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

Lori A. Shibnette  
 Commissioner

Patricia M. Tilley  
 Director

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June 11, 2021

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Sole Source** amendments to existing contracts with the vendors listed below in bold, and to enter into a **Sole Source** contract with The Cheshire Medical Center for the provision of Regional Public Health Network (RPHN) services statewide, by increasing the total price limitation by \$5,091,682 from \$12,774,809 to \$17,866,491 and by extending the completion dates from June 30, 2021 to June 30, 2022 effective upon Governor and Council approval. 66% Federal Funds. 15% General Funds. 19% Other Funds

The individual contracts were approved by Governor and Council as specified in the table below.

Vendor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	Approval History
City of Manchester	177433	Greater Manchester	\$1,487,385	\$534,068	\$2,021,453	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: GA 1/29/2021, II-5/19/21(#TBD)
City of Nashua	177441	Greater Nashua	\$1,056,156	\$0	\$1,056,156	O: September 18, 2019, item #25 A1: February 5, 2020, item #(7) A2: May 6, 2020, item #47 A3: GA - 10/5/20 A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/17/2020, II-4/7/21(#M) A6: 1/29/2021, II-5/19/21(#TBD)
County of Cheshire	177372	Greater Monadnock	\$799,792	\$0	\$799,792	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7) A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: 12/17/2020, II-4/7/21(#M) A5: 1/29/2021, II-5/19/21(#TBD)
The Cheshire Medical Center		Greater Monadnock	\$0	\$407,260	\$407,260	

Granite United Way	160015	Concord, Carroll County, and South Central	\$2,837,071	\$1,040,552	\$3,877,623	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 1/29/2021, II-5/19/21(#TBD)
Greater Seacoast Community Health	154703	Strafford County	\$943,300	\$515,395	\$1,458,695	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 1/29/2021, II-5/19/21(#TBD)
Lakes Region Partnership for Public Health	165635	Winnepesaukee	\$917,716	\$443,758	\$1,361,474	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 1/29/2021, II-5/19/21(#TBD)
Lamprey Health Care	177677	Seacoast	\$981,467	\$515,006	\$1,496,473	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 1/29/2021, II-5/19/21(#TBD)
Mary Hitchcock Memorial Hospital	177160	Greater Sullivan and Upper Valley	\$1,916,907	\$785,424	\$2,702,331	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 01/22/21, item #28 A7: 1/29/2021, II-5/19/21(#TBD)
Mid-State Health Center	158055	Central NH	\$900,378	\$445,151	\$1,345,529	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 1/29/2021, II-5/19/21(#TBD)
North Country Health Consortium	158557	North Country	\$934,637	\$405,068	\$1,339,705	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-4/7/21(#M) A7: 1/29/2021, II-5/19/21(#TBD)
		<b>Total</b>	<b>\$12,774,809</b>	<b>\$5,091,682</b>	<b>\$17,866,491</b>	

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

**See attached fiscal details.**

### **EXPLANATION**

The request is **Sole Source** because the Department is seeking 1) to extend the existing contracts beyond the completion dates and there are no renewal options available and 2) to enter into a contract with The Cheshire Medical Center and there are no known viable alternatives to the services provided by the vendor. The Department intends to competitively re-procure these services by June 30, 2022. Due to the unanticipated events of the past year, the Department determined it is in the best interest of the State to continue to utilize the existing Contractors to maintain continuity of support and efficient delivery of services. The Contractors are uniquely qualified to deliver COVID-19 emergency management services and have been an integral part in ongoing COVID-19 vaccination efforts. Additionally, the County of Cheshire was working with The Cheshire Medical Center to administer this program and to streamline services. The County of Cheshire declined to extend their contract, so it was determined that The Cheshire Medical Center was uniquely qualified to continue providing these services in the public health region.

The purpose of this request is for the Regional Public Health Networks to continue providing regional public health emergency preparedness; COVID-19 response; substance misuse prevention and substance use disorders continuum of care services; strategies targeted for young adults (18-25 years of age) who are at high risk of developing a substance use disorder; school-based seasonal influenza clinics; and climate and health prevention services. Additionally, the contractors will continue to host a Public Health Advisory Council to coordinate other public health services, statewide. Each Public Health Network site serves a defined Public Health Region with every municipality in the state assigned to a region, thereby ensuring statewide Public Health Network services.

The population served includes residents statewide in each public health region.

The Contractors will continue to provide the following services:

- COVID-19 Support – the Contractors are assisting the State in the COVID-19 vaccination efforts, by hosting mobile and other vaccination clinics and coordinating with school districts to administer the COVID-19 vaccinations.
- Flu Vaccination Clinics – eight (8) of the thirteen (13) Networks are hosting school-based flu vaccination clinics.
- Public Health Advisory Council – the Contractors coordinate an Advisory Council that identifies priority health problems in their region and develops a Community Health Improvement Plan that focuses community-based partners to collectively address key health problems.
- Public Health Emergency Preparedness – the Contractors develop a public health emergency response plan that complements municipal response plans and provides training and exercises to partners.
- Substance Misuse Prevention - Continuation of population level substance misuse prevention with the purpose of increasing awareness of the need to prevent and reduce substance misuse and associated consequences for individuals and communities

- Continuum of Care - Aim is to facilitate and coordinate a robust system of prevention, treatment, and recovery services and supports by increasing awareness and access to services and supports.
- Young Adult Strategies - targeted prevention and early intervention programs and services for young adults between the ages of 18 to 25 who are at high risk to develop a substance abuse disorder.
- Climate and Health Adaptation – Two (2) Contractors collaborate with local partners to implement activities to mitigate the effects of climate on human health.

The current Regional Public Health Network contractors have successfully met performance measures and the Department is seeking to continue services implemented through these contracts. Additionally, the Regional Public Health Network contractors were integral in the State's COVID-19 response. The Department will continue monitoring contracted services by monitoring performance indicators listed in the contract scopes of services.

