AID-472-A-16-00001	98.001	-	1,498,645
37162 - Ghana HIV/AIDS	AJD-641-A-16-00007	98.001	1,567,945	4,907,365
37186 - Madagascar CCH	AID-687-A-16-00001	98.001	471,524	6,992,770
Total Direct Grants - CFDA #98.001	•		79,202,636	185,275,085
Pass-through Grants: Passed through Partnership for Supply Chain Management, Inc. (PSCM): 36344/36519/36524/37034/37053/37150 - Supply				
Chain Management System Passed through Johns Hopkins University:	GPO-I-00-05-00032-00	98.001	•	9,926,355
37099 - Ethiopia SBCC Passed through Pathfinder International:	AID-663-A-15-000011	98.001	-	(1,076)
37265 - Ethiopia TRANSFORM Passed through Program for Appropriate Technology in Health:	AID663A1700002	98.001	-	887,909
37301 - Open LMIS - Phase I	AID.2134-01555716-CR	98.001	_	44.269
Passed through Management Science for Health, Inc.:	1			44,203
37305 - MSH Guinea eLMIS TA	SIAPS-Guines-17-01	98.001		25 106
Total Pass-through Grants - CFDA #98.001		70.001		35,186 10,892,643
Total - CFDA #98.001 - USAID Foreign Assistance for Programs Overseas TOTAL - U.S. AGENCY FOR INTERNATION	, ·		79,202,636	196,167,728
DEVELOPMENT	IAL		£ 70 305 /3/	6 164 145 115
			<u>\$ 79,202,636</u>	\$ 196,167,728
See notes to Schedule of Expenditures of Federal A	wards.			23

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA <u>Number</u>	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN S	ERVICES:			
Pass-through Grant:				
Passed through NACCHO:		,		
36689 - NH MRC Conferences	2011-041218	93.008	<u>s -</u>	<u>\$</u> 75
Total CFDA #93.008 - Medical Reserve Corps			1	
Small Grant Program	•			75
Direct Grant:	,			
37087 - Adolescent HIV/AIDS Prevention	MAIAH000001	93.057	55,510	342,523
Total CFDA #93.057 - National Resource Cente	er .			
for HIV Prevention Among Adolescents			55,510	342,523
Direct Grant:				
37128 - Competitive Abstinence Education	Agreement @09/30/15	93.060	-	9,391
Total CFDA #93.060 - Competitive Abstinence				
Education (CAE)				9,391
Direct Grant:				•
36901 - CDC - Strategic Assessments for Strategic	1U2GGH001132-01	93.067		
Action in India				24,360
Total CFDA #93.067 - Global AIDS				24,360
Pass-through Grants:		_		
Passed through State of Vermont:				
37096 - Asthma Control Program	29370	93.070	-	4,048
37206 - VT Climate Change Eval.	31578	93.070		10,591
37212 - VT HPDP Evaluation	Contract #31786	93.070		29,867
Total CFDA #93.070 - Environmental Public				
Health and Emergency Response				44,506
Pass-through Grants:				
Passed through the State of New Hampshire:				
37132 - NH Ebola Readiness	Agreement @ 11/18/15	93.074	_	877
37222 - South Central CHIP	Agreement @ 04/01/16	93.074	-	1,064
Total CFDA #93.074 - Hospital Preparedness				
Program				1,941

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN S	SERVICES - CONTINU	ED:		
Direct Grant:				
37103 - HITEQ	U30CS29366	93.129	1,308,648	2,116,274
Pass-through Grants:				_ ,,
Passed through Community Health Assoc. of Mountain/Plain States:	•			
37225 - CHAMPS Planning 2016	APW/CHAMPS/9.1.16	93,129	_	4,847
Passed through Community Health Center:	•			4,047
37241 - CHCACT UDS Training	APW/11.10.16/CHACT	93.129	_	3,578
Passed through National Assoc. of Community Health	1			3,370
Centers, Inc.:				
37256 - NACHC Pop Health Web	APW/NACH/10.12.16	93.129	-	676
37266 - NACHC Payment Reform	Agreement, 01-30-2017	93.129	-	13,801
37319 - NACHC PR Webinar	U30CS16089	93.129	<u>.</u>	1,283
Total CFDA #93.129 - Technical and				
Non-Financial Assistance to Health Centers			1,308,648	2,140,459
Pass-through Grant:			-	
Passed through Dartmouth Toxic Metals:				
37297 - Dartmouth Arsenic Site	APW/DTMSRP/4.17.17	93,143		1.401
Total CFDA #93.143 - NIEHS Superfund		73.143		1,421
Hazardous Substances-Basic Research and E	ducation		•	
Direct Grant:				
36904 - Ryan White ACE	UF2HA26520	93.145	2 222	4.660
Pass-through Grant:		73.143	3,333	4,667
Passed through Health Research, Inc.:				
37221 - National Quality Center Evaluation Project	Agreement @ 7-01-16	93.145		96 226
Total CFDA #93.145 - AIDS Education and	.	33.143		86,326
Training Centers		1	3,333	00.003
Pass-through Grant:				90,993
Passed through the State of Vermont.:				
37212 - VT HPDP Evaluation				
	Contract #31786	93.184	 .	14,171
Total CFDA #93.184 - Disabilities Prevention			<u>-</u>	14,171
Pass-through Grants:				
37163 - FamPlan Data Systems		93.217	_	116,399
37281 - FamPlan Data Systems		93.217	- -	68,774
Total CFDA #93.217 - Family Planning Services	I	, , , , , ,	 .	185,173
				100,173

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN S	SERVICES - CONTINUI	ED:		
Direct Grant:	•	•		•
37103 - HITEQ	U30CS29366-03	93.224	16,477	96,580
Total CFDA #93.224 - Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless,			16 477	06.800
and Public Housing Primary Care)			16,477	96,580
Passed through Buildings Bright Futures State Advisory Council, Inc.:				
36850 - Vermont L.A.U.N.C.H. Project Passed through Community Health Institute and Harbor Homes, Inc.:	13/7	93:243	1,540	52,268
37042 - Harbor Homes Inc.		93.243		4,612
Passed through State of Rhode Island:				
37107 - PFS 1I	3426881	93.243	10,000	60,705
Passed through State of New Hampshire:				
37133 - HCDC Evaluation	Agreement @ 10/01/15	93.243	-	44,358
37151 - NH DMH Client Survey Passed through State of Vermont:	Agreement @ 01/13/16	93.243	14,413	66,857
37212 - VT LOL Survey Passed through Prism Health North Texas:	Contract #31786	93.243	3,083	31,531
37286 - HS Atlanta Consulting Passed through Savannah State University:	Emails 4/24-7/7/2017	93.243	-	7,313
37286 - HS Atlanta Consulting Passed through Substance Abuse Certer:	Email 7/28/17	93.243	•	4,367
37300 - RI Healthy Trans Total CFDA #93.243 - Substance Abuse and		93.243		13,249
Mental Health Services Projects of Regional and National Significance	·		29,036	285,260
Pass-through Grant:				
Passed through Boston University:				
37243 - Dartmouth Training		93.249		5,415
Total CFDA #93.249 - Public Health Training Centers Program				5,415

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN	SERVICES - CONTINU	ED:		
Direct Grants:	,			
36777 - National Training Center - Quality Assurance	ce,			
Quality Improvement, Evaluation	FPTPA006025	93.260	-	4
36787 - Reproductive Health Prevention Training				
and Technical Assistance	FPTPA006015	93.260		143
36792 - National Training Center for Management				.,,,
and Systems Improvement	FPTPA006023	93.260	_	(3,481)
37223 - Family Planning National Training Center				(5,101)
for Service Delivery Improvement	FPTPA006028	93.260	1,247,914	3,447,396
Total - CFDA #93.260 - Family Planning -	V			31111330
Personnel Training			1,247,914	3,444,062
Direct Grant:				
37321 - HRSA RRHO	UH5HA30789	93,266		131,343
Total CFDA #93.266 - Health Systems	• ,			131,343
Strengthening and HIV/AIDS Prevention,				
Care and Treatment under the President's				
Emergency Plan for AIDS Relief				131,343
Pass-through Grants:				
Passed through United Way/Greater Nashua:				
36937 - Nashua DFC Eval FY14	Agreement @ 9-30-16	93,276	_	4,075
Passed through Narragansett Prevention Partnership:	- 0	,		4,075
37148 - NPP Evaluation	Agreement @ 1-01-16	93.276		11.282
Passed through Monadnock Alcohol and Drug Abuse Coalition:				11,202
37184 - Monadnock TAP	Agreement @ 2-01-16	93.276	_	217
Passed through City of Franklin, NH:		73.270		217
37290 - FMDTF DFC Eval	APW/COF/1.5.17	93.276		0.000
Passed through Mary Hitchcock Memorial Hospital:	7.11 11700171.5.17	73.210	-	9,008
37324 - Upper Vailey DFC Eval	Agreement @ 3-29-17	93,276		2 00 6
Total CFDA #93.276 - Drug-free Communities			-	2,005
Support Program Grants				26,587

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN S	SERVICES - CONTINUI	ED:		
Pass-through Grants: Passed through Commonwealth of Massachusetts Department of Health: HIV/AIDS Research, Training and Support	INTF-4111M04500824036	93.283		169,912
Passed through Catholic Medical Center Community Services:		73.203		105,512
37315 - CMC Focus Group Passed through State of Vermont:	APW/CMC/6.14.17	93.283	•	986
37125 - VOHC Planning	30445	93.283		443
37212 - VT HPDP Evaluation	Contract #31786	93.283		9,457
Total - CFDA #93.283 - Centers for Disease Control and Prevention - Investigations				
and Technical Assistance	• -			180,798
Direct Grant:				
36891 - PPHF 2013 - OSTLTS Partnerships	1U38OT000188	93.292	49,000	98,131
Total - CFDA #93.292 - National Public Health Improvement Initiative			49,000	98,131
Pass-through Grants:				
Passed through New Hampshire Dept. of Health and Human Services:				
37214 - NH Tobacco Helpline FY17 Passed through Vermont Department of Health:	Agreement @ 07-01-16	93.305	-	122,169
37212 - Vermont Health Evaluation Total - CFDA #93.305 - Nat. State Based	Contract #31786	93.305	3,083	165,256
Tobacco Control Program			3,083	287,425
Pass-through Grants:				
Passed through the Association of State and Territoria Health Officials:	1			
37149 - ASTHO Adult Immunization	Agreement @ 1-01-16	93.524	-	. 488
37273 - ASTHO Toolkit	63-12913	93.524		4,879
Total - CFDA #93.524 - Building Capacity of	•			,
the Public Health System to Improve				
Population Health through Nat'l NPOs			·	5,367

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN	SERVICES - CONTIN	 UED:		
Pass-through Grant: Passed through the University of Colorado: 37270 - TCPI Total - CFDA #93.638 - ACA Transforming Clinical Practice Initiative: Practice Transformation Networks (PTNs)	PSC-00584	93.638		38,452
Direct Grant:	4.			38,452
37015 - Tobacco Use Prevention Total - CFDA #93.735 - State Public Health Approaches for Ensuring Quitline Capacity	NU58DP005338	93.735		63,449
Pass-through Grants: Passed through State of New Hampshire:				00,449
37048 - National Diabetes Prevention Program	1042855	93.757	_	142,265
37068 - Technical Assistance Network for Rural Health Clinics	1043188	93.757	28,320	74,676
37200 - Public Health Program Services Support Total - CFDA #93.757 - State Public Health Actions to Prevent Diabetes, Heart Disease, Obesity and Assoc. Risk Factors	PO# 1031592	93.757	128,006 156,326	667,349 884,290
Pass-through Grants:				004,290
Passed through Missouri Department of Health and Senior Services:		·		
Passed through Rhode Island Department of Health:	C315199001	93.758	•	26,257
37140 - RI Epidemiological Support Total - CFDA #93.758 - Preventive Health and Health Services Block Grant Funded Soley	7549784	93.758		132,454
with Prevention and Public Health Funds (P	PHF)		<u>-</u>	158,711
Pass-through Grant: Passed through Lakes Region Partnership: 37245 - NH DSRIP Region 5	APW/LRP/10.20.16	93.779	_	42,614
Total - CFDA #93.779 - Centers for Medicare and Medicaid Services (CMS) Research, Demonstrations and Evaluations		-		42,614
		_		

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN S	ERVICES - CONTINUI	ED:		
Pass-through Grant: Passed through Commonwealth of Massachusetts Department of Public Health: HIV Care	INTF5264M04500824007	93.815	_	274,385
Total - CFDA #93.815 - Domestic Ebola Supplement to the ELC		70.010		274,385
Pass-through Grant:				
Passed through Commonwealth of Massachusetts Department of Public Health:				
37152 - Ebola CONOPS	PRF61	93.817		75,166
Total - CFDA #93.817 - Hospital Preparedness Program (HPP) Ebola Preparedness and				
Response Activities				75,166
Pass-through Grant: Passed through State of New Hampshire: 37068 - Technical Assistance Network for Rural Health Clinics Total - CFDA #93.913 - Grants to States for	PO# 1043188	93.913		34,468
Operation of Offices of Rural Health			•	34,468
Direct Grants:				
37191 - HIV Integrated Planning	U69HA30144	93.914	28,320	499,114
37194 - RWHAP ACE Health Training	U69HA30143	93.914	30,000	396,859
37327 - CHATT Planning TA Pass-through Grant:	U69HA30795	93.914	•	65,604
Passed through Boston Public Health Commission: 37170 - Quality Assurance Total - CFDA #93.914 - HIV Emergency Relief Project Grants	Agreement @ 3-01-16	93.914	58,320	1,064,012
Pass-through Grant:				
Passed through Commonwealth of Massachusetts Department of Public Health:		١	1	· ·
HIV Care	INTF-4971-M04500824092	93.917		285,562
Total - CFDA #93.917 - HIV Care Formula Grants				285,562

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN	SERVICES - CONTINU	ED	·	
Pass-through Grant:				
Passed through the State of Vermont:				
37212 - VT LOL Survey	Contract #31786	93.919	_	13,830 .
Total - CFDA #93.919 - Cooperative		• .		<u></u>
Agreements for State-Based Comprehensive				
Breast and Cervical Cancer Early Detection	i ,,			
Programs	•			13,830
Direct Grant:				
36967 - Healthy Start Performance Project	UF5MC26845	93.926	<u>-</u>	2,138,551
Total - CFDA #93.926 - Healthy Start Initiativ	'e			2,138,551
Direct Grant:				
36945 - CDC CBA FY15 - FY19	U65PS004406	93,939		878,721
Total - CFDA #93.939 - HIV Prevention				
Activities - NGO Based				878,721
Pass-through Grant:				
Passed through the State of Massachusetts:				
37153 - CoRECT Study	PRF61	93.943	_	64,927
Total - CFDA #93.943 - Epidemiologic				
Research Studies of Acquired				
Immunodeficiiency System (AIDS) and	•			
Human Immunodeficiency Virus (HIV)	•			
Infection in Selected Groups	-	=		64,927
Pass-through Grants:				
Passed through South County Hospital Healthcare Sys	stem:			
37091 - South County Health Equity Zone Passed through Vermont Department of Health	Agreement @ 5-1-15	93.945	•	17,099
37212 - Vermont Health Evaluation				
Total - CFDA #93.945 - Assistance Programs	Contract #31786	93.945		26,412
for Chronic Disease Prevention and Control			_	43,511
Pass-through Grants:	•			40,511
Passed through State of Rhode Island:				
36801 - Prevention Resource Center Passed through New Hamp. Prevention Certification	3316844	93.959	-	184,156
Board of New Hampshire:				1
37168 - NHPCB Workforce		93.959	<u> </u>	24,243
Total - CFDA #93.959 - Block Grants for			· ·	
Prevention and Treatment of Substance Abuse				208,399
ee notes to Schedule of Expenditures of Federal A	wards.	,		31

Federal Grantor/Pass-through Grantor Program Title	Agency or . Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN	SERVICES - CONTINUE	E D		
Pass-through Grant:		,	•	
Passed through Arizona Family Health Partnership: 37328 - AFHP CT Screening	17-JSI1	93.977	_	826
Total - CFDA #93.977 - Sexually Transmitted Diseases (STD) Prevention and Control Gra	nts			826
Pass-through Grants: Passed through Tri-County Health Department:				
37106 - Tri-County Health Programming Passed through Global Evaluation & Applied Research Solutions, Inc.:	Agreement @ 9-25-15 th	93.994	· -	40
37236 - MCH/SMS Retreat TA	APW/GEARS/10.7.16	93,994		2,546
Total - CFDA #93.994 - Maternal & Child Health Services Block Grant to the States			<u> </u>	2,586
TOTAL - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES		,	<u>\$</u>	<u>\$ 13,688,441</u>
U.S. DEPARTMENT OF HOMELAND SECURITY	:		·	·
Direct Grants: United States Coast Guard -				
37076 - Narl. Life Jacket Wear Rate	3315FAN1502.05	97.012	s -	\$ (28,695)
37196 - Nat'l. Estimate of Life Jacket Wear Rate	3316FAN160206	97.012	8,474	104,533
37302 - Nat'l. Estimate of Life Jacket Wear Rate	3317FAN170210	97.012	8,237	161,946
Total CFDA #97.012 - Boating Safety Financial Assistance	1		16,711	237,784
TOTAL - U.S. DEPARTMENT OF HOMELAI SECURITY	ND		S 16,711	S 227.704
			J 10,/11	<u>S 237,784</u>

JSI Research and Training Institute, Inc. SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS Year Ended September 30, 2017

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA <u>Number</u>	Passed Through to Subrecipients	Federal Expenditures
U.S. DEPARTMENT OF JUSTICE:				
Pass-through Grants: Passed through State of New Hampshire: 37205 - NH Juvenille Court Video 37250 - Juvenille Diversion Evaluation Total - CFDA #16.540 - Juvenile Justice and Delinquency Prevention - Allocation to State	Agreement @ 9-01-15	16.540 16.540	<u> </u>	13,376 30,454 43,830
TOTAL U.S. DEPARTMENT OF JUSTICE				<u>\$ 43,830</u>
U.S. DEPARTMENT OF AGRICULTURE: Pass-through Grant:	DVI)			
Passed through Food Insecurity Nutrition Incentive (F	•	10.101	•	
37257 - FINI Evaluation	PRF61	10.331	<u>\$</u>	<u>\$ 36,504</u>
Total CFDA #10.331 - Food Insecurity Nutrition Incentive Grants Program			<u>s</u> -	<u>\$</u> 36,504
Pass-through Grant: Passed through Massachusetts Dept. of Elementary and Secondary Education: 37167 - ESE Allergies Manual	Agreement @ 3-25-16	10.560	<u>s</u>	\$ 99
-Total CFDA #10.560 - State Administrative Expenses for Child Nutrition		-		99
Pass-through Grant: Passed through State of Vermont: 37155 - VT SNAP Education Evaluation Total CFDA #10.561 - State Administrative	30754	10.561	<u>-</u>	31,923
Matching Grants for the Supplemental Nutrition Assistance Program				21 002
CARLIERON USSISTANCE LIGHTS				31,923
TOTAL - U.S. DEPARTMENT OF AGRICULT	TURE		<u>s</u> -	<u>\$ 68,526</u>

JSI Research and Training Institute, Inc. SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS Year Ended September 30, 2017

Federal Grantor/Pass-through Grantor Program <u>Title</u>	Agency or Pass-through Number	Federal CFDA Number	Passed Through to Subrecipients	Federal <u>Expenditures</u>
U.S. DEPARTMENT OF STATE:				
Pass-through Grant: Passed through Dreams Innovation Challenge: 37188 - DREAMS Total CFDA #19.029 - The U.S. President's	S-LMAQM-16-CA-1103	19.029	\$ 25,325,653	\$ 30,290,777
Emergency Plan for AIDS Relief Programs		•	25,325,653	30,290,777
Direct Grant: 37244 - Russia P2P Total CFDA #19.900 - AEECA/ESF PD Progra	S-RS500-16-CA-179	19.900		96,530 96,530
TOTAL - U.S. DEPARTMENT OF STATE			\$ 25,325,653	\$ 30,387,307
U.S. DEPARTMENT OF COMMERCE:				
Pass-through Grant:			•	
Passed through Regents of the University of Michigan	1 :			
37303 - Cape Cod Coastal	•	11.419	s	\$ 2,259
Total CFDA #11.419 - Coastal Zone Management Administration Awards				2,259
TOTAL U.S. DEPARTMENT OF COMMERC	CE		<u>s</u>	<u>\$</u> 2,259
TOTAL FEDERAL AWARDS			\$ 104,545,000	\$ 240,595,875

JSI Research and Training Institute, Inc. NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS September 30, 2017

, NOTE 1 – BASIS OF PRESENTATION

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal grant activity of JSI Research and Training Institute, Inc. under programs of the federal government for the year ended September 30, 2017. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of JSI Research and Training Institute, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of JSI Research and Training Institute, Inc.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

- (1) Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Catalog of Federal Domestic Assistance (CFDA) numbers and pass-through entity identifying numbers are presented when available.

