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

Jeffrey A. Meyers
Commissioner

Lisa M. Morris
Director

29 HAZEN DRIVE, CONCORD, NH 03301
603-271-4524 1-800-852-3345 Ext. 4524
Fax: 603-271-8705 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

January 10, 2019

The Honorable Mary Jane Wallner, Chairman
Fiscal Committee of the General Court, and

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

Approved by Fiscal Committee — Date: 2/8/19

REQUESTED ACTION

1. Pursuant to RSA 14:30-a, VI Additional Revenues, authorize the Department of Health and Human Services, Division of Public Health Services, to accept and expend federal funds in the amount of $354,470 from the Centers for Disease Control and Prevention (CDC) to fund the Combined Chronic Disease Program effective upon date of approval by the Fiscal Committee and Governor and Council, through June 30, 2019, and further authorize the funds to be allocated as follows. Grant funds awarded for periods after SFY 2019 will be included in the operating budgets for SFY 2020 and SFY 2021. 100% Federal Funds.

05-95-90-902010-1227 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POPULATION HEALTH AND COMMUNITY SERVICES, COMBINED CHRONIC DISEASE

SFY 2019

Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
Revenue				
000-400146	Federal Funds	$1,325,998	$354,470	$1,680,468
Total Revenue		$1,325,998	$354,470	$1,680,468

Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
Expenses				
010-500100	Personal Services Perm Class	$242,047	$0	$242,047
020-500200	Current Expenses	$49,526	$26,759	$76,285
026-500251	Organizational Dues	$1,000	$0	$1,000
030-500301	Equipment New Replacement	$1,900	$0	$1,900
037-500174	Technology - Hardware	$0	$4,000	$4,000
038-500175	Technology - Software	$0	$2,000	$2,000
039-500188	Telecommunications	$140	$0	$140
041-500801	Audit Funds Set Aside	$1,243	$354	$1,597
042-500620	Additional Fringe Benefits	$15,608	$8,805	$24,413
046-500464	Consultants	$100	$0	$100
059-500117	Temp Full Time	$0	$75,454	$75,454
060-500601	Benefits	$151,857	$47,648	$199,505
066-500543	Employee Training	$2,200	$5,000	$7,200
070-500709	In State Travel Reimbursement	$3,500	$1,500	$5,000
080-500719	Out-of-State Travel Reimbursement	$10,000	$18,000	$28,000
102-500731	Contracts for Program Services	$846,877	$164,950	$1,011,827
Total Expenses		$1,325,998	$354,470	$1,680,468

2. Pursuant to the provisions of RSA 124:15, Positions Restricted, and subject to the approval of item 1 above, authorize the Department of Health and Human Services, Division of Public Health Services, to establish full-time temporary (Class 059) positions at the following levels: two Senior Management Analysts (LG 26), one Program Specialist IV (LG 25), one Administrator I (LG 27), one Programs Information Officer (LG23), and one Business Systems Analyst I (LG28) utilizing funds from the Centers for Disease Control and Prevention to fund the Chronic Disease Programs, effective upon date of approval by the Fiscal Committee and Governor and Council, through June 30, 2019.

EXPLANATION

Improving the Health of Americans through Prevention of Diabetes and Heart Disease and Stroke is a federal grant awarded by Centers for Disease Control and Prevention (CDC). Funds were not added to the SFY19 operating budget because the award was not announced at the time the budget was developed, and it provides greater funding than anticipated. An increase in funds carries an increase in workload and greater responsibility to evaluate progress and demonstrate outcomes, thus the request for additional staff. Where the federal funders allow, positions are shared across multiple grants, in order to increase efficiency and coordination within the Section.

The Chronic Disease Prevention and Screening Section in the Division of Public Health Services focuses on prevention and management of diabetes, heart disease, obesity, cancer, and oral disease. New to the section is a focus on pain management strategies such as alternatives to pain medication and appropriate prescribing/reduction of over-prescribing of opioids, vital work given the opioid crisis in the State. The Section also provides ongoing programmatic expertise and epidemiological support related to cancer cluster investigations in the State.

Goals in the Section include improved management of chronic diseases through increased participation in self-management programs and integrating pharmacists and community health workers into healthcare teams. Healthcare providers will be trained on the benefits and ways to refer patients to available programs and community resources. The Section partners with Agency and Department Programs to reach the populations in most need of these services with the goal of reducing the burden on the public health and healthcare systems. One example is the Section's partnership with the Medicaid Program to reduce the cost of diabetes to the State. Another goal of the section is to increase its capacity to analyze and report on chronic disease data as well as evaluate the effectiveness of its interventions, and continuously make improvements to better support the needs of NH citizens.