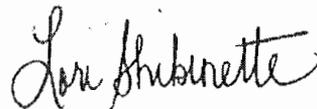
Should the Governor and Executive Council not authorize this request, the Regional Public Health Network contractors will be unable to assist the State in COVID-19 vaccination efforts. In addition, there will be a lack of a regionally-based infrastructure to coordinate and facilitate an improved systems-based approach to addressing the overall health issues statewide, which over time could increase costs, have a negative impact on health outcomes, and increase health disparities.

Area served: Statewide

Source of Funds: CFDA: #93.959, FAIN #TI08304; CFDA: #93.243, FAIN # SP020796; CFDA: #93.991, FAIN # B01OT009366; CFDA: #93.069, FAIN # NU90TP922018; CFDA: #93.268, FAIN # NH23IP922595; CFDA: #93.889, FAIN # U3REP190580; CFDA: #93.070, FAIN # NUEIEH001332;

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

Respectfully submitted,



Lori A. Shibinette  
Commissioner

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH  
BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$0	\$0
Sub-Total				\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
Sub-Total				\$30,000	\$0	\$30,000

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
Sub-Total				\$0	\$15,000	\$15,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
Sub-Total				\$30,000	\$15,000	\$45,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
Sub-Total				\$30,000	\$15,000	\$45,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
Sub-Total				\$30,000	\$15,000	\$45,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
Sub-Total				\$30,000	\$15,000	\$45,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
Sub-Total				\$30,000	\$15,000	\$45,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
		Sub-Total		\$30,000	\$15,000	\$45,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
		Sub-Total		\$30,000	\$15,000	\$45,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
		Sub-Total		\$30,000	\$15,000	\$45,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
		Sub-Total		\$30,000	\$15,000	\$45,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
		Sub-Total		\$30,000	\$15,000	\$45,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	90001022	\$0	\$15,000	\$15,000
		Sub-Total		\$30,000	\$15,000	\$45,000
		<b>SUB TOTAL</b>		<b>\$390,000</b>	<b>\$180,000</b>	<b>\$570,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

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

74% Federal Funds & 26% General Funds  
CFDA #93.069

FAIN #U90TP922018

City of Nashua				Vendor # 177441-B011		
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$197,673	\$0	\$197,673
2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$194,673	\$0	\$194,673
			Sub-Total	\$392,346	\$0	\$392,346

County of Cheshire				Vendor # 177372-B001		
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
			Sub Total 2020	\$92,910	\$0	\$92,910
2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
			Sub Total 2021	\$89,910	\$0	\$89,910
			Sub-Total	\$182,820	\$0	\$182,820

Greater Seacoast Community Health				Vendor # 154703-B001		
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$92,580	\$0	\$92,580
2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$92,580	\$0	\$92,580
			Sub-Total	\$185,160	\$0	\$185,160

Granite United Way - Capitol Region				Vendor # 160015-B001		
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
			Sub Total 2020	\$96,430	\$0	\$96,430
2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
			Sub Total 2021	\$93,430	\$0	\$93,430
			Sub-Total	\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
Carroll County Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
Carroll County Region			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
South Central Region			Sub Total 2020	\$97,360	\$0	\$97,360
2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
South Central Region			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
Lakes Region Partnership for Public Health			Sub Total 2020	\$89,750	\$0	\$89,750
2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
Lakes Region Partnership for Public Health			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Manchester Health Department			Sub Total 2020	\$288,223	\$0	\$288,223
2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Manchester Health Department			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2020	\$83,600	\$0	\$83,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
			Sub Total 2020	\$91,550	\$0	\$91,550
2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			<b>SUB TOTAL</b>	<b>\$2,942,102</b>	<b>\$0</b>	<b>\$2,942,102</b>

**05-95-90-903510-1114 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF EMERGENCY PREPAREDNESS & RESPONSE, PH  
EMERGENCY PREPAREDNESS**

69% Federal Funds & 31% General Funds  
CFDA #93.059

FAIN #U90TP922018

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$0	\$0
			Sub Total	\$0	\$0	\$0

The Cheshire Medical Center

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$49,867	\$49,867
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$40,043	\$40,043
			Sub Total	\$0	\$89,910	\$89,910

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$52,537	\$52,537
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$40,043	\$40,043
			Sub Total	\$0	\$92,580	\$92,580

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$53,387	\$53,387
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$40,043	\$40,043
			Sub Total	\$0	\$93,430	\$93,430

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$83,600	\$83,600
			Sub Total	\$0	\$83,600	\$83,600

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$54,317	\$54,317
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$40,043	\$40,043
			Sub Total	\$0	\$94,360	\$94,360

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$54,632	\$54,632
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$40,043	\$40,043
			Sub Total	\$0	\$94,675	\$94,675

Lakes Region Partnership for Public Health

Vendor # 165635-B001

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$86,750	\$86,750
			Sub Total	\$0	\$86,750	\$86,750

**Manchester Health Department** Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$245,180	\$245,180
2022	074-500589	Grants for Pub Asst and Relief	90077028	\$0	\$40,043	\$40,043
			Sub Total	\$0	\$285,223	\$285,223

**Mary Hitchcock Memorial Hospital - Sullivan County Region** Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$83,600	\$83,600
			Sub Total	\$0	\$83,600	\$83,600

**Mary Hitchcock Memorial Hospital - Upper Valley Region** Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$83,600	\$83,600
			Sub Total	\$0	\$83,600	\$83,600

**Mid-State Health Center** Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$83,600	\$83,600
			Sub Total	\$0	\$83,600	\$83,600

**North Country Health Consortium** Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077410	\$0	\$88,550	\$88,550
			Sub Total	\$0	\$88,550	\$88,550
			<b>SUB TOTAL</b>	<b>\$0</b>	<b>\$1,259,878</b>	<b>\$1,259,878</b>