NOTE 3 - INDIRECT COST RATE

JSI Research and Training Institute, Inc. has elected not to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.

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



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

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors

JSI Research and Training Institute, Inc. and Affiliate

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, the consolidated financial statements of JSI Research and Training Institute, Inc. and Affiliate ("Organization"), which comprise the consolidated statement of financial position as of September 30, 2017, and the related consolidated statements of activities, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated April 23, 2018.

Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered JSI Research and Training Institute, Inc. and its affiliate's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of JSI Research and Training Institute, Inc. and Affiliates's internal control. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Organization's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether JSI Research and Training Institute, Inc. and Affiliate's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under Government Auditing Standards.

Purpose of this Report

This purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Duxbury, Massachusetts April 23, 2018 NORMAN R. FOUGERE, JR. CPA 99 HERITAGE LANE DUXBURY, MA 02332-4334



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

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Board of Directors

JSI Research and Training Institute, Inc. and Affiliate

Report on Compliance for Each Major Federal Program

We have audited JSI Research and Training Institute, Inc.'s compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of JSI Research and Training Institute, Inc.'s major federal programs for the year ended September 30, 2017. JSI Research and Training Institute, Inc.'s major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of JSI Research and Training Institute, Inc.'s major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about JSI Research and Training Institute, Inc.'s compliance

with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of JSI Research and Training Institute, Inc.'s compliance.

Opinion on Each Major Federal Program

In our opinion, JSI Research and Training Institute, Inc. complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended September 30, 2017.

Report on Internal Control Over Compliance

Management of JSI Research and Training Institute, Inc. is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered JSI Research and Training Institute, Inc.'s internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of JSI Research and Training Institute, Inc.'s internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

World Education, Inc. (Affiliate) maintains a different fiscal year (June 30) and has its own stand alone audit performed in accordance with the Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). However, the consolidated financial statements contain the combined activity of JSI Research and Training, Institute and World Education, Inc.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Duxbury, Massachusetts April 23, 2018

JSI Research and Training Institute, Inc. and Affiliate SCHEDULE OF FINDINGS AND QUESTIONED COSTS September 30, 2017

SECTION I - Summary of Auditors' Results:

Fin	ancial	Statemen	fe
4 MM	4764.644	DIMENTE	-

The type of report issued on the financial statements:

Unmodified opinion

Internal control over financial reporting:

Material weaknesses identified?

No

 Significant deficiencies identified that are not considered to be material weaknesses?

None reported

Noncompliance material to the financial statements noted?

No

Federal Awards

Internal control over major programs:

• Material weaknesses identified?

No

 Significant deficiencies identified that are not considered to be material weaknesses?

No

Type of auditors' report issued on compliance for major programs:

Unmodified opinion

Any audit findings which are required to be reported under 2 CFR section 200.516(a):

No

• Identification of major programs:

USAID Foreign Assistance for for Programs Overseas

CFDA #98.001

The U.S. President's Emergency Plan for AIDS Relief Programs

Relief Programs CFDA #19.029

Dollar threshold used to distinguish between Type A and Type B programs:

\$3,000,000

Auditee qualified as low risk auditee under 2 CFR Section 200.520

Yes

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



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

STATUS OF PRIOR YEAR'S FINDINGS AND QUESTIONED COSTS

There were no reportable findings or questioned costs for the year ended September 30, 2016.

JSI Research & Training Institute, Inc. Board of Trustees

Alexander K. Baker, MBA

Chief Operating Officer John Snow, Inc.

David E. Bloom, M.A., Ph.D.

Clarence James Gamble Professor of Economics and Demography
Harvard School of Public Health

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Carolyn Hart, MSPH

Director, JSI/Washington John Snow, Inc.

Louis Kaplow, J.D., Ph.D.

Finn M.W. Caspersen & Household Professor of Law and Economics Harvard Law School

Joel H. Lamstein, MS

President and CEO
John Snow, Inc. and World Education, Inc.

Ken Olivola, M.C.P., M-Arch

Director, JSI/Boston International Group John Snow, Inc.

Paul Osterman, Ph.D.

Nanyang Technological University (NTU) Professor of Human Resources and Management Sloan School of Management at M.I.T.

Mike Useem, M.A., Ph.D.

William and Jacalyn Egan Professor of Management Wharton School at University of Pennsylvania

JONATHAN A. STEWART

Community Health Institute/JSI, 501 South Street, Bow, New Hampshire 03304 (603) 573-3300 jstewart@jsi.com

EDUCATION

DUKE UNIVERSITY SCHOOL OF MEDICINE, DURHAM, NORTH CAROLINA
Department of Health Administration, Master of Health Administration, 1986
Department of Biochemistry, Master of Arts, Biochemistry, 1984

UNIVERSITY OF DELAWARE, NEWARK, DELAWARE School of Arts & Sciences, Bachelor of Arts, Biology, 1981

EXPERIENCE

JSI Research and Training Institute/Community Health Institute, Bow, New Hampshire

Regional Director, September 2000 to present

Provide technical assistance, training and evaluation to health and human service organizations to support the development of effective public health and health care systems.

Selected Technical Assistance & Training Projects

NH Community and Public Health Development Program: Project Director providing technical assistance and training support to communities involved in development of improved local public health infrastructure; worked with multiple partners to develop the statewide New Hampshire Public Health Network.

Community Health Services Network and Partnership for Public Health: Community assessment, workgroup facilitation and plan development for regional integrated behavioral health system as part of a NH Delivery System Reform Incentive Payment initiative (1115 Medicaid Waiver).

Boston Metropolitan Area Hazard Vulnerability Assessment: Technical Assistance including planning, facilitation and analytic support to Massachusetts and New Hampshire state health departments and regional partners for assessment of hazards, risks and preparedness for health care, behavioral health and public health infrastructure.

Metrowest Community Health Care Foundation (Massachusetts): Capacity and readiness assessment of seven municipalities in Metro-Boston for developing collaborative models for local public health service delivery.

NH Division of Public Health Services: Project team member providing assistance on development of a Comprehensive HIV Needs Assessment; role is focused on client and community stakeholder engagement and qualitative needs assessment.

Robert Wood Johnson Foundation; New Hampshire Turning Point Initiative: Project Director for multi-year initiative to develop sustainable strategies for improved local public health capacity.

HRSA, Bureau of Primary Health Care, Uniform Data System: Trainer and editor for annual Uniform Data System reporting for the federal Community and Migrant Health Center program.

Selected Program Evaluation Projects

Central New Hampshire Health Partnership: Evaluator for two federal Rural Health Outreach Grant Initiatives: the first for improving care coordination of socially and medically vulnerable populations; the second for improving care transitions from hospital to home and community.

Communities for Alcohol and Drug free Youth (Plymouth, NH): Program Evaluator for community-based coalition involved in multiple initiatives to promote positive and healthy school and community environments for youth.

NH Division of Alcohol & Drug Prevention & Recovery: Project Director for evaluation of state-wide ATOD prevention initiative involving multiple community-based coalitions implementing a range of programs including family strengthening, school-based education, mentoring and community action for environmental change.

Family Planning Private Sector Project (Nairobi, Kenya): Operations research on cost effectiveness and sustainability of FP/MCH service delivery sites throughout Kenya to assist USAID in resource allocation decisions and to improve cost recovery capability of clinics.

New York State Department of Health (Albany, New York): Qualitative Evaluation of New York State Healthy Heart Program; an initiative intended to influence CVD risk factors through community intervention and social marketing.

Selected Research Projects

National Network of Public Health Institutes and Robert Wood Johnson Foundation: Qualitative Assessment of Local and State Health Officials awareness of, interest in, and capacity to employ computer modeling for emergency preparedness.

Endowment for Health: Study of the effect of New Hampshire's Community Benefits Law for Health Care Charitable Trusts. Cooperative effort with NHDHHS Office of Health Planning and the NH Office of the Attorney General.

Bureau of Health Professions (Rockville, MD): Study of the effect of AIDS Education and Training Centers on physician attitudes and practices; Comparative analysis of parallel CDC-funded study of the general primary care physician population.

Bureau of Primary Health Care Delivery and Assistance (Rockville, MD): Study to assess preparedness of C/MHC's to respond to HIV-related service needs

Bureau of Primary Health Care, Rockville, Maryland: Survey project designed to gather information on provider practices in Community and Migrant Health Services relative to recommendations of the 1988 US Preventive Services Task Force.

North Country Health Consortium, Littleton, New Hampshire

Executive Director, 12/97 to 8/00 Founding Director of rural health network formed by four hospitals, two community health centers, two home health agencies, a mental health and developmental services organization, and a community action program.

Ammonoosuc Community Health Services, Littleton, New Hampshire

Operations Director, 11/94 to 12/97 of federally-funded, multi-site rural Community Health Center Network.

John Snow, Inc., Boston, Massachusetts

Consultant, 10/86 to 7/94 providing assistance in health services evaluation, financial analysis and program management.

SELECTED PUBLICATIONS | REPORTS

Rosenfeld, LA, Fox CE, Kerr D, Marziale E, Cullum A, Lota K, Stewart J, and Thompson MZ. "Use Of Computer Modeling For Emergency Preparedness Functions By Local And State Health Officials: A Needs Assessment". J Public Health Management Practice, 15(2), 96-104, 2009.

Stewart J, Kassler W, McLeod M. "Public Health Partnerships: A New Hampshire Dance". Transformations in Public Health, Volume 3, Issue 3, Winter 2002.

Stewart, JA, Wroblewski S, Colapietro J, Davis H. "Survey of US Physicians Trained by Regional AIDS Education and Training Centers". Abstract No. PO-D21-4047; IXth International Conference on AIDS. Berlin, Germany, June -1, 1993.

Kibua T, Stewart JA, Njiru S, Gitari A. "Sustainability and Cost Effectiveness of Family Planning Private Sector Subprojects". United States Agency for International Development; Nairobi, Kenya, March 1990.

SELECTED WORKSHOPS | PRESENTATIONS

Dartmouth College, The Dartmouth Institute, MPH Program, (formerly CECS) guest lecturer - project management, evaluation, coalition development, Public Health 101; community health needs assessment; academic review of capstone theses; 2004–2016.

Public Health Performance Improvement – The New Hampshire Experience (with Joan Ascheim, NHDHHS); 6th Annual National Public Health Performance Standards Training Workshop; Nashville, TN; April 1–6, 2008.

Building the Public Health Infrastructure: State Lessons Learned and Keys to Success; Nebraska Health and Human Services, Expanding Our Vision – Transforming Vital Public Health Systems, October 2006.

Building Infrastructure in Public Health - RWJF National Turning Point Showcase Conference, Denver, CO; May 2004

Community Benefits Exemplary Practices - New Hampshire statewide conference; November 2002

SELECTED BOARDS | AFFILIATIONS

National Network of Public Health Institutes, Board of Directors, 2008 to present, Chair, 2014 - 2016
New Hampshire Public Health Services Improvement Council, 2008 to present
NH Prescription Monitoring Program, Advisory Council, 2012 to present
New Hampshire Healthy People 2010 Leadership Gouncil; Co-chair, 2000-2002
New Hampshire Public Health Association; Treasurer, 1999-2003



KATHERINE ROBERT, MPA

JSI Research & Training Institute, Inc. 501 South Street 2nd floor, Bow, New Hampshire 03304 · (603) 573-3331

krobert@jsi.com

EDUCATION

UNIVERSITY OF NEW HAMPSHIRE, DURHAM, NEW HAMPSHIRE Master of Public Administration, 2009
Bachelor of Arts in Political Science, 2006

EXPERIENCE

JSI Research & Training Institute, Inc., Bow, New Hampshire

Consultant, December 2007 to present

JSI provides consultation to health care organizations in the areas of health services delivery, public health, practice management, information for decision-making, and program evaluation. Clients include government agencies, public and private health care providers (hospitals, group practices, community health centers, family planning organizations, health maintenance organizations, community-based coalitions and social service agencies). JSI is a health care consulting firm working with clients in the public and private sectors. Since 1978, JSI has provided consulting, research and training services for agencies and organizations seeking to improve the health of individuals, communities and nations.

HIGHLIGHTS OF RELEVANT PROJECTS

Healthy Start EPIC Center December 2014 to present Provide technical assistance and training to Healthy Start grantees to ensure program effectiveness in achieving the goals to reduce infant mortality and health disparities, and improve perinatal health outcomes. This project focuses on providing comprehensive and innovative capacity building assistance to community-based grantees, measuring project success by the degree to which grantees achieve core competencies essential for effective implementation of the Healthy Start model and institutionalize a culture of QI and evaluation based on a foundation of documented program effectiveness. Primary responsibilities include coordination of technical assistance.

NH Home Visiting Program Supports and Services July 2015 to present Oversee and coordinate seven scopes of work building capacity for the NH Home Visiting Program and its sub-recipient agencies implementing the Healthy Families America model, funded by the federal Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV). Act as statewide training coordinator for the Healthy Families America home visitors. Conduct annual needs assessment, identify subject-matter expert trainers, and engage in continuous dialogue with agencies to most effectively provide training and technical assistance resources. Develop and implement a statewide needs assessment, and provide consultation to the NH Home Visiting Task Force. Oversight of additional scopes of work include implementation of continuous quality improvement plan for local implementing agencies, marketing and multi-media campaign development, and post-partum visit utilization pilot research project.

Trauma Informed Care for Early Childhood Services (TIECS) Training Coordination July 2014 to June 2017 Engaged subject matter experts and early childhood service professionals from around the state to complete a Train the Trainer exercise and subsequent 50+ community trainings to train over 600+ professionals serving young children and their families. Worked with technical staff to translate the in-person training curriculum to an e-learning format, and with subject matter experts to develop and facilitate a learning collaborative to train interested professionals in becoming early childhood trauma consultants.

Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) Services May 2012 to June 2013 Recruited and hired qualified consultants to implement NAP SACC in targeted NH communities. Provided technical assistance to consultants during the project period through program recruitment support, logistical support, and implementation support. Conducted an evaluation of past NAP SACC interventions from the perspective of trained sites and trainers.

Tobacco and Obesity Policy Project June 2010 to January 2012 Provided project management support, and worked with NH DHHS Obesity Prevention Program and Tobacco Prevention and Control Program staff and partners to assist in



the development of strategies and creation of trainings and materials for licensed childcare settings, schools, and workplaces to develop and adopt evidence-based guidelines around nutrition, physical activity, screen time, and tobacco exposure. Conduct qualitative research to inform process.

OTHER PROJECTS

Cheshire County Adult Drug Court Program September 2013 to August 2016 Managed the development of an evaluation protocol, data management systems, and periodic evaluation reports for the SAMHSA/CSAT-funded Cheshire County Drug Court (CCDC). Provided on-going technical assistance to ensure adherence to drug court model.

Public Health Program Services and Supports June 2010 to present Serve as fiscal manager for the master contract by which various programs within the NH Department of Health and Human Services engages JSI for work. Coordinate monthly review of invoices across 15+ tasks, and a \$2 million budget. Manage all contract set up and documentation.

NH Immunization Marketing June 2010 to December 2015 Provided project coordination support, and worked with the NH DHHS Immunization Program staff and community stakeholders to research, and assist in the development and implementation of a statewide marketing and awareness campaign aimed at increasing immunization rates for priority populations, including infants, teens, and elderly.

NH Environmental Public Health Tracking Program Data Utilization and Outreach Project April 2012 to November 2015 Worked with NH DHHS Environmental Public Health Tracking Program (EPHT) staff and partners to increase the utilization of the EPHT's data portal and other communication tools by developing a communication plan consisting of contemporary marketing and outreach strategies. Assist EPHT in developing a user analytics data collection process for web-based tools.

Poison Control Innovation/Transformation Project September 2013 to December 2014 Developed market research protocol to inform the development of a three-year innovation/transformation plan for the American Association for Poison Control Centers. Designed a survey to assess poison control centers' (PCC) use and inclination to use new communications modalities to reach consumers of PCC services, conducted an environmental scan of organizations with characteristics similar to PCCs, and conducted focus groups and key informant interviews. Produced market research report focusing on identification of opportunities for PCCs to expand their role and visibility through the use of new partnerships and communications modalities while maintaining quality in the assessment triage and management of poison exposures.

SHARE Needs Assessment September 2013 to May 2014 Developed methodology for local non-profit needs assessment, covering five towns in Southern NH. Developed protocols for focus groups and key informant interviews, designed and analyzed community service provider survey. Developed and presented final needs assessment report.

Nashua Community Health Assessment September 2013 to January 2014 Worked with client to develop appropriate protocols for focus groups with targeted segments of population, varying from topic-specific issues, to general health issues. Facilitated and summarized focus group findings.

NH Breast and Cervical Cancer Program Focus Groups April 2012 to June 2012 Convened, facilitated, and summarized findings of four market research focus groups around promotional materials promoting breast and cervical cancer screenings. Finalized a focus group script, developed relevant recruitment and logistical materials, and developed a final report with recommendations for promotional materials development.

Dartmouth-Hitchcock Colorectal Cancer Screening Focus Groups April 2012 to June 2012 Convened, facilitated, and summarized findings of two market research focus groups around six posters designed by the Dartmouth-Hitchcock Colorectal Cancer Screening Program. Finalized a focus group script, developed relevant recruitment and logistical materials, and developed a final report with recommendations for promotional materials development.

Dartmouth-Hitchcock Early Childhood Messaging Collaborative Focus Groups December 2011 to January 2012 Convened, facilitated, and summarized findings of four market research focus groups around six logos and three graphic sets designed for the HNHfoundation-funded Early Childhood Messaging collaboration. Finalized a focus group script, developed relevant recruitment and logistical materials, and developed a final report with recommendations for the logo and graphic development.



NH County Rankings Video Project September 2011 to December 2011 Participated in a collaborative process of the NH State County Health Rankings Team to produce video vignettes focusing on state and local Public Health. Data from the NH County Health Rankings and the NH State Health Report were linked to stories gathered around the state that illustrate community actions to improve health or people impacted by improvements in public health. The video(s) will be used to educate and motivate individuals and communities into action to improve the health of their community and state.

Strategic Prevention Framework – Local Regional Evaluation January to March 2009 Data entry and data analysis for surveys of four strategic prevention framework regions. Worked in SPSS to clean and analyze the data. Created summary reports to provide to the client.

Manchester Community Needs Assessment December 2008 to December 2009 Provided logistical support to the project by serving as a liaison between the MSAP Data Committee and the Community Health Institute team. Assigned team roles, managed the budget, and defined key deadlines. Collected quantitative state and local data, as well as analyzed and summarized focus group and key informant survey data. Assisted in the development and editing of the final Needs Assessment Report.

Southern New Hampshire University, Manchester, New Hampshire

Member, Public Health Advisory Council, 2018-present

Advise SNHU to support its Council of Education for Public Health Accreditation application process.

