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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



Jeffrey A. Meyers
Commissioner

Lisa Morris, MSSW
Director

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
			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
			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
			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

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
			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	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90041000	50,000
SFY 2019	102-500731	Contracts for Prog Svc	90041000	50,000
			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	Total Amount
SFY 2018	102-500731	Contracts for Prog Svc	90003600	36,000
	102-500731	Contracts for Prog Svc	90038000	50,000
			Sub Total SFY 2018	86,000
SFY 2019	102-500731	Contracts for Prog Svc	90003600	36,000
	102-500731	Contracts for Prog Svc	90038000	50,000
			Sub Total SFY 2019	86,000
			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.

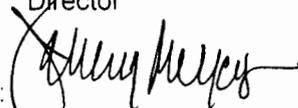
In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Lisa Morris, MSSW
Director

Approved by:



Jeffrey A. Meyers
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.

Sincerely,

Denis Goulet

DG/ik
DoIT #2018-029

cc: Bruce Smith, IT Manager, DoIT



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

Public Health Professional Support
 Services
 RFP Name

RFP-2018-DPHS-03-PUBLIC
 RFP Number

Bidder Name

1. JSI dba Community Health Institute
2. 0
3. 0
4. 0
5. 0
6. 0
7. 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. Beverly Drouin
7. Jennifer Conroy, Cost
8. Ellen Chase Lucard
9. 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 and 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.
- 1.6. Develop and produce educational materials
 - 1.6.1. Environmental Public Health Tracking Program
 - 1.6.1.1. 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

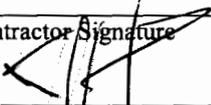
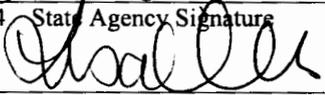
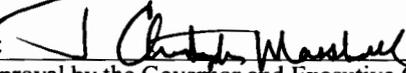
Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

AGREEMENT

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

GENERAL PROVISIONS

1. IDENTIFICATION.

1.1 State Agency Name NH Department of Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name JSI Research and Training Institute, Inc., d/b/a Community Health Institute		1.4 Contractor Address 501 South Street, 2 nd Floor Bow, NH 03304	
1.5 Contractor Phone Number 603-573-3300	1.6 Account Number 05-95-90-202510-7545, 05-95-90-902510-2239, 05-95-90-902510-5178, 05-95-90-902510-2229, 05-95-90-902510-5390, 05-95-90-902510-5173, 05-95-90-902510-7964, 05-95-90-902010-5896, 05-95-90-902010-5190, & 05-95-90-201510-5299	1.7 Completion Date June 30, 2019	1.8 Price Limitation \$1,565,580
1.9 Contracting Officer for State Agency Jonathan V. Gallo, Esq., Interim Director		1.10 State Agency Telephone Number 603-271-9246	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory Jonathan Stewart, Director	
1.13 Acknowledgement: State of <u>NH</u> , County of <u>Merrimack</u> On <u>May 23, 2017</u> before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace 			
1.13.2 Name and Title of Notary or Justice of the Peace SARAH E. MOECKEL, Notary Public Commission Expires September 17, 2019			
1.14 State Agency Signature 		1.15 Name and Title of State Agency Signatory Lisa Morris, MSSW, Director	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By:  On: <u>6/5/17</u>			
1.18 Approval by the Governor and Executive Council (if applicable) 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/REMEDIES.

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

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

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

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

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

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

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

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

12. ASSIGNMENT/DELEGATION/SUBCONTRACTS. The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written 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 \$1,000,000 per 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

Date 5/23/17

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 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 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



Exhibit A

- 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



Exhibit A

- 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 in-person 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).



Exhibit A

- 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.



Exhibit A

- 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.



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 and 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.



- 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.
- 4.6. 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 MIECHV 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
 - 4.9.4.1. 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 poison 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:


5/23/17



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.



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 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.

Handwritten initials, possibly 'JG', written in black ink.

5/23/17

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
Services - Public Health Emergency
Budget Request for: Preparedness
(Name of RFP)**

Budget Period: SFY 2018

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

Indirect As A Percent of Direct

7.7%

Contractor Initials: _____



Date: 5/23/17

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 - Public Health Emergency**

Budget Request for: Preparedness

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 49,887.59	\$ -	\$ 49,887.59	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 18,957.28	\$ -	\$ 18,957.28	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase &	\$ 1,546.52	\$ -	\$ 1,546.52	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical,	\$ 2,698.97	\$ -	\$ 2,698.97	
6. Travel	\$ 1,000.00	\$ -	\$ 1,000.00	
7. Occupancy	\$ 4,988.76	\$ -	\$ 4,988.76	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 3,741.57	\$ -	\$ 3,741.57	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 997.75	\$ -	\$ 997.75	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Web-based Collaboration System	\$ 13,000.00	\$ -	\$ 13,000.00	
Preparedness Conference Support	\$ 10,000.00	\$ -	\$ 10,000.00	
Information Systems	\$ -	\$ 2,045.39	\$ 2,045.39	
HR	\$ -	\$ 2,045.39	\$ 2,045.39	
Gen Admin	\$ -	\$ 2,045.39	\$ 2,045.39	
Payroll and Accounting	\$ -	\$ 2,045.39	\$ 2,045.39	
TOTAL	\$ 106,818.44	\$ 8,181.56	\$ 115,000.00	

Indirect As A Percent of Direct

7.7%

Contractor Initials: _____



Date: _____

5/23/17

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 - Hospital Preparedness

(Name of RFP)

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 10,796.70	\$ -	\$ 10,796.70	The federally approved
2. Employee Benefits	\$ 4,102.75	\$ -	\$ 4,102.75	Negotiated Indirect Cost
3. Consultants	\$ -	\$ -	\$ -	Rate Agreement
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 334.70	\$ -	\$ 334.70	(NICRA) for JSI
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 639.83	\$ -	\$ 639.83	Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other
6. Travel	\$ 250.00	\$ -	\$ 250.00	general operating costs
7. Occupancy	\$ 1,079.67	\$ -	\$ 1,079.67	to support project
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 809.76	\$ -	\$ 809.76	activities including occupancy, equipment, general office supplies, telecommunications and
9. Software	\$ -	\$ -	\$ -	other current expenses,
10. Marketing/Communications	\$ -	\$ -	\$ -	information systems,
11. Staff Education and Training	\$ 215.93	\$ -	\$ 215.93	accounting and payroll,
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	human resources and
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	staff development, and
Medical Reserve Corps Mini-Grants	\$ 50,000.00	\$ -	\$ 50,000.00	general administrative
Information Systems	\$ -	\$ 442.67	\$ 442.67	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
Indirect As A Percent of Direct		2.6%		

Contractor Initials: _____



Date: 5/23/17

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 - Immunization
(Name of RFP)**

Budget Period: SFY 2018

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

Indirect As A Percent of Direct

8.3%

Contractor Initials:

Date: 5/23/17

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 - Immunization
(Name of RFP)**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 30,219.78	\$ -	\$ 30,219.78	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 11,483.52	\$ -	\$ 11,483.52	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 936.82	\$ -	\$ 936.82	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,510.99	\$ -	\$ 1,510.99	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 3,021.98	\$ -	\$ 3,021.98	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,266.47	\$ -	\$ 2,266.47	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00	
11. Staff Education and Training	\$ 604.40	\$ -	\$ 604.40	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory): 2019 NHIP Conference	\$ 5,000.00	\$ -	\$ 5,000.00	
<i>Information Systems</i>	\$ -	\$ 1,239.01	\$ 1,239.01	
<i>HR</i>	\$ -	\$ 1,239.01	\$ 1,239.01	
<i>Gen Admin</i>	\$ -	\$ 1,239.01	\$ 1,239.01	
<i>Payroll and Accounting</i>	\$ -	\$ 1,239.01	\$ 1,239.01	
TOTAL	\$ 60,043.96	\$ 4,956.04	\$ 65,000.00	
Indirect As A Percent of Direct		8.3%		

Contractor Initials: _____

Date: _____


 5/23/17

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 - Pharmaceutical Rebates

(Name of RFP)

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Location Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 37,607.84	\$ -	\$ 37,607.84	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 14,290.98	\$ -	\$ 14,290.98	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,165.84	\$ -	\$ 1,165.84	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,880.39	\$ -	\$ 1,880.39	
6. Travel	\$ 1,500.00	\$ -	\$ 1,500.00	
7. Occupancy	\$ 3,760.78	\$ -	\$ 3,760.78	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,820.60	\$ -	\$ 2,820.60	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 752.16	\$ -	\$ 752.16	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
HPG Member Reimbursement	\$ 2,000.00	\$ -	\$ 2,000.00	
Conference Support	\$ 5,000.00	\$ -	\$ 5,000.00	
Prevention Supplies	\$ 12,000.00	\$ -	\$ 12,000.00	
Digital Storytelling	\$ 25,000.00	\$ -	\$ 25,000.00	
Meeting Expenses	\$ 6,000.00	\$ -	\$ 6,000.00	
Website Maintenance	\$ 500.00	\$ -	\$ 500.00	
Subscription Services	\$ 1,500.00	\$ -	\$ 1,500.00	
Other Professional Support Services	\$ 10,000.00	\$ -	\$ 10,000.00	
Special Projects	\$ 1,853.73	\$ -	\$ 1,853.73	
Information Systems	\$ -	\$ 1,541.92	\$ 1,541.92	
HR	\$ -	\$ 1,541.92	\$ 1,541.92	
Gen Admin	\$ -	\$ 1,541.92	\$ 1,541.92	
Payroll and Accounting	\$ -	\$ 1,541.92	\$ 1,541.92	
	\$ -	\$ -	\$ -	
TOTAL	\$ 127,632.32	\$ 6,167.68	\$ 133,800.00	

Indirect As A Percent of Direct

4.8%

Contractor Initials: _____

Date: _____

5/23/17

New Hampshire Department of Health and Human Services

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

**Budget Request for: Public Health Professional Support
Services - Pharmaceutical Rebates
(Name of RFP)**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Location Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 38,647.24	\$ -	\$ 38,647.24	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 14,685.95	\$ -	\$ 14,685.95	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 1,198.06	\$ -	\$ 1,198.06	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,932.36	\$ -	\$ 1,932.36	
6. Travel	\$ 1,500.00	\$ -	\$ 1,500.00	
7. Occupancy	\$ 3,864.72	\$ -	\$ 3,864.72	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 2,898.54	\$ -	\$ 2,898.54	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 772.94	\$ -	\$ 772.94	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
HPG Member Reimbursements	\$ 2,000.00	\$ -	\$ 2,000.00	
Conference Support	\$ 5,000.00	\$ -	\$ 5,000.00	
Prevention Supplies	\$ 12,000.00	\$ -	\$ 12,000.00	
Meeting Expenses	\$ 6,000.00	\$ -	\$ 6,000.00	
Website Maintenance	\$ 500.00	\$ -	\$ 500.00	
Subscription Services	\$ 1,500.00	\$ -	\$ 1,500.00	
Other Professional Support Services	\$ 10,000.00	\$ -	\$ 10,000.00	
Special Projects	\$ 5,154.71	\$ -	\$ 5,154.71	
Information Systems	\$ -	\$ 1,536.37	\$ 1,536.37	
HR	\$ -	\$ 1,536.37	\$ 1,536.37	
Gen Admin	\$ -	\$ 1,536.37	\$ 1,536.37	
Payroll and Accounting	\$ -	\$ 1,536.37	\$ 1,536.37	
	\$ -	\$ -	\$ -	
TOTAL	\$ 107,654.52	\$ 6,145.48	\$ 113,800.00	

Indirect As A Percent of Direct

5.7%

Contractor Initials:

JSI

Date: 5/23/17

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 - Food
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 9,577.03	\$ -	\$ 9,577.03	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,639.28	\$ -	\$ 3,639.28	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 296.89	\$ -	\$ 296.89	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 478.85	\$ -	\$ 478.85	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 957.71	\$ -	\$ 957.71	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 718.29	\$ -	\$ 718.29	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 191.54	\$ -	\$ 191.54	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Training Development	\$ 569.77	\$ -	\$ 569.77	
Information Systems	\$ -	\$ 392.66	\$ 392.66	
HR	\$ -	\$ 392.66	\$ 392.66	
Gen Admin	\$ -	\$ 392.66	\$ 392.66	
Payroll and Accounting	\$ -	\$ 392.66	\$ 392.66	
	\$ -	\$ -	\$ -	
TOTAL	\$ 16,429.36	\$ 1,570.64	\$ 18,000.00	
Indirect As A Percent of Direct		9.6%		

Contractor Initials:

Date: 5/23/17

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 - Food

(Name of RFP)

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 8,791.47	\$ -	\$ 8,791.47	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,340.48	\$ -	\$ 3,340.48	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 272.52	\$ -	\$ 272.52	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 439.55	\$ -	\$ 439.55	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 879.10	\$ -	\$ 879.10	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 659.34	\$ -	\$ 659.34	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 175.82	\$ -	\$ 175.82	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Training Development	\$ 2,000.00	\$ -	\$ 2,000.00	
Information Systems	\$ -	\$ 360.43	\$ 360.43	
HR	\$ -	\$ 360.43	\$ 360.43	
Gen Admin	\$ -	\$ 360.43	\$ 360.43	
Payroll and Accounting	\$ -	\$ 360.43	\$ 360.43	
	\$ -	\$ -	\$ -	
TOTAL	\$ 16,558.28	\$ 1,441.72	\$ 18,000.00	
Indirect As A Percent of Direct		8.7%		

Contractor Initials:

Date: 5/23/17

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 - EPHT
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 6,483.30	\$ -	\$ 6,483.30	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 2,463.62	\$ -	\$ 2,463.62	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 200.98	\$ -	\$ 200.98	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 324.16	\$ -	\$ 324.16	
6. Travel	\$ 450.00	\$ -	\$ 450.00	
7. Occupancy	\$ 648.32	\$ -	\$ 648.32	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 486.24	\$ -	\$ 486.24	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 129.66	\$ -	\$ 129.66	
12. Subcontracts/Agreements	\$ 30,000.00	\$ -	\$ 30,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Meeting Expenses	\$ 4,600.00	\$ -	\$ 4,600.00	
Materials Development	\$ 3,150.48	\$ -	\$ 3,150.48	
<i>Information Systems</i>	\$ -	\$ 265.81	\$ 265.81	
<i>HR</i>	\$ -	\$ 265.81	\$ 265.81	
<i>Gen Admin</i>	\$ -	\$ 265.81	\$ 265.81	
<i>Payroll and Accounting</i>	\$ -	\$ 265.81	\$ 265.81	
	\$ -	\$ -	\$ -	
TOTAL	\$ 72,200.00	\$ 11,191.00	\$ 50,000.00	

Indirect As A Percent of Direct

15.5%

Contractor Initials: 

Date: 5/23/17

New Hampshire Department of Health and Human Services

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

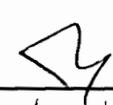
**Public Health Professional Support
Budget Request for: Services - EPHT
(Name of RFP)**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 9,609.55	\$ -	\$ 9,609.55	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 3,651.63	\$ -	\$ 3,651.63	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 297.90	\$ -	\$ 297.90	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 480.48	\$ -	\$ 480.48	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 960.96	\$ -	\$ 960.96	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 720.72	\$ -	\$ 720.72	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 192.16	\$ -	\$ 192.16	
12. Subcontracts/Agreements	\$ 30,000.00	\$ -	\$ 30,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Materials Production	\$ 2,510.64	\$ -	\$ 2,510.64	
<i>Information Systems</i>	\$ -	\$ 393.99	\$ 393.99	
<i>HR</i>	\$ -	\$ 393.99	\$ 393.99	
<i>Gen Admin</i>	\$ -	\$ 393.99	\$ 393.99	
<i>Payroll and Accounting</i>	\$ -	\$ 393.99	\$ 393.99	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 48,424.04	\$ 1,575.96	\$ 50,000.00	

Indirect As A Percent of Direct

3.3%

Contractor Initials: 

Date: 5/23/17

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 - CDC Lead
(Name of RFP)

Budget Period: SFY 2018

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

Indirect As A Percent of Direct

5.4%

Contractor Initials:

Date: 5/23/17

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 - CDC Lead
(Name of RFP)**

Budget Period: SFY 2019

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 11,208.79	\$ -	\$ 11,208.79	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 4,259.34	\$ -	\$ 4,259.34	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 347.47	\$ -	\$ 347.47	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 560.44	\$ -	\$ 560.44	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 1,120.88	\$ -	\$ 1,120.88	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 840.66	\$ -	\$ 840.66	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 224.18	\$ -	\$ 224.18	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Educational Outreach	\$ 15,600.00	\$ -	\$ 15,600.00	
Information Systems			\$ -	
HR	\$ -	\$ 459.56	\$ 459.56	
Gen Admin	\$ -	\$ 459.56	\$ 459.56	
Payroll and Accounting	\$ -	\$ 459.56	\$ 459.56	
	\$ -	\$ 459.56	\$ 459.56	
TOTAL	\$ 34,161.76	\$ 1,838.24	\$ 36,000.00	
Indirect As A Percent of Direct		5.4%		

Contractor Initials: JSI

Date: 5/23/17

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 - EPA Lead
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 23,461.54	\$ -	\$ 23,461.54	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 8,915.38	\$ -	\$ 8,915.38	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 727.31	\$ -	\$ 727.31	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 1,173.08	\$ -	\$ 1,173.08	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 2,346.15	\$ -	\$ 2,346.15	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 1,759.62	\$ -	\$ 1,759.62	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 469.23	\$ -	\$ 469.23	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
NELCC Meetings	\$ 6,750.01		\$ 6,750.01	
Educational Outreach	\$ 550.00	\$ -	\$ 550.00	
Information Systems	\$ -	\$ 961.92	\$ 961.92	
HR	\$ -	\$ 961.92	\$ 961.92	
Gen Admin	\$ -	\$ 961.92	\$ 961.92	
Payroll and Accounting	\$ -	\$ 961.92	\$ 961.92	
	\$ -	\$ -	\$ -	
TOTAL	\$ 46,152.32	\$ 3,847.68	\$ 50,000.00	

Indirect As A Percent of Direct

8.3%

Contractor Initials:

Date: 5/23/17

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

(Name of RFP)

Budget Period: SFY 2019

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

Indirect As A Percent of Direct

7.9%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**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

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

Indirect As A Percent of Direct

7.2%

Contractor Initials: _____



Date: _____

5/23/17

New Hampshire Department of Health and Human Services

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

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

Indirect As A Percent of Direct

7.2%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

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

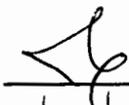
**Regional Public Health Network
Budget Request for: Services - Maternal & Child Health
(Name of RFP)**

Budget Period: SFY 2018

Line Item	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ -	\$ -	\$ -	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday sick
2. Employee Benefits	\$ -	\$ -	\$ -	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ -	\$ -	\$ -	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ -	\$ -	\$ -	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ -	\$ -	\$ -	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ -	\$ -	\$ -	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ -	\$ -	\$ -	
12. Subcontracts/Agreements	\$ 24,000.00	\$ -	\$ 24,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 24,000.00	\$ -	\$ 24,000.00	

Indirect As A Percent of Direct

0.0%

Contractor Initials: 
Date: 5/23/17

New Hampshire Department of Health and Human Services

**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	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ -	\$ -	\$ -	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday sick
2. Employee Benefits	\$ -	\$ -	\$ -	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ -	\$ -	\$ -	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ -	\$ -	\$ -	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ -	\$ -	\$ -	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ -	\$ -	\$ -	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ -	\$ -	\$ -	
12. Subcontracts/Agreements	\$ 24,000.00	\$ -	\$ 24,000.00	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 24,000.00	\$ -	\$ 24,000.00	

Indirect As A Percent of Direct

0.0%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services

**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	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 494.51	\$ -	\$ 494.51	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 187.91	\$ -	\$ 187.91	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 15.33	\$ -	\$ 15.33	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 24.73	\$ -	\$ 24.73	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 49.45	\$ -	\$ 49.45	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 37.08	\$ -	\$ 37.08	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 9.89	\$ -	\$ 9.89	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Radiological Emergencies Subcontracts	\$ 8,100.00	\$ -	\$ 8,100.00	
	\$ -	\$ -	\$ -	
Information Systems	\$ -	\$ 20.28	\$ 20.28	
HR	\$ -	\$ 20.28	\$ 20.28	
Gen Admin	\$ -	\$ 20.28	\$ 20.28	
Payroll and Accounting	\$ -	\$ 20.28	\$ 20.28	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 8,918.90	\$ 81.10	\$ 9,000.00	

Indirect As A Percent of Direct

0.9%

Contractor Initials:

Date: 5/23/17

New Hampshire Department of Health and Human Services
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	Direct Incremental	Indirect Fixed	Total	Allocation Method for Indirect/Fixed Cost
1. Total Salary/Wages	\$ 494.51	\$ -	\$ 494.51	The federally approved Negotiated Indirect Cost Rate Agreement (NICRA) for JSI Research and Training Institute, Inc. includes fringe benefits (38% of salary) and other general operating costs to support project activities including occupancy, equipment, general office supplies, telecommunications and other current expenses, information systems, accounting and payroll, human resources and staff development, and general administrative support costs. The approved basis for application of the NICRA is on salary/wages only including holiday, sick and vacation.
2. Employee Benefits	\$ 187.91	\$ -	\$ 187.91	
3. Consultants	\$ -	\$ -	\$ -	
4. Equipment: (includes Rentals, Repair & Maintenance, Purchase & Depreciation)	\$ 15.33	\$ -	\$ 15.33	
5. Supplies: (includes supplies for Education, Lab, Pharmacy, Medical, Office)	\$ 24.73	\$ -	\$ 24.73	
6. Travel	\$ -	\$ -	\$ -	
7. Occupancy	\$ 49.45	\$ -	\$ 49.45	
8. Current Expenses (includes Telephone, Postage, Subscriptions, Audit & Legal, Insurance, Board Expenses)	\$ 37.08	\$ -	\$ 37.08	
9. Software	\$ -	\$ -	\$ -	
10. Marketing/Communications	\$ -	\$ -	\$ -	
11. Staff Education and Training	\$ 9.89	\$ -	\$ 9.89	
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	
Radiological Emergencies Subcontracts	\$ 8,100.00	\$ -	\$ 8,100.00	
	\$ -	\$ -	\$ -	
Information Systems	\$ -	\$ 20.28	\$ 20.28	
HR	\$ -	\$ 20.28	\$ 20.28	
Gen Admin	\$ -	\$ 20.28	\$ 20.28	
Payroll and Accounting	\$ -	\$ 20.28	\$ 20.28	
	\$ -	\$ -	\$ -	
	\$ -	\$ -	\$ -	
TOTAL	\$ 8,918.90	\$ 81.10	\$ 9,000.00	

Indirect As A Percent of Direct

0.9%

Contractor Initials:

Date: 5/23/17



SPECIAL PROVISIONS

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

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



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

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

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



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

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



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

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

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

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

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

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

19. **Subcontractors:** DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.

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

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



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

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

DEFINITIONS

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

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

DEPARTMENT: NH Department of Health and Human Services.

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

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

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

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

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

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



Exhibit C-1

REVISIONS TO GENERAL PROVISIONS

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

4. CONDITIONAL NATURE OF AGREEMENT.

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

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

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

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

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

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

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

3. 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.



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



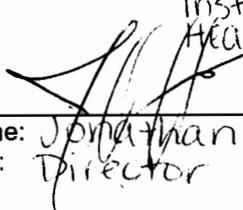
has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

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

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

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

5/23/17
Date

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

Name: Jonathan Stewart
Title: Director

Contractor Initials JS
Date 5/23/17



CERTIFICATION REGARDING LOBBYING

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

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

Programs (indicate applicable program covered):

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

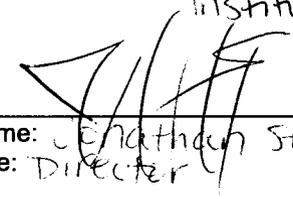
The undersigned certifies, to the best of his or her knowledge and belief, that:

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

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

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

5/23/17
Date


Name: Jonathan Stewart
Title: Director



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

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

INSTRUCTIONS FOR CERTIFICATION

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


5/23/17



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.

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

5/23/17
Date


Name: Jonathan Stewart
Title: Director

Contractor Initials 
Date 5/23/17



**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

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

Contractor Initials

5/23/17



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

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

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

5/23/17
Date

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

Name: Jonathan Stewart
Title: Director

Exhibit G

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

Contractor Initials





CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

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

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

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

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

5/23/17
Date

[Signature]
Name: Jonathan Stewart
Title: Director



Exhibit I

HEALTH INSURANCE PORTABILITY ACT
BUSINESS ASSOCIATE AGREEMENT

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

(1) Definitions.

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



Exhibit I

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

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

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

A handwritten signature in black ink, appearing to be 'S' followed by a flourish.



Exhibit I

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

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

(3) Obligations and Activities of Business Associate.

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

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

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

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



Exhibit I

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

(4) Obligations of Covered Entity

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

(5) Termination for Cause

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

(6) Miscellaneous

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



Exhibit I

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

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

Department of Health and Human Services

The State

Lisa Morris

Signature of Authorized Representative

Lisa Morris

Name of Authorized Representative

DIRECTOR

Title of Authorized Representative

5/25/17

Date

JSI Research + Training Institute, Inc.,
d/b/a Community Health Institute

Name of the Contractor

Jonathan Stewart

Signature of Authorized Representative

Jonathan Stewart

Name of Authorized Representative

Director

Title of Authorized Representative

5/23/17

Date

JS



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

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than \$25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of \$25,000 or more. If the initial award is below \$25,000 but subsequent grant modifications result in a total award equal to or over \$25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.

In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
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 Community Health Institute

5/23/17
Date


Name: Jonathan Stewart
Title: Director



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. 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?

_____ NO X YES

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?

_____ NO X YES

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:

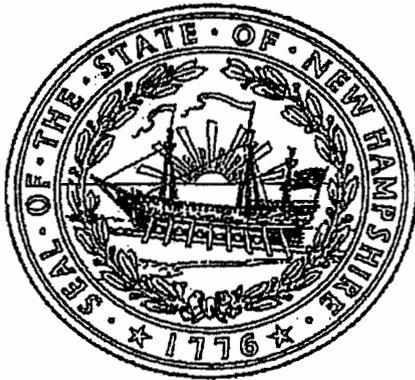
Name: _____	Amount: _____

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.

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

William M. Gardner
Secretary of State

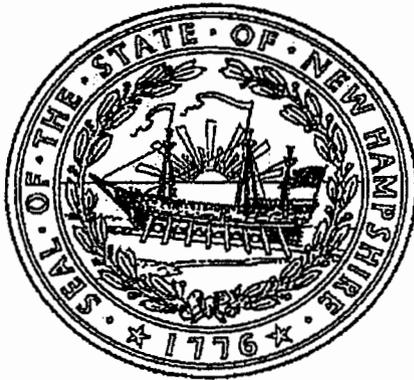
State of New Hampshire

Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that 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.

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

William M. Gardner
Secretary of State

CERTIFICATE OF VOTE/AUTHORITY

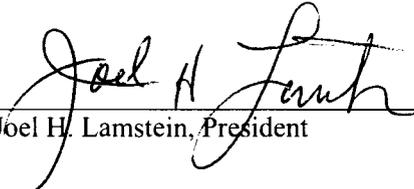
I, Joel H. Lamstein, of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute, do hereby certify that:

1. I am the duly elected President of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute;
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 Board of Directors of the JSI Research & Training Institute, 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 May 23, 2017.