Funds will be budgeted as follows:

- Funds are budgeted for Current Expenses (Class 020) for purchase of: office supplies, copying, and printing; promotional costs to exhibit at conferences and professional meetings; and distribution of surveys and reports.
- Funds are budgeted for Technology Hardware (Class 037) for the purchase of 2 laptops for new staff.
- Funds are budgeted for Technology Software (Class 038) for the purchase of software needed to use new computers, such as Adobe Pro and Microsoft Office Suite.
- Funds are budgeted for Audit Cost Set Aside (Class 041) per state requirements.
- Funds are budgeted for Additional Fringe Benefits (Class 042) per state requirements.
- Funds are budgeted for Temp Full Time (Class 059) for new, temporary positions listed below.
- Funds are budgeted for Benefits (Class 060) for six new employees listed below.
- Funds are budgeted for Employee Training (Class 066) for training on chronic disease prevention and management related topics.
- Funds are budgeted for In-State Travel (Class 070) to cover travel expenses staff incurs while performing their duties, new staff will increase required travel.
- Funds are budgeted for Out-of-State Travel (Class 080) to cover travel expenses for meetings mandated by the funder, and for professional development.
- Funds are budgeted in Contracts for Program Services (Class 102) to fund contracts for data analysis, community health worker capacity building, continuing professional (clinicians and public health professionals) education to increase referrals to diabetes and heart disease programs, quality improvement in health systems, and a clinical consultant to provide expertise to state staff.

The following information is provided in accordance with the Comptroller's instructional memorandum dated September 21, 1981:

1) List of personnel involved:

a. Full-Time Senior Management Analyst, LG 26 (9T2956)
b. Full-Time Program Specialist IV, LG 25 (9T2955)
c. Full-Time Senior Management Analyst, LG 26 (9T2958)
d. Full-Time Administrator I, LG 27 (9T2960)
e. Full-Time Programs Information Officer, LG 23 (9T2959)
f. Full-Time Business Systems Analyst I, LG 28 (9T2961)

2) Nature, need and duration:

a. The Senior Management Analyst (9T2956) is responsible for evaluating the impact, including cost effectiveness, of diabetes and heart disease interventions in New Hampshire. They serve as a liaison with the evaluation team from the Centers for Disease Control and Prevention (CDC). CDC recommends at least 10% of the award be dedicated to evaluation. Filling this position will help the program fulfill this recommendation. Funds for this position have been added to the state FY 2020-21 budget and is needed for at least the five years of grant funding (through June 2023) and beyond, should CDC provide a continuation of the awards.

b. The Program Specialist IV (9T2955) is responsible for planning and implementing heart disease and diabetes interventions. On the technical review of the grant application, CDC indicated there could be insufficient staffing to carry out the required activities, thus, the request to establish this position. Funds for this position have been added to the state FY 2020-21 budget and is needed for at least the five years of grant funding (through June 2023) and beyond, should CDC provide a continuation of the awards.

c. The Senior Management Analyst (9T2958) is an Evaluator for Oral Health and Cancer programs, responsible for evaluating the impact, including cost effectiveness, of oral health and cancer interventions in New Hampshire. CDC recommends at least 10% of the awards be dedicated to evaluation. Filling this position will help the program fulfill this recommendation. Funds for this position have been added to the state FY 2020-21 budget and is needed for at least the five years of grant funding (through June 2023) and beyond, should CDC provide a continuation of the awards.

d. The Administrator I (9T2960) is a Cancer Director for the Section. This position will oversee the three different components of the state's cancer grant which include the Comprehensive Cancer Control Program, Breast and Cervical Cancer Program and the Cancer Registry Program. They will be a resource on projects related to exposure environmental health hazards and planning community response to potential concerns about cancer clusters. This position is essential to lessen the burden on the Chronic Disease Section Administrator to allow them to support all of the Chronic Disease Program areas, ensure federal grant requirements are met, and lead strategic initiatives on behalf of the Division. Funds for this position have been added to the state FY 2020-21 budget and is needed for at least the five years of grant funding (through June 2023) and beyond, should CDC provide a continuation of the awards.

e. The Programs Information Officer (9T2959) is a Health Communications expert for the Chronic Disease Screening Section. This position will lead chronic disease communication efforts, reaching internal and external stakeholders as well as the general public; development of materials, planning of professional education events; press releases,

social media, evaluation of communication interventions. The position is needed for at least the five years of grant funding (through June 2023) and beyond, should CDC provide a continuation of the awards.

f. The Business Systems Analyst is a Senior Epidemiologist (9T2961) for the Chronic Disease Screening Section. This will be an experienced Epidemiologist that will oversee collection, analysis, interpretation and dissemination of chronic disease data and available to analyze complex data sets. They serve as a liaison with CDC and Health Resources and Services Administration (HRSA) experts and collaborate with health information technology and data analysts and a mentor for junior level Epidemiologists in the Division. The position is needed for at least the five years of grant funding (through June 2023) and beyond, should CDC provide a continuation of the awards.

3) Relationship to existing agency programs: These positions will be a part of the Chronic Disease Prevention and Screening Section and will work collaboratively across the Section and with other Division and Department programs to expand the reach and impact of interventions to improve the health of adults with and at risk for Chronic Disease.

