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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF THE COMMISSIONER
BUREAU OF HUMAN RESOURCE MANAGEMENT

Jeffrey A. Meyers
Commissioner

Marilyn G. Doe
Director

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11/29/2017

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

REQUESTED ACTION

For consideration on the Consent Calendar, authorize the Department of Health and Human Services, to enter into an educational tuition agreement and to pay said costs in an amount of \$788.00 as follows:

Institution:	Manchester Community College 1066 Front Street Manchester NH 03103
Course Title(s):	Computers in Healthcare
Course Date(s):	Begin: 01/16/2018 End: 05/04/2018
Employee:	Bonnie Cornish
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Course(s):	\$788.00
State Share:	\$788.00
Source of Funds:	Employee Training, 100% General

EXPLANATION

The Department of Health and Human Services encourages and supports employees who wish to further their professional growth through continuing education in disciplines that are mutually advantageous.

The employee has been employed with the State of New Hampshire for 15 years and has been employed at the Department of Health and Human Services, New Hampshire Hospital, Health Information Department, in the position of Medical Records Technician. Her duties include maintaining all patient medical records and providing both hard copy and electronic record copies to other health care providers on their request.

The course, Computers in Healthcare, will prepare the employee to create and manage the increasingly expanding use of electronic medical record management. The knowledge and expertise gained from this course will greatly enhance the employees skill in the ever expanding Health Information field. As the Health Information profession continues to expand it is imperative that there is an increased understanding of the fundamentals of database management tools and techniques commonly used for data collection. Successful completion of the program will increase the employee's effectiveness and add to the overall strength of the Department to perform its mission to the residents of New Hampshire Hospital.

This course will not be taken on State time.

Attached is a fully executed Tuition Agreement for your review.

Respectfully submitted,



Approved by: Jeffrey A. Meyers
Commissioner



THE STATE OF NEW HAMPSHIRE
EDUCATIONAL TUITION AGREEMENT

Agreement dated this 28th day of November 2017 by and through the Department of Health and Human Services (hereinafter referred to as the "State) and Bonnie Cornish (hereinafter referred to as the "Recipient"). The State and the Recipient do hereby mutually agree as follows:

- 1. The State shall pay to the named institution the sum of \$788.00, which monies shall be used for the purpose of enrolling the Recipient in: Computers in Health Care (course name), which course(s) is being offered by Manchester Community College and which course(s) shall commence on 01/16 2018 and terminate on 05/04 2018.
2. The Recipient shall complete and achieve a passing grade in each course named in paragraph 1.
3. Should the Recipient fail to complete or achieve a passing grade in each course named in paragraph 1, the Recipient shall pay to the State the sum set forth in paragraph 1, provided, however, that if more than one course is named in paragraph 1, the amount which shall be paid to the State shall be calculated on a pro rata basis.
4. Upon the satisfactory completion of the courses named in paragraph 1, the Recipient shall continue in the employ of the State in his/her current position (or in such other position, at equal or greater compensation, to which he/she may be assigned) for a period of six (6) months.
5. The Recipient shall work in any area of the State to which he/she may be assigned, provided that such assignment will not constitute a severe hardship to said Recipient.
6. Should the Recipient breach any of the conditions set forth in paragraphs 4 and 5, the Recipient shall pay to the State a sum equal to all monies previously paid by the State for the Recipient pursuant to the Agreement, provided, however, that the Recipient shall receive a credit for each month in which he/she is employed by the State subsequent to the date upon which the named course(s) are satisfactorily completed, the value of said credit to be calculated on a pro rata basis.
7. The Recipient shall not raise any setoff or counterclaim against the State in any action brought by the State to collect any amount due under this agreement.
8. Should any amount be found to be due the State in any action brought against the Recipient pursuant to this Agreement, the State shall, in addition to said amount, be entitled to an award of costs and a reasonable amount in "attorney" fees.

IN WITNESS WHEREOF the representatives of the State, in his/her official capacity only, and without personal liability, and the Recipient, have hereunto set their hands on the date first above written.

RECIPIENT
(signature) Bonnie Cornish
(printed name) Bonnie Cornish

THE STATE OF NEW HAMPSHIRE
(signature) Lori Weaver
(printed name, title) Lori Weaver, Associate Commissioner

State of New Hampshire, County of Merrimack

On this the 29th day of Nov, 2017, before me, Susan Brown the undersigned officer, personally appeared, Bonnie Cornish (recipient) known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes herein contained.

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

Susan J. Brown
Notary Public/Justice of the Peace

A True Copy Attest.
SUSAN J. BROWN
NOTARY PUBLIC
STATE OF NEW HAMPSHIRE
My commission expires Nov. 20, 2018