IN WITNESS WHEREOF, I have hereunto set my hand as the President of the JSI Research & Training Institute, Inc., d/b/a Community Health Institute this 23rd day of May, 2017.

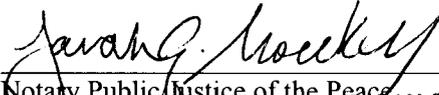


Joel H. Lamstein, President

STATE OF New Hampshire

COUNTY OF Merrimack

The foregoing instrument was acknowledged before me this 23rd day of May, 2017 by Joel H. Lamstein.



Notary Public Justice of the Peace
SARAH E. MOECKEL, Notary Public
My Commission Expires: September 17, 2019



JOHNSNO-01

DMEANEY

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/30/2016

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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).

PRODUCER Mason & Mason Technology Insurance Services, Inc. 458 South Ave. Whitman, MA 02382		CONTACT NAME: Judy Yeary PHONE (A/C, No, Ext): E-MAIL ADDRESS: JYeary@masoninsure.com	FAX (A/C, No):
INSURED JSI d/b/a Community Health Institute JSI Research & Training Institute, Inc. 501 South Street 2nd Floor Bow, NH 03304		INSURER(S) AFFORDING COVERAGE INSURER A: Federal Insurance Company INSURER B: Executive Risk Indemnity INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 20281 35181

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

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		35873320	09/09/2016	09/09/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER POLICY PROJECT X LOC X OTHER Combined Agg \$10M						
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY X SCHEDULED AUTOS X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY		73546634	09/09/2016	09/09/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A X	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE		79861066	09/09/2016	09/09/2017	EACH OCCURRENCE \$ 20,000,000 AGGREGATE \$ 20,000,000 DED RETENTION \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	71733182	09/09/2016	09/09/2017	X PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Directors & Officers		81595534	11/09/2016	11/09/2017	EACH OCC/GEN AGG \$ 3,000,000
B	ERRORS & OMISSIONS		82120859	11/09/2016	11/09/2017	EACH OCC/GEN AGG \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
It is understood and agreed that NH Department of Health and Human Services is included as an additional insured as respects general liability as required by written contract per the terms and conditions of Chubb form 80-02-2367 (5-07). All forms available for your review upon request.

CERTIFICATE HOLDER NH Department of Health and Human Services 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
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JSI Research and Training

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. JSI maintains offices in Boston, Massachusetts; Washington, D.C.; Denver, Colorado and Concord, New Hampshire; as well as seven overseas offices in developing nations. Since its inception, JSI has successfully completed more than 400 contracts in the health and human service fields.

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 OMB Circular A-133**

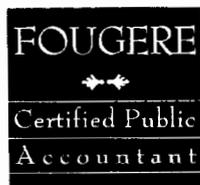
September 30, 2015

**JSI Research and Training Institute, Inc. and Affiliate
September 30, 2015**

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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, 2015, 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, 2015, 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 U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, 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 February 12, 2015. In our opinion, the summarized consolidated comparative information presented herein as of and for the year ended September 30, 2014 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 February 10, 2016, on our consideration of JSI Research and Training Institute, Inc. and its 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 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 its affiliate's internal control over financial reporting and compliance.

A handwritten signature in black ink, appearing to read "Norman R. Ferguson CPA". The signature is written in a cursive style with a large initial "N".

Duxbury, Massachusetts
February 10, 2016

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF FINANCIAL POSITION
September 30, 2015
(With Comparative Totals for 2014)

	2015	2014
ASSETS		
Current Assets:		
Cash and cash equivalents	\$ 32,723,562	\$ 29,466,831
Receivables for program work	18,380,102	12,193,072
Loans receivable - related party	130,870	425,470
Field advances - program	3,831,076	2,612,580
Employee advances	268,427	221,271
Prepaid expenses	3,700	3,700
Total Current Assets	55,337,737	44,922,924
Property and Equipment:		
Furniture and equipment	625,913	625,913
Leasehold improvements	30,355	30,355
	656,268	656,268
Less: Accumulated depreciation	(619,202)	(603,262)
Net Property and Equipment	37,066	53,006
Other Assets	83,336	83,336
TOTAL ASSETS	\$ 55,458,139	\$ 45,059,266
 LIABILITIES AND NET ASSETS		
Current Liabilities:		
Accounts payable and payroll withholdings	\$ 6,171,223	\$ 5,026,325
Accrued vacation	1,581,896	1,563,950
Advances for program work	17,530,808	14,217,480
Loans payable - related party	-	-
Notes payable	-	-
Contingencies	-	-
Total Current Liabilities	25,283,927	20,807,755
Net Assets:		
Unrestricted	30,169,212	24,246,511
Temporarily restricted	5,000	5,000
Total Net Assets	30,174,212	24,251,511
TOTAL LIABILITIES AND NET ASSETS	\$ 55,458,139	\$ 45,059,266

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF ACTIVITIES
Year Ended September 30, 2015
(With Comparative Totals for 2014)

	2015	2014
UNRESTRICTED NET ASSETS:		
Public Support and Revenue		
Public Support:		
Government grants and contracts:		
U.S. Government	\$ 210,063,095	\$ 173,962,790
Commonwealth of Massachusetts	4,161,101	4,947,642
Other grants and contracts	50,876,520	45,345,787
Program income	405,334	95,478
Contributions	3,117,911	2,061,708
In-kind project contributions	2,010,273	7,244,720
Interest income	11,440	12,236
Total Unrestricted Support and Revenue	270,645,674	233,670,361
Expenses		
Program Services:		
International programs	224,104,084	190,033,358
Domestic programs	14,498,901	14,255,597
Total Program Services	238,602,985	204,288,955
Supporting Services:		
Management and General	25,808,825	24,224,914
Fundraising	311,163	225,386
Total Supporting Services	26,119,988	24,450,300
Total Expenses	264,722,973	228,739,255
Increase (Decrease) in Unrestricted Net Assets	5,922,701	4,931,106
TEMPORARILY RESTRICTED NET ASSETS		
Net assets released from restriction	-	-
Increase (decrease) in temporarily restricted net assets	-	-
Increase (decrease) in net assets	5,922,701	4,931,106
Net Assets at Beginning of Year	24,251,511	19,320,405
Net Assets at End of Year	\$ 30,174,212	\$ 24,251,511

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
Year Ended September 30, 2015
(With Comparative Totals for 2014)

	PROGRAM SERVICES			SUPPORTING SERVICES			TOTAL
	International Programs	Domestic Programs	Total	Management And General	Fundraising	Total	EXPENSES
Salaries	\$ 22,267,515	\$ 6,385,750	\$ 28,653,265	\$ 6,262,396	\$ 180,937	\$ 6,443,333	\$ 35,096,598
Consultants	13,763,894	4,177,488	17,941,382	718,091	67,200	785,291	18,726,673
Cooperating National Salaries	33,345,783	-	33,345,783	516,111	-	516,111	33,861,894
Travel	16,017,306	643,405	16,660,711	528,599	128	528,727	17,189,438
Allowance & Training	8,777,124	5,961	8,783,085	309,204	-	309,204	9,092,289
Sub-contracts	73,066,441	1,806,467	74,872,908	-	-	-	74,872,908
Equipment, Material and Supplies	5,598,616	54,609	5,653,225	287,927	138	288,065	5,941,290
Other Costs	49,257,132	1,425,221	50,682,353	17,170,557	62,760	17,233,317	67,915,670
In-kind project expenses	2,010,273	-	2,010,273	-	-	-	2,010,273
Depreciation	-	-	-	15,940	-	15,940	15,940
TOTAL EXPENSE	\$ 224,104,084	\$ 14,498,901	\$ 238,602,985	\$ 25,808,825	\$ 311,163	\$ 26,119,988	\$ 264,722,973
							\$ 228,739,255

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
CONSOLIDATED STATEMENT OF CASH FLOWS
Year Ended September 30, 2015
(With Comparative Totals for 2014)

	2015	2014
Cash Flows From Operating Activities:		
Increase (Decrease) in net assets	\$ 5,922,701	\$ 4,931,106
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	15,940	18,012
(Increase) Decrease in receivables for program work	(6,187,030)	(6,662,821)
(Increase) Decrease in field advances - program	(1,218,496)	243,209
(Increase) Decrease in employee advances	(47,156)	(39,417)
(Increase) Decrease in prepaid expenses	-	164
(Increase) Decrease in other assets	-	(3,138)
Increase (Decrease) in accounts payable and payroll withholdings	1,144,898	1,012,582
Increase (Decrease) in accrued vacation	17,946	107,337
Increase (Decrease) in advances for program work	3,313,328	(10,535,890)
Net Cash Provided (Used) By Operating Activities	2,962,131	(10,928,856)
Cash Flows From Investing Activities:		
Loans made	(36,111)	(454,957)
Loans repaid	330,711	360,198
Acquisition of property and equipment	-	(811)
Net Cash Provided (Used) By Investing Activities	294,600	(95,570)
Net Increase (Decrease) in Cash and Cash Equivalents	3,256,731	(11,024,426)
Cash and Cash Equivalents at Beginning of Year	29,466,831	40,491,257
Cash and Cash Equivalents at End of Year	\$ 32,723,562	\$ 29,466,831

See notes to consolidated financial statements.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
September 30, 2015

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.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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 \$1,500 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.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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 2012, 2013, 2014 and 2015, 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.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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, 2015 there was no activity in temporarily restricted or 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, 2014, from which the summarized information was derived.

Reclassification

Certain amounts for 2014 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:

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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, 2015:

Current assets:

Cash and cash equivalents (invested)	<u>\$ 16,161,589</u>
	<u>\$ 16,161,589</u>

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, 2015:

	<u>Unrestricted</u>
Interest income	<u>\$ 11,440</u>
Total investment return	<u>\$ 11,440</u>

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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, 2015 was \$0.

Receivables for program work consist of the following at September 30, 2015:

U.S. Agency for International Development	\$ 11,173,185
U.S. Department of Health and Human Services	646,017
U.S. Department of State	139,794
U.S. Department of Labor	51,349
Commonwealth of Massachusetts	316,750
Other - non-governmental	<u>6,053,007</u>
	<u>\$ 18,380,102</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, 2015 is \$130,870.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

NOTE 7 – PROPERTY AND EQUIPMENT AND ACCUMULATED DEPRECIATION

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

	<u>Cost</u>	<u>Accumulated Depreciation</u>	<u>Net</u>
Furniture and equipment	\$ 625,913	\$ (588,847)	\$ 37,066
Leasehold improvements	30,355	(30,355)	-
	<u>\$ 656,268</u>	<u>\$ (619,202)</u>	<u>\$ 37,066</u>

Depreciation expense was \$15,940 for the year ended September 30, 2015.

NOTE 8 – OTHER ASSETS

Other assets consist of the following at September 30, 2015:

Deposits	\$ 46,391
Artwork - donated	<u>36,945</u>
	<u>\$ 83,336</u>

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, 2015 as follows:

JSI Research and Training Institute, Inc.	\$ 1,301,257
World Education, Inc. (Affiliate)	<u>280,639</u>
	<u>\$ 1,581,896</u>

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

NOTE 10 – ADVANCES FOR PROGRAM WORK

Advances for program work consist of the following at September 30, 2015:

Other - non-governmental	
Partnership for Supply Chain Management, Inc. (related party)	\$ 6,135,820
Bill & Melinda Gates Foundation	5,407,688
UNICEF	1,026,850
Other	<u>4,960,450</u>
	<u>\$ 17,530,808</u>

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, 2015 is \$0.

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 August 12, 2015. 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 February 28, 2016 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, 2015, the outstanding balance is \$0 and no interest was incurred on this loan during the year ended September 30, 2015.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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, 2013. 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, 2016. The loan is not collateralized. No funds were borrowed during the year and as a result, as of September 30, 2015, the outstanding balance is \$0. No interest was incurred on this loan during the year ended September 30, 2015. (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, 2015. 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, 2015, 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, 2014. 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

At September 30, 2015, the Welthy Fisher Fund of World Education, Inc. is the beneficiary of an irrevocable life income trust agreement. Under the terms of the agreement, the donor will receive either a fixed percentage of the initial fair market value of the gift or the actual income earned by the trust. Upon the death of the donor, the funds are released to World Education, Inc. for its unrestricted use.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

NOTE 14 – TEMPORARILY RESTRICTED NET ASSETS - continued

No assets were released from donor restriction by occurrence of events specified by the donor during the year ended September 30, 2015. The temporarily restricted net assets balance at September 30, 2015 is \$5,000.

NOTE 15 – SURPLUS REVENUE RETENTION

In accordance with the Massachusetts Division of Purchased Services (DPS) Regulation, 808 CMR 1.19 (3), a nonprofit provider of services is allowed to retain a portion of its excess of support and revenue over expenses in a fiscal year (the “surplus”). A nonprofit provider may retain as its surplus up to 5% of its total revenue from Commonwealth of Massachusetts purchasing agencies during any fiscal year. In addition, a nonprofit provider may retain a cumulative amount of surplus over a period of years not to exceed 20% of the prior year’s total support and revenue from Commonwealth of Massachusetts purchasing agencies and the cumulative surplus must be segregated as surplus retention net assets. A current year surplus which exceeds the 5% level or a cumulative surplus exceeding the 20% amount may be: 1) reinvested in program services as stipulated by the purchasing agencies; 2) recouped or; 3) used by the Commonwealth to reduce the price of future contracts.