**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
South Central Region			Sub Total 2020	\$133,512	\$0	\$133,512
2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
South Central Region			Sub Total 2021	\$133,512	\$0	\$133,512
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$78,375	\$78,375
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$40,137	\$40,137
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$80,000	\$80,000
			Sub Total 2022	\$0	\$213,512	\$213,512
			Sub-Total	\$267,024	\$213,512	\$480,536

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
Lamprey Health Care			Sub Total 2020	\$131,149	\$0	\$131,149
2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
Lamprey Health Care			Sub Total 2021	\$131,149	\$0	\$131,149
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$73,649	\$73,649
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$42,500	\$42,500
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$75,000	\$75,000
			Sub Total 2022	\$0	\$206,149	\$206,149
			Sub-Total	\$262,298	\$206,149	\$468,447

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
Lakes Region Partnership for Public Health			Sub Total 2020	\$129,008	\$0	\$129,008
2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
Lakes Region Partnership for Public Health			Sub Total 2021	\$129,008	\$0	\$129,008
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$69,367	\$69,367
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$44,641	\$44,641
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$80,000	\$80,000
			Sub Total 2022	\$0	\$209,008	\$209,008
			Sub-Total	\$258,016	\$209,008	\$467,024

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
Manchester Health Department			Sub Total 2020	\$135,845	\$0	\$135,845
2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
Manchester Health Department			Sub Total 2021	\$135,845	\$0	\$135,845
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$83,040	\$83,040
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$37,805	\$37,805
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$80,000	\$80,000
			Sub Total 2022	\$0	\$215,845	\$215,845
			Sub-Total	\$271,690	\$215,845	\$487,535

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
Hospital - Sullivan County Region			Sub Total 2020	\$136,362	\$0	\$136,362
2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
Hospital - Sullivan County Region			Sub Total 2021	\$136,362	\$0	\$136,362
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$84,275	\$84,275
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$37,087	\$37,087
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$75,000	\$75,000
			Sub Total 2022	\$0	\$211,362	\$211,362
			Sub-Total	\$272,724	\$211,362	\$484,086

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
Hospital - Upper Valley Region			Sub Total 2020	\$133,162	\$0	\$133,162
2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
Hospital - Upper Valley Region			Sub Total 2021	\$136,612	\$0	\$136,612
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$84,575	\$84,575
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$37,037	\$37,037
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$75,000	\$75,000
			Sub Total 2022	\$0	\$211,612	\$211,612
			Sub-Total	\$269,774	\$211,612	\$481,386

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2020	\$118,551	\$0	\$118,551
2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2021	\$133,551	\$0	\$133,551
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$78,453	\$78,453
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$40,098	\$40,098
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$80,000	\$80,000
			Sub Total 2022	\$0	\$213,551	\$213,551
			Sub-Total	\$252,102	\$213,551	\$465,653

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
sortium			Sub Total 2020	\$133,069	\$0	\$133,069
2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
sortium			Sub Total 2021	\$133,069	\$0	\$133,069
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$77,488	\$77,488
2022	074-500589	Grants for Pub Asst and Relief	92057502	\$0	\$15,000	\$15,000
2022	074-500589	Grants for Pub Asst and Relief	92057504	\$0	\$40,581	\$40,581
2022	074-500589	Grants for Pub Asst and Relief	TBD	\$0	\$80,000	\$80,000
			Sub Total 2022	\$0	\$213,069	\$213,069
			Sub-Total	\$266,138	\$213,069	\$479,207
			<b>SUB TOTAL</b>	<b>\$3,445,412</b>	<b>\$2,462,758</b>	<b>\$5,908,170</b>

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds

CFDA #93.243 FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
			Sub-Total	\$195,375	\$0	\$195,375

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
			Sub-Total	\$194,991	\$0	\$194,991

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$229,099	\$0	\$229,099

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$189,678	\$0	\$189,678

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
2021	102-500731	Contracts for Prog Svc	92052410	\$82,432	\$0	\$82,432
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$188,308	\$0	\$188,308

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$180,000	\$0	\$180,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$207,249	\$0	\$207,249

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
2021	102-500731	Contracts for Prog Svc	92052410	\$80,852	\$0	\$80,852
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$161,602	\$0	\$161,602

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
2021	102-500731	Contracts for Prog Svc	92052410	\$83,220	\$0	\$83,220
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$210,507	\$0	\$210,507

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$180,000	\$0	\$180,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2022	074-500589	Grants for Pub Asst and Relief	92052410	\$0	\$0	\$0
		Sub-Total		\$180,000	\$0	\$180,000
		<b>SUB TOTAL</b>		<b>\$2,116,809</b>	<b>\$0</b>	<b>\$2,116,809</b>

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

100% Federal Funds

CFDA #93.258

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$43,182	\$0	\$43,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$73,182	\$15,000	\$88,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$73,180	\$15,000	\$88,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$73,182	\$15,000	\$88,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,182	\$0	\$50,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$43,182	\$0	\$43,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$73,182	\$15,000	\$88,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$42,000	\$0	\$42,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$42,000	\$0	\$42,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$73,182	\$15,000	\$88,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$80,182	\$15,000	\$95,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$71,058	\$15,000	\$86,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
2022	074-500589	Grants for Pub Asst and Relief	90023013	\$0	\$15,000	\$15,000
		Sub-Total		\$73,182	\$15,000	\$88,182
		<b>SUB TOTAL</b>		<b>\$810,876</b>	<b>\$120,000</b>	<b>\$930,876</b>

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 Funds

CFDA #93.889

FAIN #U3REP190580

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000
		<b>SUB TOTAL</b>		<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

**05-95-90-903510-1113 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF EMERGENCY PREPAREDNESS & RESPONSE, HOSPITAL PREPAREDNESS**

100% Federal Funds

CFDA #93.889

FAIN #U3REP190580

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$0	\$0
		Sub-Total		\$0	\$0	\$0

The Cheshire Medical Center

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
		Sub-Total		\$0	\$10,000	\$10,000