NH Health & Equity Partnership, Concord, New Hampshire

Diversity and Cultural Competence trainer, April 2018 - present

Participated in a train the trainer session to qualify in offering diversity and cultural competence trainings for wide range of organizations.

Rivier University, Nashua, New Hampshire

Adjunct Faculty, September 2016-January 2018

Developed the curriculum for and instructs the online capstone for the undergraduate Public Health program.

PROFESSIONAL ASSOCIATIONS

NH Public Health Association, Immediate Past President

- Board of Directors / Executive Committee 2012 Present
- Human Resources Committee, 2015 Present
- Communications Committee, 2012 Present

NH Home Visiting Task Force

• Member, 2015 - Present

American Public Health Association

Member, 2013 – Present

NH Public Health Services Improvement Council

• Member, 2016-2017

COMPUTER SKILLS

Proficient in Adobe InDesign CS5.5, Adobe Illustrator CS5.5, Microsoft Word, Excel, and Publisher. Working knowledge of Microsoft Access, QuickBooks, Adobe Photoshop, and SPSS.



KEY ADMINISTRATIVE PERSONNEL

NH Department of Health and Human Services

Contractor Name: JSI Research and Training Institute, Inc., dba Community Health Institute

Name of Bureau/Section: Public Health Program Support Services - FY19, Amendment #2

BUDGET PERIOD:	SFY19	 }			
NAME	JOB TITLE	Program Area	SALARY.	PERCENT PAID FROM THIS CONTRACT	AMOUNT PAID FROM THIS CONTRACT
Jonathan Stewart	Project Manager/Director	PHPS - Overall / OA	\$121,750	6.57%	\$8,000.00
Katie Robert	Fiscal Manager	PHPS - Overall / HV	\$71,000	39.44%	\$28,000.00
			\$0	0.00%	\$0.00
· <u> </u>	1		\$0	0.00%	\$0.00
			\$0	0.00%	\$0.00
			\$0	0.00%	\$0.00
<u></u>			\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exce	eed Total/Salary Wages, Line Item	1 of Budget request)		·	\$36,000.00



Jeffrey A. Meyers Commissioner

Lisa M. Morris Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301 603-271-4501 1-800-852-3345 Ext. 4501 Fax: 603-271-4827 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

January 22, 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 of Division of Public Health Services, to enter into an amendment with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, Vendor #161611-B001, 501 South Street, 2nd Floor, Bow, NH 03304 to provide a broad range of programmatic support services across a number of public health programs by increasing the price limitation by \$13,000 from \$1,565,580 to \$1,578,580 effective upon date of Governor and Council approval, with no change to the completion date of June 30, 2019. The original contract was approved by the Governor and Executive Council on June 21, 2017 (Item #51). Funds being added are 100% Other Funds (Pharmaceutical Rebates).

Funds are available in the following accounts in SFY 2018 and 2019, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

FISCAL DETAILS ATTACHED.

EXPLANATION

The purpose of this request is to increase the budget for the Human Immunodeficiency Virus (HIV) Program by adjusting several program-area budgets in order to enable the vendor to purchase additional prevention supplies, specifically Human Immunodeficiency Virus (HIV) test kits. The budget for the Childhood Lead Poisoning Prevention Program is decreased due to a reduction in our federal awards for the program from the Environmental Protection Agency (EPA) and the Centers for Disease Control and Prevention (CDC). The adjustments result in an overall price limitation increase of \$13,000.

The vendor provides a broad range of public health professional support services including, but not limited to; developing and implementing training programs; developing evaluation plans; conducting needs assessments; developing educational materials; planning for large statewide conferences; serving as a fiscal agent; providing technical assistance to local partners; and making subject matter experts available to Departmental contractors.

These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to New Hampshire citizens.

The overarching purpose of this contract is to better coordinate a range of public health professional support services on a statewide basis to assure that New Hampshire residents are served by effective initiatives to protect and improve the health of the public. The Vendor will ensure successful outcomes across this range of services and program areas that include: transparent and informed evaluation planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among Department contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.

The Department procured these services as it does not have the resources available to manage these specific services in-house. Support services to be provided include:

- Environmental Public Health Tracking activities;
- Food Protection activities;
- Lead Poisoning Prevention activities;
- Immunization Promotion:
- Infectious Disease Prevention, Investigation and Care activities;
- Maternal and Child Health activities;
- Public Health Emergency Preparedness activities

This contractor was selected through a competitive bid process.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, this Agreement has the option to extend for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council. No renewal request is being made at this time.

Should Governor and Executive Council not authorize this Request, the vendor may not have sufficient HIV test kits to provide to contracted testing sites. This may lead to testing not being available to individuals to inform them of their HIV status.

Area served: Statewide.

Source of Funds: Funds being added are 100% Other Funds (Pharmaceutical Rebates). Funding for the total contract are 73% Federal Funds from the Centers for Disease Control and Prevention, HPP & PHEP Cooperative Agreements, Immunization Cooperative Agreement, EPHT Program, NH Reduced Lead Poisoning of Children, US EPA Lead 404G Training and Certification, UH Health Resources & Services Administration, Maternal, Infant & Early Childhood Home Visiting Grant, Maternal and Child Health Grant, 21% Other Funds from HIV Pharmaceutical Rebates, Food Protection Agency Licensing Fees, Utility Assessment from Safety, and 6% General Funds.

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

Respectfully submitted,

Lisa M. Morris

Director

Approved by

leffrey A'. Meyers

Commissioner

Public Health Professional Support Services Fiscal Details

05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY PREPAREDNESS 67% Federal, 33% General

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90077410	115,000
SFY 2019	102-500731	Contracts for Prog Svc	90077410	115,000
<u> </u>			Sub Total	\$230,000

05-95-90-902510-2239 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, HOSPITAL PREPAREDNESS 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Syc	90077700	70,000
SFY 2019	102-500731	Contracts for Prog Svc	90077700	70,000
25 25 22 22			Sub Total	\$140,000

05-95-90-902510-5178 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, IMMUNIZATION PROGRAM 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	. Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90023320	65,000
SFY_2019	102-500731	Contracts for Prog Svc	90023320	65,000
<u> </u>		<u> </u>	Sub Total	\$130,000

05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PHARMACEUTICAL REBATES 100% Other

SFY	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
2018	102-500731	Contracts for Prog Svc	90024600	133,800	50,000	183,800
2019	102-500731	Contracts for Prog Svc	90024600	113,800		113,800
-			Sub Total	\$247,600	\$50,000	\$297,600

05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD PROTECTION 37% General, 63% Other

Fiscal Year	Class / Account	Class Title	Job Number	Current/ . Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90000022	18,000
SFY 2019	102-500731	Contracts for Prog Svc	90000022	18,000
			Sub Total	\$36,000

05-95-90-900510-5173 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFORMATICS, ENVIRONMENTAL PUBLIC HEALTH TRACKING 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90041000	50,000
SFY 2019 -	102-500731	Contracts for Prog Svc	90041000	50,000
.,	32 (A) N (A)		Sub Total	\$100,000

05-95-90-901510-7964 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, LEAD PROTECTION 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	/ Increase/ (Decrease)	Modified Amount
SFY 2018	102-500731	Contracts for Prog Svc	90003600	36,000	0	36,000
-	102-500731	Contracts for Prog Svc	90038000	50,000	0	50,000
:.		·	Sub Total SFY 2018	86,000	0	86,000
SFY 2019	102-500731	Contracts for Prog Svc	90003600	36,000	(27,000)	9,000
	102-500731	Contracts for Prog Svc	90038000	50,000	(10,000)	40,000
			Sub Total SFY 2019	86,000	(37,000)	49,000
			Sub Total	\$172,000	(37,000)	\$135,000

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, ACA HOME VISITING X02 FORMULA GRANT 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90083200	221,990
SFY-2019	102-500731	Contracts for Prog Svc	90083200	221,990
			Sub Total	\$443,980

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05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH; BUREAU OF COMMUNITY AND HEALTH SERVICES, MATERNAL – CHILD HEALTH 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Current/ Modified Amount (No change)
SFY 2018	102-500731	Contracts for Prog Svc	90080001	24,000
SFY 2019	102-500731	Contracts for Prog Svc	90080001	24,000
			Sub Total	\$48,000

05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, RADIOLOGICAL EMERGENCY RESPONSE 100% Other

Fiscal Year	Class / Account	Class Title	Job Number	Current Amount	Increase/ (Decrease)	Modified Amount
SFY 2018	102-500731	Contracts for Prog Svc	90030000	9,000-	0	9,000
SFY 2019	102-500731	Contracts for Prog Svc	90030000	9,000	0	9,000
			Sub Total	\$18,000	\$0	\$18,000
			TOTAL	\$1,565,580	\$13,000	\$1,578,580

STATE OF NEW HAMPSHIRE

DEPARTMENT OF INFORMATION TECHNOLOGY

27 Hazen Dr., Concord, NH 03301 Fax: 603-271-1516 TDD Access: 1-800-735-2964 www.nh.gov/doit

Denis Goulet
Commissioner

February 5, 2018

Jeffrey A. Meyers, Commissioner
Department of Health and Human Services
State of New Hampshire
29 Hazen Drive
Concord, NH 03301

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to enter into a contract with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, of Bow, NH, as described below and referenced as DoIT No. 2018-029A.

The purpose of this contract amendment is for JSI Research and Training Institute, Inc., to continue to provide a broad range of programmatic support services across a number of public health programs including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Departmental contractors. These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

The funding amount for this amendment is \$13,000, increasing the current contract from \$1,565,580, to an amount not to exceed \$1,578,580 and is effective upon the date of Governor and Council approval, with no change to the completion date of June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Denis Goulet

Sincerely.

DG/kaf DoIT #2018-029A

cc: Bruce Smith, IT Manager, DoIT



New Hampshire Department of Health and Human Services Public Health Professional Support Services

State of New Hampshire Department of Health and Human Services Amendment #1 to the Public Health Professional Support Services

This 1st Amendment to the Public Health Professional Support Services contract (hereinafter referred to as "Amendment #1") dated this 22nd day of January, 2018, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and JSI Research and Training Institute, Inc., d/b/a Community Health Institute, (hereinafter referred to as "the Contractor"), a nonprofit agency with a place of business at 501 South Street, 2nd Floor, Bow, NH 03304.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 21, 2017 (Item #51), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

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

WHEREAS, pursuant to the General Provisions, Paragraph 18, the State may modify the scope of work and the payment schedule of the contract by written agreement of the parties;

WHEREAS, the parties agree to increase the price limitation, and

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

- Amend Form P-37, Block 1.8, to increase Price Limitation by \$13,000 from \$1,565,580 to read: \$1,578,580.
- 2. Amend Form P-37, Block 1.9, to read E. Maria Reinemann, Esq., Director of Contracts and Procurement.
- 3. Amend Form P-37, Block 1.10 to read 603-271-9330.
- 4. Delete Budget Request for Public Health Professional Support Services HIV, SFY 18 and replace with Budget Request for Public Health Professional Support Services HIV SFY 18

 Amendment #1.
- Delete Budget Request for Public Health Professional Support Services EPA Lead, SFY 19 and replace with Budget Request for Public Health Professional Support Services – EPA Lead SFY 19 Amendment #1.
- Delete Budget Request for Public Health Professional Support Services CDC Lead, SFY 19 and replace with Budget Request for Public Health Professional Support Services – CDC Lead SFY19 Amendment #1.



New Hampshire Department of Health and Human Services Public Health Professional Support Services

This amendment shall be effective upon the date of Governor and Executive Council approval. IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

	State of New Hampshire Department of Health and Human Services
2 1 8 Date	Name: LISA MORTELS Title: DIRECTOR, DPHS
1/22/18	JSI Research and Training Institute, Inc., d/b/a Community Health Institute
Date	Name: Jonathari Stewart Title: Regional Director
Acknowledgement of Contractor's s	signature:
	of Mernmack on 12211 before the eared the person identified directly above, or satisfactorily proven to ed above, and acknowledged that s/he executed this document in the
Signature of Notary Flublic or Justic	e of the Peace
Courtney Castro, Not Name and Title of Notary of Justice	and Pudic

COURTNEY A. CASTRO, Notary Public

My Commission Expires: My Commission Expires November 8, 2022



New Hampshire Department of Health and Human Services Public Health Professional Support Services

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

OFFICE OF THE ATTORNEY GENERAL

Name: Number of the State of New Hampshire at the Meeting on: _______ (date of meeting)

OFFICE OF THE ATTORNEY GENERAL

Name: Name: Name: Title:

New Hampshire Department of Health and Human Services

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

Public Health Professional Support

Budget Request for: Services - HIV

Amendment #1

Budget Period: SFY 2018

Uno Radio					÷.	7 0 25	
	_	Contracts.				A STATE OF THE STATE OF	
I. Total Salary/Wages	\$	37,607.84	<u> </u>		12		The federally approved
Employee Benefits Consultants	\$		\$		ĻŞ	14,290.98	Negotiated Indirect Cost
	\$		5	•	\$	-	Rate Agreement (NICRA) for JSI Research and
4. Equipment: (includes Rentals, Repair & Maintenance,			١.,		1.		Training Institute, Inc.
Purchase & Depreciation)	\$	1,165.84	•\$	• •	\$	1,165.84	-includes fringe benefits
5. Supplies: (includes supplies for Education, Lab,	·		厂		Γ		(38% of salary) and other
Pharmacy, Medical, Office)	\$	<u>- 1,8</u> 80.39	\$		\$		general operating costs to
6. Travel	\$	500.00	\$	-	3		support project activities
7. , Occupancy	\$	3,760.78	\$	-	13	3,760.78	including occupancy,
8. Current Expenses (includes Telephone, Postage,			Г		Г	,	equipment, general office
Subscriptions, Audit & Legal, Insurance, Board	l		1		[.		supplies,
Expenses)	\$	2,820.60	S	•	l s	2,820.60	telecommunications and
9. Software	Š	-	Š	-	š	•	rother current expenses,
10. Marketing/Communications	\$		Š	-	₹		information systems,
11. Staff Education and Training	\$	752.16	Š		l š	752.16	-accounting and payroll, ,
12., Subcontracts/Agreements .	3		Ť		Ť		human resources and stat
13. Other (specific details mandatory):	Ť		Ť		۲š		development, and general administrative support
HPG Member Reimbursement	5	2.000.00	Ť		łŧ	.2 000 00	costs. The approved basi
Conference Support		2,000.00	l š	<u>-</u> -	łš		for application of the
Prevention Supplies	, -	66,800.00	Ť		tŧ	<u></u>	NICRA is on salary/wage
Digital Storytelling		25,000:00	Ŧ		۲Ť		only including holiday, sid
Meeting Expenses	1	6,000.00	Ť		tě		and vacation.
Website Maintenance	Ť	500.00	Ť	 _	۲ť	500.00	•
Subscription Services	1	700.00	ť	` _	۲ŧ	700.00	
Other Professional Support Services	١ ٠	10.000.00	\vdash		اڏ	10.000.00	•
Special Projects	۳-	\$1,853.73	\vdash		اڈ	1,853.73	•
Information Systems	┢	41,000.13	F	1.541.92	ŝ	1.541.92	•
iniormation systems	—	_	÷	1,541.92	*	1.541.92	•
Gen Admin	<u> </u>		1	.,	_	1,541.92	
——————————————————————————————————————	<u> </u>		+	1,541.92	ļ\$		
Payroll and Accounting	-		13	1,541.92	Ľ	1,541.92	
	!	700	Ļ	· * * * * * * * * * * * * * * * * * * *	냐	-	1
TOTAL	\$	177,632.32	1 \$	6,167.68	ı S	183,800.00	1

Contractor Initials:

Date: 1/22/18

RFP-2018-DPHS-03-PUBLIC

New Hampshire Department of Health and Human Services

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

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support Services -

Budget Request for: CDC Lead

Amendment #1

Budget Period: SFY 2019

Line ban	e on	Direct Cremental	(). 4(C).	Indirect Fixed	132	Total	Alocation Lettor for
Total Salary/Wages	\$	2,802.20	1 \$	-	TŠ	2.802.20	The federally approved
2. Employee Benefits	\$	1,064.84	\$	-	 Š	1.064.84	
3. Consultants	\$	•	\$	-	18		Rate Agreement (NICRA)
4. Equipment: (includes Rentals, Repair			m		Ė		for JSI Research and
& Maintenance, Purchase &			l .				Training Institute, Inc.
Depreciation)	\$ ·	86.87	\$	· -	\$	86.87	includes fringe benefits - (38% of salary) and other
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical,		٠.				·	general operating costs to
Office)	\$	140.11	\$	•	\$	140.11	support project activities including occupancy,
6. Trevel	\$		\$	-	\$	•	equipment, general office
7. Occupancy	\$	280.22	\$	<u> </u>	\$	280.22	
8. Current Expenses (includes		_			·		telecommunications and other current expenses,
Telephone, Postage, Subscriptions, Audit			l		ĺ		information systems,
& Legal, Insurance, Board Expenses)	\$	210.15	\$, -	\$	210.15	accounting and payroll, human resources and staff
9. Software	\$	•	\$	-	\$		development, and general
10. Marketing/Communications	\$	-	\$		\$		administrative support
11. Staff Education and Training	\$	56.04	\$	-	\$	56.04	
12. Subcontracts/Agreements			3		\$	-	for application of the
13 Other (specific details mandatory):	\$	-	\$		\$		NiCRA is on salary/wages
Educational Outreach	\$	3,900.01	\$	-	\$	3,900.01	only including holiday, sick
Information Systems	·				\$		and vacation.
HR	\$		\$	114.89	\$	114.89	•
Gen Admin	\$		\$	114.89	\$	114.89	•
Payroll and Accounting	\$	-	\$	114.89	\$	114.89	
	\$		\$	114,89	\$_	114.89	
TOTAL	\$	8,540.44	\$	459.56	\$	9,000.00	
indirect As A Percent of Direct				5.4%			

RFP-2018-DPHS-03-PUBLIC

Contractor Initials:

Page 1 of 1

Date: 1/22/18

New Hampshire Department of Health and Human Services

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

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support Services -

Budget Request for: EPA Lead

Amendment #1

Budget Period: SFY 2019

							<u> </u>
Line Man	5.65 1.05 1.05 1.05 1.05 1.05 1.05 1.05 1.0	Libect Crescental		Indirect Fixed	d, i	TOP!	
Total Salary/Wages	3	17,445.05	3	and the second	√A. Σ.: S	17,445,05	The rederally approved
2. Employee Benefits	\$	6,629.12	<u>š</u>		Š	6,629.12	Negotiated Indirect Cost
3. Consultants	-\$		3	, -	l š	•	Rate Agreement (NICRA)
Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)		540.80	\$		s	540.80	for JSI Research and Training Institute, Inc. includes fringe benefits
5. Supplies: (includes supplies for	۳	5-40.00	۳		₽	340.00	(38% of salary) and other
Education, Lab, Pharmacy, Medical, Office)	\$	872.25	\$	-	\$	872.25	general operating costs to support project activities including occupancy
6. Travel.	\$	•.	\$		\$		equipment, general office
7. Occupancy	\$_	1,744.51	\$	-	\$·	1,744.51	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit							telecommunications and other current expenses, information systems,
& Legal, Insurance, Board Expenses)	\$	1,308.39	\$	•	\$. 1,308.39	accounting and payroll, human resources and staff
9. Software and a second	\$		\$		\$	-	development, and general
10. Marketing/Communications	\$	-	\$		\$	• .	administrative support
11. Staff Education and Training	\$	348.90	\$	-	\$	348.90	costs. The approved basis
12. Subcontracts/Agreements	.\$.	-	\$		\$	-	for application of the
Other (specific details mandatory):	\$		\$; <u>-</u>	\$	-	NICRA is on salary/wages
NELCC Meetings		7,500.00	4	-	\$	7,500.00	only including holiday, sick
Educational Outreach	\$_	749.98	49		44	749.98	and vacation.
Information Systems	\$	-	\$	715.25	\$	715.25	· · · · · · · · · · · · · · · · · · ·
<u> </u>	\$	-	\$	715.25	\$	715.25	- .
Gen Admin	\$	-	\$	715.25	\$	715.25	•
Payroll and Accounting	\$_	-	\$	715.25	\$	715.25	•
	\$		\$	· .	\$		•
TOTAL	\$	37,139.00	\$	2,861.00	\$ -	40,000.00	

7.7%

RFP-2018-DPHS-03-PUBLIC

Contractor Initials:

Date: 1/22/18

Page 1 of 1



Jeffrey A. Meyers Commissioner

Lisa Morris, MSSW Director

STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

29 HAZEN DRIVE, CONCORD, NH 03301-6527 603-271-4501 1-800-852-3345 Ext. 4501 Fax: 603-271-4827 TDD Access: 1-800-735-2964



May 25, 2017

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

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Division of Public Health Services, to enter into an agreement with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, Vendor #161611-B001, 501 South Street, 2nd Floor, Bow, NH 03304, in an amount not to exceed \$1,565,580; to provide a broad range of programmatic support services across a number of public health programs, effective July 1, 2017 or upon date of Governor and Council approval, whichever is later, through June 30, 2019. Funds are 76% Federal, 18% Other, and 6% General Funds.