4) Has similar program been requested of the Legislature and denied?
No

5) Why wasn't funding included in the agency's budget request?
Notice of these funds was received on August 21, 2018. They were not added to the operating budget because the State received an increase in funds compared to last fiscal year and that detail was not available at the time the budget was developed.

6) Can portions of the grant funds be utilized for other purposes?
No. Federal funds allocated to the state cannot be used for other purposes.

7) Estimate the funds required to continue this position:

Position (Salary & Benefits)	SFY2020	SFY2021
Senior Management Analyst, LG 26	$93,146	$93,146
Program Specialist IV, LG 25	$89,905	$89,905
Senior Management Analyst, LG 26	$93,146	$93,146
Administrator I, LG 27	$96,457	$96,457
Programs Information Officer, LG 23	$84,029	$84,029
Business Systems Analyst I, LG 28	$112,266	$112,266

In response to the anticipated two-part question, "Can these funds be used to offset General Funds?" and "What is the compelling reason for not offsetting General Funds?" the Division offers the following information: These funds may not be used to offset General Funds as they are specifically granted to the State for the purpose of providing the services described above.

These funds will not change the program eligibility levels. No new program will be established with the acceptance of these funds. Funds will be used to expand on existing chronic disease programming.

Area served: statewide

Source of funds: These funds are 100% Federal from the Centers for Disease Control and Prevention (CDC). Attached is the Notice of Grant Award, award history, and approval letters from the Division of Personnel. Notice of these funds was received on August 21, 2018. They were not added to the operating budget because the State received an increase in funds compared to last fiscal year and that detail was not available at the time the budget was developed.

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

Respectfully submitted,

Jeffrey A. Meyers
Commissioner

State Of New Hampshire
DIVISION OF PERSONNEL
Department of Administrative Services
State House Annex – 28 School Street
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603) 271-3201

LORRIE A. RUDIS
Director of Personnel
(603) 271-3261

December 6, 2018

Marilyn G. Doe, Administrator
Bureau of Human Resources
Department of Health & Human Services
129 Pleasant St.
Concord, NH 03301

Regarding: Request to establish a full-time temporary Administrator I, labor grade 27

Dear Ms. Doe:

The Division of Personnel approves of your request dated November 28, 2018 to establish a full-time temporary Administrator I, labor grade 27 in the Division of Public Health Services, Bureau of Population Health and Community Services, and have assigned the position number of 9T2960 pending approval of funding.

This position number will be inactive until you receive funding approval from the Fiscal Committee per RSA 124:15, and the Position Profile Form (PPF) is subsequently approved by the Department of Administrative Services Budget Office for funding.

It will be your responsibility to bring the request for funding before the Fiscal Committee. You may use this letter as confirmation of our decision. Once you have obtained Fiscal Committee approval, please notify the Classification Section with documentation. Thank you.

Very truly yours,

Marianne Rechy

Marianne R. Rechy
Classification & Compensation Administrator

Cc: Lorrie A. Rudis, Director of Personnel

State Of New Hampshire
DIVISION OF PERSONNEL
Department of Administrative Services
State House Annex – 28 School Street
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603) 271-3201

LORRIE A. RUDIS
Director of Personnel
(603) 271-3261

December 19, 2018

Marilyn G. Doe, Administrator
Bureau of Human Resources
Department of Health & Human Services
129 Pleasant St.
Concord, NH 03301

Regarding: Request to establish a full-time temporary Programs Information Officer, LG 23

Dear Ms. Doe:

The Division of Personnel approves of your request dated November 28, 2018 to establish a full-time temporary Programs Information Officer, LG 23 in the Division of Public Health Services, Bureau of Population Health and Community Services, and have assigned the position number of 9T2959 pending approval of funding.

This position number will be inactive until you receive funding approval from the Fiscal Committee per RSA 124:15, and the Position Profile Form (PPF) is subsequently approved by the Department of Administrative Services Budget Office for funding.

It will be your responsibility to bring the request for funding before the Fiscal Committee. You may use this letter as confirmation of our decision. Once you have obtained Fiscal Committee approval, please notify the Classification Section with documentation. Thank you.

Very truly yours,

Marianne Rechy

Marianne R. Rechy
Classification & Compensation Administrator

Cc: Lorrie A. Rudis, Director of Personnel

State Of New Hampshire
DIVISION OF PERSONNEL
Department of Administrative Services
State House Annex – 28 School Street
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603) 271-3201

LORRIE A. RUDIS
Director of Personnel
(603) 271-3261

December 7, 2018

Marilyn G. Doe, Administrator
Bureau of Human Resources
Department of Health & Human Services
129 Pleasant St.
Concord, NH 03301

Regarding: Request to establish a full-time temporary Senior Management Analyst, labor grade 26

Dear Ms. Doe:

The Division of Personnel approves of your request dated November 27, 2018 to establish a full-time temporary Senior Management Analyst, labor grade 26 in the Division of Public Health Services, Bureau of Population Health and Community Services, and have assigned the position number of 9T2958 pending approval of funding.