Manchester Health Department

Vendor # 177433-B009

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
			Sub-Total	\$0	\$10,000	\$10,000

Mary Hitchcock Memorial Hospital - Sullivan County Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
			Sub-Total	\$0	\$10,000	\$10,000

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
			Sub-Total	\$0	\$10,000	\$10,000

Mid-State Health Center Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
			Sub-Total	\$0	\$10,000	\$10,000

North Country Health Consortium Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	90077700	\$0	\$10,000	\$10,000
			Sub-Total	\$0	\$10,000	\$10,000
			<b>SUB TOTAL</b>	<b>\$0</b>	<b>\$120,000</b>	<b>\$120,000</b>

**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 PREVENTION**

City of Nashua Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
			Sub-Total	\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$3,000	\$0	\$3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$13,145	\$0	\$13,145

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
2020	102-500731	Contracts for Prog Svc	90036000	\$42,108	\$0	\$42,108
2021	102-500731	Contracts for Prog Svc		\$4,124	\$0	\$4,124
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$53,146	\$0	\$53,146

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$10,891	\$0	\$10,891

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
2022	074-500589	Grants for Pub Asst and Relief	90036000	\$0	\$0	\$0
		Sub-Total		\$13,145	\$0	\$13,145
		<b>SUB TOTAL</b>		<b>\$171,350</b>	<b>\$0</b>	<b>\$171,350</b>

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$8,820	\$0	\$8,820

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$1,818	\$0	\$1,818
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Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818
		<b>SUB TOTAL</b>		<b>\$83,000</b>	<b>\$0</b>	<b>\$83,000</b>

**05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
		Sub-Total		\$80,000	\$0	\$80,000

The Cheshire Medical Center

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	102-500731	Contracts for Prog Svc	90007936	\$0	\$40,000	\$40,000
		Sub-Total		\$0	\$40,000	\$40,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$29,511	\$0	\$29,511
2022	102-500731	Contracts for Prog Svc	90007936	\$0	\$40,000	\$40,000
		Sub-Total		\$69,511	\$40,000	\$109,511
		<b>SUB TOTAL</b>		<b>\$149,511</b>	<b>\$80,000</b>	<b>\$229,511</b>

**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**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$7,930	\$0	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$10,309	\$0	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$10,309	\$0	\$10,309

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$7,930	\$0	\$7,930

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$7,930	\$0	\$7,930

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$7,930	\$0	\$7,930

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$10,309	\$0	\$10,309

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$0	\$0	\$0

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,069	\$0	\$7,069
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$13,254	\$0	\$13,254

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$13,355	\$0	\$13,355

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$10,309	\$0	\$10,309

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
2022	074-500589	Grants for Pub Asst and Relief	90004100	\$0	\$0	\$0
		Sub-Total		\$13,255	\$0	\$13,255
		<b>SUB TOTAL</b>		<b>\$120,750</b>	<b>\$0</b>	<b>\$120,750</b>

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90027027	\$190,000	\$0	\$190,000
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$190,000	\$0	\$190,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lamprey Health Care

Vendor # 177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$240,000	\$0	\$240,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$240,000	\$0	\$240,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$55,000	\$0	\$55,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$55,000	\$0	\$55,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$49,999	\$0	\$49,999
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief		\$0	\$0	\$0
		Sub-Total		\$49,999	\$0	\$49,999
		<b>SUB TOTAL</b>		<b>\$984,999</b>	<b>\$0</b>	<b>\$984,999</b>

**05-95-095-950010-1919 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: COMMISSIONER'S OFFICE, COVID-19 FEMA**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
		Sub-Total		\$100,000	\$0	\$100,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$100,000	\$0	\$100,000
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The Cheshire Medical Center Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	103-502507	Contracts for Op Svc	95010890	\$0	\$110,364	\$110,364
		Sub-Total		\$0	\$110,364	\$110,364

Greater Seacoast Community Health Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$25,800	\$125,800
2022	103-502507	Contracts for Op Svc	95010890	\$0	\$141,001	\$141,001
		Sub-Total		\$100,000	\$166,801	\$266,801

Granite United Way - Capitol Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
		Sub-Total		\$100,000	\$0	\$100,000

Granite United Way - Carroll County Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
		Sub-Total		\$100,000	\$0	\$100,000

Granite United Way -South Central Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
		Sub-Total		\$100,000	\$0	\$100,000

Lamprey Health Care Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc	95010890	\$0	\$141,182	\$141,182
		Sub-Total		\$100,000	\$141,182	\$241,182

Lakes Region Partnership for Public Health Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$100,000	\$200,000
2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
		Sub-Total		\$100,000	\$100,000	\$200,000

Manchester Health Department Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
		Sub-Total		\$100,000	\$0	\$100,000

Mary Hitchcock Memorial Hospital - Sullivan County Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc		\$0	\$37,783	\$37,783
		Sub-Total		\$100,000	\$37,783	\$137,783

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$0	\$100,000
2022	103-502507	Contracts for Op Svc		\$0	\$61,467	\$61,467
		Sub-Total		\$100,000	\$61,467	\$161,467

Mid-State Health Center Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$100,000	\$200,000
2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
		Sub-Total		\$100,000	\$100,000	\$200,000

North Country Health Consortium Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	103-502507	Contracts for Op Svc	95010890	\$0	\$0	\$0
2021	103-502507	Contracts for Op Svc	95010890	\$100,000	\$55,449	\$155,449

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

2022	103-502507	Contracts for Op Svc		\$0	\$0	\$0
			Sub-Total	\$100,000	\$55,449	\$155,449
			<b>SUB TOTAL</b>	<b>\$1,300,000</b>	<b>\$773,046</b>	<b>\$2,073,046</b>

**05-95-92-922010-4117000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF MENTAL HEALTH SVS, CMH PROGRAM SUPPORT**

City of Nashua Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$0	\$0
			Sub-Total	\$0	\$0	\$0