Funds are anticipated to be available in the following accounts in SFY 2018 and SFY 2019, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without approval from Governor and Executive Council.

05-95-90-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS. HHS. DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY PREPAREDNESS 67% Federal, 33% General

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90077410	115,000
SFY 2019	102-500731	Contracts for Prog Svc	90077410	115,000
<u> </u>			Sub Total	\$230,000

05-95-90-902510-2239 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS. DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, HOSPITAL PREPAREDNESS 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90077700	70,000
SFY 2019	102-500731	Contracts for Prog Svc	90077700	70,000
			Sub Total	\$140,000

05-95-90-902510-5178 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, IMMUNIZATION PROGRAM 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90023320	65,000
SFY 2019	102-500731	Contracts for Prog Svc	90023320	65,000
	<u> </u>		Sub Total	\$130,000

05-95-90-902510-2229 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS. HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, PHARMACEUTICAL REBATES 100% Other

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90024600	133,800
SFY 2019	102-500731	Contracts for Prog Svc	90024600	113,800
 -	<u> </u>		Sub Total	\$247,600

05-95-90-901510-5390 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, FOOD PROTECTION 37% General, 63% Other

1				
Fiscal Year	. Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731			
		Contracts for Prog Svc	90000022	18,000
SFY 2019	102-500731	Contracts for Prog Svc		
			90000022	18,000
	<u> </u>	<u></u>	Sub Total	\$36,000

05-95-90-900510-5173 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS. HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFORMATICS, ENVIRONMENTAL PUBLIC HEALTH TRACKING

!	Classition			T	
- -	Fiscal Year	Class / Account	Class Title	Job Number	Total-Amount
	SFY 2018	102-500731		000 110111061	- Total Amount
-	SFY 2019		Contracts for Prog Svc	90041000	50,000
\vdash	SF1 2019	102-500731	Contracts for Prog Svc	90041000	50,000
_		<u> </u>		Sub Total	\$100,000

05-95-90-901510-7964 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS. HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, LEAD PROTECTION 100%

Fiscal Year	Class / Account	Class Title		
		Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	00003500	
	102-500731	Contracts for Prog Svc	90003600	36,000
	100001011	Contracts for Prog SVc	90038000	50,000
SFY 2019	400 500704		Sub Total SFY 2018	86,000
	102-500731	Contracts for Prog Svc	90003600	36,000
	102-500731	Contracts for Prog Svc	90038000	
				50,000
	 		Sub Total SFY 2019	86,000
	<u>'</u>		Sub Total	\$172,000

05-95-90-902010-5896 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, ACA HOME VISITING X02 FORMULA GRANT 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	·Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90083200	221,990
SFY 2019	102-500731	Contracts for Prog Svc	90083200	221,990
			Sub Total	\$443,980

05-95-90-902010-5190 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNITY AND HEALTH SERVICES, MATERNAL - CHILD HEALTH 100% Federal

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90080001	24,000
SFY 2019	102-500731	Contracts for Prog Svc	90080001	24,000
			Sub Total	\$48,000

05-95-90-9015010-5299 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, RADIOLOGICAL EMERGENCY RESPONSE 100% Other

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90030000	9,000
SFY 2019	102-500731	Contracts for Prog Svc	90030000	9,000
			Sub Total	\$18,000_
			TOTAL	\$1,565,580

EXPLANATION

Funds in this agreement will be used to provide a broad range of public health professional support services including, but not limited to; developing and implementing training programs; developing evaluation plans; conducting needs assessments; developing educational materials; planning for large statewide conferences; providing technical assistance to local partners; and making subject matter experts available to Departmental contractors. These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

The overarching purpose of this contract is to better coordinate a range of public health professional support services on a statewide basis to assure that all New Hampshire residents are covered by initiatives to protect and improve the health of the public. The Vendor will ensure successful outcomes across this range of services and program areas that include: transparent and informed evaluation planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among Department contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.

The Department procured these services as it does not have the resources available to manage these specific services in-house. Support services to be provided include:

- 1. Environmental Public Health Tracking activities;
- 2. Food Protection activities:
- 3. Lead Poisoning Prevention activities:
- 4. Immunization Promotion;
- 5. Infectious Disease Prevention, Investigation and Care activities:
- 6. Maternal and Child Health activities:
- 7. Public Health Emergency Preparedness activities

Notwithstanding any other provision of the Contract to the contrary, no services shall be provided after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30, 2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennium.

Should Governor and Executive Council not authorize this Request, there will be a reduced capacity to provide training to a range of public health partners on multiple health topics; host large scale conferences; develop plans to evaluate the effectiveness of services; develop and produce educational materials; and provide technical assistance to local and state partners.

JSI Research and Training Institute, Inc., d/b/a Community Health Institute 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 March 10, 2017 through April 5, 2017. In addition, bidder's conference was held on March 20, 2017.

The Department received one 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 proposals/applications. The Bid Summary is attached.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, this Agreement has the option to extend for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council.

The performance measures/objectives that will be used to measure the effectiveness of the agreement are attached:

Area served: Statewide.

Source of Funds: 76% Federal Funds from the Centers for Disease Control and Prevention, HPP & PHEP Cooperative Agreements, Immunization Cooperative Agreement, EPHT Program, NH Reduced Lead Poisoning of Children, US EPA Lead 404G Training and Certification, UH Health Resources & Services Administration, Maternal , Infant & Early Childhood Home Visiting Grant, Maternal and Child Health Grant, 18% Other Funds from HIV Pharmaceutical Rebates, Food Protection Agency Licensing Fees, Utility Assessment from Safety, and 6% General Funds.

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

Respectfully submitted,

isa Morris, MSSW

Director

Approved by:

Leffrey A. Meyer

Commissioner



STATE OF NEW HAMPSHIRE DEPARTMENT OF INFORMATION TECHNOLOGY

27 Hazen Dr., Concord, NH 03301 Fax: 603-271-1516 TDD Access: 1-800-735-2964 www.nh.gov/doit

Denis Goulet
Commissioner

May 23, 2017

Jeffrey A. Meyers, Commissioner
Department of Health and Human Services
State of New Hampshire
29 Hazen Drive
Concord, NH 03301

Dear Commissioner Meyers:

This letter represents formal notification that the Department of Information Technology (DoIT) has approved your agency's request to enter into a contract with JSI Research and Training Institute, Inc., d/b/a Community Health Institute, of Bow, NH, as described below and referenced as DoIT No. 2018-029.

This is a request to enter into a contract with JSI Research and Training Institute, Inc., to provide a broad range of programmatic support services across a number of public health programs including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Departmental contractors. These services increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens.

The funding amount is not to exceed \$1,565,580, and is effective July 1, 2017, or upon the date of Governor and Council approval, whichever is later, through June 30, 2019.

A copy of this letter should accompany the Department of Health and Human Services' submission to the Governor and Executive Council for approval.

Sincerety,

Denis Goulet

DG/ik DoIT #2018-029

cc: Bruce Smith, IT Manager, DolT



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

Public Health Professional Support	
Services	RFP-2018-DPHS-03-PUBLIC
DED Mores	OFD Mumber

Bidder Name

JSI dba Community Health Institute									
^{2.} 0									
3. <u>o</u>									
1. <u>o</u>									
j. 0									

Pass/Fail	Maximum Points	Actual Points
85%	400	340
	400	0
	400	0
	400	0
	400	0
_	400	0
	400	0

	Reviewer Names
1.	Neil Twitchell, Tech
2:	Karen Blizzard Royce
3 .	Katie Bush
4.	Lindsay Pierce
5.	Rhonda Siegel
6.	Beverty Drouin
7.	Jennifer Conroy, Cost
8.	Ellen Chase Lucard

Philip Nadeau

Public Health Professional Support Services Performance Measures

1. Performance Measures

- 1.1. The Contractor shall ensure that following performance outcomes and measures are annually achieved and monitored monthly to measure the effectiveness of the agreement:
- 1.2. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 1.2.1. Environmental Public Health Tracking
 - 1.2.1.1. At least 85% of participants rate the Feedback Sessions as either "excellent" or "very good" in an evaluation survey
 - 1.2.2. Healthy Homes and Lead Poisoning Prevention Program
 - 1.2.2.1. At least 85% of participants rate the regular NELCC meetings as either "excellent" or "very good" in an evaluation survey.
 - 1.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.2.3.1. At least 85% of participants rate the quarterly caucus phone meetings as either "excellent" or "very good" in an evaluation survey.
 - 1.2.3.2. At least 85% of participants rate the quarterly Home Visiting Coordinating Council meetings as either "excellent" or "very good" in an evaluation survey.
- 1.3. Develop and Implement Training Programs
 - 1,3.1. Food Protection Section
 - 1.3.1.1. The training modules are approved rand rated by the DHHS as either "excellent" or "very good"
 - 1.3.1.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 1.3.2. Public Health Emergency Preparedness
 - 1.3.2.1. The training modules are rated as either "excellent" or "very good" by DPHS.
 - 1.3.2.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 1.3.3. Healthy Homes and Lead Poisoning Prevention Program
 - 1.3.3.1. The training module is rated as either "excellent" or "very good" by DPHS.
 - 1.3.3.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 1.3.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.3.4.1. Needs assessment and training plan (overall and site specific) approved by DPHS.
 - 1.3.4.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.

Public Health Professional Support Services Performance Measures

- 1.4. Provide Logistical Support for Conferences
 - 1.4.1. Healthy Homes and Lead Poisoning Prevention Program
 - 1.4.1.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.1.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.2. Immunization Program
 - 1.4.2.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.2.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.3. Public Health Emergency Preparedness
 - 1.4.3.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.3.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.4.4.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 1.4.4.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 1.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.4.5.1. At least 85% of learning exchange participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
- 1.5. Provide Technical Assistance
 - 1.5.1. Public Health Emergency Preparedness
 - 1.5.1.1. At least 90% of high-priority technical assistance requests made are met.
 - 1.5.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.5.2.1. At least 90% of high-priority technical assistance requests made are met.
- Develop and produce educational materials
 - 1.6.1. Environmental Public Health Tracking Program
 - Approval by the Division of Public Health Services of developed educational materials.
 - 1.6.2. Healthy Homes and Lead Poisoning Prevention Program
 - 1.6.2.1. Approval by the Division of Public Health Services of developed educational materials.

Public Health Professional Support Services Performance Measures

- 1.6.3. Immunization Program
 - 1.6.3.1. Approval by the Division of Public Health Services of developed educational materials.
- 1.6.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.6.4.1. Approval by the Division of Public Health Services of the content and functionality of the HPG website.
- 1.7. Develop and Implement Evaluation Plans
 - 1.7.1. Environmental Public Health Tracking Program
 - 1.7.1.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 1.7.2. Healthy Homes and Lead Poisoning Prevention Program
 - 1.7.2.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 1.7.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.7.3.1. Implementation of at least 90% of the current MIECHV Continuous Quality Improvement Plan.
- 1.8. Update Strategic Plans
 - 1.8.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - . 1.8.1.1. Approval by the Division of Public Health Services of updated MIECHV Strategic State Plan.
- 1.9. Serve as a Fiscal Agent
 - 1.9.1. Environmental Public Health Tracking Program
 - 1.9.1.1. Subcontracts with RPHNs executed as directed by DPHS.
 - 1.9.2. .. Infectious Disease Prevention, Investigation & Care Services Section
 - 1.9.2.1. Target: 95% of HIV and HCV testing and prevention supplies distributed to sites are logged on the appropriate distribution log within one week of distribution.
 - 1.9.2.2. Numerator- The number of HIV and HCV testing and prevention supply distributions listed on the distribution log that were logged within one week of the distribution date.
 - 1.9.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 1.9.3.1. Subcontract for increase in postpartum visit project executed as directed by DPHS.
 - 1.9.4. Public Health Emergency Preparedness
 - 1.9.4.1. Subcontracts with Medical Reserve Corps executed as directed by DPHS/ESU.
 - 1.9.4.2. Subcontract for web-based collaboration system executed as directed by DPHS.
 - 1.9.4.3. Subcontracts with up to four individuals executed as directed by DPHS.
- 1.10. Annually, the Contractor shall develop and submit to the DHHS, a corrective action plan for any performance measure that was not achieved.

Subject: Public Health Professional Support Services RFP-2018-DPHS-03-PUBLIC

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

AGREEMENT

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

GENERAL PROVISIONS

1. IDENTIFICATION.			
1.1 State Agency Name		1.2 State Agency Address	
NH Department of Health and H	luman Services	129 Pleasant Street	
· ·	•	Concord, NH 03301-3857	
· · · · · · · · · · · · · · · · · · ·		<u> </u>	
1.3 Contractor Name		1.4 Contractor Address	
JSI Research and Training Instit	ute, Inc., d/b/a Community	501 South Street, 2nd Floor	
Health Institute	•	Bow, NH 03304	,
<u> </u>			
1.5 Contractor Phone	1.6 Account Number	1.7 Completion Date	1.8 . Price Limitation
Number	05-95-90-202510-7545, 05-95-90-	1	
603-573-3300	902510-2239, 05-95-90-902510-5178, 05-95-90-902510-2229, 05-95-90-	June 30, 2019	\$1,565,580
	902510-5390, 05-95-90-902510-5173,		
	05-95-90-902510-7964, 05-95-90-	ł.	
	902010-5896, 05-95-90-902010-5190.		
1.9 Contracting Officer for Sta	& 05-95-90-201510-5299	1.10 State Agency Telephone	Number
Jonathan V. Gallo, Esq., Interim		603-271-9246	. напосі
Johanian V. Cano, Esq., Interim	Duccio	003-271-9240	
1.11 Contractor Signature		1.12 Name and Title of Con	tractor Signatory
	·	Jonathan Stewart, Director	·
1.13 Acknowledgement: State	of ACH County of	1	
1.13 Acknowledgement. State	of 10 Hr. County of	Merrimack	
on Man 23 2017 hefor	e the undersigned officer, personal	ly appeared the person identifie	d in block 1-12, or satisfactorily
proven to be the person whose n	ame is signed in block 1.11, and ac	knowledged that s/he executed	this document in the capacity
indicated in block 1.12.			
1.13.1 Signature of Notary Pub	lic or Justice of the Peace		
	SMould 1.		
- analy) Mould.		•
[Seal]	//		
1.13.2 Name and Title of Notar	ry or Justice of the Peage	BARAH E. MOECKEL, Notary P	ablic
		Commission Expires September 1	7, 2019
	1001,1V01 012, 1		
1.14 State Agency Signature	· —1 .	1.15 Name and Title of State	
$1 \cdot (U_1 \cap (U_1))$	(5/2/117	Lisa Morris, MSSW, Directo	r
	Date: 541/		<u></u>
1.16 Approval by the N.H. Der	partment of Administration, Division	on of Personnel (if applicable)	·
D.		Disease On:	•
By:		Director, On:	
1.17 Approval by the Attorney	General (Form, Substance and Ex-	ecution) (if applicable)	
1 /		0 6/5/12	
By:	Marshel	011.	_
1.18 Approval by the Governor	rand Executive Council (if application	able)	
Bu:		On:	
By:		On:	

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

3. EFFECTIVE DATE/COMPLETION OF SERVICES.

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

4. CONDITIONAL NATURE OF AGREEMENT.

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

5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.

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

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law. 5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

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

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

7. PERSONNEL.

- 7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.
- 7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

Agreement. This provision shall survive termination of this Agreement.

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

8. EVENT OF DEFAULT/REMEDIÉS.

- 8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):
- 8.1.1 failure to perform the Services satisfactorily or on schedule:
- 8.1.2 failure to submit any report required hereunder; and/or 8.1.3 failure to perform any other covenant, term or condition of this Agreement.
- 8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:
- 8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two
- days after giving the Contractor notice of termination;
- 8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;
- 8-2.3 set off against any other obligations the State may owe tothe Contractor any damages the State suffers by reason of any Event of Default; and/or
- 8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/ PRESERVATION.

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

- 10. TERMINATION. In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of: termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report. described in the attached EXHIBIT A.
- 11. CONTRACTOR'S RELATION TO THE STATE. In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.
- 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS. The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.
- 13. INDEMNIFICATION. The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

14. INSURANCE.

- 14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:
- 14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000per occurrence and \$2,000,000 aggregate; and
- 14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property. 14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

Contractor Initials

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

15. WORKERS' COMPENSATION.

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

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

- 19. CONSTRUCTION OF AGREEMENT AND TERMS. This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.
- 20. THIRD PARTIES. The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.
- 21. HEADINGS. The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.
- 22. SPECIAL PROVISIONS. Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.
- 23. SEVERABILITY. In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.
- 24. ENTIRE AGREEMENT. This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.



Scope of Services

1. Provisions Applicable to Ali Services

- 1.1. The Contractor will 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.
- 1.3. Notwithstanding any other provision of the Contract to the contrary, no services shall continue after June 30, 2017, and the Department shall not be liable for any payments for services provided after June 30,2017, unless and until an appropriation for these services has been received from the state legislature and funds encumbered for the SFY 2018-2019 biennia.

2. Scope of Services

The Contractor shall:

- 2.1. Provide a broad range of public health professional support services including, but not limited to; developing and implementing training programs; conducting needs assessments; developing educational materials; planning for large statewide conferences; and making subject matter experts available to Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS) contractors.
- 2.2. Increase the capacity of local, regional, and state-level public health practitioners to provide high-quality public health services to NH citizens and ensure successful outcomes across this range of services and program areas that include: transparent and informed community planning processes; high-quality educational materials, conferences and training programs; knowledge and skills-building among DPHS contracted agencies; timely and efficient administrative processes; and effective evaluation of programs.
- 2.3. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 2.3.1. In consultation with DPHS subject matter experts, provide logistical support for ongoing committees/planning groups as defined in Attachment F.
- 2.4. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.4.1. Provide logistical support to the New England Lead Coordinating Committee (NELCC). This includes up to 12 regular meetings of the full NELCC and up to 2 of committee/ workgroup meetings per year. Information about the NELCC is available at: http://www.newenglandlead.org/.