The following summarizes the Company’s calculation of the surplus for fiscal year 2015 and on a cumulative basis:

	Commonwealth Surplus Retention Net Assets	Other Net Assets	Total Net Assets
Beginning of Year	\$ 854,932	\$ 23,396,579	\$ 24,251,511
Current Year	<u>104,335</u>	<u>5,818,366</u>	<u>5,922,701</u>
End of Year	<u>\$ 959,267</u>	<u>\$ 29,214,945</u>	<u>\$ 30,174,212</u>

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

NOTE 16 – COMMONWEALTH OF MASSACHUSETTS

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

Receivables from program work at October 1, 2014	\$ 295,121
Receipts	(4,139,472)
Disbursements/expenditures	<u>4,161,101</u>
Receivables from program work at September 30, 2015	<u>\$ 316,750</u>

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, 2015, John Snow, Inc. billed JSI Research and Training Institute, Inc. \$26,822,283 for consulting services (technical support). This amount is reflected under the program services-consulting line item (\$13,735,463) and program services – other costs line item (\$13,086,820) on the statement of functional expenses. In addition, JSI Research and Training Institute, Inc. performed consulting services (technical support) for John Snow, Inc. totaling \$9,290,945.

The two companies also share facilities and pool various overhead expenses. For the year ended September 30, 2015, JSI Research and Training Institute, Inc. incurred \$19,671,337 of overhead expenses (supporting services), of which \$5,713,097 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 February 28, 2016, 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, 2015 was 2.199%. At September 30, 2015, a balance of \$0 was outstanding on the loan. Management believes the loan payable will be extended, when due, under similar terms and conditions.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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, 2015, the loan receivable balance is \$130,870 and the loan payable balance is \$0.

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, 2015 are summarized as follows:

Administrative and technical support	\$ 411,365
Other direct charges (including rent of \$703,496)	<u>1,138,912</u>
	<u>\$ 1,550,277</u>

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, 2015 totaling \$273,102 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 Footnote 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.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

NOTE 17 – RELATED PARTY TRANSACTIONS - continued

Partnership for Supply Chain Management, Inc. - continued

During the year ended September 30, 2015, JSI Research and Training Institute, Inc. billed PSCM \$61,492,925 for services performed with a cost of \$58,643,920 and a fee of \$2,849,005. At September 30, 2015, PSCM advanced the Organization \$6,135,820 for program work.

During the year ended September 30, 2015, PSCM made an unrestricted contribution of \$3,000,000 to the Company.

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.)	\$ 1,569,479
	<u>\$ 1,569,479</u>

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 \$2,851,621 for the year ended September 30, 2015.

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 \$340,016 in the year ended September 30, 2015.

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

NOTE 19 – COMMITMENTS

Operating Leases

The JSI Research and Training Institute, Inc. leases space for general offices under operating leases expiring from 2014 through 2018. The leases contain renewal options for periods of up to 5 years.

During the year ended September 30, 2015, rentals under long-term lease obligations were \$508,041. Future obligations over the primary terms of the Company's long-term leases as of September 30, 2015 are:

Year Ended September 30,		
2016	\$	384,243
2017		258,901
2018		170,468
Thereafter		-
	\$	<u>813,612</u>

World Education, Inc. (Affiliate) leases space for general offices on a year-to-year basis. Rent expense for the year ended September 30, 2015 was \$703,496.

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, 2015:

	Income Received	% of Total Income
U.S. Agency for International Development	\$ 137,079,156	50.65%
Partnership for Supply Chain Management, Inc. - (Related Party)	61,492,925	22.72%
	<u>\$ 198,572,081</u>	<u>73.37%</u>

JSI Research and Training Institute, Inc. and Affiliate
NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED
September 30, 2015

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 \$2,010,273 for the year ended September 30, 2015, 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.

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, 2015, the following donated materials and services received by the Organization have been used to fulfill matching requirements on active grants:

36521	Uganda STAR-EC	\$ 90
36662	Madagascar CBIHP	(460,936)
36697	SPRING	2,030,719
36895	Mozambique M-SIP	9,371
36991	AIDS Free	37,712
63101	Senegal/Journalism	14,749
63114	Uganda	23,295
64024	Tanzania	282,513
64026	Uganda	35
64057	Zimbabwe	72,725
		<u>\$ 2,010,273</u>

NOTE 22 – SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through February 10, 2016, 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

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT			
Direct Grants:			
36030 - Georgia HWG	114-A-00-03-00157-00	98.001	\$ (5,816)
36100 - CAPACITY	176-A-00-04-00014-00	98.001	(7,262)
36514 - Liberia RBHS	669-A-00-09-00001-00	98.001	2,199,222
36521 - Uganda HIV/AIDS/TB	617-A-00-09-00007-00	98.001	6,433,323
36528 - Nigeria TSHIP	620-A-00-09-00014-00	98.001	12,930,136
36532 - Turkmenistan YC	120-A-00-09-00029-00	98.001	440,960
36662 - Madagascar CBIHP	687-A-00-11-00013-00	98.001	7,857,160
36697 - SPRING	AID-OAA-A-11-00031	98.001	23,596,255
36702 - Nepal CHX Cord Care	AID-OAA-A-11-00073	98.001	562,174
36747 - Ukraine HWUP	AID-121-A-11-00003	98.001	1,230,053
36800 - Advancing Partners	AID-OAA-A-12-00047	98.001	36,686,327
36807 - Live Learn & Play	AID-OAA-I-12-00003	98.001	120,606
36845 - Pakistan HSSP	AID-391-A-13-00002	98.001	6,230,528
36895 - Mozambique M-SIP	AID-656-A-13-00006	98.001	954,639
36932 - Senegal LLP	AID-685-A-14-00001	98.001	288,744
36991 - AIDSFREE	AID-OAA-A-14-00046	98.001	13,900,950
37024 - Tanzania CHSS	AID-621-A-14-00004	98.001	2,189,596
Total Direct Grants			<u>115,607,595</u>
Pass-through Grants:			
Passed through Partnership for Supply Chain Management, Inc. (PSCM):			
36344/36524 - Supply Chain Management System	GPO-I-00-05-00032-00	98.001	58,643,920
Passed through World Education:			
36591 - Tanzania OVC	621-A-00-10-00024-00	98.001	68,989
36840 - Zimbabwe - Vanc. Bantwana	AID-6133-A-13-00002	98.001	64,298
Passed through Family Health International (FHI):			
36620 - Africa FHI Neglected Tropical Disease	AID-OAA-A-10-00050	98.001	439,968
Passed through International Business Initiatives, Corporation (IBI):			
36826 - Liberia Governance and Economic Management Support Program	669-C-00-11-00050-00	98.001	107,318
Passed through Johns Hopkins University:			
37099 - Ethiopia SBCC	AID-663-A-15-000011	98.001	9,887
Total Pass-through Grants			<u>59,334,380</u>
Total - CFDA #98.001 - USAID Foreign Assistance for Programs Overseas			<u>174,941,975</u>

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT - CONTINUED			
Direct Grant:			
36098 - Pakistan MNH Prog. Paiman	391-A-00-05-01037-00	98.004	(96,571)
Total - CFDA #98.004 - Non-Governmental Organization Strengthening (NGO)			<u>(96,571)</u>
TOTAL - U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT			\$ <u>174,845,404</u>
 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			
Pass-through Grants:			
Passed through NACCHO:			
36595 - NH MRC Conferences	2010-051013	93.008	\$ 176
36689 - NH MRC Conferences	2011-041218	93.008	<u>165</u>
Total CFDA #93.008 - Medical Reserve Corps Small Grant Programs			<u>341</u>
Direct Grant:			
37087 - Adolescent HIV/AIDS Prevention	MAIAH000001	93.057	<u>62,171</u>
Total CFDA #93.057 - National Resource Center for HIV Prevention Among Adolescents			<u>62,171</u>
Direct Grant:			
36901 - CDC - Strategic Assessments for Strategic Action in India	1U2GGH001132-01	93.067	<u>528,620</u>
Total CFDA #93.067 - Global AIDS			<u>528,620</u>
Pass-through Grants:			
Passed through State of New Hampshire:			
36879 - Public Health Program Services Support	PO# 1031592	93.069	(765)
36880 - Public Health Program Services Support	PO# 1031592	93.069	114,248
37090 - Public Health Program Services Support	PO# 1031592	93.069	<u>51,424</u>
Total CFDA #93.069 - Public Health Emergency Preparedness			<u>164,907</u>

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants:			
Passed through State of Vermont:			
36847 - Asthma Control Program	23940	93.070	39,568
37096 - Asthma Control Program	29370	93.070	198
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.070	45,170
37090 - Public Health Program Services Support	PO# 1031592	93.070	40
Total CFDA #93.070 - Environmental Public Health and Emergency Response			84,976
Pass-through Grant:			
Passed through Puerto Rico Academy of Medical Directors, Inc.:			
37031 - Cuidate and Cuidalos Training of Trainers	2015-DS0758	93.092	21,225
Total CFDA #93.092 - Affordable Care Act Personal Responsibility Education Program			21,225
Pass-through Grants:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.110	37,244
37090 - Public Health Program Services Support	PO# 1031592	93.110	2,482
Passed through State of New Hampshire Family Voices:			
37081 - Epilepsy Needs Assessment	Agreement @ 6-30-15	93.110	8,525
Total CFDA #93.110 - Maternal and Child Health Federal Consolidated Programs			48,251
Direct Grant:			
37103 - HITEQ	U30CS29366	93.129	7,203
Total CFDA #93.129 - Technical and Non-Financial Assistance to Health Centers			7,203
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.130	6,143
Total CFDA #93.130 - Cooperative Agreements to States/ Territories for the Coordination and Development of Primary Care Offices			6,143

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.136	33,397
Total CFDA #93.136 - Injury Prevention and Control Research and State and Community Based Programs			33,397
Pass-through Grants:			
Passed through Health Research, Inc.:			
36989 - National Quality Center Evaluation Consultation Services	4538-03	93.145	90,930
37089 - NQC Evaluation Project	Agreement @ 7-01-15	93.145	16,492
Direct Grant:			
36904 - Ryan White ACE	UF2HA26520	93.145	1,414,531
Total CFDA #93.145 - AIDS Education and Training Centers			1,521,953
Pass-through Grants:			
Passed through Action for Boston Community Development, Inc.:			
36935 - FamPlan Data Systems		93.217	18,447
37047 - FamPlan Data Systems		93.217	26,722
Passed through State of New Hampshire:			
36935 - FamPlan Data Systems	PO# 1039867	93.217	11,632
Passed through State of Rhode Island:			
36935 - FamPlan Data Systems	PO# 3307663	93.217	16,473
Passed through Planned Parenthood of Southern New England:			
36935 - FamPlan Data Systems		93.217	19,905
37047 - FamPlan Data Systems		93.217	11,759
Passed through Planned Parenthood of Northern New England:			
36935 - FamPlan Data Systems		93.217	9,078
37047 - FamPlan Data Systems		93.217	34,934
Passed through Health Imperatives, Inc.:			
36935 - FamPlan Data Systems		93.217	6,428
37047 - FamPlan Data Systems		93.217	11,282
Passed through Planned Parenthood League of Massachusetts:			
36935 - FamPlan Data Systems		93.217	2,361
37047 - FamPlan Data Systems		93.217	4,144

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants - continued:			
Passed through Health Quarters, Inc.:			
36935 - FamPlan Data Systems		93.217	4,578
37047 - FamPlan Data Systems		93.217	8,034
Passed through Tapestry Health Systems:			
36935 - FamPlan Data Systems		93.217	4,634
Passed through Family Planning Association of Maine:			
36935 - FamPlan Data Systems		93.217	12,149
37047 - FamPlan Data Systems		93.217	21,323
Passed through Massachusetts Department of Public Health:			
37047 - FamPlan Data Systems		93.217	9,489
Passed through Vermont Department of Health:			
37047 - FamPlan Data Systems		93.217	4,173
Total CFDA #93.217 - Family Planning Services			<u>237,545</u>
Pass-through Grant:			
Passed through First Nations Community Healthsource:			
37000 - NCQA PCMH Recognition Technical Assistance	Agreement @ 6-13-14	93.224	2,033
Total CFDA #93.224 - Consolidated Health Centers			<u>2,033</u>
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160925	93.236	1,812
Total CFDA #93.236 - Grants to States to Support Oral Health Workforce Activities			<u>1,812</u>
Pass-through Grants:			
Passed through Buildings Bright Futures State Advisory Council, Inc.:			
36850 - Vermont L.A.U.N.C.H. Project	13/7	93.243	55,059
Passed through State of New Hampshire:			
36875 - NH Center for Excellence - Drug and Alcohol	1025785	93.243	445,563
Passed through County of Cheshire, New Hampshire:			
36889 - Drug Court Program	Agreement @ 8-19-13	93.243	39,828
Passed through Action for Boston Community Development, Inc.:			
36903 - Entre Nosotras FY14	Agreement @ 10-19-13	93.243	16,647

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants - continued:			
Passed through State of Rhode Island:			
37023 - PFS Training and Technical Assistance Services	3426881	93.243	33,337
Passed through Goodwin Community Health:			
37054 - GCH MS YRBS Evaluation Services	Agreement @ 4-19-15	93.243	<u>1,307</u>
Total CFDA #93.243 - Substance Abuse and Mental Health Services Projects of Regional and National Significance			<u>591,741</u>
Direct Grants:			
36777 - National Training Center - Quality Assurance, Quality Improvement, Evaluation	FPTPA006025	93.260	1,068,933
36787 - Reproductive Health Prevention Training and Technical Assistance	FPTPA006015	93.260	191,616
36792 - National Training Center for Management and Systems Improvement	FPTPA006023	93.260	1,115,176
36794 - Region VIII Sexual Health	FPTPA006016	93.260	<u>163,076</u>
Total - CFDA #93.260 - Family Planning - Personnel Training			<u>2,538,801</u>
Pass-through Grants:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.268	99,442
37090 - Public Health Program Services Support	PO# 1031592	93.268	<u>6,348</u>
Total CFDA #93.268 - Immunization Cooperative Agreements			<u>105,790</u>
Pass-through Grants:			
Passed through United Way of Greater Nashua:			
36937 - Nashua DFC Evaluation	Agreement @ 3-5-14	93.276	3,445
Passed through Center for Social Innovation:			
36980 - BRSS TACS	HHSS280201100002C	93.276	36,905
Passed through Sullivan County, New Hampshire:			
37026 - MS YRBS Evaluation Services	150952	93.276	6,744
Passed through Mary Hitchcock Memorial Hospital:			
37036 - Upper Valley Drug Free Communities Grant Evaluation	Agreement @ 1-29-15	93.276	8,243
Passed through Narragansett Prevention Partnership:			
37037 - NPP Evaluation	Agreement @ 1-25-15	93.276	8,374