This position number will be inactive until you receive funding approval from the Fiscal Committee per RSA 124:15, and the Position Profile Form (PPF) is subsequently approved by the Department of Administrative Services Budget Office for funding.

It will be your responsibility to bring the request for funding before the Fiscal Committee. You may use this letter as confirmation of our decision. Once you have obtained Fiscal Committee approval, please notify the Classification Section with documentation. Thank you.

Very truly yours,

Marianne Rechy

Marianne R. Rechy
Classification & Compensation Administrator

Cc: Lorrie A. Rudis, Director of Personnel

State Of New Hampshire
DIVISION OF PERSONNEL
Department of Administrative Services
State House Annex – 28 School Street
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603) 271-3201

LORRIE A. RUDIS
Director of Personnel
(603) 271-3261

December 3, 2018

Marilyn G. Doe, Administrator
Bureau of Human Resources
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

Regarding: Request to establish a full-time temporary Program Specialist IV, labor grade 25

Dear Ms. Doe:

The Division of Personnel approves of your request dated November 5, 2018 to establish a full-time temporary Program Specialist, labor grade 25 in the Division of Public Health Service, Bureau of Population Health and Community Service, Chronic Disease Prevention & Screening Section, and have assigned the position number of 9T2955 pending approval of funding.

This position number will be inactive until you receive funding approval from the Fiscal Committee per RSA 124:15, and the Position Profile Form (PPF) is subsequently approved by the Department of Administrative Services Budget Office for funding.

It will be your responsibility to bring the request for funding before the Fiscal Committee. You may use this letter as confirmation of our decision. Once you have obtained Fiscal Committee approval, please notify the Classification Section with documentation. Thank you.

Very truly yours,

Marianne Rechy

Marianne R. Rechy
Classification & Compensation Administrator

Cc: Lorrie A. Rudis, Director of Personnel

State Of New Hampshire
DIVISION OF PERSONNEL
Department of Administrative Services
State House Annex – 28 School Street
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603) 271-3201

LORRIE A. RUDIS
Director of Personnel
(603) 271-3261

January 4, 2019

Marilyn G. Doe, Administrator
Bureau of Human Resources
NH Department of Health & Human Services
129 Pleasant St.
Concord, NH 03301

Regarding: Request to establish a full-time temporary Business Systems Analyst I, labor grade 28

Dear Ms. Doe:

The Division of Personnel approves of your request dated November 28, 2018 to establish a full-time temporary Business Systems Analyst I, labor grade 28 in the Division of Public Health Services Bureau of Population and Community Services, and have assigned the position number of 9T2961 pending approval of funding.

This position number will be inactive until you receive funding approval from the Fiscal Committee per RSA 124:15, and the Position Profile Form (PPF) is subsequently approved by the Department of Administrative Services Budget Office for funding.

It will be your responsibility to bring the request for funding before the Fiscal Committee. You may use this letter as confirmation of our decision. Once you have obtained Fiscal Committee approval, please notify the Classification Section with documentation. Thank you.

Very truly yours,

Marianne Rechy

Marianne R. Rechy
Classification & Compensation Administrator

Cc: Lorrie A. Rudis, Director of Personnel

State Of New Hampshire
DIVISION OF PERSONNEL
Department of Administrative Services
State House Annex – 28 School Street
Concord, New Hampshire 03301

CHARLES M. ARLINGHAUS
Commissioner
(603) 271-3201

LORRIE A. RUDIS
Director of Personnel
(603) 271-3261

December 3, 2018

Marilyn G. Doe, Administrator
Bureau of Human Resources
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

Regarding: Request to establish a full-time temporary Senior Management Analyst, labor grade 26

Dear Ms. Doe:

The Division of Personnel approves of your request dated November 7, 2018 to establish a full-time temporary Senior Management Analyst, labor grade 26 in the Division of Public Health Service, Bureau of Population Health and Community Service, Chronic Disease Prevention & Screening Section, and have assigned the position number of 9T2956 pending approval of funding.

This position number will be inactive until you receive funding approval from the Fiscal Committee per RSA 124:15, and the Position Profile Form (PPF) is subsequently approved by the Department of Administrative Services Budget Office for funding.

It will be your responsibility to bring the request for funding before the Fiscal Committee. You may use this letter as confirmation of our decision. Once you have obtained Fiscal Committee approval, please notify the Classification Section with documentation. Thank you.