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- 2.5. Environmental Public Health Tracking
 - 2.5.1. Provide logistical support to host up to 10 meetings with Regional Public Health Networks to gather feedback on the EPHT Data Portal.
 - 2.5.2. Provide logistical support for up to 5 focus groups to conduct user research of EPHT data and projects.
- 2.6. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.6.1. Provide logistical support to the NH HIV Planning Group (HPG). This includes up to 6 regular meetings of the full HPG and up to 30 of committee/workgroup meetings per year. More information about the HIV HPG is available at: nhhiv.org.
- 2.7. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.7.1. Provide logistical support to quarterly conference calls for three, peer-based caucuses. The caucuses will be role based (e.g. supervisors, home visitors, and quality improvement staff).
 - 2.7.2. Provide logistical support for the Home Visiting Coordinating Council at least quarterly. This group serves as the MIECHV Advisory Group and is made up of collaborating partners and others in the state with an interest and background in home visiting.
- 2.8. Develop and Implement Training Programs
 - 2.8.1. In consultation with DPHS subject matter experts, develop and/or implement training programs based on adult learning theories that use various training modalities (i.e. classroom, web-based, training of trainers, etc.) to maximize the reach of these programs.
 - 2.8.1.1. Food Protection Section (FPS):
 - 2:8:1:1.1. In consultation with Food Protection Staff develop training curricula for three discrete audiences:
 - 2.8.1.1.1.1 DPHS FPS staff and Food Service Establishment (FSE) inspectors in municipalities that regulate FSE. A list of these municipalities is available at: http://www.dhhs.nh.gov/dphs/fp/documents/selfinspect.pdf
 - 2.8.1.1.1.2. Staff from state agencies that conduct food safety inspections as one component of a more comprehensive operational inspection. This includes Department of Environmental Services Youth Camp inspection staff, DHHS Health Facilities Licensing staff (which inspects child care centers, nursing homes and assisted living facilities).
 - 2.8.1.1.1.3. Food Service Workers including, but not limited to workers in restaurants, retail food stores, schools, and caterers.
 - 2.8.1.2. Public Health Emergency Preparedness:
 - 2.8.1.2.1. Develop and implement training programs for two discrete audiences:

2.8.1.2.1.1. RPHN emergency preparedness coordinators

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- 2.8.1.2.1.2. Local municipal officials, healthcare preparedness personnel, volunteers and others engaged in regional PHEP planning and response.
- 2.8.1.3. Healthy Homes and Lead Poisoning Prevention Program:
 - 2.8.1.3.1. Plan and implement the 1-day Renovation, Repair and Painting Training programs in New Hampshire's highest risk communities using the US Environmental Protection Agency curriculum.
- 2.8.1.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.8.1.4.1. In consultation with MIECHV/MCH staff, facilitate a training needs assessment for the 11 MIECHV contracted home visiting sites.
 - 2.8.1.4.2. Develop and implement an annual training plan (which will include site specific training plans), including evaluation, from the information garnered from the training needs assessment. At a minimum, ten (10) training accessible opportunities should be offered per MIECHV funded home visiting site per year. An opportunity is defined as a pre-existing training, which the contractor pays home visiting staff to attend (can be out of state) and trainings which are provided by the contractor. These can be offered electronically (webinars, etc.) or in-person.
- 2.9. Provide Logistical Support for Conferences
 - 2.9.1. In consultation with DPHS subject matter experts, provide logistical support for conferences as defined by the DPHS in the original Request for Proposal.
 - 2.9.1.1. Healthy Homes and Lead Poisoning Prevention Program
 - 2.9.1.1.1. Provide logistical and planning support for the NELCC's annual conference for up to 250 attendees. Provide logistical and planning support for four regional dinner meetings for up to 120 attendees each.
 - 2.9.1.2. Immunization Program
 - 2.9.1.2.1. Provide logistical support for the annual Immunization Conference for approximately 400 attendees.
 - 2.9.1.3. Public Health Emergency Preparedness
 - 2.9.1.3.1. Provide logistical and planning support for the annual NH Statewide. Preparedness conference for up to 800 attendees.
 - 2.9.1.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.9.1.4.1. Provide logistical and planning support for the bi-annual NH STD, HIV, Hepatitis, TB conference for up to 250 attendees. Planning support includes provision of continuing education credits.
 - 2.9.1.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section

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- 2.9.1.5.1. Provide logistical and planning support, including evaluation, to semi-annual conferences-learning exchanges (fall and spring) for up to 55 staff at MIECHV contracted sites. The spring 2018 training will focus on Healthy Families America required content training for continued certification. The fall training 2018 will be based on findings from the needs assessment.
- 2.9.1.5.2. Provide logistical and planning support for at least two half or full day inperson statewide and/or regional trainings.
- 2.10. Provide Technical Assistance
 - 2.10.1. Public Health Emergency Preparedness
 - 2.10.1.1. In consultation with DPHS subject matter experts, provide technical assistance to three discrete groups directed toward their meeting the national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (March 2011) and subsequent editions:
 - 2.10.1.1.1 DPHS/Emergency Services Unit (ESU) preparedness staff
 - 2.10.1.1.2. Public health preparedness coordinators at the 13 organizations funded by DPHS to provide Regional Public Health Network services. TA will be available to both individuals and as a group.
 - 2.10.1.1.3 Medical Reserve Corps units recognized by the registered with the U.S. Surgeon General, Office of the Civilian Volunteer Medical Reserve Corps, to support recruitment, training and deployment of the MRC volunteers.
 - 2.10.1.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.2.1. In consultation with DPHS subject matter experts, identify and coordinate the availability of technical assistance providers to DPHS contractors and service provider agencies.
 - 2.10.1.3. Develop and produce educational materials
 - 2.10.1.3.1. In consultation with DPHS subject matter experts, develop and/or produce educational materials on topics determined by DPHS staff. All materials shall be developed in accordance with CDC recommendations contained in Simply Put: Guide to Developing Easy-To-Understand Materials, CDC July 2010, available at: https://www.cdc.gov/healthliteracy/pdf/Simply_Put.pdf
 - 2.10.1.4. Environmental Public Health Tracking Program (EPHT)
 - 2.10.1.4.1. Develop educational materials targeted to public health professionals, emergency preparedness officials, and local partners to increase knowledge and understanding of the EPHT program at the state and local levels.
 - 2.10.1.5. Healthy Homes and Lead Poisoning Prevention Program (HHLPPP)
 - 2.10.1.5.1 Develop educational materials in collaboration with the HHLPPP to target to clinicians, contractors, and families to increase knowledge and understanding of best practices relative to Screening and Management Guidelines, lead-safe work practices, and keeping children safe from lead hazards.
 - 2.10.1.6. Immunization Program
 - 2.10.1.6.1. Develop educational materials targeted towards increasing awareness related to the Immunization Information System (IIS).

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- 2.10.1.6.2. Develop educational materials targeted towards increasing awareness related to the benefits of immunizations across the lifespan.
- 2.10.1.7. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.1.7.1. In consultation with DPHS, maintain and update the NH HIV Planning Group (HPG) website.
- 2.10.2. Develop and Implement Evaluation Plans
 - 2.10.2.1. In consultation with DPHS subject matter experts, develop evaluation plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
 - 2.10.2.2. Environmental Public Health Tracking Program
 - 2.10.2.2.1. Develop and implement a plan to evaluate ongoing EPHT projects that meets criteria outlined by CDC and fulfills federal requirements. This document will facilitate programming planning, implementation, and evaluation.
 - 2.10.2.2.2. Develop and implement a plan to evaluate previously funded HHLPPP projects that addressed dissemination techniques and understanding of the 2015 Lead Surveillance Report and the Childhood lead Screening and Management Guidelines.
 - 2.10.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.2.3.1. Implement current MIECHV Continuous Quality Improvement Plan
- 2.10.3. Update Strategic Plans
 - 2.10.3.1. In consultation with DPHS subject matter experts, update pre-existing strategic plans that clearly outline goals, objectives, activities, outputs, outcomes, and performance measures.
 - 2.10.3.2. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.3.2.1. Update the 2010 MIECHV Strategic State Plan.
- 2.10.4. Serve as a Fiscal Agent
 - 2.10.4.1. As directed by DPHS staff, serve as fiscal agent to maximize the efficient use of resources as follows:
 - 2.10.4.2. Environmental Public Health Tracking Program
 - 2.10.4.2.1. Enter into up to 3 mini-grants with vendors funded by DPHS to provide Regional Public Health Networks services. A list of currently funded vendors is available at: http://www.dhhs.nh.gov/dphs/rphn/index.htm.
 - 2.10.4.3. Infectious Disease Prevention, Investigation & Care Services Section
 - 2.10.4.3.1. Reimburse costs incurred by approximately 5 public members of the HPG to attend out-of-state conferences identified by the DPHS and mileage costs to attend in-state meetings. The purpose is to increase the knowledge and skills of the public members of the HPG.
 - 2.10.4:3.2. Procure prevention supplies as determined by the IDPICSS.

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- 2.10.4.3.3. Execute a subcontract with a vendor identified by the DPHS to provide consultation and technical assistance on the production of a digital storytelling project, including coordination, development and implementation of a digital storytelling workshop; production of a digital storytelling electronic file for up to eight stories and training of participants in conducting an engagement session with stakeholders.
- 2.10.4.4. Public Health Emergency Preparedness
 - 2.10.4.4.1. Execute a subcontract with a vendor identified by the DPHS to procure E-Studio, a web-based collaboration system currently in use at DPHS.
 - 2.10.4.4.2. Enter into mini-grants with up to 13 Medical Reserve Corps units to build capacity to staff emergency response facilities during public health emergencies.
 - 2.10.4.4.3. Enter into subcontracts with up to 4 individuals identified by the DPHS to participate in radiological emergency planning, training and exercises to build staffing capacity to respond to radiological emergencies.
- 2.10.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 2.10.4.5.1. Support at least two MIECHV funded home visiting agency staff selected by the DHHS to attend the annual MIECHV grantee conference.
 - 2.10.4.5.2. Execute a subcontract with a vendor identified by the DPHS to research and identify methods to increase utilization of postpartum visits by home visiting families.

3. Staffing

The Contractor shall:

- 3.1. Provide sufficient staff to perform all tasks specified in this Contract and shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion to meet the scope of work
- 3.2. Ensure staffing structure includes a contract administrator to administer all scopes of work relative to this Contract, as well as progress and finance reporting.
- 3.3. Ensure that across all funded positions, in addition to subject matter expertise, there is a combined level of expertise, skills and ability to understand data; use data for planning and evaluation; community engagement and collaboration; group facilitation skills; and IT skills in order to function as a team, ideally with complementary skill and abilities across these foundational areas of expertise and abilities.
- 3.4. Ensure that personnel are available during normal business hours, at a minimum Monday through Friday, 8:00 A.M. to 4:00 P.M.

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4. Outcomes / Performance Measures

- 4.1. The Contractor shall ensure that following performance outcomes and measures are annually achieved and monitored monthly to measure the effectiveness of the agreement:
- 4.2. Convene, Coordinate and Facilitate Community-Based Public Health Partners
 - 4.2.1. Environmental Public Health Tracking
 - 4.2.1.1. At least 85% of participants rate the Feedback Sessions as either "excellent" or "very good" in an evaluation survey.
 - 4.2.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.2.2.1. At least 85% of participants rate the regular NELCC meetings as either "excellent" or "very good" in an evaluation survey.
 - 4.2.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.2.3.1. At least 85% of participants rate the quarterly caucus phone meetings as either "excellent" or "very good" in an evaluation survey.
 - 4.2.3.2. At least 85% of participants rate the quarterly Home Visiting Coordinating Council meetings as either "excellent" or "very good" in an evaluation survey.
- 4.3. Develop and Implement Training Programs
 - 4.3.1. Food Protection Section
 - 4.3.1.1. The training modules are approved rand rated by the DHHS as either "excellent" or "very good"
 - 4.3.1.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.2. Public Health Emergency Preparedness
 - 4.3.2.1. The training modules are rated as either "excellent" or "very good" by DPHS.
 - 4.3.2.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.3. Healthy Homes and Lead Poisoning Prevention Program
 - 4.3.3.1. The training module is rated as either "excellent" or "very good" by DPHS.
 - 4.3.3.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.
 - 4.3.4. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.3.4.1. Needs assessment and training plan (overall and site specific) approved by DPHS.
 - 4.3.4.2. At least 85% of participants rate the training programs as either "excellent" or "very good" in an evaluation survey.

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- 4.4. Provide Logistical Support for Conferences
 - 4.4.1. Healthy Homes and Lead Poisoning Prevention Program
 - 4.4.1.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.1.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2. Immunization Program
 - 4.4.2.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.2.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3. Public Health Emergency Preparedness
 - 4.4.3.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.3.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.4.4.1. At least 85% of conference planning committee members rate the conference planning support as either "excellent" or "very good" in an evaluation survey.
 - 4.4.4.2. At least 85% of conference participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey.
 - 4.4.5. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.4.5.1. At least 85% of learning exchange participants rate the elements pertaining to conference logistics as either "excellent" or "very good" in an evaluation survey
- 4.5. Provide Technical Assistance
 - 4.5.1. Public Health Emergency Preparedness
 - 4.5.1.1. At least 90% of high-priority technical assistance requests made are met.
 - 4.5.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.5.2.1. At least 90% of high-priority technical assistance requests made are met.
- Develop and produce educational materials
 - 4.6.1. Environmental Public Health Tracking Program
 - 4.6.1.1. Approval by the Division of Public Health Services of developed educational materials.
 - 4.6.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.6.2.1. Approval by the Division of Public Health Services of developed educational materials.

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- 4.6.3. Immunization Program
 - 4.6.3.1. Approval by the Division of Public Health Services of developed educational materials.
- 4.6.4. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.6.4.1. Approval by the Division of Public Health Services of the content and functionality of the HPG website.
- 4.7. Develop and Implement Evaluation Plans
 - 4.7.1. Environmental Public Health Tracking Program
 - 4.7.1.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.2. Healthy Homes and Lead Poisoning Prevention Program
 - 4.7.2.1. Approval by the Division of Public Health Services of developed evaluation plan.
 - 4.7.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.7.3.1. Implementation of at least 90% of the current MIEGHV Continuous Quality Improvement Plan.
- 4.8. Update Strategic Plans
 - 4.8.1. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.8.1.1. Approval by the Division of Public Health Services of updated MIECHV Strategic State Plan.
- 4.9. Serve as a Fiscal Agent
 - 4.9.1. Environmental Public Health Tracking Program
 - 4.9.1.1. Subcontracts with RPHNs executed as directed by DPHS.
 - 4.9.2. Infectious Disease Prevention, Investigation & Care Services Section
 - 4.9.2.1. Target: 95% of HIV and HCV testing and prevention supplies distributed to sites are logged on the appropriate distribution log within one week of distribution.
 - 4.9.2.2. Numerator- The number of HIV and HCV testing and prevention supply distributions listed on the distribution log that were logged within one week of the distribution date.
 - 4.9.3. Maternal, Infant and Early Childhood Home Visiting Program (MIECHV)/Maternal and Child Health Section (MCH):
 - 4.9.3.1. Subcontract for increase in postpartum visit project executed as directed by DPHS.
 - 4.9.4. Public Health Emergency Preparedness
 - Subcontracts with Medical Reserve Corps executed as directed by DPHS/ESU.
 - 4.9.4.2. Subcontract for web-based collaboration system executed as directed by DPHS.
 - 4.9.4.3. Subcontracts with up to four individuals executed as directed by DPHS.

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4.10. Annually, the Contractor shall develop and submit to the DHHS, a corrective action plan for any performance measure that was not achieved.

5. State and Federal Laws

The Contractor shall:

- 5.1. Be responsible for compliance with all relevant state and federal laws. Special attention is called to the following statutory responsibilities:
- 5.2. Publications funded under this contract shall be responsible to adhere to the requirements in Exhibit C Special Provisions, Paragraph 14. Prior Approval and Copyright Ownership.
- 5.3. The Contractor shall ensure equal access to quality health services and provide culturally and linguistically appropriate services and adhere to the requirements in Exhibit C Special Provisions, Paragraph 16. Limited English Proficiency (LEP).
- 5.4. DHHS recognizes that Contractors may choose to use subcontractors with specific expertise to perform certain services or functions for efficiency or convenience. However, the Contractor shall retain the responsibility and accountability for the function(s) for any services required by this Contract that are provided, in whole or in part, by a subcontracted agency or provider, and adhere to the requirements in Exhibit C Special Provisions, Paragraph 19. Subcontractors of this Contract.
- 5.5. Adhere to the Health Insurance Portability and Accountability Act requirements to maintain the confidentiality of protected health information provided by individuals who contact the polson control center in Exhibit I Health Insurance Portability Act Business Associate
- 5.6. The Contractor shall ensure that following performance indicators are annually achieved and monitored monthly to measure the effectiveness of the agreement:

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Exhibit B

Method and Conditions Precedent to Payment

- 1) The State shall pay the contractor an amount not to exceed the Form P-37, Block 1.8, Price Limitation for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
 - 1.1. This contract is funded with Funds from:
 - 1.1.1. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA #) 93.069, Federal Award Identification Number (FAIN) # U90TP000535.
 - 1.1.2. US Centers for Disease Control and Prevention, TP12-1201 HPP and PHEP Cooperative Agreements, Catalog of Federal Domestic Assistance (CFDA #) 93.889, Federal Award Identification Number (FAIN) # U90TP000535.
 - 1.1.3. US Centers for Disease Control and Prevention, 2013 Cooperative Agreement Application for the Immunization, Vaccine for Children, Catalog of Federal Domestic Assistance (CFDA #) 93.539, Federal Award Identification Number (FAIN) # 23IP000757.
 - 1.1.4. US Centers for Disease Control and Prevention, Environmental Public Health Tracking Program Network Implementation, Catalog of Federal Domestic Assistance (CFDA #) 93.070, Federal Award Identification Number (FAIN) # NU38EH000947.
 - 1.1.5. US Centers for Disease Control and Prevention, NH Reduced Lead Poisoning of Children, Catalog of Federal Domestic Assistance (CFDA #) 93.753, Federal Award Identification Number (FAIN) # NUE1EH001271.
 - 1.1.6. US Environmental Protection Agency, Lead 404(g) Training and Certification, Catalog of Federal Domestic Assistance (CFDA #) 66.707, Federal Award Identification Number (FAIN) # 99151215.
 - 1.1.7. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA #) 93.870, Federal Award Identification Number (FAIN) # X10MC29490.
 - 1.1.8. US Department of Health and Human Services, Health Resources and Services Administration, Catalog of Federal Domestic Assistance (CFDA #) 93.994, Federal Award Identification Number (FAIN) # BO4MC30627.
 - 1.1.9. Other Funds from Pharmaceutical Rebates, Food Protection Fees and Radiological Health Fees
 - 1.1.10. General Funds.
 - 1.2. The Contractor agrees to provide the services in Exhibit A, Scope of Service in compliance with funding requirements. Failure to meet the scope of services may jeopardize the funded contractor's current and/or future funding.
- 2) Payment for said services shall be made monthly as follows:
 - 2.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved line item.
 - 2.2. The Contractor will submit an invoice in a form satisfactory to the State by the twentieth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The invoice must be completed, signed, dated and returned to the Department in order to initiate payment. The Contractor agrees to keep records of their activities related to Department programs and services.

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Exhibit B

- 2.3. 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. Contractors will keep detailed records of their activities related to DHHS-funded programs and services.
- 2.4. The final invoice shall be due to the State no later than forty (40) days after the contract Form P-37, Block 1.7 Completion Date.
- 2.5. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to <u>DPHScontractbilling@dhhs.nh.gov</u>, or invoices may be mailed to:

Financial Administrator
Department of Health and Human Services
Division of Public Health Services
29 Hazen Drive
Concord, NH 03301

. .