County of Cheshire Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$0	\$0	\$0

County of Cheshire Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Greater Seacoast Community Health Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Granite United Way - Capitol Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Granite United Way - Carroll County Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Granite United Way -South Central Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Lamprey Health Care Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Lakes Region Partnership for Public Health Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Manchester Health Department Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Mary Hitchcock Memorial Hospital - Sullivan County Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
			Sub-Total	\$0	\$8,000	\$8,000

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
		Sub-Total		\$0	\$8,000	\$8,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
		Sub-Total		\$0	\$8,000	\$8,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2022	074-500589	Grants for Pub Asst and Relief	92204117	\$0	\$8,000	\$8,000
		Sub-Total		\$0	\$8,000	\$8,000
		<b>SUB TOTAL</b>		<b>\$0</b>	<b>\$96,000</b>	<b>\$96,000</b>

		<b>TOTAL ALL</b>		<b>\$12,774,809</b>	<b>\$5,091,682</b>	<b>\$17,866,491</b>
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**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and City of Manchester ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), as amended with Governor approval on December 17, 2020 and to be presented to the Executive Council as an Informational Item, as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$2,021,453.
3. Modify Exhibit A Scope of Work by replacing it in its entirety with Exhibit A Scope of Work, Amendment #8, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.

- 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.
6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
  7. The Contractor shall bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
    - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
    - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
9. Modify Exhibit B-1, Program Funding, Amendment #7 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #8, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-17, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-18, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-19, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-20, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-21, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-22, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

6/11/2021

Date

DocuSigned by:  
*Patricia M. Tilley*  
846FB38F5BFD4C8

Name: Patricia M. Tilley

Title:

Director

City of Manchester

Date

*Joyde Craig*  
Name: Joyde Craig  
Title: Mayor

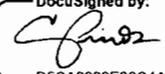
*JC*  
6/8/21

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

OFFICE OF THE ATTORNEY GENERAL

6/11/2021

Date

DocuSigned by:  
  
D5CA9202E32C4AE...

Name: Catherine Pinos

Title:

Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:

*gjc*

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient), in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Networks for the Winnepesaukee region, as defined by the Department, to provide a broad range of public health services within one or more of the state's thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to assure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing young adult substance misuse prevention strategies.
    - 2.1.2.6. Ensuring contract administration and leadership.

*JL*

6/8/21

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



**2.2. Public Health Advisory Council**

2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team and direction to public health activities within the assigned region. The Contractor shall:

2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;

2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:

2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.

2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issue.

2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.

2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.

2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.

2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:

2.2.1.3.1. Ensure meeting minutes are available to the public upon request.

2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:

*JC*  
6/8/21

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.
- 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
- 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to the public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC), YA and PHEP programs.
- 2.2.1.12. Advance the work of RPHNs by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected officials, on the PHAC.

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- 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.
- 2.3. Public Health Emergency Preparedness
  - 2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:
    - 2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.
    - 2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) and/or coordinating and/or planning committee and/or workgroup to:
      - 2.3.1.2.1. Improve regional emergency response plans; and
      - 2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.
    - 2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.
    - 2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.
    - 2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.
    - 2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative including the workgroup.
    - 2.3.1.7. Submit an annual work plan based on a template provided by the Department.
    - 2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.

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- 2.3.1.9. Collaborate with the Department's, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:
  - 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
  - 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.
- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to

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strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.

- 2.3.1.13. Regularly communicate with the Department's Area Agency contractor that provides developmental and acquired brain disorder services in the region.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State's emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training as needed to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC's Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department's SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:
  - 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
  - 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.

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- 2.3.1.21.3. ORR site visit as scheduled by the CDC and the Department.
- 2.3.1.21.4. Completion of relevant drills/exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate these supplies prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
- 2.3.1.24. Participate, as requested by the Department, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.
- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health

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and Human Services Assistant Secretary for Preparedness and Response.

2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

**2.4. Substance Misuse Prevention**

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.

2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.

2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes: assessment, capacity development, planning, implementation and evaluation.

2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department's guidance on what is evidenced informed.

2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.

2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic

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models that demonstrates short-, intermediate- and long-term measures in alignment the Three-Year Strategic Plan.

- 2.4.1.7. Advance, promote and implement substance misuse primary prevention of strategies that incorporate the Institute of Medicine (IOM) categories of prevention: universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, as directed by the Department's Bureau of drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

**2.5. Continuum of Care**

- 2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:
  - 2.5.1.1. Engage regional partners in ongoing update of regional assets and gaps, and regional CoC plan development

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and implementation. The Contractor shall ensure regional partners include, but are not limited to:

- 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Services providers.
- 2.5.1.1.2. Primary health care providers.
- 2.5.1.1.3. Behavioral health care providers.
- 2.5.1.1.4. Other interested and/or affected parties.
- 2.5.1.2. Work toward, and adapt as necessary and indicated, the priorities and actions identified in the regional CoC development plan.
- 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
  - 2.5.1.3.1. Increased awareness of and access to services;
  - 2.5.1.3.2. Increased communication and collaboration among providers; and
  - 2.5.1.3.3. Increases in capacity and delivery of services.
- 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
- 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to, the Integrated Delivery Networks.
- 2.5.1.6. Work with statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.
- 2.5.1.7. Engage regional stakeholders to assist with information dissemination.

**2.6. Young Adult Substance Misuse Prevention Strategies**

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- 2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within the regions.
- 2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:
  - 2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:
    - 2.6.2.1.1. Reducing risk factors.
    - 2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and
    - 2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.
  - 2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.
- 2.7. School Based Vaccination Clinics
  - 2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:
    - 2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.
    - 2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.
    - 2.7.1.3. Distribute state-supplied promotional vaccination materials.
    - 2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardians prior to administration of vaccines in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.
    - 2.7.1.5. Request the NH Immunization Program (NHIP) to store consent forms once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination consent forms within HIPAA guidelines.