Very truly yours,

Marianne R. Rechy
Classification & Compensation Administrator

Cc: Lorrie A. Rudis, Director of Personnel

AWARD HISTORY
COMBINED CHRONIC DISEASE

A	Combined Chronic Disease NU58DP004821	
B	Award Ending 9/29/18	218,180
A	Combined Chronic Disease NU58DP006515	
B	Award Ending 6/29/2019	1,392,190
C		
D	Unobligated Balance Unable to Spend	-
E	Award Balance 7/1/18	$ 1,610,370
F	SFY 19 Appropriation **	(1,185,109)
G	Balance Forward - Less Amt Charged to Prior Year	(70,791)
H	Available to Accept in SFY 19	354,470
I	Amount Requested this Action	354,470

** SFY 19 Appropriation

	010-090-12270000	Current	OYR	Total	This Action	Revised Budget
J	COMBINED CHRONIC DISEASE	1,142,595	321,120	1,463,715	-	1,463,715
				-		-
	Allocated Cost for Combined Chronic Disease	42,514		42,514		42,514

1. DATE ISSUED MM/DD/YYYY: 08/21/2018 | 2. CFDA NO.: 93.426 | 3. ASSISTANCE TYPE: Cooperative Agreement

1a. SUPERSEDES AWARD NOTICE dated
except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO.: 1 NU58DP006515-01-00
Formerly

5. ACTION TYPE: New

6. PROJECT PERIOD: From 09/30/2018 Through 06/29/2023

7. BUDGET PERIOD: From 09/30/2018 Through 06/29/2019

8. TITLE OF PROJECT (OR PROGRAM)
Prevention and Management of Diabetes and Heart Disease in NH

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources
2920 Brandywine Road
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. Section 241(a) and 247b(k)(2)], as amended.

9a. GRANTEE NAME AND ADDRESS
HEALTH AND HUMAN SERVICES, NEW HAMPSHIRE DEPT OF
Alternate Name: New Hampshire Department of Health and Human Services
129 PLEASANT ST
CONCORD, NH 03301-3852

9b. GRANTEE PROJECT DIRECTOR
Mrs. WHITNEY HAMMOND
29 HAZEN DR
CONCORD, NH 03301-6504
Phone: 603-271-4959

10a. GRANTEE AUTHORIZING OFFICIAL
Mrs. Monica DeRico
29 Hazen Drive
Public Health Services
Concord, NH 03301-6510
Phone: 603-271-4535

10b. FEDERAL PROJECT OFFICER
Ms. Debra Sanchez-Torres
1600 Clifton Rd
Atlanta, GA 30333
Phone: 770.488.1097

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)
I Financial Assistance from the Federal Awarding Agency Only
II Total project costs including grant funds and all other financial participation [I]

a. Salaries and Wages	212,191.00	
b. Fringe Benefits	136,683.00	
c. Total Personnel Costs		348,874.00
d. Equipment		0.00
e. Supplies		30,695.00
f. Travel		23,806.00
g. Construction		0.00
h. Other		109,011.00
i. Contractual		801,000.00
j. TOTAL DIRECT COSTS		1,313,386.00
k. INDIRECT COSTS		78,804.00
l. TOTAL APPROVED BUDGET		1,392,190.00
m. Federal Share		1,392,190.00
n. Non-Federal Share		1,392,190.00

12. AWARD COMPUTATION

a. Amount of Federal Financial Assistance (from item 11m)	1,392,190.0
b. Less Unobligated Balance From Prior Budget Periods	0.0
c. Less Cumulative Prior Award(s) This Budget Period	0.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	1,392,190.00
13. Total Federal Funds Awarded to Date for Project Period	1,392,190.00

14. RECOMMENDED FUTURE SUPPORT
(Subject to the availability of funds and satisfactory progress of the project):

YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 2	1,392,190.00	d. 5	1,392,190.00
b. 3	1,392,190.00	e. 6	
c. 4	1,392,190.00	f. 7	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:
a. DEDUCTION
b. ADDITIONAL COSTS
c. MATCHING
d. OTHER RESEARCH (Add / Deduct Option)
e. OTHER (See REMARKS)

[b]

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:
a. The grant program legislation
b. The grant program regulations.
c. This award notice including terms and conditions, if any, noted below under REMARKS.
d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached - [X] Yes [ ] No)

GRANTS MANAGEMENT OFFICIAL: Stephanie Latham

17. OBJ CLASS 41.51	18a. VENDOR CODE 1026000618C3	18b. EIN 026000618	19. DUNS 011040545	20. CONG. DIST. 02
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 8-939ZQZH	b. 18NU58DP006515	c. DP	d. $696,095.00	e. 75-18-0948
22. a. 8-939ZRJF	b. 18NU58DP006515	c. DP	d. $696,095.00	e. 75-18-0948
23. a.	b.	c.	d.	

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 2	DATE ISSUED 08/21/2018
GRANT NO. 1 NU58DP006515-01-00	

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	$0.00	$0.00	$0.00
Fringe Benefits	$0.00	$0.00	$0.00
Travel	$0.00	$0.00	$0.00
Equipment	$0.00	$0.00	$0.00
Supplies	$0.00	$0.00	$0.00
Contractual	$0.00	$0.00	$0.00
Construction	$0.00	$0.00	$0.00
Other	$0.00	$0.00	$0.00
Total	$0.00	$0.00	$0.00

AWARD ATTACHMENTS

New Hampshire Department of Health and Human Services 1 NU58DP006515-01-00

1. Terms and Conditions
2. Technical Review

AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at https://www.cdc.gov/grants/federalregulationspolicies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-DP18-1815, entitled Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke, and application dated June 11, 2018, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of $ 1,392,190 is approved for the Year 1 budget period, which is **September 30, 2018** through **June 29, 2019**. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