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants - continued:			
Passed through Center for Social Innovation:			
37058 - BRSS TACSII	HHSS280201100002C	93.276	30,887
37062 - BRSS TACS	HHSS280201100002C	93.276	486
Passed through SoROCK:			
37072 - Evaluation Support Services	Agreement @ 5-20-15	93.276	5,401
Total CFDA #93.276 - Drug-free Communities Support Program Grants			100,485
Pass-through Grants:			
Passed through State of New Hampshire:			
36843 - Tobacco Helpline	1028499	93.283	218,445
36880 - Public Health Program Services Support	PO# 1031592	93.283	14,996
36906 - NH Top QL Partnership	Agreement @ 9-4-13	93.283	2,717
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.283	3,922
36849 - Smoker's Helpline - Quitline Tobacco Cessation	3320510	93.283	49,229
Passed through Commonwealth of Massachusetts Department of Public Health:			
HIV/AIDS Research, Training and Support	INTF-2915M04900315005	93.283	248,405
Passed through State of Vermont:			
37041 - Vermont Tobacco Control Program	28405	93.283	10,399
Total - CFDA #93.283 - Centers for Disease Control and Prevention - Investigations and Technical Assistance			548,113
Direct Grant:			
36891 - PPHF 2013 - OSTI/TS Partnerships	1U38OT000188	93.292	99,574
Pass-through Grant:			
Passed through Yale University:			
37070 - CT QI Project	SNP6247797	93.292	11,683
Total - CFDA #93.292 - National Public Health Improvement Initiative			111,257

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants:			
Passed through Black Ministerial Alliance of Greater Boston, Inc.:			
36664 - Healthy Futures	Agreement @ 6-1-11	93.297	138,167
36750 - Healthy Futures Health Education	Agreement @ 4-20-12	93.297	300
36848 - Teen Pregnancy Prevention Initiative	Agreement @ 5-1-13	93.297	10,879
Passed through Massachusetts Alliance on Teen Pregnancy:			
37079 - MATP Consulting	Agreement @ 6-8-15	93.297	24,480
Total - CFDA #93.297 - Teenage Pregnancy Prevention Program			173,826
Pass-through Grant:			
Passed through University of Southern Maine:			
37093 - Maine Food Security	Agreement @ 8-1-15	93.331	2,472
Total - CFDA #93.331 - Partnerships to Improve Community Health			2,472
Pass-through Grants:			
Passed through State of Vermont:			
36853 - Maternal, Infant, and Early Childhood Home Visitation Program	24086	93.505	11,155
Passed through State of New Hampshire:			
37090 - Public Health Program Services Support	PO# 1031592	93.505	4,754
Total - CFDA #93.505 - Affordable Care Act Maternal, Infant, and Early Childhood Home Visiting Program			15,909
Pass-through Grants:			
Passed through Town of Hudson, Massachusetts:			
36754 - MetroWest Moves	Agreement @ 5-9-12	93.531	48,539
Passed through State of Vermont:			
36930 - Vermont Oral Health Coalition	25965	93.531	31
Total - CFDA #93.531 - PPHF 2012 - Community Transition Grants			48,570
Pass-through Grant:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.538	29,090
Total - CFDA #93.538 - Affordable Care Act - Nat'l. Environmental Public Health Tracking Program			29,090

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grant:			
Passed through State of New Hampshire:			
36843 - Tobacco Helpline	1028499	93.735	5,375
Direct Grant:			
37015 - Tobacco Use Prevention	U58DP005338	93.735	<u>64,123</u>
Total - CFDA #93.735 - State Public Health Approaches for Ensuring Quitline Capacity			<u>69,498</u>
Pass-through Grants:			
Passed through Ozarks Regional YMCA:			
36835 - Transformation Engagement Project	Agreement @ 2-28-13	93.737	108,198
36929 - Ozarks Regional Food Policy Council	Agreement @ 1-12-14	93.737	<u>4,041</u>
Total - CFDA #93.737 - Community Transformation Grants			<u>112,239</u>
Pass-through Grant:			
Passed through Granite United Way:			
37074 - CHIP Process in the Capital Area	Agreement @ 5-28-15	93.749	<u>2,580</u>
Total - CFDA #93.749 - PPHF - Public Health Laboratory Infrastructure			<u>2,580</u>
Pass-through Grant:			
Passed through State of New Hampshire:			
37090 - Public Health Program Services Support	PO# 1031592	93.753	<u>1,331</u>
Total - CFDA #93.753 - Child Lead Poisoning Surveillance (PPHF)			<u>1,331</u>
Pass-through Grants:			
Passed through State of New Hampshire:			
37048 - National Diabetes Prevention Program	161611-B001	93.757	119,099
37068 - Technical Assistance Network for Rural Health Clinics	1043188	93.757	<u>79,895</u>
Total - CFDA #93.757 - State and Local Public Health Actions to Prevent Obesity, Diabetes, Heart Disease and Stroke (PPHF)			<u>198,994</u>
Pass-through Grants:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.758	13,869
Passed through Commonwealth of Massachusetts Dept. of Public Health:			
Preventive Health and Health Services	INTF-4300-M04500824048	93.758	100,000

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants - continued:			
Passed through United Way of the Greater Seacoast:			
37073 - Community Health Improvement Planning	Agreement @ 5-28-15	93.758	590
Passed through State of New Hampshire:			
37090 - Public Health Program Services Support	PO# 1031592	93.758	11,954
Total - CFDA #93.758 - Preventive Health and Health Services Block Grant Funded Solely with Prevention and Public Health Funds (PPHF)			126,413
Pass-through Grant:			
Passed through State of Colorado:			
37080 - Hospital Quality Incentive Payment	PO UHAA 2016000000000000820	93.778	7,334
Total - CFDA #93.778 - Medical Assistance Program			7,334
Pass-through Grants:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.889	41,363
37090 - Public Health Program Services Support	PO# 1031592	93.889	22,480
Total - CFDA #93.889 - National Bioterrorism Hospital Preparedness Program			63,843
Pass-through Grant:			
Passed through Massachusetts Alliance on Teen Pregnancy:			
37046 - Young Men Matter, Too	YEPMP140092	93.910	19,750
Total - CFDA #93.910 - Family and Community Violence Prevention Program			19,750
Pass-through Grant:			
Passed through Mid-State Health Center:			
36953 - PATT Evaluation	MS1415-1	93.912	11,280
Total - CFDA #93.912 - Rural Health Care Services Outreach			11,280
Pass-through Grants:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.913	1,961

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grants - continued:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.913	23,546
36988 - Rural Health and Primary Care	PO# 1038916	93.913	10,293
37068 - Technical Assistance Network for Rural Health Clinics	1043188	93.913	<u>27,228</u>
Total - CFDA #93.913 - Grants to States for Operation of Offices of Rural Health			<u>63,028</u>
Pass-through Grant:			
Passed through Boston Public Health Commission:			
36453 - BPHC Quality Management	6307A	93.914	<u>191,224</u>
Total - CFDA #93.914 - HIV Emergency Relief Project Grants			<u>191,224</u>
Pass-through Grants:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.917	63,551
37090 - Public Health Program Services Support	PO# 1031592	93.917	608
Passed through Commonwealth of Massachusetts Department of Public Health:			
HIV Care	INTF-4971-M045008224092	93.917	<u>377,667</u>
Total - CFDA #93.917 - HIV Care Formula Grants			<u>441,826</u>
Direct Grant:			
36967 - Healthy Start Performance Project	UF5MC26845	93.926	<u>1,536,877</u>
Total - CFDA #93.926 - Healthy Start Initiative			<u>1,536,877</u>
Direct Grant:			
36945 - CDC CBA FY15 - FY19	U65PS004406	93.939	<u>826,403</u>
Total - CFDA #93.939 - HIV Prevention Activities - NGO Based			<u>826,403</u>
Pass-through Grants:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.940	42,368
Passed through State of Connecticut Department of Public Health:			
37028 - HIV Prevention	2014-0186	93.940	<u>82,644</u>
Total - CFDA #93.940 - HIV Prevention Activities - Health Department Based			<u>125,012</u>

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTINUED			
Pass-through Grant:			
Passed through Commonwealth of Massachusetts Department of Public Health:			
HIV/AIDS Surveillance	INTF-4971-M04500824092	93.944	<u>32,258</u>
Total - CFDA #93.944 - HIV/AIDS Surveillance			<u>32,258</u>
Pass-through Grant:			
Passed through South County Hospital Healthcare System:			
37091 - South County Health Equity Zone	Agreement @ 5-1-15	93.945	<u>2,398</u>
Total - CFDA #93.945 - Assistance Programs for Chronic Disease Prevention and Control			<u>2,398</u>
Direct Grant:			
36615 - CDC Teen Pregnancy	U58DP002906	93.946	<u>330,469</u>
Total - CFDA #93.946 - Cooperative Agreements to Support State-Based Safe Motherhood and Infant Initiative Programs			<u>330,469</u>
Pass-through Grants:			
Passed through State of Rhode Island:			
36801 - Prevention Resource Center	3316844	93.959	173,399
Passed through United Way of the Greater Seacoast:			
37073 - Community Health Improvement Planning	Agreement @ 5-28-15	93.959	<u>885</u>
Total - CFDA #93.959 - Block Grants for Prevention and Treatment of Substance Abuse			<u>174,284</u>
Pass-through Grants:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	93.994	38,511
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	93.994	2,203
Passed through State of Vermont:			
37067 - Title V and Title X Needs Assessment	28817	93.994	<u>28,711</u>
Total - CFDA #93.994 - Maternal & Child Health Services Block Grant to the States			<u>69,425</u>
TOTAL - U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			<u>\$ 11,393,097</u>

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF HOMELAND SECURITY			
Direct Grants:			
United States Coast Guard -			
36857 - Nat'l. Estimate of Life Jacket Wear Rate	3313FAN1302.15	97.012	\$ 2,965
36969 - Nat'l. Estimate of Life Jacket Wear Rate	3314FAN1402.09	97.012	86,372
37076 - Nat'l. Life Jacket Wear Rate	3315FAN1502.05	97.012	132,058
Pass-through Grant:			
Passed through the State of Washington:			
36958 - WA Parks Lifejackets	315-126	97.012	<u>524</u>
Total CFDA #97.012 - Boating Safety Financial Assistance			<u>221,919</u>
TOTAL - U.S. DEPARTMENT OF HOMELAND SECURITY			<u>\$ 221,919</u>
 U.S. ENVIRONMENTAL PROTECTION AGENCY			
Direct Grant:			
36789 - Reducing Asthma Disparities Through Adult Basic Education	96161301	66.034	<u>\$ 13,279</u>
Total CFDA #66.034 - Surveys Studies Research Investigations, Demonstrations and Special Purpose Activities Relating to the Clean Air Act			<u>13,279</u>
Pass-through Grant:			
Passed through State of Rhode Island:			
36501 - Epidemiology/Public Health Data	3160295	66.472	<u>1,037</u>
Total CFDA #66.472 - Beach Monitoring and Notification Program Implementation Grants			<u>1,037</u>
Pass-through Grants:			
Passed through State of New Hampshire:			
36880 - Public Health Program Services Support	PO# 1031592	66.707	53,668
37090 - Public Health Program Services Support	PO# 1031592	66.707	<u>1,122</u>
Total CFDA #66.707 - TSCA Title IV State Lead Grants Certification of Lead-Based Paint Professional			<u>54,790</u>
TOTAL - U.S. ENVIRONMENTAL PROTECTION AGENCY			<u>\$ 69,106</u>

See notes to Schedule of Expenditures of Federal Awards.

JSI Research and Training Institute, Inc.
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Year Ended September 30, 2015

Federal Grantor/Pass-through Grantor Program Title	Agency or Pass-through Number	Federal CFDA Number	Federal Expenditures
U.S. DEPARTMENT OF JUSTICE - CONTINUED			
Pass-through Grants:			
Passed through State of New Hampshire:			
36931 - Court Diversion	PO# 1035374	16.540	\$ <u>28,345</u>
Total - CFDA #16.540 - Juvenile Justice and Delinquency Prevention - Allocation to States			<u>28,345</u>
Pass-through Grants:			
Passed through County of Cheshire, New Hampshire:			
36902 - Cheshire County Drug Court	Agreement @ 9-20-13	16.585	13,423
Passed through State of New Hampshire Admin. Office of the Courts:			
37043 - Rockingham County Adult Drug Court	Agreement @ 1-16-15	16.585	<u>2,730</u>
Total - CFDA #16.858 - Department of Justice, Bureau of Justice Assistance Grant			<u>16,153</u>
TOTAL U.S. DEPARTMENT OF JUSTICE			\$ <u>44,498</u>
TOTAL FEDERAL AWARDS			\$ <u>186,574,024</u>

JSI Research and Training Institute, Inc.
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
September 30, 2015

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, 2015. The information in this Schedule is presented in accordance with the requirements of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. 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 OMB Circular A-122, *Cost Principles for Non-Profit Organizations*, wherein certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Catalog of Federal Domestic Assistance (CFDA) numbers are presented when available.