- 2.6. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A, Scope of Services and in this Exhibit B.
- 3) Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line Items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

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JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support Services - Public Health Emergency

Budget Request for: Preparedness

(Name of RFP)

Budget Period: SFY 2018

Line Item	L	Direct ::		Indirect Fixed	8 A	Total	Allocation Method for indirect/Fixed Cost
1. Total Salary/Wages	\$	49,886.51	\$	•	\$	49,886.51	The federally approved
Employee Benefits	\$	18, <u>95</u> 6.87	\$	•	\$	18,956.87	Negotiated Indirect Cost
3. Consultants ,	\$	-	\$	-	4		Rate Agreement
4. Equipment: (includes Rentals, Repair &		•	Γ				(NICRA) for JSI
Maintenance, Purchase & Depreciation)	\$	1,546.48	\$	•	\$	1,546.48	Research and Training
5. Supplies: (includes supplies for							Institute, Inc. includes
Education, Lab, Pharmacy, Medical, Office)	\$	2,700.88	\$	• •	\$	2,700.88	fringe benefits (38% of - salary) and other
6. Travel	\$	1,000.00	\$	-	\$	1,000.00	- salary) and other - general operating costs
7. Occupancy	\$	4,988.65	\$	•	3	4,988.65	_to support project
8. Current Expenses (includes Telephone,				`			activities including
Postage, Subscriptions, Audit & Legal,							occupancy, equipment,
Insurance, Board Expenses)	\$	3,741.48	\$	-	\$	3,741.48	general office supplies,
9. Software	\$	-	\$	-	\$	-	telecommunications and
10. Marketing/Communications	\$	-	\$	••	\$	-	other current expenses,
11. Staff Education and Training	\$	997.73	\$		\$	997.73	Information systems,
12. Subcontracts/Agreements	\$	/ •	\$	· -	\$		accounting and payroll,
13. Other (specific details mandatory):	\$	•	\$	•	\$		human resources and
Web-based Collaboration System	\$	13,000.00	\$	-	\$	13,000.00	staff development, and
Preparedness Conference Support	\$	10,000.00	\$	•	\$	10,000.00	general administrative
Information Systems	\$	•	\$	2,045.35	\$	2,045.35	support costs. The approved basis for
HR	\$	•	\$	2,045.35	\$	2,045.35	- application of the
Gen Admin	\$	-	\$	2,045.35	\$	2,045.35	- NICRA is on
Payroll and Accounting	\$		\$	2,045.35	\$	2,045.35	÷salary/wages only
	\$	•	\$	•	\$		including holiday, sick
TOTAL	\$	106,818.60	\$	8,181.40	\$	115,000.00	and vacation.
Indirect As A Percent of Direct			-	7.7%		•	

Contractor Initials:

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

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support

Services - Public Health Emergency

Budget Request for: Preparedness

(Name of RFP)

Budget Period: SFY 2019

Line Item		Direct Incremental		Indirect Fixed		Total	Allocation Method fo Indirect/Fixed Cost
Total Salary/Wages	\$	49,887.59	\$		T 5	49,887.59	The federally approved
Employee Benefits	\$	18,957.28	3	-	ŤŠ	18,957.28	Negotiated Indirect Cost
3. Consultants	\$		1 3		1 3		Rate Agreement
4. Equipment: (includes Rentals, Repair			t÷		Ť		(NICRA) for JSI
& Maintenance, Purchase &	\$	1,546.52	ls	_	ls	1,546,52	Research and Training
5. Supplies: (includes supplies for	ľ	.,,	łŤ		+*	1,340.32	Institute, Inc. includes
Education, Lab, Pharmacy, Medical,	\$	2,698.97	s		s	2,698.97	fringe benefits (38% of
6. Travel	Š	1,000.00	tš		1 🕏	1,000.00	-salary) and other
7. Occupancy	Š	4,988.76	tš	 -	3	4,988.76	-general operating costs
8. Current Expenses (includes	Ť	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 		+~	4,300.70	to support project
Telephone, Postage, Subscriptions, Audit		•	ľ	·	i		activities including
& Legal, Insurance, Board Expenses)	\$	3,741.57	s			2 744 57	occupancy, equipment,
9. Software	Š	0,741.37	Ιŧ		\$	3,741.57	general office supplies,
10. Marketing/Communications	Š		<u> </u>		\$	 -	telecommunications and
11. Staff Education and Training	Š	997.75	Š	 -	\$	007.75	other current expenses,
12. Subcontracts/Agreements	ŧ	337.73	Š		 \$	997.75	information systems,
13. Other (specific details mandatory):	Ť		1	 -	13	<u>-</u>	accounting and payroll,
Web-based Collaboration System	ŧ	13,000.00	-		13	40.000.00	human resources and staff development, and
Preparedness Conference Support	Š	10,000.00	-	 -	13	13,000.00	general administrative
Information Systems	Ť	10,000.00	*	2045 20	1 *	10,000.00	Support costs. The
HR	Ť		\$	2,045.39	13	2,045.39	approved basis for
Gen Admin	ŧ		5	2,045.39	13	2,045.39	application of the
	Š	——— -		2,045.39	- \$	2,045.39_	NICRA is on
	\$		\$	2,045.39	1	2,045.39	salary/wages only
TOTAL	÷	400 040 64	<u> </u>		<u>. 5</u>		including hollday, sick
ndirect As A Percent of Direct	•	106,818.44	<u>\$</u>	8,181.56 7.7%	\$1	15,000.00	and vacation

Contractor Initials:

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Data:

- 1

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Hospital Preparedness

(Name of RFP)

Budget Period: SFY 2018

Line item	įr	Direct ocremental		ndirect Fixed	:	Total	Allocation Method for Indirect/Fixed Cost
Total Salary/Wages	\$	10,796.70	13	-	\$	10,796.70	The federally approved
2. Employee Benefits	\$	4,102.75	[\$		\$	4,102.75	
3. Consultants	\$		\$	-	\$	_	Rate Agreement
4. Equipment: (includes Rentals, Repair &					Г	•	(NICRA) for JSI
Maintenance, Purchase & Depreciation)	\$	334.70	\$	-	S	334.70	Research and Training
5. Supplies: (includes supplies for							Institute, Inc. includes
Education, Lab, Pharmacy, Medical, Office)	\$	639.83	s	•	s	639.83	fringe benefits (38% of
6. Travel	\$. 250.00	Š		Š	250.00	-salary) and other
7. Occupancy	\$	1,079.67	\$		\$	1,079.67	-general operating costs
8. Current Expenses (includes Telephone,							to support project activities including
Postage, Subscriptions, Audit & Legal,							occupancy, equipment,
Insurance, Board Expenses)	S	809.76	s	_	s	809.76	
9. Software	\$	•	Š	-	\$		telecommunications and
10. Marketing/Communications	\$		\$		\$		other current expenses,
11. Staff Education and Training	\$	215.93	Š	 -	Š	215.93	information systems,
12. Subcontracts/Agreements	\$	-	\$	-	\$		accounting and payroli,
13. Other (specific details mandatory):	\$		3		\$		human resources and
Medical Reserve Corps Mini-Grants	\$	50,000.00	\$		\$	50,000.00	staff development, and
Information Systems	\$	-	\$	442.67	3	442.67	general administrative
HR	\$	-	\$	442.67	3	442.67	support costs. The
Gen Admin	\$	-	\$	442.67	\$	442,67	approved basis for
Payroll and Accounting	\$	-	\$	442.67	\$	442.67	-application of the
	\$	•	S		s	· .	-NICRA is on _salary/wages only
TOTAL	\$	68,229.34	\$,770.66	+	70,000.00	including holiday, sick
Indirect As A Percent of Direct				2.6%	_		

Contractor Initials:

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

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support

Budget Request for: Services - Hospital Preparedness (Name of RFP)

Budget Period: SFY 2019

Line Item		Direct noremental		Indirect Fixed		Total	liocation Method for Indirect/Fixed Cont
Total Salary/Wages	\$	10,796.70	\$	•	\$	10,796.70	The federally
2. Employee Benefits	\$	4,102.75	\$	-	\$	4,102.75	approved Negotiated
3. Consultants	\$		\$	-	\$	•	Indirect Cost Rate
Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$	334.70	\$	_	s	334.70	Agreement (NICRA) for JSI Research and Training Institute, Inc.
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	s	 639.83			Ť		includes fringe benefits (38% of salary) and other .
6. Travel	\$	250.00	\$		\$		general operating
7. Occupancy	\$	1.079.67	₽÷.		13	250.00	_costs to support
Companie	9	1,079.07	[\$	<u> </u>	\$	1,079.67	_project activities
8. Current Expenses (includes Telephone.			1				including occupancy, equipment, general
Postage, Subscriptions, Audit & Legal,					•		office supplies,
Insurance, Board Expenses) 9. Software	\$	809.76	\$	~	\$	809.76	telecommunications
	\$		\$		**	<u> </u>	and other current
	\$		\$		49	-	expenses, information
11. Staff Education and Training	\$	215.93	\$	-	15	215.93	systems, accounting
12. Subcontracts/Agreements	\$	•	\$		\$	-	and payroli, human
13. Other (specific details mandatory):	\$		\$	-	\$	· · ·	resources and staff
Medical Reserve Corps Mini-Grants	\$	50,000.00	\$		\$	50,000.00	development, and
Information Systems	\$	-	\$	442.67	\$	442.67	general administrative support costs. The
HR	.\$		\$	442.67_	-\$-	442.67	approved basis for
Gen Admin	\$	•	\$	442.67	\$	442.67	application of the
Payroll and Accounting	\$		\$	-442.67-	-\$-	-442.67-	NICRA is on
	\$	•	\$	-	\$		salary/wages only
TOTAL	\$	68,229.34	\$	1,770.66	\$	70,000.00	including holiday, sick
ndirect As A Percent of Direct				2.6%	-		Sand Handay, olok

Contractor Initials:

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Immunization

(Name of RFP)

Budget Period: SFY 2018

Une Item	In	Direct cremental		ndirect Fixed		Total	Allocation Method for tridbiett/Fixed Cost
Total Salary/Wages	3	30,219.78	\$	-	\$	30,219.78	The federally approved
2. Employee Benefits	\$	11,483.52	\$		\$	11,483.52	Negotiated Indirect Cost
3. Consultants	\$	•	\$	• •	\$	· • _	Rate Agreement (NICRA
4. Equipment: (includes Rentals, Repair &							for JSI Research and
Maintenance, Purchase & Depreciation)	\$	936.82	\$	- .	\$	936.82	Training Institute, Inc.
5. Supplies: (includes supplies for Education,							includes fringe benefits
Lab, Pharmacy, Medical, Office)	\$	1,510.99	\$	-	\$	1,510.99	(38% of salary) and other
6 Travel	\$	•	\$	•	\$		- general operating costs - to support project
7. Occupancy	\$	3,021.98	\$	-	\$	3,021.98	activities including
8. Current Expenses (includes Telephone,							occupancy, equipment,
Postage, Subscriptions, Audit & Legal,							general office supplies,
Insurance, Board Expenses)	S	2,266.47	\$	-	\$	2,266.47	telecommunications and
9. Software	\$	•	\$	•	\$		other current expenses,
10. Marketing/Communications	\$	5,000.00	\$		\$	5,000.00	Information systems,
11. Staff Education and Training	\$	604.40	185	-	\$	604.40	accounting and payroll,
12. Subcontracts/Agreements	\$	-	3	-	\$		human resources and
13. Other (specific details mandatory): 2019							staff development, and
NHIP Conference	S	5,000.00	\$	- '	\$	5,000.00	general administrative
Information Systems	\$	-	\$,239.01	\$	1,239.01	support costs. The
HR	\$	-	\$	1,239.01	\$	1,239.01	epproved basis for
Gen Admin	\$	-	\$	1,239.01	\$	1,239.01	-application of the NiCRA
Payroll and Accounting	\$	-	\$	1,239.01	\$	1,239.01	- is on salary/wages only - including holiday, sick
	\$	-	\$		\$	<u> </u>	and vacation.
TOTAL	₹	60,043.96		956.04	₹	65,000.00	1

Contractor Initials:

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Date: 5/23/17

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Immunization

(Name of RFP)

Budget Period: SFY 2019

Line Item		Direct remental		direct	//: · *	Total	Allocation Method for
Total Salary/Wages Employee Benefits		30,219.78	\$	-	13	30,219.78	
	\$.	11,483.52	\$	-	\$	11,483.52	
3. Consultants	\$		\$	-	\$	-	Rate Agreement
4. Equipment: (includes Rentals, Repair &			T -				(NICRA) for JSI
Maintenance, Purchase & Depreciation)	. \$	936.82	S	-	S	936.82	
5. Supplies: (includes supplies for			<u> </u>	 -	 `- -	000.02	Institute, Inc. includes
ducation, Lab, Pharmacy, Medical, Office)	\$	1,510.99	s	_	s	1,510.99	fringe benefits (38% of
3. Travel	\$		t š		13	1,510.55	-salary) and other general
Occupancy	15	3,021.98	\$	 -	 *	3,021.98	operating costs to
Current Expenses (includes Telephone,	1		Ť		₩-	3,021.90	- support project activities
Postage, Subscriptions, Audit & Legal.	1						including occupancy,
nsurance, Board Expenses)	S	2,266.47	s			2 000 47	equipment, general
. Software	13	-,200.77	۳-	<u> </u>	\ <u>\$</u> _	2,266.47	office supplies,
Marketing/Communications	15	5,000.00	\$	- - -	₽-	500000	telecommunications and
Staff Education and Training	ŧ	604.40	ě		\$	5,000.00	
Subcontracts/Agreements	\$	- 007.40	\$-		\$	604.40	information systems,
Other (specific details mandatory): 2019	┝┷╌		-		\$	<u> </u>	accounting and payroll,
HIP Conference	S	5,000.00					human resources and
Information Systems	3	3,000.00	\$	-	\$	5,000.00	staff development, and
HR HR	1			239.01	\$		general administrative support costs. The
Gen Admin	- -			239.01	\$	1,239.01	approved basis for
Payroll and Accounting				239.01	\$	1,233.01	application of the NICRA
· ayour and Accounting	├-╬		⇒ 1,2	239.01	\$		is on salary/wages only
TOTAL			<u>.\$</u>		<u>.\$ -</u>		including holiday, sick
direct As A Percent of Direct	\$ 60	,043.96	\$ 4,8	56.04	3	65,000.00	and vacation.

Contractor Initials:

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Date: 5/23/17

1. D.

USI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Pharmaceutical Rebates (Name of RFP)

Budget Period: SFY 2018

Line Item		Direct ocremental		ndirect Fixed		Total	location Method
Total Salary/Wages	\$	37,607.84	\$		\$	37,607.84	The federally
2. Employee Benefits	\$	14,290.98	\$	-	\$	14,290.98	approved Negotiate
3. Consultants	\$	-	\$	•	\$	•	Indirect Cost Rate
4. Equipment: (includes Rentals, Repair &	Г		Γ		1		Agreement (NICRA
Maintenance, Purchase & Depreciation)	\$	_1,165.84	\$	-	\$	1,165.84	for JSI Research
5. Supplies: (includes supplies for Education,	Π		T		1		and Training
Lab, Pharmacy, Medical, Office)	\$	1,880.39	\$	-	S	1,880.39	Institute, Inc.
3. Travel	\$	1,500.00	\$	-	\$	1,500.00	-includes fringe
. Occupancy	\$	3,760.78	\$	•	1 \$	3,760.78	- benefits (38% of
Current Expenses (includes Telephone,	Г		广		广		salary) and other
Postage, Subscriptions, Audit & Legal,			ŀ		1.		general operating costs to support
nsurance, Board Expenses)	\$	2,820.60	\$	_	s	2,820.60	
). Software	\$		\$		Ť	2,020.00	_project acovices _including occupancy
Marketing/Communications	\$		Ť		łš		equipment, general
Staff Education and Training	\$	752.16	Š	-	Š	752 16	office supplies
Subcontracts/Agreements	\$	-	Š		\$		telecommunications
Other (specific details mandatory):	\$		5		Š		and other current
HPG Member Reimbursement	\$	2,000.00	Š	-	Š	2,000.00	expenses,
Conference Support	3	5,000.00	·\$		3	5,000.00	information systems
Prevention Supplies	3	12,000.00	\$		Š	12,000.00	accounting and
Digital Storytelling		25,000.00	Š		\$	25,000.00	-payroll, human
Meeting Expenses	\$	6,000.00	Š		1	6,000.00	resources and staff
Website Maintenance	Š	500.00	\$		1	500.00	development, and
Subscription Services	\$	1,500.00	_		3	1,500.00	general
Other Professional Support Services	3	10,000.00			3	10,000.00	.administrative
Special Projects	5	1,853,73			3	1,853.73	support costs. The
Information Systems	\$		\$1	541.92	\$		approved basis for application of the
HR	\$			541.92	\$	1,541.92	Application of the NICRA is on
Gen Admin	\$			541.92	Š		salary/wages only
Payroll and Accounting	Š	_		541.92	S		including holiday,
	Š	- :	5		Š	1,041.32	sick and vacation.
TOTAL	3	27,632.32	3 2	187 88	÷	133,800.00	orth driv vaceuUtt.
direct As A Percent of Direct	•	1.,002.02	70,	4.8%	•	133,800.00	

Contractor Initials

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Pharmaceutical Rebates (Name of RFP)

Budget Period: SFY 2019

Line frem	[Direct ncremental		Indirect Fixed	٠	Total	location Method for triding of the location Method for the location Method for the location of the location Method for the loc
Total Salary/Wages	\$		1 \$	-	15		The federally
2. Employee Benefits	\$	14,685.95	3	-	[3	14,685.95	approved Negotiated
3. Consultants		_	[]	•	Ţ	-	Indirect Cost Rate
4. Equipment: (includes Rentals, Repair &	}		Γ	,	Т		Agreement (NICRA)
Maintenance, Purchase & Depreciation)	\$	1,198.06	S	•	\$	1,198.06	for JSI Research and
Supplies: (includes supplies for Education,			Γ		T		Training Institute
Lab, Pharmacy, Medical, Office)	\$	1,932.36	} \$	-	1 \$	1,932.36	Inc. includes fringe
6. Travel	\$	1,500.00	3		1 \$	1,500.00	- benefits (38% of
7. Occupancy	\$	3,864.72	\$		\$	3,864.72	- salary) and other - general operating
8. Current Expenses (includes Telephone,			Г		1		costs to support
Postage, Subscriptions, Audit & Legal,	ŀ		i		ı		project activities
Insurance, Board Expenses)	\$	2,898.54	[ş	-	S	2,898,54	including occupancy.
9. Software	\$		\$	-	1 \$		equipment, general
10. Marketing/Communications	-\$	-	\$	•	\$		office supplies
11. Staff Education and Training	\$	772.94	\$	-	13	772.94	telecommunications
12. Subcontracts/Agreements	3	•	\$	•	13	•	and other current
13. Other (specific details mandatory):	\$	-	\$		Ì	•.	expenses,
HPG Member Relmbursements		2,000.00	\$		13	2,000.00	information systems,
Conference Support	\$	5,000.00	\$	•	\$	5,000.00	accounting and
Prevention Supplies		12,000.00	\$: -	1 \$	12,000.00	payroll, human
Meeting Expenses	\$	6,000.00	\$	-	\$	6,000.00	resources and staff
Website Maintenance	\$	500.00	\$	-	15	500.00	-development, and
Subscription Services	-\$	-1,500.00	-\$		5	1,500.00-	general
Other Professional Support Services	\$	10,000.00			\$	10,000.00	administrative
Special Projects	\$	5,154.71			5	5,154.71	support costs. The approved basis for
Information Systems	\$		\$	1,536.37	\$	1,536.37	approved basis for application of the
HR	\$		\$	1,536.37	\$	1,536.37	NiCRA is on
Gen Admin	\$		\$	1,536.37	\$	1,536,37	salary/wages only
Payroll and Accounting	\$	-	\$	1,536.37	\$		including holiday.
	\$		\$	•	\$	-	sick and vacation.
TOTAL	\$	107,654.52	3	8,145.48	3	113,800.00	

Indirect As A Percent of Direct

5.7%

Contractor Initials:

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Food

(Name of RFP)

Budget Period: SFY 2018

Line Item	in	Direct cremental	1	ndirect Fixed		Total	Allocation Method for Indirect/Fixed Cost
Total Salary/Wages	\$	9,577.03	1 2		\$	9,577.03	The federally approved
2. Employee Benefits	\$	3,639.28	 \$		\$	3,639.28	
3. Consultants	\$	-	\$	-	5		Rate Agreement
4. Equipment: (includes Rentals, Repair &	Γ		Г		1		(NICRA) for JSI
Maintenance, Purchase & Depreciation)	\$	296.89	\$		s	296.89	Research and Training
5. Supplies: (includes supplies for			Г		† <u>`</u>		Institute, Inc. includes
Education, Lab, Pharmacy, Medical, Office)	5	478.85	S		Ís	478.85	fringe benefits (38% of
6. Travel	\$		Ì		t š		-salary) and other general
7. Occupancy	3	957.71	Š		13	957.71	operating costs to
8. Current Expenses (includes Telephone,	 		Ť		 `		support project activities
Postage, Subscriptions, Audit & Legal,	ĺ		(•	Including occupancy,
Insurance, Board Expenses)	s	718,29	s	-	\$	718.29	equipment, general office supplies.
9 Software	Š		Ť		<u> </u>	. 710.23	telecommunications and
10. Marketing/Communications	Š		Š		 		other current expenses.
11. Staff Education and Training	3	191.54	Š		3	191.54	information systems,
12. Subcontracts/Agreements	\$		Š		1	101.04	accounting and payroll,
13. Other (specific details mandatory):	Š		Ť		l š		human resources and
Training Development	3	569.77	1		Š	569.77	staff development, and
Information Systems	\$	•	\$	392.66	Š	392.66	general administrative
HR	\$		Š	392.66	\$	392.66	support costs. The
Gen Admin	\$	_	\$	392.66	š -	392.66	approved basis for
. Payroll and Accounting	\$		Š	392.66	3	392.66	application of the NICRA
	\$		Š		\		is on salary/wages only
TOTAL	\$1	6.429.38	\$ 1	.570.64	3	18,000.00	Including holiday, sick
indirect As A Percent of Direct			_	9.6%	<u> </u>	. 5/555.00	and vacation.