Diabetes Category A	Heart Disease Category B
$ 696,095	$ 696,095

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

CDC Program Supports to Recipients:

The CDC programs supporting this NOFO will be substantially involved beyond site visits and regular performance and financial monitoring during the project period. Substantial involvement means that the recipient can expect federal programmatic partnership in carrying out efforts under the award. CDC will work in partnership with the recipient to ensure the success of the cooperative agreement by:

- Supporting recipients in implementing cooperative agreements requirements and meeting program outcomes;
- Provide technical assistance to revise annual work plans;
- Assisting recipients in advancing program activities to achieve project outcomes.
- Providing scientific subject matter expertise (e.g., engaging non-physician team members, implementing and sustaining the National Diabetes Prevention Program) and resources in support of the selected strategies;
- Collaborating with recipients to develop and implement evaluation plans that align with CDC evaluation activities;
- Providing technical assistance on recipient's evaluation and performance measurement plans;
- Providing technical assistance to define and operationalize performance measures;

- Using webinars and other social media for recipients and CDC to communicate and share tools and resources;
- Establishing learning communities to facilitate the sharing of information among recipients
- Providing professional development and training opportunities, either in person or through virtual, web-based training formats, for the purpose of sharing the latest science, best practices, success stories, and program models;
- Participating in relevant meetings, committees, conference calls, and working groups related to the cooperative agreement requirements to achieve outcomes;
- Coordinating communication and program linkages with other CDC programs and Federal agencies, such as the Health Resources and Services Administration (HRSA), Centers for Medicare & Medicaid Services (CMS), Indian Health Services (HIS), and the National Institute of health (NIH);
- Providing surveillance technical assistance and state -specific data collected by CDC;
- Providing technical expertise to other CDC programs and Federal agencies on how to interface with recipients;
- Translating and disseminating lessons learned through publications, meetings, and other means on promising and best practices to expand the evidence base; and
- Hosting a meeting/training during the first year of the project period and later in the project period (for a total of 2 meetings/training for recipients).

CDC will:

1. Ensure that grantees have access to expertise found throughout NCCDPHP. For example, a team of subject matter experts could include, but is not limited to, the project officer, health scientist, epidemiologists, statisticians, policy analysts, communication specialist, health economists, and evaluators to provide technical assistance to grantees. Technical assistance teams will also work in collaboration with other programs and division across NCCDPHP to identify specific actions that improve efficiency and greater public health impact.

2. Collaborate with grantees to explore appropriate flexibilities needed to meet public health outcomes and goals. Flexibility in cooperative agreements includes grantee's ability to propose alternative methods to achieve the outcomes and goals of the cooperative agreement that align with grantee's opportunities for success, infrastructure, partner and stakeholder buy-in, demographics, and burden. This includes bringing together resources from multiple cooperative agreements to jointly advance the goals of each, and expanding the dialogue to bring in other CDC and grantee staff to reach a win/win solution.

3. Create greater efficiencies and consistency across NCCDPHP programs for grantees: Examples of how NCCDPHP divisions and programs work together to achieve this include but are not limited to:
    - Joint site visits that maximize the ability to do collaborative problem solving, offer insights and ideas to strengthen or augment grantee approaches, and increase understanding of grantee's context to accomplish chronic disease prevention and health promotion.
    - Jointly developed resources and tools that focus on cross-cutting functions, settings, domains, risk factors, conditions and disease to ensure consistent messages and to meet grantee technical assistance needs.
    - Joint training and technical assistance opportunities that help grantees produce policies and programs that are more holistic and fully supportive of work in tobacco, nutrition, physical activity, chronic disease management and other strategies and topics, as appropriate.

4. Continue and expand support for grantees to leverage NCCDPHP resources to address cross-cutting functions, domains, settings, risk factors and diseases.

Defining terms:

Cross-cutting functions: Are functions that are necessary to all programs and include communication, epidemiology, evaluation, health equity, leadership, partnerships, planning, policy, and training among other; as well as functions specific to the cooperative agreement.

Domains:

1. Epidemiology and surveillance – to monitor trends and track progress.
2. Environmental approaches – to promote health and support healthy behaviors.
3. Health care system intervention – to improve the effective delivery and use of clinical and other high-value preventive services.
4. Community programs linked to clinical services – to improve and sustain management of chronic conditions.

Settings: Early care and education, schools, worksites, community, health care systems, etc.

Risk factors, conditions and diseases; Nutrition, physical activity, tobacco, sleep, excessive alcohol use, maternal and infant health, Alzheimer's arthritis, diabetes, cancer, chronic obstructive pulmonary disease, heart disease and stroke, and oral health.