JSI Research and Training Institute, Inc.
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
September 30, 2015

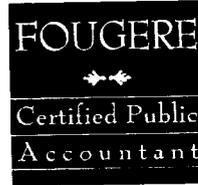
NOTE 3 – SUBRECIPIENTS

Of the federal expenditures presented in the schedule, JSI Research and Training Institute, Inc. provided federal awards to subrecipients as follows:

<u>Program</u>	<u>CFDA Number</u>	<u>Amount Provided to Subrecipients</u>
Juvenile Justice and Delinquency Prevention	16.540	\$ 8,387
Clean Air Act	66.340	2,000
National Resources Center for HIV Prevention Among Adolescents	93.057	41,596
Public Health Emergency Preparedness	93.069	90,337
Cooperative Agreements to Promote Adolescent Health through School-Based HIV/STD Prevention and School-Based Surveillance	93.079	1,797
Injury Prevention and Control Research and State and Community Based Programs	93.136	53
AIDS Education and Training Centers	93.145	220,975
Family Planning Services	93.217	36,443
Substance Abuse and Mental Health Services - Projects of Regional and National Significance	93.243	12,830
Family Planning - Personnel Training	93.260	270,000
Centers for Disease Control and Prevention - Investigations and Technical Assistance	93.283/93.735	230,210
Building Capacity of the Public Health System to Improve Population Health	93.424	53,083
Capacity Building Assistance to Strengthen Public Health Immunization	93.539/93.268	1,322
ACA - State Innovation Models: Funding for Model Design and Model Testing Assistance	93.624	97,363
State and Local Public Health Actions to Prevent Obesity, Diabetes, etc.	93.757	20,400
Grants to States for Operation of Offices of Rural Health	93.913/93.757	27,566
HIV Care Formula Grants	93.917	71,778
Healthy Start Initiative	93.926	45,499
HIV Prevention Activities - Health Department Based	93.940	658
HIV Demonstration, Research, Public and Professional Education Projects	93.941	150
RI Prevent Resource Center	93.959	695
USAID Foreign Assistance for Program Overseas	98.001	<u>57,144,191</u>
Total Federal Awards Provided to Subrecipients		\$ 58,377,332
Non-Federal Awards Provided to Subrecipients		<u>1,644,775</u>
		<u>\$ 60,022,107</u>

The federal expenditures provided to subrecipients are reflected in the sub-contracts line item of the schedule of functional expenses.

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**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, 2015, 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 February 10, 2016.

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 its 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

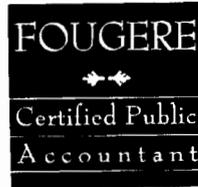
As part of obtaining reasonable assurance about whether JSI Research and Training Institute, Inc. and its affiliate's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, 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.

A handwritten signature in black ink, appearing to read "Norman J. Joyce, CPA". The signature is written in a cursive style with a large initial "N".

Duxbury, Massachusetts
February 10, 2016



**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR
PROGRAM AND ON INTERNAL CONTROL
OVER COMPLIANCE IN REQUIRED BY OMB CIRCULAR A-133**

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 Circular A-133 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, 2015. 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 the requirements of laws, regulations, contracts, and grants 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 OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 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, 2015.

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 OMB Circular A-133, 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 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 U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. 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 OMB Circular A-133. Accordingly, this report is not suitable for any other purpose.

A handwritten signature in black ink, appearing to read "Norman Ferguson CPA". The signature is written in a cursive style with a large, stylized initial "N".

Duxbury, Massachusetts
February 10, 2016

JSI Research and Training Institute, Inc. and Affiliate
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
September 30, 2015

SECTION I - Summary of Auditors' Results:

Financial Statements

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

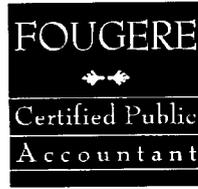
Any audit findings which are required to be reported under Section 510(a) of OMB Circular A-133: No

- Identification of major programs: USAID Foreign Assistance for Programs Overseas CFDA #98.001

Dollar threshold used to distinguish between Type A and Type B programs: \$3,000,000

Auditee qualified as low risk auditee under Section 530 of OMB Circular A-133 Yes

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STATUS OF PRIOR YEAR'S FINDINGS AND QUESTIONED COSTS

There were no reportable findings or questioned costs for the year ended September 30, 2014.



JSI Research & Training Institute, Inc.

BOARD OF DIRECTORS

Alex Baker, Chief Operating Officer, JSI

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

Patricia Fairchild, Vice President, JSI Health Services

Sandro Galea, Dean and Robert A. Knox Professor, Boston University School of Public Health

Leland Goldberg, Business Consultant

Carolyn Hart, Vice President, JSI International Health

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

Joel Lamstein, JSI, President and Chair

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

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

JONATHAN A. STEWART

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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 Council; Co-chair, 2000-2002

New Hampshire Public Health Association; Treasurer, 1999-2003



ALYSON M. COBB

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EDUCATION

BOSTON UNIVERSITY SCHOOL OF PUBLIC HEALTH, BOSTON, MASSACHUSETTS

Masters of Public Health in Epidemiology, 2015

Delta Omega Honorary Society in Public Health

BUCKNELL UNIVERSITY, LEWISBURG, PENNSYLVANIA

Bachelor of Arts in Chemistry, Minor in American Literature, 2009

FEMA EMERGENCY MANAGEMENT INSTITUTE, INDEPENDENT STUDY COURSES (ONLINE)

IS-100.a Introduction to the Incident Command System, 2009

IS-120.a: An Introduction to Exercises, 2015

IS-200.a ICS for Single Resources and Initial Action Incidents, 2009

IS-700.a National Incident Management System- An Introduction, 2009

HOMELAND SECURITY EXERCISE AND EVALUATION PROGRAM, AGAWAM, MASSACHUSETTS

Homeland Security Exercise and Evaluation Program Training Course, 2010

EXPERIENCE

JSI, Bow, New Hampshire

Project Director, August 2015 to present

Project Associate, August 2010 to August 2015

*AmeriCorps*VISTA Member, August 2009 to August 2010*

New Hampshire Public Health Emergency Planning Technical Assistance and Training

Provide technical assistance and support to the 13 Regional Public Health Networks in NH around public health emergency preparedness, planning, and response, as well as Public Health Advisory Council development. Assess statewide needs to provide technical assistance to all 13 Networks, as well as provide one-on-one technical assistance to Networks upon request. Develop and deliver trainings, plan templates, and tools on a variety of public health and emergency response topics, including medical surge, standard precautions, points of dispensing, and public information. Develop, facilitate, and evaluate exercises and real events. Conducted After Action Report development processes in New Hampshire for 2009 H1N1, 2012 Hepatitis C Outbreak, and 2014-15 Ebola responses.

New Hampshire Medical Reserve Corps Development

Work to strengthen the statewide volunteer system, including convening regular meetings of unit coordinators, providing individual technical assistance, organizing statewide recruitment efforts, developing and implementing volunteer surveys, and developing and providing trainings for volunteers. Facilitate planning process of the NH Integrated Emergency Volunteer Training Conference, which draws 200 attendees annually. In 2016, expanded NH Integrated Emergency Volunteer Training Conference to include a Point of Dispensing (POD) exercise, in which all 200 attendees had the opportunity to act as both a responder and a client.

New Hampshire Lead Poisoning Prevention

Work with Healthy Homes & Lead Poisoning Prevention Program (HHLPPP) to reduce lead poisoning in NH. Facilitate the New England Lead Coordinating Committee (NELCC), including hosting regular conference calls, developing and maintaining the New England Lead website (www.newenglandlead.org), developing of educational materials, and planning regular NELCC Retreats and the 2015 and 2017 New England Lead Conferences. Worked with HHLPPP to develop/customize and disseminate educational materials for parents, providers, and lead professionals, including posters for municipalities, the 2015 update of the Screening and Management Guidelines, the 2015 Lead Exposure Surveillance Report and accompanying at-a-glance guide, and training materials for non-certified workers. Developed HHLPPP's three-year evaluation plan for CDC funds.



New Hampshire Ebola and Emerging Infectious Disease Readiness

Implemented project to improve preparedness of the health care system to identify, isolate, and manage high threat infectious disease cases. Conducted an assessment of current infectious disease readiness capacity of hospitals, based on the CDC Infection Control Assessment and Response Program's methodology. Planned and facilitated two HSEEP-compliant tabletops focused on isolation of an infectious disease patient and transporting an Ebola patient to the Regional Ebola Treatment Center in MA. Drafted NH's first ever High Threat Infectious Disease Plan and updated state Ebola Response Plan to address new guidance and findings from tabletop exercises.

Massachusetts Jurisdictional Risk Assessments

Working with Massachusetts Division of Public Health, Office of Preparedness and Emergency Management (MA DPH, OPEM) to design and implement a participatory, multi-sectoral risk assessment process for the six Health and Medical Coordinating Coalitions (HMCCs). Project includes development of an online survey for coalition members to prioritize risks from a set of nine hazards and assess regional preparedness using a JSI-developed instrument derived from the CDC's 2011 Public Health Emergency Preparedness Capabilities and the 2016 Health Care Capabilities. After analyzing and disseminating survey results, will facilitate in-person meetings with coalition members in each region to review results and plan appropriate mitigation strategies to reduce risk. Develop toolkit to assist HMCCs with mitigation strategy development and implementation.

Active Ebola Monitoring Program for Low Risk Travelers in Massachusetts

As a consultant epidemiologist for MA Department of Public Health, actively monitored incoming travelers from Ebola-affected West Africa with a low risk of exposure for 21 day incubation period. Role included daily communication with travelers, entering traveler information into web-based secure surveillance system (MAVEN), and coordinating with local health departments to ensure continuous monitoring.

Public Health, Behavioral Health, and Health Care System Hazard Vulnerability Assessments in New Hampshire and Massachusetts

Support project to assess the public health, behavioral health, and health care system impacts of natural and manmade hazards. Facilitate participatory meetings with local stakeholders to assess anticipated impact of various hazards, assess regional preparedness to respond to the hazards, and identify of risk mitigation strategies. Results of the three-step process are summarized in an action plan for each region to improve their preparedness. Assessment process has been completed in all regions in MA and NH.

Functional Needs Support Services Shelter Workshops for New Hampshire Medical Reserve Corps Volunteers
Plan, develop materials for, and conduct four discussion-based exercises for NH Medical Reserve Corps volunteers to prepare them to accommodate all residents in an emergency shelter.

Exercises and Regional Plans for Administering Supplemental Oxygen in Public Health Emergencies in New Hampshire

Planned, developed materials for, and conducted 10 discussion-based and 12 functional exercises for NH Public Health Networks to develop their ability to provide low-flow oxygen in a medical surge setting. Corrective actions for each region, as well as the State, were summarized following each exercise to improve the ability of the Public Health Networks to provide oxygen services.

Healthy Farms, Healthy People Policy Research & Analysis Project

Conducted a formative research process of barriers and innovative strategies to foster connections between consumers and producers of local foods in NH. Held key informant interviews and focus groups with opinion leaders, including state government, education, bulk purchasers, public health, farmers, and organizers of various local food programs and initiatives. Conducted survey of over 500 food producers and consumers from around the state and analyzed survey responses. Drafted and finalized a white paper on key findings. Final white paper available at <http://bit.ly/14ii10L>.

NH Department of Health & Human Services, Infectious Disease Surveillance Section, Concord, New Hampshire *Student Intern, March 2014 to May 2015*

Under the direction of the Infectious Disease Surveillance Section Chief, collect, manage, and analyze reportable disease information for Lyme disease cases, including entering case information into the NH Electronic Disease Surveillance System (NHEDSS). Develop report cards evaluating individual providers around the state regarding timeliness of Lyme disease case reporting, including selecting measures, analyzing data, developing and disseminating individual provider report cards, and writing a procedure to be followed in future years to allow for the assessment of trend data. Internship fulfilled practicum requirement of Boston University School of Public Health's Masters of Public Health program.



MARTHA BRADLEY, MS

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EDUCATION

SPRINGFIELD COLLEGE, MANCHESTER, NEW HAMPSHIRE
M.S., Human Service Administration, May, 2001

UNIVERSITY OF NEW HAMPSHIRE, DURHAM, NEW HAMPSHIRE
B.A., Psychology, May, 1987

EXPERIENCE

JSI, Bow, New Hampshire

Project Manager, December 2002 to present

Areas of technical expertise include: Project management and implementation, health education and material development, training, and qualitative research.

New Hampshire SBIRT Initiative, December 2015 to present

Funded by the NH Charitable Foundation in partnership with the Conrad N. Hilton Foundation and NH Bureau of Drug and Alcohol Services to provide training to healthcare providers and systems implementing SBIRT (Screening, Brief Intervention, and Referral to Treatment) as a strategy to integrate behavioral health and primary care to identify patients at risk of substance misuse in 18 health systems across 30 locations. Developed and implemented a variety of learning opportunities such as webinars, meetings, onsite trainings and shared learning to help providers address all facets of their workflow including payment and reimbursement, confidentiality, technology, shared decision making tools, patient education and follow-up. The training builds knowledge and skills through role play and practice on utilizing motivational interviewing techniques with patients identified at greater risk of substance misuse.

Partnerships for Quitline Sustainability, August 2014 to present

A multi-year contract with the CDC to work with the state health department to develop strategy and material to engage insurance professionals to consider cost sharing arrangements for Helpline services. Strategy based on model developed by North American Quitline Consortium and key informant interviews with insurance stakeholders.

Prediabetes Media Development and Placement Services, March 2015 to present

Responsible for developing a statewide media campaign that encourages those at risk to enroll in a National Diabetes Prevention Program which includes quantitative research of the target audience, audience testing, and message and material development.

Child Abuse Needs Assessment, April- October 2015

Conducted a comprehensive needs assessment to increase knowledge regarding the factors that impact the competencies and capacities of healthcare providers to provide special medical exams to child victims of suspected physical abuse and neglect.

Arsenic in Private Well Water, March to August 2015

Worked with the Dartmouth Toxic Metals Superfund Research Program to create intervention material to increase home owners' readiness to voluntarily test their well water for arsenic. Developed message themes and conducted end user testing to identify factors influencing home owners' interest in testing.