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- 2.7.1.6. Document, verify and store written or electronic record of vaccine administration in compliance with HIPAA and other state and federal regulations.
- 2.7.1.7. Request the NHIP to store written or electronic records of vaccine administration once the Contractor completes data collection and reporting only if the Contractor lacks the ability to store vaccination records within HIPAA guidelines.
- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to the parent and/or legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient's primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care providers. The Contractor shall ensure information includes:
  - 2.7.1.9.1. Patient full name and one other unique patient identifier;
  - 2.7.1.9.2. Vaccine name;
  - 2.7.1.9.3. Vaccine manufacturer;
  - 2.7.1.9.4. Lot number;
  - 2.7.1.9.5. Date of vaccine expiration
  - 2.7.1.9.6. Date of vaccine administration;
  - 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
  - 2.7.1.9.8. Edition date of the VIS given;
  - 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor's name); and
  - 2.7.1.9.10. Full name and title of the individual who administered the vaccine.
- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian, and/or

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- parent is provided access to the information on the day of vaccination.
- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in session school days.
- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise through providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director is able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.
    - 2.7.2.6.5. Non-latex bandages.
- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
  - 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP, annually, ensuring all listed requirements are met.

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- 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
- 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
- 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.
- 2.7.3.5. Utilize NHIP training materials or other educational materials, as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
- 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
- 2.7.3.7. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
- 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
- 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
- 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
- 2.7.3.11. Account for every dose of vaccine.
- 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
- 2.7.3.13. Notify NHIP by contacting the NHIP Nursing helpline and faxing incident forms of any adverse event within 24 hours of event occurring.
- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturers recommended temperatures, the Contractor shall:
  - 2.7.3.14.1. Immediately quarantine the vaccine in an appropriate temperature setting,

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- separating it from other vaccine, and label it "DO NOT USE".
- 2.7.3.15. Contact the manufacturer immediately to explain the event duration and temperature information to determine if the vaccine is still viable.
- 2.7.3.16. Notify NHIP immediately after contacting the manufacturer regarding any temperature excursion.
- 2.7.3.17. Submit a Cold Chain Incident Report with a Data Logger Report to NHIP within 24 hours of the temperature excursion occurrence.
- 2.7.4. The Contractor shall tasks within 24 hours of the completion of every clinic that include, but are not limited to:
  - 2.7.4.1. Updating State Vaccination System with total number of vaccines administered and wasted during each mobile clinic.
  - 2.7.4.2. Ensuring doses administered and entered in the inventory system match the clinical documentation of doses administered.
  - 2.7.4.3. Submitting the hourly vaccine temperature log for the duration the vaccine is kept outside of the Contractor's established vaccine refrigerator.
  - 2.7.4.4. Submitting totals to the NHIP outside of the vaccine ordering system that include the total number of:
    - 2.7.4.4.1. Students vaccinated.
    - 2.7.4.4.2. Vaccines wasted.
  - 2.7.4.5. Completing an annual year-end self-evaluation and improvement plan for areas that include, but are not limited to:
    - 2.7.4.5.1. Strategies that worked well in the areas of communication, logistics, or planning.
    - 2.7.4.5.2. Areas for improvement both at the state and regional levels, emphasizing strategies for implementing improvements.
    - 2.7.4.5.3. Discussions relative to strategies that worked well for increasing both the number of clinics conducted at schools and the number of students vaccinated.

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- 2.7.4.5.4. Discussions relative to future strategies and plans for increasing students vaccinated, including suggestions on how state-level resources may aid in the effort.
- 2.7.5. The Contractor shall be funded through a combination of base funding and incentivized funding, in order to encourage the Contractor to offer vaccination at schools that have a greater economic disparity, as identified through reports generated by the NHIP in collaboration with the Department of Education (DOE).
- 2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:
  - 2.7.6.1. If the Contractor is unable to provide vaccine to at least 50% of the schools listed, the Contractor may show evidence of providing vaccine to additional schools listed but not previously served the year before in order to receive full funding.
  - 2.7.6.2. If NHIP and the Contractor agree that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.
  - 2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 2.7, funding will be awarded on a sliding scale based on the percentage of schools listed, calculated as follows:
    - 2.7.6.3.1. The percentage of listed school covered divided by 50%.
    - 2.7.6.3.2. The percentage determined by the equation above will be multiplied by the total amount of dollars available for funding, beyond the base portion of funding, for a total of dollars awarded for that year.
- 2.8. Contract Administration and Leadership
  - 2.8.1. The Contactor shall introduce and orient all funded staff to the work of activities conducted through the contract agreement. The Contractor shall:
    - 2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

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- 2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.
  - 2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
  - 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
  - 2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.
- 2.9. I-CARE Program:
- 2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
  - 2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.
  - 2.9.3. The Contractor shall ensure activities in the work plan support:
    - 2.9.3.1. The I-CARE NH mental health and wellness initiative;
    - 2.9.3.2. 9-8-8 National Suicide Prevention lifeline expansion project; and/or
    - 2.9.3.3. NH's Suicide Prevention Council's strategic plan.
  - 2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.
  - 2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of the contract effective date.

**3. Training and Technical Assistance Requirements**

- 3.1. The Contractor shall participate in training and technical assistance as follows:
  - 3.1.1. Public Health Advisory Council
    - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by Department's DPHS and/or BDAS.
    - 3.1.1.2. Complete a technical assistance needs assessment.
  - 3.1.2. Public Health Emergency Preparedness

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- 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department's DPHS and/or Emergency Services Unit (ESU).
- 3.1.2.2. Complete a technical assistance needs assessment.
- 3.1.2.3. Attend a maximum of two trainings per year offered by Department's DPHS and/or ESU or the agency contracted by the Department's DPHS to provide training programs.
- 3.1.3. Substance Misuse Prevention
  - 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
  - 3.1.3.2. At the Department's request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including, but not limited to:
    - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
    - 3.1.3.2.2. Using appropriate measures and tools.
  - 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
  - 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
  - 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
  - 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and
    - 3.1.4.1.5. Development.