Contractor Initials:

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Date: 5/23/17

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - Food

(Name of RFP)

Budget Period: SFY 2019

Line item	În	Direct cremental	-	ndirect Fixed		Total	Allocation Method for Indirect Fixed Cost
Total Salary/Wages	\$	8,791.47	\$		\$	8,791.47	The federally approved
2. Employee Benefits	\$	3,340.48	\$	•	\$	3,340.48	Negotiated Indirect Cost
3. Consultants	\$		\$	•	\$		Rate Agreement (NICRA)
4. Equipment: (includes Rentals, Repair &							for JSI Research and
Maintenance, Purchase & Depreciation)	\$	272.52	\$	· -	\$	272.52	Training Institute, Inc.
5. Supplies: (includes supplies for							includes fringe benefits
Education, Lab, Pharmacy, Medical, Office)	\$	439.55	\$		\$	439.55	(38% of salary) and other
6. Travel	\$	-	\$	-	\$	<u>-</u>	 general operating costs to support project activities.
7. Occupancy	\$	879.10	\$	•	\$	879.10	including occupancy,
Current Expenses (includes Telephone,							equipment, general office
Postage, Subscriptions, Audit & Legal,	l		l		ľ		supplies,
Insurance, Board Expenses)	\$_	659.34	\$. •	\$	659.34	
9. Software	\$	•	\$	•	\$	-	other current expenses,
10. Marketing/Communications	\$	•	\$	•	\$		information systems,
11. Staff Education and Training	\$	175.82	\$		\$	175.82	accounting and payroll,
12. Subcontracts/Agreements	\$	•	\$	<u> </u>	45		human resources and
13. Other (specific details mandatory):	\$		\$		45	-	staff development, and
Training Development	\$	2,000.00	\$	· •	\$	2,000.00	general administrative
Information Systems	\$	-	\$	360.43	\$	360.43	support costs. The
HR	\$	•	\$	360.43	\$	360.43	approved basis for application of the NICRA
Gen Admin	\$	-	\$	360.43	\$	360.43	is on salary/wages only
Payroll and Accounting	\$		<u> </u>	360.43	\$	360.43	including holiday, sick
	\$. \$-		\$.	<u> </u>	and vacation.
TOTAL	*	16,558.28	\$	441.72	\$	18,000.00	
Indirect As A Percent of Direct				8:7%			

Contractor Initials:

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Date:

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JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - EPHT

(Name of RFP)

Budget Period: SFY 2018

15			Fixed	Ł .		Indirect/Fixed Cos
	6,483.30	\$	-	\$	6,483.30	The federally approved
\$	2,463.62	\$		\$	2,463.62	Negotiated Indirect
\$	•	\$	•	\$	· ·	Cost Rate Agreement
Г				•		(NICRA) for JSI
\$	200.98	\$	<u> </u>	\$	200.98	Research and Training
Т		T		Γ		Institute, Inc. includes
\$	324.16	\$	•	\$	324.16	fringe benefits (38% of -salary) and other
\$	450.00	\$		\$	450.00	-salary) and other -general operating cost
\$	648.32	\$	-	\$	648.32	to support project
Г						activities including
			•			occupancy, equipment
\$	486.24	S	•	\$	486.24	general office supplies
\$		\$	•	\$	•	telecommunications
\$	•	5		\$	•	and other current
\$	129.66	\$	1.11	\$	129.66	expenses, information
\$	30,000.00	\$	•	\$	30,000.00	systems, accounting
\$	-	\$	-	\$	•	and payroll, human
\$	4,600.00	\$-	•	\$	4,600.00	resources and staff
\$	3,150.48	\$	•	\$	3,150.48	development, and
\$		\$	265.81	\$	265.81	general administrative
	•	\$	265.81	\$	265.81	-support costs. The -approved basis for
	•	\$	265.81	\$	265.81	-application of the
<u> </u>		\$	265.81	\$	265.81	NICRA is on
\$	•	\$	' -	\$	<u> </u>	salary/wages only
1	72,200.00	31	1,191.00	\$	50,000.00	Including holiday, sick
	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ 324.16 \$ 450.00 \$ 648.32 \$ 486.24 \$ - \$ 129.66 \$ 30,000.00 \$ - \$ 4,600.00 \$ 3,150.48 \$ \$ -	\$ 324.16 \$ \$ 450.00 \$ \$ 648.32 \$ \$ \$ \$ 486.24 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ 30,000.00 \$ \$ \$ \$ 4,600.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ 324.16 \$ - \$ 450.00 \$ - \$ - \$ \$ 486.24 \$ - \$ - \$ - \$ - \$ -	\$ 200.98 \$ - \$ \$ 324.16 \$ - \$ \$ 450.00 \$ - \$ \$ 648.32 \$ - \$ \$ 486.24 \$ - \$ \$ 5 129.66 \$ - \$ \$ 30,000.00 \$ - \$ \$ 4,600.00 \$ - \$ \$ 4,600.00 \$ - \$ \$ 3,450.48 \$ - \$ \$ 265.81 \$ \$ 5 265.81 \$ \$	\$ 200.98 \$ \$ 200.98 \$ \$ 324.16 \$ \$ 450.00 \$ \$ \$ 450.00 \$ \$ 450.00 \$ \$ 648.32 \$ \$ 648.32 \$ \$ 486.24 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Contractor Initials:

Page 1 of 1

Date:

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - EPHT

(Name of RFP)

Budget Period: SFY 2019

In		1	ndirect Fixed	7 × 1	Total	Allocation Method for Indirect/Fixed Cost
12		5	•	\$	9,609.55	The federally approved
<u> \$</u>	3,651.63	<u> </u>		13	3,651.63	Negotiated Indirect Cos
<u> </u>		\$	-	1 \$		Rate Agreement
1		Γ		T		(NICRA) for JSI
\$	297.90	\$	-	\$	297.90	Research and Training
		T		T		Institute, Inc. includes
\$	480.48	S	_	S	480 48	fringe benefits (38% of
15		tš			700.40	-salary) and other
1 \$	960.96	Š	 -	+- <u>`</u>	960.96	general operating costs
Ť		Ť	· ····	† *	300.30	to support project
1		l		ł		activities including
5	720.72	•	•	١.	700 70	occupancy, equipment,
-	120.72	-	<u> </u>	•	120.12	general office supplies,
┿		÷		-	 :	telecommunications and
1	102.16		 -	1 8	400.40	other current expenses,
		Ť		13		information systems,
	30,000.00	_		<u> </u>	30,000.00	accounting and payroll,
<u> </u>	2 510 64	_		<u> </u>	-	human resources and
_ •	2,010,04	Ť	200.00	· · ·		staff development, and
		<u> </u>		·		general administrative support costs. The
13		_		2		approved basis for
13		_		\$		application of the NICRA
1		2	393.99	5_	393.99	is on salary/wages only
\$		\$	· ·	-\$	· •	including holiday, sick
3		\$	•	.\$		and vacation.
\$ 4	8,424.04	-\$1	,575.96	-\$	-50,000.00	and foldaudit.
	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ 9,609.55 \$ 3,651.63 \$ 297.90 \$ 480.48 \$ 960.96 \$ 720.72 \$ - \$ 192.16 \$ 30,000.00 \$ - \$ 2,510.64 \$ -	Incremental \$ 9,609.55 \$ \$ 3,651.63 \$ \$ \$ \$ \$	Incremental Fixed \$ 9,609.55 \$ - \$ 3,651.63 \$ - \$ - \$ 297.90 \$ - \$ 480.48 \$ - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - \$ 5 - 5 - \$ 393.99 \$ 5 - 5 3	Incremental Fixed	Incremental Fixed

Contractor Initials:

Page 1 of 1

Date: 5/23/

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - CDC Lead (Name of RFP)

Budget Period: SFY 2018

Line item		Direct cremental		ndirect Fbred	 9 1131	Total	Mocation Method for Indirect/Fixed Cost
Total Salary/Wages	\$	11,208.79	\$	-	\$	11,208.79	The federally approved
2. Employee Benefits	\$	4,259.34	\$	•	\$	4,259.34	Negotiated Indirect Cost
3. Consultants	\$	-	\$	-	\$		Rate Agreement
4. Equipment: (includes Rentals, Repair &	٠,				,		(NICRA) for JSI
Maintenance, Purchase & Depreciation)	\$	347.47	\$		\$	347.47	Research and Training
5. Supplies: (includes supplies for						·	Instituté, inc. includes
Education, Lab, Pharmacy, Medical, Office)	\$	560.44	\$	- '	\$	560.44	fringe benefits (38% of -salary) and other
6. Travel	\$		\$	-	\$	•	- general operating costs
7. Occupancy	\$	1,120.88	\$	-	\$	1,120.88	_to support project
Current Expenses (includes Telephone,							activities including
Postage, Subscriptions, Audit & Legal,	ŀ			1	l	•	occupancy, equipment,
Insurance, Board Expenses)	\$	840.66	\$	-	\$	840.66	general office supplies,
9. Software	\$	•	\$. ,	\$		telecommunications
10. Marketing/Communications	\$	•	\$	-	\$	-	and other current
11. Staff Education and Training	\$	224.18	\$		\$	224.18	•
12. Subcontracts/Agreements	\$	-	\$	•	\$		systems, accounting
13. Other (specific details mandatory):	\$		\$	-	\$		and payroll, human
Educational Outreach	\$	15,600.00	\$	•	\$	15,600.00	resources and staff
							development, and
Information Systems	\$		\$	459.56	\$	459.56	general administrative
HR.	\$	-	\$	459.56	\$	459.56	-support costs. The -spproved basis for
Gen Admin	\$	-	\$	459.56	\$	459.56	-application of the
Payroll and Accounting	\$	•	\$	459.56	\$	459.56	-NICRA is on
	S		S	•	S	_	salary/wages only
TOTAL	\$	34,161.76	\$,838.24	3	36,000.00	including holiday, sick

Indirect As A Percent of Direct

5.4%

Contractor Initials:

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - CDC Lead (Name of RFP)

Budget Period: SFY 2019

Line Item	ln	Direct crements		Indirect Fixed		Total	Ulocation Method fo
Total Salary/Wages	\$	11,208:79	13	•	T\$	11,208.79	The federally
2. Employee Benefits	\$	4,259.34	13	-	\$	4,259.34	approved Negotiated
3. Consultants	\$	-	13	-	1 \$	-	Indirect Cost Rate
4. Equipment: (includes Rentals,			T		1		Agreement (NICRA)
Repair & Maintenance, Purchase &	ļ				1		for JSI Research and
Depreciation)	5	347.47	1 8		s	347.47	Training Institute, Inc.
5. Supplies: (includes supplies for	ΙŤ		t		+-	071.77	-includes fringe
Education, Lab, Pharmacy, Medical,		•			L		benefits (38% of
Office)	\$	560.44	\$	_	s	560.44	salary) and other
6. Travel	3	- 000.14	 š		1 5	300.44	_general operating
7. Occupancy	\$	1,120.88	Š		S	1,120.88	_costs to support
8. Current Expenses (includes	۱Ť	1,120.00	╀ᄬ	 -	╇	1,120.00	_project activities
Telephone, Postage, Subscriptions,							including occupancy,
Audit & Legal, Insurance, Board		•			ł	-	equipment, general
Expenses)	\$	840.66	١.		1.	040.00	office supplies,
9. Software	\$	040.00	\$ \$	 -	\$	840.66	telecommunications and other current
10. Marketing/Communications	\$	<u>-</u>	3		<u> </u>		expenses, information
11. Staff Education and Training	\$	224.18	\$		\$.7%	systems, accounting
12. Subcontracts/Agreements	2	224,10	13	<u> </u>	\$	224.18	and payroll, human
13. Other (specific details mandatory):	*	 -	13		13	 -	resources and staff
Educational Outreach	-	F 600 00	13		13		development, and
Information Systems	3	5,600.00	\$		\$	15,600.00	general administrative
HR	<u>.</u>		<u> </u>	120.00	1.5		support costs. The
Gen Admin	-} -	<u></u>	<u>.\$.</u>	459.56	7	459.56	approved basis for
Payroll and Accounting	*		1	459.56	1	459.56	application of the
r dyrun anu Accounting	.\$	·	· > -	459.56	2	459.56	NICRA is on
	\$.	-	\$	459.56	\$	459.56	salary/wages only
TOTAL	\$ 3	4,161.76	\$	1,838.24	Š	36,000.00	including holiday, sick
Indirect As A Percent of Direct	_			5.4%	_₹.	50,500,00	and unasting

Contractor Initials:	41
Date:	5/23/17

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Public Health Professional Support

Budget Request for: Services - EPA Lead

(Name of RFP)

Budget Period: SFY 2018

Line Item		Direct cremental		ndirect Fixed		Total	Allocation Method for Indirect/Fixed Cost
Total Salary/Wages	3	23,461.54	5		\$	23,461.54	The federally approved
Employee Benefits	85	8,915.38	**	•	\$	8,915.38	
3. Consultants	\$		\$		\$	-	Rate Agreement
4. Equipment: (includes Rentals, Repair &		,					"(NICRA) for JSI
Maintenance, Purchase & Depreciation)	\$	727.31	\$	-	\$	727.31	Research and Training
Supplies: (includes supplies for							Institute, Inc. includes
Education, Lab, Pharmacy, Medical, Office)	\$	1,173.08	\$	-	S	1,173.08	fringe benefits (38% of
6. Travel	\$		\$	-	\$	-	- satary) and other
7. Occupancy	\$	2,346.15	\$		\$	2,346.15	 general operating costs to support project
8. Current Expenses (includes Telephone,							activities including
Postage, Subscriptions, Audit & Legal,			ĺ				occupancy, equipment,
Insurance, Board Expenses)	\$	1,759.62	\$	· -	\$	1,759.62	
9. Software	\$		\$	-	\$	-	telecommunications and
10. Marketing/Communications	\$		\$		\$		other current expenses,
11. Staff Education and Training	\$	469.23	\$	-	5	469.23	information systems,
12. Subcontracts/Agreements	\$		\$	-	\$	-	accounting and payroll,
13. Other (specific details mandatory):	\$		3	-	3	-	Thuman resources and
NELCC Meetings	\$	6,750.01			3	6,750.01	staff development, and
Educational Outreach	-\$	550.00	\$	-	\$	550.00	general administrative
Information Systems	\$	-	\$	961.92	\$	961.92	support costs. The
HR	\$	•	\$	961.92	\$	961.92	approved basis for
Gen Admin	\$		\$	961.92	\$	961.92	-application of the NICRA
Payroll and Accounting	\$		\$	961.92	\$	961.92	is on salary/wages
	\$		\$	-	\$		only including holiday, sick and vacation.
TOTAL	3	48,152.32	\$ 3	,847.68	3	50,000:00	SICK GITU VACAUOTI.
Indirect As A Percent of Direct				8.3%			<u> </u>

Contractor Initials:

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

Bidder/Contractor Name: Community Health Institute

Public Health Professional Support Services

Budget Request for: - EPA Lead

(Name of RFP)

Budget Period: SFY 2019

Ine Kem		Direct Incremental		Indirect Fixed		Total	Viocation Method fo Indirect/Fixed Cost	
Total Salary/Wages	\$	22,225.27	\$. •	5	22,225.27	The federally approved	
Employee Benefits	\$	8,445.60	\$	-	\$	8,445.60	Negotiated Indirect	
3. Consultants	\$	-	\$	-	\$	-	Cost Rate Agreement	
Equipment: (includes Rentals,					Г		(NICRA) for JSI	
Repair & Maintenance, Purchase &		•			ı		Research and Training	
Depreciation) .	\$	688.98	\$	•	[\$	688.98	Institute, Inc. includes	
5. Supplies: (includes supplies for							fringe benefits (38% of	
Education, Lab, Pharmacy, Medical,							salary) and other	
Office)	\$	1,111.26	\$	-	l s	1,111.26	general operating cost	
6. Travel	\$	•	\$	-	\$		to support project	
7. Occupancy	\$	2,222.53	\$		\$	2,222.53	_occupancy, equipment	
8. Current Expenses (includes		- · · · · · · · · · · · · · · ·					general office supplies	
Telephone, Postage, Subscriptions,						<i>:</i>	telecommunications	
Audit & Legal, Insurance, Board		·	l	·	ŀ		and other current	
Expenses)	\$	1,666.89	s	-	s	1.666.89	expenses, information	
9. Software	\$		3		\$		systems, accounting	
10. Marketing/Communications	\$	-	-\$		\$		and payroll, human	
11. Staff Education and Training	\$	444.51	\$	-	S	444.51	resources and staff	
12. Subcontracts/Agreements	\$, <u>.</u>	\$		\$	-	development, and	
13. Other (specific details mandatory):	\$	-	\$		3		-general administrative	
NELCC Meetings	\$	9,000.00	\$		\$	9,000.00	- support costs. The	
Educational Outreach	\$	550.00	3	-	\$	550.00	approved basis for application of the	
Systems	\$	- · · ·	\$	911.24-	-\$	911:24-	NICRA is on	
- HR	\$	-	\$	911.24	\$	911.24	.salary/wages only	
Gen Admin	\$-		-\$-	911.24	\$	911:24	including holiday, sick	
Payroll and Accounting	\$	-	\$	911.24	\$	911.24	and vacation.	
	\$	•	\$		\$			
TOTAL	\$	46,355.04	3	3,644.96	Š	50,000,00	ì	

Contractor Initials:

JSI Research & Training Institute, inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Regional Public Health Network Services -

Budget Request for: Home Visiting

(Name of RFP)