Technical Review Statement Response Requirement: The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the CDC Staff Contacts section of this NoA, no later than 30 days from the budget period start date. **The response must be submitted in GrantSolutions as an amendment, type "Summary Statement/Technical Review Response to Weaknesses"**. Failure to submit the required information by the due date, **October 30, 2018**, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: By **October 30, 2018**, the recipient must submit a revised budget with a narrative justification, to include the following:

- Provide the name and/or title of the person who will be supervising all contractors and consultants in the Method of Accountability section.
- Provide itemized detail for general office supplies.
- Review items listed under Supplies. Unless internal policies dictate otherwise, all advertising, duplication, postage, printing, binding, and telecommunications costs should be categorized as Other costs.

The Budget Revision must be submitted in GrantSolutions as an amendment, type "Budget Revision". Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

All TBD contract and consultant costs, once determined, must be submitted to the GMS as a Budget Revision amendment in GrantSolutions. Recipient must have prior approval before the contract/consultant costs can be expended.

FUNDING RESTRICTIONS AND LIMITATIONS

Notice of Funding Opportunity (NOFO) Restrictions: CDC-RFA-DP18-1815

- Recipients may not use funds for research
- Recipients may not use funds for clinical care except as allowed by law.

- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies and services
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
    - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
    - The salary or expenses of any grant or contract recipient or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action or Executive order proposed or pending before any legislative body.
    - See Additional Requirement (AR) 12 for detailed guidance on this prohibition and Additional guidance on lobbying for CDC recipients
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.
- In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or sub recipient, are strictly prohibited regardless of the source of funds, from performing abortions as a method of family planning or Engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability https://www.cdc.gov/grants/additionalrequirements/ar-35.html

Programmatic Restriction(s): Required Recipient Meeting: Recipients are required to attend the DP18-1815 meeting schedule for March 2019 in Atlanta, Georgia Key staff or contractors working on funded categories (Category A: Diabetes and/ or Category B: Cardiovascular Disease) should plan to participate. If any recipient is not in compliance with this requirement of attending the three (3) day two (2) night meeting, the approved travel budget associated with the training activities will not be allowed to be redirected into their other line item activities, and the un-obligated balance resulting from not attending the training activities, will not be allowed to use in future budget periods.

Indirect Costs: Indirect costs are approved based on the recipient's approved Cost Allocation Plan dated August 13, 2015.

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services

Karen Clackum, Grants Management Specialist
Centers for Disease Control and Prevention
Office of Grant Services (OGS)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Email: KClackum@cdc.gov

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201
Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities have been obligated in a newly established subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application. All award funds must be tracked and reported separately

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

CDC Staff Contacts

Grants Management Specialist: The GMS is the federal staff member responsible for the day-to-day

management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

GMS Contact:
Karen Clackum, Grants Management Specialist
Centers for Disease Control and Prevention
OGS Chronic Disease and Birth Defects Services Branch
2960 Brandywine Rd.
Atlanta, GA 30341
Telephone: 770-488-2680
Email: KClackum@cdc.gov

Program/Project Officer: The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

Programmatic Contact:
Debra Sanchez-Torres, Project Officer
Centers for Disease Control and Prevention
NCCDPHP
4770 Buford Hwy.
Chamblee, GA 30341
Telephone: 770-488-1097
Email: DSanchezTorres@cdc.gov

Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

GMO Contact:
Stephanie Latham, Grants Management Officer
Centers for Disease Control and Prevention
OGS Chronic Disease and Birth Defects Services Branch
2960 Brandywine Rd.
Atlanta, GA 30341
Telephone: 770-488-2917
Email: fzv6@cdc.gov

1815 TECHNICAL REVIEW

CDC-RFA-DP18-1815: IMPROVING THE HEALTH OF AMERICANS THROUGH PREVENTION AND MANAGEMENT OF DIABETES AND HEART DISEASE AND STROKE

Applicant: New Hampshire

Application Number: NU58DP201800562

Project Period Dates: September 30, 2018 – June 29, 2023

Date Reviewed: July 6, 2018

Requested funding: $1,392,390

Recommended Funding: Approved at requested amount

OVERALL COMMENTS

The applicant is required to work with its CDC project officers and evaluators post award to further refine the work plan, budget, and Evaluation and Performance Measurement Plan as needed.

SUMMARY

The New Hampshire Department of Health and Human Services (NH DHHS) is applying to implement and evaluate evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes. Target populations for this project include those disproportionately affected by diabetes and CVD due to socioeconomic factors, inadequate access to care and/or poor quality of care/poor outcomes compared to the general population in the state such as adults with mental illness, adults served by federally qualified health centers (FQHC) or rural health clinics (RHC), State of New Hampshire Employees, adults with disabilities (mobility, intellectual, developmental), and priority populations served in health systems outside of FQHCs and RHCs. NH DHHS is well-positioned to reach these target populations through strong, long-standing, relationships with healthcare and community partners (e.g., NH's Health Center Controlled Network, State of NH Risk Management Unit, Granite State Diabetes Educators) and integrating diabetes and cardiovascular strategies into statewide initiatives such as the CMS approved Section 1115(a) Medicaid waiver Delivery System Reform Incentive Program (DSRIP) and the University of New Hampshire's Institute on Disability "Disability and Health Project."