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- 3.1.4.2. Be familiar with RROSC and NH DHHS CoC systems development and the “No Wrong Door” approach to systems integration.
- 3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.
- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics

*JG*  
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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with a current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
- 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and status, and current BLS certificate shall be retained in the training file.

#### 4. Staffing

- 4.1. The Contractor's staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN's efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

#### 5. Reporting

City of Manchester

Exhibit A – Amendment # 8

Contractor Initials

SS-2019-DPHS-28-REGION-01-A08

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Date

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6/8/21

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide Reports for the PHAC that include, but are not limited to, submitting quarterly PHAC progress reports using an online system administered by the Department's DPHS.
- 5.3. The Contractor shall provide Reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.3.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.3.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.3.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.3.4. Inputting data on a monthly basis by the 20th business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes but is not limited to:
    - 5.3.4.1. Number of individuals served or reached.
    - 5.3.4.2. Demographics.
    - 5.3.4.3. Strategies and activities per IOM by the six (6) activity types.
    - 5.3.4.4. Dollar Amount and type of funds used in the implementation of strategies and/or interventions.
    - 5.3.4.5. Percentage evidence based strategies.
  - 5.3.5. Submitting annual reports.
  - 5.3.6. Providing additional reports or data as required by the Department.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 5.3.7. Participating and administering the Regional SMP Stakeholder Survey in alternate years.
- 5.4. The Contractor shall provide Reports for Continuum of Care that include, but are not limited to:
  - 5.4.1. Submitting update on regional assets and gaps assessments, as required.
  - 5.4.2. Submitting updates on regional CoC development plans, as indicated.
  - 5.4.3. Submitting quarterly reports ,as indicated.
  - 5.4.4. Submitting year-end reports, as indicated.
- 5.5. The Contractor shall provide reports for Young Adult Strategies that include but are not limited to:
  - 5.5.1. Inputting data on a monthly basis to an online database as required by the Department.
  - 5.5.2. Ensuring the data includes but is not limited to:
    - 5.5.2.1. Number of individuals served.
    - 5.5.2.2. Demographics of individuals served.
    - 5.5.2.3. Types of strategies or interventions implemented.
    - 5.5.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
  - 5.5.3. Meeting with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.
- 5.6. The Contractor shall provide reports for School-Based Vaccination Clinics that include but are not limited to:
  - 5.6.1. Attending annual debriefing and planning meetings with NHIP staff.
  - 5.6.2. Completing a year-end summary of:
    - 5.6.2.1. The total numbers of children vaccinated; and
    - 5.6.2.2. Accomplishments and improvements to future school-based clinics.
  - 5.6.3. Providing aggregated data, by school for each school, to the NHIP no later than 3 months after SBCs are concluded, that include:
    - 5.6.3.1. Number of students at that school;
    - 5.6.3.2. Number of students vaccinated out of the total number at that school; and
    - 5.6.3.3. Number of vaccinated students on Medicaid out of the total number at that school.
  - 5.6.4. Provide other reports and updates as requested by NHIP.

**6. Performance Measures**

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the DHHS, to measure the effectiveness of the agreement as follows:
- 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision or mission statements/
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
    - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
    - 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
    - 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
  - 6.1.3. Substance Misuse Prevention
    - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
      - 6.1.3.1.1. 30-day alcohol use;
      - 6.1.3.1.2. 30-day marijuana use;
      - 6.1.3.1.3. 30-day illegal drug use;
      - 6.1.3.1.4. Illicit drug use other than marijuana;

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 6.1.3.1.5. 30-day nonmedical use of pain relievers;
- 6.1.3.1.6. Life time heroin use;
- 6.1.3.1.7. Binge Drinking; and
- 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
- 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
  - 6.1.3.2.1. Perception of risk from alcohol use;
  - 6.1.3.2.2. Perception of risk from marijuana use;
  - 6.1.3.2.3. Perception of risk from illegal drug use;
  - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
  - 6.1.3.2.5. Perception of risk from binge drinking;
  - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
  - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.
- 6.1.4. Continuum of Care
  - 6.1.4.1. Evidence of ongoing update of regional substance use services assets and gaps assessment.
  - 6.1.4.2. Evidence of ongoing update of regional CoC development plan.
  - 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
  - 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:
    - 6.1.4.4.1. Health;
    - 6.1.4.4.2. Safety;
    - 6.1.4.4.3. Education;
    - 6.1.4.4.4. Government; and
    - 6.1.4.4.5. Business.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**



- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or are affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to
- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.
- 6.1.6. School-Based Vaccination Clinics
  - 6.1.6.1. Annual increase in the percentage of students receiving seasonal influenza vaccination in school-based clinics.
  - 6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.
  - 6.1.6.3. Maintain vaccine wastage below 5%.

*DC*  
*6/8/21*

Vendor Name: City of Manchester  
 Contract Name: Regional Public Health Network Services  
 Region: Greater Manchester

Program Name and Funding Amounts

State Fiscal Year	COVID Vaccination	Immunization	I-Care	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Public Health Emergency Preparedness-Medical Reserve Corp	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019				\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ 1,200	
2020				\$ 30,000	\$ 285,223	\$ 240,000	\$ 10,000	\$ 80,404	\$ 40,441	\$ 117,249	\$ 1,800	\$ 10,000
2021	\$ 100,000	\$ 35,000		\$ 30,000	\$ 285,223		\$ 10,000	\$ 80,404	\$ 40,441	\$ 90,000	\$ -	\$ -
2022			\$ 8,000	\$ 30,000	\$ 285,223		\$ 10,000	\$ 83,040	\$ 37,805	\$ 80,000		
												\$ 2,021,453

Contractor Initials: *JC*  
 Date: *4/8/21*

Exhibit B-17, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: City of Manchester Health Department