Budget Period: SFY 2018

Direct Incremental	Indirect Fixed		Total	Viocation Method fo indirect/Fixed Cost
	\$ -	<u> </u>	91,203.33	The federally approved
\$ 34,657.25	\$ -	\$	34,657.25	Negotiated Indirect Cos
\$ -	\$	\$		Rate Agreement
		Γ		(NICRA) for JSI
\$ 2,827.30	\$ -	\$_	2,827.30	Research and Training
	·			Institute, Inc. includes
\$ 4,560.16	\$ -	\$	4,560.16	fringe benefits (38% of salary) and other
\$ 5,000.00	\$ -	\$	5,000.00	- general operating costs
\$ 9,120.33	\$ -	\$	9,120.33	to support project
			-	activities including
1		1		occupancy, equipment,
\$ 6,840.24	\$ - 1	\$_	6,840.24	general office supplies,
\$-	\$ -	\$		telecommunications
\$ -	\$ -	\$		and other current
\$ 1,824.07	\$ -	\$_	1,824.07	expenses, information
\$ 5,000.00	\$ -	5	5,000.00	systems, accounting
\$-	\$ -	\$		and payroll, human
	\$-	<u> \$ </u>		resources and staff
	\$	\$		development, and general administrative
\$ 35,000.00	\$	\$_		-support costs. The
		\$		- approved basis for
		<u> </u>		- application of the
	\$ 3,739.33	[\$	3,739.33	-NICRA is on
	\$ 3,739.33	\$_	3,739.33	salary/wages only
\$ 207,032.68	\$ 14,957,32	15	221,990.00	including holiday, sick
	the comments \$ 91,203.33	Incremental Fixed	Incremental Fixed	Incremental Fixed

Contractor Initials

JSI Research & Training Institute, Inc.,

Bidder/Contractor Name: d/b/a Community Health Institute

Regional Public Health Network Services -

Budget Request for: Home Visiting

(Name of RFP)

Budget Period: SFY 2019

Une Item	Direct Incremental	Indirect	Total	Allocation Method for indirect/Proof Cost
1. Total Salary/Wages	\$ 91,203.33	\$ -	\$ 91,203.33	The federally approved
2. Employee Benefits	\$ 34,657.25	\$-		Negotiated Indirect Cost
3. Consultants	\$-	\$-	\$ -	Rate Agreement (NICRA)
Equipment: (includes Rentals,			+ -	for JSI Research and
Repair & Maintenance, Purchase &	\$ 2,827.30	\$ -	\$ 2,827.30	
Supplies: (includes supplies for	-	 	Ψ 2,021.30	includes fringe benefits
Education, Lab, Pharmacy, Medical	\$ 4,560.16	S -	4 500 40	(38% of salary) and other
6. Travel	\$ 5,000.00	\$.	\$ 4,560.16	-general operating costs to
7. Occupancy	\$ 9,120.33	\$-	\$ 5,000.00 \$ 9,120.33	-support project activities
8. Current Expenses (includes	V 0,120.00	Ψ- ·	\$ 9,120.33	Including occupancy,
Telephone, Postage, Subscriptions,	ĺ			equipment, general office
Audit & Legal, Insurance, Board	\$ 6,840.24	\$-		supplies,
9. Software	\$ -	\$-	\$ 6,840.24	
10. Marketing/Communications	\$-	\$-	\$ -	other current expenses,
11. Staff Education and Training	\$ 1,824.07	\$.	\$.	information systems,
12, Subcontracts/Agreements	\$ 5,000.00		\$ 1,824.07	
Other (specific details mandatory):	\$ 5,000.00	\$ -	\$ 5,000.00	human resources and staff
Learning Exchanges		\$ -	\$ -	development, and general
Scholarships	\$ 5,000.00	\$ -	\$ 5,000.00	administrative support
HFA Training & Supports	\$ 6,000.00	\$ -	\$ 6,000.00	costs. The approved
	\$ 35,000.00	\$ -	\$ 35,000.00	basis for application of the
Information Systems		\$ 3,739,33	9 3,1 33.33	NICRA is on
HR	<u>_</u>	\$ 3,739.33	\$ 3,739.33	salary/wages only
Gen Admin_		\$ -3,739.33		including holiday, sick and
Payroll and Accounting		\$ 3,739.33	\$ 3,739.33	vacation.
TOTAL	\$ 207,032.68	\$ 14,957.32	\$ 221,990.00	

Contractor Initials:

Page 1 of 1

Date: 5 /23

JSI Research & Training Institute,

Bidder/Contractor Name: Inc., d/b/a Community Health

Regional Public Health Network

Budget Request for: Services - Maternal & Child Health

(Name of RFP)

Budget Period: SFY 2018

Line Item	Dire			irect xed		Total	Ulocation Method fo Indirect/Flood Cost
1. Total Salary/Wages	\$	-	\$		\$		The federally approved
2. Employee Benefits	\$	-	5	•	\$	<u> </u>	Negotiated Indirect
3. Consultants	\$	-	5	•	\$	<u> </u>	Cost Rate Agreement
4. Equipment: (includes Rentals, Repair &							'(NICRA) for JSI Research and Training
Maintenance, Purchase & Depreciation)	\$	-	\$	-	\$		Institute, Inc. Includes
Supplies: (Includes supplies for Education,	,						fringe benefits (38% of
Lab, Pharmacy, Medical, Office)	\$		\$	•	\$_		salary) and other
6. Travel	\$	-	3	-	\$		general operating
7. Occupancy	\$		\$	-	\$		costs to support
8. Current Expenses (includes Telephone,			1				project activities
Postage, Subscriptions, Audit & Legal, Insurance,	ł		ł	•	_	•	including occupancy,
Board Expenses)	\$	٠	\$	-	\$		equipment, general
9. Software	\$	•	[\$	•	\$		office supplies,
10. Marketing/Communications	\$	•	[\$	-	\$		telecommunications
11. Staff Education and Training	\$	• -	\$		\$	<u>.</u>	and other current expenses, information
12. Subcontracts/Agreements	\$ 24.0	00,00	\$	-	\$_	24,000.00	expenses, intomizuon Esystems, accounting
13. Other (specific details mandatory):	\$	-	<u> </u>		\$	<u> </u>	and payroll, human
	\$		[\$	-	5		resources and staff
	\$	-	<u>L\$</u>		[\$		- development, and
	\$	-	\$		\$	-	- general administrative
	\$	-	[\$	•	\$		-support costs. The
	\$		\$	•	\$		approved basis for
	\$	-	<u> </u>	-	\$		_application of the
	s	-	s	_	s	-	NICRA is on
TOTAL	\$ 24,0	00.00	Ť		\$	24,000.00	salary/wages only including holiday sick

Indirect As A Percent of Direct

Contractor Initials:

JSI Research & Training Institute,

Bidder/Contractor Name: Inc., d/b/a Community Health

Regional Public Health Network

Budget Request for: Services - Maternal & Child Health (Name of RFP)

Budget Period: SFY 2019

Line Item		rect mental		direc		Total	Viocetion Method fo
Total Salary/Wages Employee Benefits	\$		\$	•	\$		The federally approved
3. Consultants	\$	-	\$	-	\$		Negotiated Indirect
	\$		\$		\$	-	Cost Rate Agreement
4. Equipment: (includes Rentals, Repair &			Γ		广		(NICRA) for JSI
Maintenance, Purchase & Depreciation)	\$	-	\$	-	\$	-	Research and Training
5. Supplies: (includes supplies for Education,			Ť		Ť		Institute, Inc. Includes
ab, Pharmacy, Medical, Office)	\$		\$		s		fringe benefits (38% of
). Travel	13		3		Ť		- salary) and other
. Occupancy	1 \$		\$		\$	 -	general operating
Current Expenses (includes Telephone,	 -	_	 ~	<u> </u>	٣		_costs to support
Postage, Subscriptions, Audit & Legal, Insurance	1						project activities
oard Expenses)	s			ı		. ,	including occupancy,
. Software	 3		\$		\$		equipment, general
Marketing/Communications	3		*	<u> </u>	3		office supplies,
Staff Education and Training	 * -		\$	<u> </u>	\$	<u>-</u>	telecommunications
Subcontracts/Agreements	8240		-	<u>-</u>	<u>\$</u>		and other current
Other (specific details mandatory):	\$ 24,0	00.00	*	<u>-</u>	5	24,000.00	
The second interiories.			2	<u> </u>	<u>\$</u>	-	systems, accounting
	 } _		\$		<u> </u>		and payroli, human
	\$	<u> </u>	\$		\$		resources and staff
	\$		\$_	-	\$		development, and
	\$	_:!	\$	<u>. </u>	\$		general administrative
	\$	I	\$		\$	-	support costs. The
	\$		\$.	• .]	-\$		approved basis for
							application of the
70741	\$		<u>\$_</u>	<u> </u>	\$	ما المعمليا س	NICRA is on
TOTAL	\$ 24.00	00.00	\$	•	\$	24,000.00	salary/wages only
direct As A Percent of Direct			7	0.0%	_		including boliday, sick

Contractor Initials:

JSI Research & Training Institute,

Bidder/Contractor Name: Inc., d/b/a Community Health

Regional Public Health Network

Budget Request for: Services - Radiological Emergency (Name of RFP)

Budget Period: SFY 2018

Line Item	Inc	Direct cremental	·	direct bxed		Total	Allocation Method for indirect/Fixed Cost
1. Total Salary/Wages	\$	494.51	\$		\$_	494.51	The federally approved
2. Employee Benefits	\$	187.91	₹		\$	187.91	Negotiated Indirect Cost
3. Consultants	\$	_	\$	-	\$		Rate Agreement (NICRA)
4. Equipment: (includes Rentals, Repair &			Γ.				for JSI Research and
Maintenance, Purchase & Depreciation)	\$	15.33	\$	_•	\$	15.33	Training institute, inc.
5. Supplies: (includes supplies for			$ldsymbol{-}$	•	Г		includes fringe benefits
Education, Lab, Pharmacy, Medical, Office)	\$	24.73	\$	•	\$	24.73	(38% of salary) and other
6. Travel	\$	-	\$	-	\$		 general operating costs to support project activities
7. Occupancy	\$	49.45	\$	•	\$	49.45	_including occupancy,
8. Current Expenses (includes Telephone,	_		Γ		Γ		equipment, general office
Postage, Subscriptions, Audit & Legal,	1		1		•		supplies,
Insurance, Board Expenses)	\$	37.08	\$	<u>-</u>	\$	37.08	telecommunications and
9. Software	157		\$	<u>.</u> .,	\$		other current expenses,
10. Marketing/Communications	44	_	\$		\$	-	information systems,
11. Staff Education and Training	\$	9.89	\$	•	\$	9.89	accounting and payroll,
12. Subcontracts/Agreements	\$	•	\$	-	\$		human resources and sta
13. Other (specific details mendatory):	49	•	\$	-	\$		development, and genera
Radiological Emergencies Subcontracts	\$	8,100.00	\$		\$	8,100.00	administrative support
	4	, =	\$		\$		costs. The approved
Information Systems	\$	•		20.28	[\$	20.28	 basis for application of the NICRA is on
HR	\$	•		20.28	\$	20.28	- NICKA IS ON - salary/wages only
Gen Admin	\$	•	_	20.28	\$	20.28	- salary/wages only - including holiday, sick an
Payroll and Accounting	4	-,	\$	20.28	[5]	20.28	- including holloay, sick all - vacation.
	\$		<u> </u>		5		
	\$		5		\$	•	_
TOTAL	\$	8,918.90	.\$	81.10	\$	9,000.00	1

Contractor Initials

JSI Research & Training Institute,

Bidder/Contractor Name: Inc., d/b/a Community Health

Regional Public Health Network

Budget Request for: Services - Radiological Emergency

(Name of RFP)

Budget Period: SFY 2019

Line Item	Į,	Direct cremental		direct	54.1	Total	Viocation Method for
Total Salary/Wages	۳	494,51	7	MPU:	Ťŧ	494.51	Indirect/Fixed Cos
2. Employee Benefits	3		Hå	-	Hå	187.91	The federally approved Negotiated Indirect
3. Consultants	۱ŧ	107.31	H		H	107.91	Cost Rate Agreement
4. Equipment: (includes Rentals, Repair &	۳		۲		╀ざ		(NICRA) for JSI
Maintenance, Purchase & Depreciation)	S	15.33	l s		s	- 15.33	
5. Supplies: (includes supplies for Education,	╅	10.00	├		Ĭ	15.55	Institute, Inc. includes
ab, Pharmacy, Medical, Office)	\$	24.73	l s		ß	24.73	fringe benefits (38% of
5. Travel	Š		Š		Š		-salary) and other
7. Occupancy	Š		Ťš		ŧ	49.45	 general operating cost
Current Expenses (includes Telephone,	t		H		ř	45.40	to support project
Postage, Subscriptions, Audit & Legal,	1	1					activities including
nsurance, Board Expenses)	S	37.08	s		s	37.08	occupancy, equipment general office supplies
9. Software	Š		Š		Ťš	07.00	_ general office supplies _ telecommunications
Marketing/Communications	Š		Š	 -	Ť	 -	and other current
1. Staff Education and Training	Š	9.89	Š	 -	Š	9.89	_ '
2. Subcontracts/Agreements	Š	-	Š		Š		systems, accounting
Other (specific details mandatory):	Š		Š		Š		and payroll, human
Radiological Emergencies Subcontracts	\$	8,100.00	Š	-	Ť	8,100.00	resources and staff
	\$		\$		Š	-	development, and
Information Systems	\$	•	\$	20.28	\$	20.28	general administrative
HR.	\$			20.28	3	20.28	-support costs. The
Gen Admin	\$	-	\$	20,28	\$	20.28	-approved basis for
Payroll and Accounting	\$	•	1	20.28	\$	20.28	-application of the
	\$	-	\$	-	\$		-NICRA-is on
	\$		\$	-	. Š	•	-saiary/wages only
TOTAL	\$	8,918.90	\$	81.10	\$	9,000.00	including holiday, sick- land vacation.
ndirect As A Percent of Direct	_		_	0.9%	_	-,	Land Tacabott

Contractor Initials:



SPECIAL PROVISIONS

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

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

7.1. Renegotiate the rates for payment hereunder, in which event new rates shall be established;

7.2. Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs:

Exhibit C - Special Provisions

06/27/14



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

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

8. Maintenance of Records: In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:

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

Exhibit C - Special Provisions

Date 5/23/17



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

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

Page 3 of 5

Exhibit C - Special Provisions

Date 5/23/17

Contractor Initial



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

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

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

- (a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at 41 U.S.C. 4712 by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR 3,908.
- (b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.
- (c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.
- 19. Subcontractors: DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.

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

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

19.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate

19.3. Monitor the subcontractor's performance on an ongoing basis

Exhibit C - Special Provisions

Date 5/73/17

Contractor Initia

Page 4 of 5



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

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

DEFINITIONS

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

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

DEPARTMENT: NH Department of Health and Human Services.

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

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

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

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

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

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

Exhibit C - Special Provisions

Page 5 of 5

Contractor Initials

Date 5/23/17



Exhibit C-1

REVISIONS TO GENERAL PROVISIONS

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

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

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

Agreement.

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

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

communication and revisions of the Transition Plan to the State as requested.

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

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

to the State as described above.

3. Extension:

The Department reserves the right to renew the Contract for up to two (2) additional years, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.

Exhibit C-1 - Revisions to General Provisions

Contractor Initials

CU/DHHS/011414



CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

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

ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS

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

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

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

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

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

Date 5/23/17

CU/DHHS/110713



has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted

1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency:

1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.

2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

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

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

Contractor Name:

USI Research and Training

Institute, inc. a/b/a communi Health institute

Name: ,)

Title:

Johnston Steward

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

CU/DH#45/110713



CERTIFICATION REGARDING LOBBYING

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1,12 of the General Provisions execute the following Certification:

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

Programs (indicate applicable program covered):

- Temporary Assistance to Needy Families under Title IV-A
- *Child Support Enforcement Program under Title IV-D
- *Social Services Block Grant Program under Title XX
- *Medicaid Program under Title XIX
- *Community Services Block Grant under Title VI
- *Child Care Development Block Grant under Title IV

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

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

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

Name:

いくけんしと

Title: 🏗

Exhibit E - Certification Regarding Lobbying

Contractor Init

CLI/DHHS/110713



CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

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

INSTRUCTIONS FOR CERTIFICATION

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

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

Contractor Initials

Date 5/23/1

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

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

PRIMARY COVERED TRANSACTIONS

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

LOWER TIER COVERED TRANSACTIONS

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

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

Contractor Name:

7/72 Date

Name:

vame: UUIXA+11XAUT

Title: 1

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

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

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

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

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

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

Exhibit G

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

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

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

> USI Research and Training Institute, Contractor Name: Inc., d/b/a Community Health

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Name:

Title: Title

Exhibit G

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artification of Compliance with requirements pertaining to Federal Nondecimination, Equal Treatment of Feith-Based Organizations

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CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

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

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

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

> USI Research and Training Institute, Contractor Name: Inc., d/b/a Community Health

nshite

Title:

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

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HEALTH INSURANCE PORTABLITY ACT BUSINESS ASSOCIATE AGREEMENT

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

(1) <u>Definitions</u>.

- a. "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
- b. "Business Associate" has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- c. <u>"Covered Entity"</u> has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. "<u>Designated Record Set</u>" shall have the same meaning as the term "designated record set" in 45 CFR Section 164,501.
- e. "<u>Data Aggregation</u>" shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. "Health Care Operations" shall have the same meaning as the term "health care operations" in 45 CFR Section 164,501.
- g. <u>"HITECH Act"</u> means the Health Information Technology for Economic and Clinical Health Act, TitleXIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.
- h. "<u>HIPAA</u>" means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.
- "Individual" shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).
- j. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
- k. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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

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

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

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

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Date 5/23/1



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

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

(3) Obligations and Activities of Business Associate.

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

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

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

Exhibit I Health Insurance Portability Act **Business Associate Agreement**

Page 3 of 6



pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

- f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.
- g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.
- h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.
- Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164,528.
- Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.
- k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.
- I. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

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Health Insurance Portability Act
Business Associate Agreement
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Date 5 23 1



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

(4) Obligations of Covered Entity

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

(5) <u>Termination for Cause</u>

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

(6) Miscellaneous

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

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Health Insurance Portability Act
Business Associate Agreement
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Date 5 23 1



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

THE WITHESS WHEREOF, the parties her	eto have duly executed this Exhibit I,
	USI Research + Training Institute, Inc.,
Department of Health and Human Services	d/b/a Community Health Institute
The State Clsal Cls	Name of the Contractor
Signature of Authorized Representative	Signature of Authorized Representative
LISA Morn's Name of Authorized Representative	Name of Authorized Representative
DIRECTOR Title of Authorized Representative	Title of Authorized Representative
5/25/17 Date	5/23/17 Date

3/2014

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CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA) COMPLIANCE

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than \$25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of \$25,000 or more. If the initial award is below \$25,000 but subsequent grant modifications result in a total award equal to or over \$25,000, the award is subject to the FFATA reporting requirements, as of the date of the award. In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

- Name of entity
- Amount of award
- Funding agency
- 4... NAICS code for contracts / CFDA program number for grants
- 5. Program source
- 6. Award title descriptive of the purpose of the funding action
- 7. Location of the entity
- 8. Principle place of performance
- 9. Unique identifier of the entity (DUNS #)
- 10. Total compensation and names of the top five executives if:
 - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than \$25M annually and
 - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.

The Contractor Identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1:11 and 1.12 of the General Provisions execute the following Certification:

The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

> JSI Research and Training Institute, Inc. Contractor Name: d/b/a Cummunity Health Institute

Name:

Title:

Exhibit J - Certification Regarding the Federal Funding Accountability And Transparency Act (FFATA) Compliance Page 1 of 2

CU/0HHS/110713



FORM A

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

1.	1. The DUNS number for your entity is: 14-5729117	
2.	In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts loans, grants, sub-grants, and/or cooperative agreements; and (2) \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?	on -
	NOXYES	,
	If the answer to #2 above is NO, stop here	
	If the answer to #2 above is YES, please answer the following:	
3.	 Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C.78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986? 	
	NOXYES	
	If the answer to #3 above is YES, stop here	
	If the answer to #3 above is NO, please answer the following:	•
4.	 The names and compensation of the five most highly compensated officers in your business or organization are as follows: 	
	Name: Amount:	•
	Name: Amount:	

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

Date 5/23/1