MAJOR STRENGTHS

Category A:

- The proposed project will expand upon previous outcomes including improved hypertension and diabetes control in FQHCs and RHCs, increasing access and enrollment in the National Diabetes Prevention Programs(National DPP) life style change programs through formation of a Diabetes Prevention Advisory Group, increasing Diabetes Self-Management Education Services (DSMES) participation among people with newly diagnosed diabetes, and utilizing the ASTHO Community Health Worker (CHW) Learning Community to build statewide infrastructure for CHWs.
- The activities proposed are specific and well written. The applicants builds on previous work.
- The applicant includes activities specific to working with non-traditional partners such as Oral Health and Arthritis programs.

Category B:

- The applicant has selected six target populations on which to focus its DP18-1815 efforts: 1) adults with mental illness, 2) people served by FQHCs, 3) people served by RHCs, 4) state employees, 5) adults with disabilities, and 6) priority populations within health systems.
- Several strategies from Category A and B were selected to be implemented in a mutually reinforcing approach in the same communities/settings.
- The applicant received the Association of State and Territorial Health Officials (ASTHO) CHW Learning Community award with three other states.
- The applicant provided a preliminary evaluation plan and expects to submit a detailed Evaluation and Performance Measure report 6-months after the start of the project period.

MAJOR WEAKNESSES

Category A:

- Strategy A4: In Activity #2, the applicant describes work with health care systems, but there is no mention of how these healthcare systems will be identified.

Category B:

- Strategy B1 – Activity #1: The intent of this strategy is to promote patients being diagnosed and treated in order to control hypertension using health information technology (HIT). It is unclear if the emphasis will be on enhancing EHRs and HIT or establishing the closed loop referral system which may fit better under Strategy B7.
- Strategy B4 – Activities #4-6: Activities were vague and did not specifically address hypertension and cholesterol management. Activity #4 only mentioned building MTM services for diabetes management which is not the focus for Category B activities.
- Strategy B6- Activity #2- Activity was broadly written/nonspecific. It is unclear what the pilot project will do to implement SMBP tied to clinical support.
- Strategy B7- Activities #2-4: Activities are broadly written and not specific to hypertension or cholesterol management. Activity #3 only references diabetes and prediabetes which is not the focus for Category B activities.

RECOMMENDATIONS

Category A:

- Strategy A4: The applicant should describe any process to identify the health systems with which it will work to support workflow design and referrals to National DPP, CDC recognized lifestyle change programs since it will also affect the activity for working with these same health systems in Strategy A6.

Category B:

- Strategy B1 – Activity #1: The applicant should revise and align this activity with the most relevant strategy that will demonstrate progress on the performance measure for either strategy B1 or B7.
- Strategy B4 – Activities #4-6: The applicant should revise activities to specify how they will address hypertension and cholesterol management.
- Strategy B6- Activity #2: The applicant should revise this to clarify the activity description.

- Strategy B7- Activities #2-4: The applicant should revise activities to specify how they will address hypertension and/or cholesterol management. Note, Category B funds may not be used to fund DSME and CDSMP programs.

OTHER RELEVANT COMMENTS

Category A:

- One individual is listed as lead personnel assigned (along with in some cases a program planner III who remains to-be-hired). The applicant should ensure there is adequate support for the staff person to carry out the activities assigned.
- The applicant did not propose complete information for the data source, baseline and/or target for the short-term performance measures that align with the selected strategies (A3, A4, A5, A6). The applicant should work with CDC to identify appropriate data sources, baselines and/or target values and resubmit within 6 months of award.
- The applicant did not address all required components of the Evaluation and Performance Measurement Plan. The applicant should address all required components in the Detailed Evaluation and Performance Measurement Plan due within 6 months of award and work with its assigned CDC evaluator for any technical assistance.

Category B:

- For Category B, the applicant chose the following strategies to implement: B1, B4, B5, B6, and B7.
- While the applicant did not provide baseline and target values for the short-term performance measures that align with Strategy B4, it did describe a plan for determining the values.
- The applicant did not specify how it will obtain baseline and target values for the short-term performance measure for strategy B7. The applicant should work with CDC to identify appropriate data sources, baselines and/or target values and resubmit within 6 months of award.

BUDGET COMMENTS:

Equal Division of Funds between Categories A & B? ☒ *YES* ☐ *NO*

- The applicant submitted a budget in the amount of $1,392,190 that appears appropriate to address the selected strategies and scope of work outlined in its workplan for DP18-1815.
- The applicant will need prior approval for the TBD consultant (amount of $69,120).
- Several pages of the budget were missing so it wasn't possible to review contracts and personnel for appropriateness. An Excel version of the budget narrative will needed to complete the review.

RESEARCH DETERMINATION

DP18-1815 is only for non-research activities supported by CDC. (For the definition of research, please see the CDC Web site at the following Internet address: http://www.cdc.gov/od/ads/opspoll1.htm)

☒ No research activities have been proposed.

☐ Research activities have been proposed, but were disapproved/disallowed.