NH Immunization Marketing, June 2010 to present

NH Department of Health and Human Services, NH Immunization Program: Worked with community stakeholders to research, develop, and implement a statewide marketing and awareness campaign aimed at increasing immunization rates for the priority population.

NH Environmental Public Health Tracking Program Data Utilization and Outreach Project, April 2012 to present

NH Department of Health and Human Services, Environmental Public Health Tracking Program: works 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. Conducted formative research and wrote current communication plan. Conducted end user testing on a web-based tool to assess the probability of arsenic in well water.

New Hampshire Public Health Emergency Planning Technical Assistance and Training, *December 2008 to present*
New Hampshire Department of Health and Human Services, Division of Public Health Services, Office of Community and Public Health: Provide technical assistance and support to two of the 14 regional public health regions. Developed and delivered a five hour *Risk Communication* training designed to build skills for professionals serving as a public information officer during a public health emergency, Family and Individual Preparedness train-the-trainer, Continuity of Operations Planning training and several other Homeland Security Emergency Planning compliant exercises to assist the regions build knowledge and skills to plan and respond to public health emergencies. Support, participate in and evaluate training exercises.

Nashua Community Health Assessment, *September 2013 to May 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 10 focus groups and wrote summary report of findings.

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 and developed needs assessment report.

HNH Foundation, *December 2012–2013*
Worked with 12 community groups across NH to plan, coordinate, implement and evaluate 12 screening and education events of the *Challenges* film from the HBO series *Weight of the Nation*. The aim of the project is to increase awareness among NH residents of the social costs and implications of obesity and to encourage local and regional strategies to address access to healthy food and opportunities for physical activity.

NH Department of Education, Child and Adult Care Food Program (CACFP), *January–June 2013*
Created content for two lessons and supplemental activities on the topics of nutrition and physical activity for CACFP for professionals working in family-based child care programs that are enrolled in CACFP and their sponsoring agencies.

PRESENTATIONS

- Presentation at Moffitt Cancer Center: *Cancer, Culture and Literacy Conference* in 2008 & 2010.
- Presentation at the NH Conference for Adult Educators on *Tobacco & Literacy in NH: A Pilot Program for Young Adults*, February 2007 and abstract accepted at the ACCESS 08 Conference.
- Presentation at the Break Free Alliance Conference, *Promising Practice to Eliminate Tobacco Related Disparities: the Power of Communities*, April 2012.
- Presented poster Break Free Alliance Conference on *Supporting Healthy Practices in Child Care: Nutrition, Physical Activity & Tobacco Exposure*, April 2012.
- Presentation at National Conference on Tobacco or Health, *Engaging Low-Income Smokers in Tobacco Cessation via Credit Counseling Programs*, 2012.

OTHER EDUCATION

- National Institutes of Health, Office of Extramural Research, Protecting Human Research Participants. *September 2009*
- New Hampshire Department of Safety, Division of Fire Standards and Training:
 - IS-700: NIMS an Introduction*, January 2009
 - IS-100: Introduction to ICS*, January 2009
 - Public Information Office*, April 2009
- Homeland Security Exercise & Evaluation Program (HSEEP) Training Course, December 2008
- Attended National Conference on Tobacco or Health, Minneapolis, MN, 2007
- Attended World Tobacco Conference, Washington, D.C., 2006
- Completed *Motivational Interviewing* workshop at Health Education and Training Institute, Portland, ME, 2005
- Attended National Tobacco Conference, Boston, MA, 2004
- Completed *Basic Skills for Working with Smokers*, University of Massachusetts Medical School, 2002

LORI WALTER, CMP

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lwalter@jsi.com

EDUCATION

ASHWORTH UNIVERSITY, NORCROSS, GEORGIA
A.S., Business Management

CONVENTION INDUSTRY COUNCIL, WASHINGTON, D.C.
Certified Meeting Professional (CMP) designation 2005

PROFESSIONAL CAREER DEVELOPMENT INSTITUTE, ASHWORTH UNIVERSITY, NORCROSS, GEORGIA
Certified in Bridal Consulting, 2003
Certified in Travel & Tourism, 1998

NEW HAMPSHIRE TECHNICAL INSTITUTE, CONCORD, NEW HAMPSHIRE
Coursework in hospitality sales & management, hotel management, and convention planning, 1999-2001

EXPERIENCE

JSI, Boston, Massachusetts

Project Assistant, July 2007 to present

Public Health Emergency Preparedness Training and Technical Assistance *July 2007 to present*

Provides administrative support and conference and training logistics management for the Public Health Emergency Preparedness Technical Assistance and Training projects funded by the NH DHHS and NH Homeland Security and Emergency Managements (HSEM) to provide training and technical assistance to public health emergency planning partners in New Hampshire's Public Health Regions. As part of the Technical Assistance and Training project, provides training logistics for contracted training, workshops and events as well as conference management for the one-day NH Emergency Preparedness Conference held annually for over 800 attendees, speakers and vendors. In addition, manages logistics for the NH Integrated Emergency Volunteer Training Conference held annually for 200 emergency volunteers. Also provided conference logistics for the 2010 Functional Needs Conference for 150 participants.

Marketing the Immunization Message in NH *July 2010 to present*

Provides project support and conference logistics for the NH DHHS Immunization Program's annual NH Immunization Conference. The conference team provides promotion, registration, fiscal management, exhibitor solicitation, planning committee management, speaker coordination, CEU/CME management, set-up and day-of onsite management. The goal of the conference is to educate healthcare providers on immunization specific topics.

NH Center for Excellence *January 2009 to present*

Provides logistical and administrative support for a statewide technical assistance resource center for evidence-based practice in substance abuse services. The Center establishes a base of evidence-based practices in prevention, developing a learning collaborative of networks and practitioners to engage in systems change to support evidence-based practice, and establishes data dissemination systems to ensure that data is both an input to and output of evidence-based practice. An expert panel endorses evidence-based practice selections, outcome measurement designs, and the process by which promising practices may develop a base of evidence of effectiveness in New Hampshire.

Healthy Home and Lead Poisoning Prevention Program *July 2014 - present*

Primary responsibilities include working with the New England Lead Coordinating Committee to coordinate the biennial New England Lead Conference, as well working with the HHLPPP to coordinate regional dinners and other events to promote the program initiatives.

Continuing Nursing Education Coordinator *January 2012 to present*

Provides ongoing support and administration of JSI's continuing nursing education (CNE) accreditation through the Northeast Multi-State Division of Continuing Education. Works with JSI staff to develop programs that adhere to the strict NEMSD and American Nursing Association guidelines for CNE approval. In addition, works with JSI staff on



researching and developing programs that adhere to other accreditation guidelines such as continuing medical education, social worker education, licensed drug and alcohol counselors, prevention specialists, etc.

NH Governor's Summit on Substance Misuse *November 2015 - July 2016*

Provided conference management for the one-day NH Governor's Summit on Substance Misuse held in May 2016 for 800+ attendees, speakers and vendors. Services included promotion, registration, fiscal management, exhibitor solicitation, planning committee management, speaker coordination, CEU management, set-up and day-of onsite management.

Weight of the Nation Community Screenings & Events *December 2012 to January 2014*

Provided project management and logistical coordination. The project, funded by HNH Foundation, was to provide logistical support and coordination to community partners for 12 community screenings of the Weight of the Nation film four *Challenges*. The objective of the screening project was to raise awareness of the social costs and implication of obesity and to begin to build local and regional action to create access to healthy food and enhance recreational opportunities.

Uniform Data System for the Bureau of Primary Care *September 2008 to 2014*

Serves as a training logistics coordinator for a major initiative to collect 'Uniform Data System' (UDS) information from all BPHC funded sites across the country. Responsibilities include coordinating training logistics with the training coordinator, host primary care associations (PCAs) and trainers, compilation and distribution of training materials to the host PCAs, and compiling and summarizing training evaluations.

Uniform Data System for the Indian Health Services Urban Indian Health Program *September 2008 to 2014*

Serves as a training coordinator for a major initiative to collect 'Uniform Data System' (UDS) information. The UDS is a standardized reporting system that provides consistent information about the administrative, financial and clinical performance of 34 UIHP funded grantees nationwide. Responsibilities includes coordinating several annual one or two day trainings around the United States, informing grantees of training in their area, registering grantees, trainer travel arrangements, facility site selection and logistical management, compilation and distribution of training materials, and compiling and summarizing training evaluations.

New England Meat Conference *September 2012 to July 2013*

Provided project management and event logistics and management for the first ever New England Meat Conference and New England Meat Ball in March 2013 which over the course of two-days, attracted over 350 participants. The goal of the conference was to enhance the production, processing, and marketing of sustainable, nutritious, humanely-raised, and delicious meat from New England farms by providing education and networking opportunities for meat producers, processors, government officials, and consumers.

Prescription Drug Strategy Summit *August - November 2011*

Provided project management and event logistics management for the October 2011 Prescription Drug Abuse Strategy Summit which brought together 165 stakeholders to address NH's prescription drug abuse epidemic. The goal of the summit was to gather stakeholder input for the Prescription Drug Abuse Plan which goes before the Governor in December 2011.

Child & Family Services Adolescent Substance Abuse Treatment Program *October 2007 to August 2011*

Provided administrative support and data management services for Child and Family Services (CFS) for the CSAT funded Assertive Adolescent and Family Treatment (AAFT-2 and AAFT-3) projects. Data management activities include: Acts as the liaison between Chestnut Health Systems, CSAT and CFS data systems, provides ongoing technical assistance and support in setting up and maintaining the ABS/GAIN data collection systems, compile and report on client satisfaction survey upon discharge from ASAT program, ongoing data monitoring and technical assistance, conduct process and outcome evaluation activities, evaluation tool development, data collection training and support for CFS staff as needed to maintain quality data, SPSS and Access database development, creating client tracking systems, web based GPRA data entry, data cleaning and analysis, and report writing.

Social Distancing Law Project *March - July 2010*

Provided logistics for the NH DHHS and NH AG's office Social Distancing legal assessment meeting which followed a tabletop format and was conducted with state and local public health leaders and other key stakeholders to determine the sufficiency and identify potential gaps in current state law regarding implementation of social distancing measures.



NH Teen Foster Conference *July 2007 to September 2009*

Provided administration support coordination and conference management for the third, fourth and fifth annual NH Teen Foster Conferences. The CHI team worked closely with the DCYF staff and Youth Advisory Board, to develop workshops and materials that are most interesting and helpful to the youth and meet their mission and goals. CHI provided conference management services including developing and managing a confidential registration system and day-of, onsite logistical support.

Healthy Eating Active Living (HEAL) *August - November 2007*

Provided administrative support and conference management for the state wide HEAL conference in 2007. The HEAL objectives were to develop a statewide plan for promoting health eating and active living. The ultimate goal of the project is to promote personal wellness through active living and healthy eating. CHI facilitated a process lead by a statewide Steering Committee composed of representatives from schools, business, communities, and government. Five work groups were established to identify priority policy, educational and programmatic interventions to promote individual wellness including: schools, health care industry, worksites, food and recreational industry, community, and built and natural environment. The project includes a state wide conference to present the plan to stakeholders and technical assistance to community-based collaborative to develop active plans for implementing the statewide plan.

Youth Vision *December 2007 to March 2008*

Provided administrative support and focus group coordination for assessment project for NH Employment Services and the NH Departments of Education and Health and Human Services to gather quantitative and qualitative data on the well being of youth exiting the foster care and residential care system in Manchester.

NH HIV Logistics and Capacity Building *July 2007 to June 2008*

Provide administrative support for the NH HIV Logistics and Capacity Building Project funded by the NHDHHS and the Division of Public Health Services STD/HIV Prevention Section. This project provides logistical and capacity building support for the NH HIV community planning process and for funded HIV Prevention Services agencies.

NH Center for Nonprofits, Concord, New Hampshire

Member Services Coordinator, November 2006 to February 2007

Processing event registrations and payments; processing membership applications and payments; ongoing correspondence with members both current and prospective; event planning including coordination of speakers, materials, site details, and onsite registrations management; administrative assistance for executive director and assistant director.

NH Local Government Center, Concord, New Hampshire

Event Planner, September 1999 to December 2005

Event and trade show management; requests for proposals; site inspections; contract negotiation; marketing; exhibitor, sponsor and advertiser solicitation and relations; speaker coordination and support; registration; preparation of handouts; food and beverage management; on-site logistics; staff and volunteer management; event evaluation. Supervised event associate and functional supervision of support staff; in-house catering coordination and ordering; in-house audiovisual assistance; member services; coordinated Local Government Center awards and scholarship programs. Received 2003 Employee of the Year Award.

Holiday Inn, Concord, New Hampshire

Front Office Manager/Guest Service Agent, June 1996 to September 1999

Guest relations; rate setting; coordinating work with sales department on group arrivals, billing and special requests; housekeeping inspections; site inspections with prospective groups and clients; revenue forecasting; night audit; manager on duty; direct Supervision of a staff of 8 including hiring, training, scheduling, and personnel issues.



MELISSA SCHOEMMELL

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EDUCATION

UNIVERSITY OF NEW HAMPSHIRE
Master's in Public Health, 2013

UNIVERSITY OF NEW HAMPSHIRE
Bachelors of Science, Health Management and Policy, 2008

EXPERIENCE

JSI d/b/a Community Health Institute, Bow, New Hampshire
Program Coordinator, October 2015 to present

New Hampshire Center for Excellence

Support staff for the NH Center for Excellence, a state-wide technical assistance and resource center for the implementation of evidence-based interventions in alcohol and other drug prevention, intervention, treatment and recover services. Primary role responsibilities include supporting the operational functions of the center, preparing literature reviews, presentation and other materials, and providing other technical assistance needs.

New Hampshire Immunization Program

Assist the team in marketing strategy, materials development and reporting.
Support the team through maintenance of social media. Develop original and share appropriate content to targeted audiences.

Public Health Advisory Council Learning Collaborative

Served in a role as project coordinator for this Robert Wood Johnson Foundation, County Health Rankings & Roadmaps to Health funded project. Provided logistical support for the learning collaborative meetings, assisted in content development and provided technical assistance as needed. The overall goal of this project was to assist the Regional Public Health Networks in development of logic models based on their work plans, corresponding evaluation plans and rapid cycle improvement.

City of Nashua, Division of Public Health and Community Services, Nashua, New Hampshire
Health Program Specialist, 2013–2015

Promotion of health programs, community forums, presentations and initiatives within the health department and among community partners, coordination of relevant and timely health information to target audiences, development of all marketing and health promotion materials, maintenance of web and social media presence, and in the event of a public health emergency, served as the Public Information Officer in the local emergency operations center.

Program Assistant, 2013–2015

Planning, coordination and facilitation of Homeland Security Exercise and Evaluation Program (HSEEP) compliant Public Health Emergency Preparedness workshops, drills trainings and exercises, facilitation and participation in emergency responses, and assisted with the development and maintenance of standard operating procedures.

City of Manchester Health Department, Manchester, New Hampshire
Consultant, 2013

Conducted a neighborhood health assessment using Healthy Eating Active Living (HEAL) methodology in Manchester, NH. Assessments included a walkability audit, GIS analysis and a survey of resident perceptions. Provided recommendations to assist in the development of a "Community Schools Model" at a local elementary school.

New Hampshire Asthma Control Program, New Hampshire Department of Health and Human Services, Concord, New Hampshire
Intern, 2013

Conducted a cross-sectional survey of smoke-free publicly assisted housing in New Hampshire and presented findings at the New Hampshire Public Health Association Annual Meeting.



Boston Children's Hospital. Boston, Massachusetts

Program Coordinator, 2008-2013

Coordination of the Intermediate Care Program and Medicine ICU Resident Rotations, developed and maintained the website, planning of events (conferences, holiday events, meetings, retreats, travel arrangements), oversaw compliance of required federal and state licensure for physicians, and assisted in grant writing and application process for both NIH and privately funded grants.

SKILLS | CERTIFICATIONS

Computer: Microsoft (Word, Excel, PowerPoint, Access, Publisher), Adobe Professional Suite, SPSS

Volunteer Activities: Board of Director, New Hampshire Public Health Association, *2013 to present* and Chair of the New Hampshire Public Health Association Communications Committee, *2013 to present*

Certifications: FEMA Certifications (ICS-100, 200, 300, 400, 700, 800), Homeland Security Exercise and Evaluation Program (HSEEP) and Medical terminology

AWARDS

New Hampshire Public Health Association Young Professional Award, *2015*

First place for the UNH Master's in Public Health capstone project, "Community Schools: A Unifying Thread. Assessment and Recommendations for the Implementation of the Community School Model at Bakersville Elementary School". *2013*

Third place at the New Hampshire Public Health Association annual meeting for poster presentation, "Cross-Sectional Survey of Smoke-Free Publicly Assisted Housing in NH - Findings and Recommendations, *2013*

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.

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 Statewide Training Coordination *July 2015 to present* Develop, coordinate, and implement a statewide training plan for the state's 11 MIECHV-funded home visiting agencies currently implementing the Healthy Families America program. 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.

Trauma Informed Care for Early Childhood Services (TIECS) Training Coordination *July 2014 to present* 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. Work 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.

Cheshire County Adult Drug Court Program *September 2013 to present* Manage the development of an evaluation protocol, data management systems, and periodic evaluation reports for the SAMHSA/CSAT-funded Cheshire County Drug Court (CCDC). Provide 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 the priority population.

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.

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

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.

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.

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 HNH foundation-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.

Rivier University, Nashua, New Hampshire

Adjunct Faculty, September 2016-present

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

PROFESSIONAL ASSOCIATIONS

NH Public Health Association, President

- Board of Directors – 2012 – Present
- Communications Committee, chair – 2012 – Present

NH Home Visiting Coordinating Council

- Member, 2015

American Public Health Association

- Member, 2013 - Present

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.



AMANDA L. BAKER

JSI, 501 South Street, Bow, New Hampshire 03304 (603) 573 3371

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EDUCATION

STATE UNIVERSITY AT ALBANY SCHOOL OF PUBLIC HEALTH, ALBANY, NEW YORK
Masters of Public Health in Epidemiology, 2015

HARTWICK COLLEGE, ONEONTA, NEW YORK
Bachelor of Arts in Biology, cum laude, 2013
Beta Beta Beta Honor Society of Biology

HOMELAND SECURITY EXERCISE AND EVALUATION PROGRAM, CONCORD, NH
Homeland Security Exercise and Evaluation Program Training Course, 2015

EXPERIENCE

JSI, Bow, New Hampshire
Consultant, August 2015 to present

U.S. Department of Health and Human Services, Maternal and Child Health Bureau, Health Resources and Services Administration, Supporting Healthy Start Performance Project.

Healthy Start (HS) EPIC Center provides technical assistance and training to 100 Healthy Start grantees to achieve program goals and benchmarks. The HS Epic Center helps strengthen staff skills, implement evidence-based practices in maternal and child health, facilitates grantee to grantee sharing of lessons learned, and work to build relationships with community partners.

U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Primary Health Care (BPHC) Uniform Data System.

Contracted by BPHC to implement the Uniform Data System (UDS) that collects information annually from over 1,300 federally qualified health centers (FQHCs) nationwide. The data collected describes the financial and operational parameters of FQHCs and informs BPHC decision-making along with enlightening health centers of their yearly relative performance.

New Hampshire Integrated Delivery Networks

Contracted by the State of New Hampshire to develop the Building Capacity for Transformation 1115 Medicaid Waiver to strengthen community-based mental health services, combat the opioid crisis, and drive health care delivery system reform. Main responsibilities include meeting facilitation and plan development to progress Community Health Services Network integration plan including monitoring plan, expected outcomes, and perceived challenges and barriers with integration between primary care, behavioral health (including mental health and substance use), and social services support.

Delaware Maternal and Child Health Epidemiology

Contracted by Delaware State Health Department to provide training, technical assistance, and epidemiologic insight around their Title V Needs Assessment. TA focuses on domain development, strategic organization, evidence based strategies applicable to the state, and development of a Facilitator's Guide to assist the process in moving forward appropriately over the next few years. Also contracted to provide GIS mapping development and descriptive language around maternal and child health gaps around the state.

Hillsborough County Drug Court

Provide support in program evaluation of the HCDC program, which is focused on expanding substance use disorder treatment capacity in their Superior County through the development of the program. The goal of the program is to reduce recidivism by breaking the criminogenic patterns of behavior related to substance abuse and addiction among high risk and high need non-violent offenders.



New Hampshire Public Health Emergency Planning Technical Assistance

Provide training and technical assistance to Public Health Networks in New Hampshire around emergency preparedness, planning, response, and Public Health Advisory Council development. Develop and deliver trainings and tools on various public health and emergency response topics. Implement activities to strengthen statewide Medical Reserve Corps volunteer system through convening regular meetings and providing one on one technical assistance. Trained in Incident Command System and certified HSEEP evaluator for tabletop and functional exercises.

Massachusetts Jurisdictional Risk Assessment Project

Massachusetts Department of Public Health, Office of Preparedness and Emergency Management. Serve as technical advisors in a project to design and implement a participatory, multi-sectoral risk assessment project for Massachusetts' six Health and Medical Coordinating Coalitions. Project entailed developing an online survey for coalition members to prioritize risks from a set of nine hazards, and assess regional preparedness using a JSI-developed instrument derived from the CDC's 2011 Public Health Emergency Preparedness Capabilities and the 2016 Health Care Capabilities. Facilitated in person meetings to review survey results and select and plan appropriate mitigation strategies to reduce risk. Provided HMCCs with JSI-developed toolkit for mitigation strategy development.

PRIOR EXPERIENCE

NYS Department of Health, Public Health Information Group, Albany, New York
Student Research Assistant, January 2015 to May 2015

NYS Department of Health, Bureau of Immunization, Albany, New York
Student Research Assistant, May 2014 to August 2014

COMPUTER SKILLS

Proficient in:

Microsoft Office: Word, Excel, PowerPoint, and Access

Online tools: Google Drive, SurveyMonkey

Statistical Analysis: SAS 9.3, SPSS

Social media tools: Facebook, Twitter, LinkedIn

KEY ADMINISTRATIVE PERSONNEL

Contractor Name: NH Department of Health and Human Services
JSI Research & Training Institute, Inc., d/b/a Community Health Institute

Name of Contract: Public Health Professional Support Services

Budget Period: SFY 18

Name	Job Title	Salary	Percent paid from this	Amount paid from this contract
Public Health Emergency Preparedness				
Jonathan Stewart	PHPSS Project Director	\$140,088	1.00%	\$1,400.88
Alyson Cobb	PHEP Task Lead	\$64,375	22.50%	\$14,484.38
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$15,885.26

Hospital Preparedness				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.01	\$1,400.88
Alyson Cobb	PREP Task Lead	\$64,375	6.73%	\$4,332.93
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$5,733.81

Immunization				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.00%	\$0.00
Martha Bradley	NHIP Task Lead	\$94,411	13.08%	\$12,347.43
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$12,347.43

HIV Pharmaceutical Rebates				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.77%	\$1,077.60
Lori Walter	HIV Task Lead	\$55,182	30.00%	\$16,555.00
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$17,632.60

Food Protection				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.38%	\$538.80
Melissa Schoemmell	FPS Task Lead	\$57,165	5.00%	\$2,858.23
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$3,397.03

Environmental Public Health Tracking				
Jonathan Stewart	PHPSS Project Director + Task	\$140,088	1.73%	\$2,424.60
		\$0	0.00%	\$0.00
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$2,424.60

CDC Lead				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.50%	\$700.44
Alyson Cobb	Lead Task Lead	\$64,375	7.45%	\$4,797.18
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$5,497.62

KEY ADMINISTRATIVE PERSONNEL

Contractor Name: NH Department of Health and Human Services
JSI Research & Training Institute, Inc., d/b/a Community Health Institute

Name of Contract: Public Health Professional Support Services

Budget Period: SFY 18

Name	Job Title	Salary	Percent paid from this	Amount paid from this contract
EPA Lead				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.50%	\$700.44
Alyson Cobb	Lead Task Lead	\$64,375	15.14%	\$9,749.10
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$10,449.54

Home Visiting				
Jonathan Stewart	PHPSS Project Director	\$140,088	10.00%	\$14,008.84
Katie Robert	MCH/HV Task Lead	\$67,980	52.57%	\$35,736.99
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$49,745.83

Maternal & Child Health				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.00%	\$0.00
Katie Robert	MCH/HV Task Lead	\$67,980	0.00%	\$0.00
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$0.00

Radiological Emergency Response				
Jonathan Stewart	PHPSS Project Director	\$140,088	0.00%	\$0.00
Amanda Baker	Rad Task Lead	\$56,658	0.87%	\$494.51
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$494.51

KEY ADMINISTRATIVE PERSONNEL

Contractor Name: NH Department of Health and Human Services
JSI Research & Training Institute, Inc., d/b/a Community Health Institute

Name of Contract: Public Health Professional Support Services

Budget Period: SFY 19

Name	Job Title	Salary	Percent paid from this	Amount paid from this contract
Public Health Emergency Preparedness				
Jonathan Stewart	PHPSS Project Director	\$144,291	1.00%	\$1,442.91
Alyson Cobb	PHEP Task Lead	\$66,306	21.88%	\$14,504.49
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$15,947.40

Hospital Preparedness				
Jonathan Stewart	PHPSS Project Director	\$144,290	1.00%	\$1,442.90
Alyson Cobb	PREP Task Lead	\$66,306	6.65%	\$4,411.94
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$5,854.84

Immunization				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.00%	\$0.00
Martha Bradley	NHIP Task Lead	\$97,260	12.69%	\$12,343.65
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$12,343.65

HIV Pharmaceutical Rebates				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.77%	\$1,109.93
Lori Walter	HIV Task Lead	\$56,826	33.44%	\$19,000.00
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$20,109.93

Food Protection				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.38%	\$554.96
Melissa Schoemmell	FPS Task Lead	\$58,880	9.83%	\$5,788.27
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$6,343.23

Environmental Public Health Tracking				
Jonathan Stewart	PHPSS Project Director + Task	\$144,290	2.88%	\$4,162.24
		\$0	0.00%	\$0.00
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$4,162.24

CDC Lead				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.50%	\$721.45
Alyson Cobb	Lead Task Lead	\$66,306	7.21%	\$4,781.70
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$5,503.15

KEY ADMINISTRATIVE PERSONNEL

Contractor Name: NH Department of Health and Human Services
JSI Research & Training Institute, Inc., d/b/a Community Health Institute

Name of Contract: Public Health Professional Support Services

Budget Period: SFY 19

Name	Job Title	Salary	Percent paid from this	Amount paid from this contract
EPA Lead				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.50%	\$721.45
Alyson Cobb	Lead Task Lead	\$66,306	13.94%	\$9,244.62
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$9,966.07

Home Visiting				
Jonathan Stewart	PHPSS Project Director	\$144,290	10.00%	\$14,429.09
Katie Robert	MCH/HV Task Lead	\$70,019	48.66%	\$34,072.99
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$48,502.08

Maternal & Child Health				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.00%	\$0.00
Katie Robert	MCH/HV Task Lead	\$70,019	0.00%	\$0.00
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$0.00

Radiological Emergency Response				
Jonathan Stewart	PHPSS Project Director	\$144,290	0.00%	\$0.00
Amanda Baker	Rad Task Lead	\$58,358	0.85%	\$494.51
		\$0	0.00%	\$0.00
TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)				\$494.51