Budget Request for: YAS

Project Title

Budget Period: FY2022

Line Item	Total Program Cost			Contractor Share/ Match			Funded by DHHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 60,840.00	\$ -	\$ 60,840.00	\$ -	\$ -	\$ -	\$ 60,840.00	\$ -	\$ 60,840.00
2. Employee Benefits	\$ 12,067.36	\$ -	\$ 12,067.36	\$ -	\$ -	\$ -	\$ 12,067.36	\$ -	\$ 12,067.36
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 892.64	\$ -	\$ 892.64	\$ -	\$ -	\$ -	\$ 892.64	\$ -	\$ 892.64
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 1,200.00	\$ -	\$ 1,200.00	\$ -	\$ -	\$ -	\$ 1,200.00	\$ -	\$ 1,200.00
7. Occupancy	\$ 2,400.00	\$ -	\$ 2,400.00	\$ -	\$ -	\$ -	\$ 2,400.00	\$ -	\$ 2,400.00
8. Current Expenses	\$ 850.00	\$ -	\$ 850.00	\$ -	\$ -	\$ -	\$ 850.00	\$ -	\$ 850.00
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 750.00	\$ -	\$ 750.00	\$ -	\$ -	\$ -	\$ 750.00	\$ -	\$ 750.00
11. Staff Education and Training	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00	\$ -	\$ 600.00
12. Subcontracts/Agreements	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00	\$ -	\$ 600.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 80,000.00	\$ -	\$ 80,000.00	\$ -	\$ -	\$ -	\$ 80,000.00	\$ -	\$ 80,000.00

Indirect As A Percent of Direct

0.0%

0.0%

Contractor Initials: *JC*  
 Date: 6/8/21

Exhibit B-18, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: City of Manchester Health Department

Budget Request for: Public Health Emergency Preparedness-Medical Reserve Corp

Project Title

Budget Period: July 1, 2021- June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 8,000.00	\$ -	\$ 8,000.00	\$ -	\$ -	\$ -	\$ 8,000.00	\$ -	\$ 8,000.00
2. Employee Benefits	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 700.00	\$ -	\$ 700.00	\$ -	\$ -	\$ -	\$ 700.00	\$ -	\$ 700.00
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ 750.00	\$ -	\$ 750.00	\$ -	\$ -	\$ -	\$ 750.00	\$ -	\$ 750.00
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
11. Staff Education and Training	\$ 750.00	\$ -	\$ 750.00	\$ -	\$ -	\$ -	\$ 750.00	\$ -	\$ 750.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory)	\$ -	\$ 300.00	\$ 300.00	\$ -	\$ -	\$ -	\$ -	\$ 300.00	\$ 300.00
TOTAL	\$ 9,700.00	\$ 300.00	\$ 10,000.00	\$ -	\$ -	\$ -	\$ 9,700.00	\$ 300.00	\$ 10,000.00

Indirect As A Percent of Direct

3.1%

3.1%

Contractor Initials: *[Signature]*  
 Date: 6/18/21

Exhibit B-19, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: City of Manchester Health Department 300000%

Budget Request for: Public Health Advisory PHAC

Project Title

Budget Period: July 1, 2021- June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 23,000.00	\$ -	\$ 23,000.00	\$ -	\$ -	\$ -	\$ 23,000.00	\$ -	\$ 23,000.00
2. Employee Benefits	\$ 6,100.00	\$ -	\$ 6,100.00	\$ -	\$ -	\$ -	\$ 6,100.00	\$ -	\$ 6,100.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ 900.00	\$ 900.00	\$ -	\$ -	\$ -	\$ -	\$ 900.00	\$ 900.00
TOTAL	\$ 29,100.00	\$ 900.00	\$ 30,000.00	\$ -	\$ -	\$ -	\$ 29,100.00	\$ 900.00	\$ 30,000.00

Indirect As A Percent of Direct

3.1%

3.1%

*[Signature]*  
 6/8/21

Exhibit B-20, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: City of Manchester Health Department

Budget Request for: Public Health Emergency Preparedness

Project Title

Budget Period: July 1, 2021- June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 172,000.00	\$ -	\$ 172,000.00	\$ -	\$ -	\$ -	\$ 172,000.00	\$ -	\$ 172,000.00
2. Employee Benefits	\$ 92,592.00	\$ -	\$ 92,592.00	\$ -	\$ -	\$ -	\$ 92,592.00	\$ -	\$ 92,592.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 4,000.00	\$ -	\$ 4,000.00	\$ -	\$ -	\$ -	\$ 4,000.00	\$ -	\$ 4,000.00
Office	\$ 574.31	\$ -	\$ 574.31	\$ -	\$ -	\$ -	\$ 574.31	\$ -	\$ 574.31
6. Travel	\$ 1,500.00	\$ -	\$ 1,500.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ -	\$ 1,500.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 4,000.00	\$ -	\$ 4,000.00	\$ -	\$ -	\$ -	\$ 4,000.00	\$ -	\$ 4,000.00
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 2,000.00	\$ -	\$ 2,000.00	\$ -	\$ -	\$ -	\$ 2,000.00	\$ -	\$ 2,000.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify, if it is mandatory)	\$ -	\$ 8,556.69	\$ 8,556.69	\$ -	\$ -	\$ -	\$ -	\$ 8,556.69	\$ 8,556.69
TOTAL	\$ 276,666.31	\$ 8,556.69	\$ 285,223.00	\$ -	\$ -	\$ -	\$ 276,666.31	\$ 8,556.69	\$ 285,223.00

Indirect As A Percent of Direct

3.1%

3.1%

Contractor Initials

Date

*JSC*  
 6/18/21

Exhibit B-21, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: City of Manchester Health Dept

Budget Request for: Continuum of Care

Project Title

Budget Period: FY2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 28,080.00	\$ -	\$ 28,080.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ 5,587.92	\$ -	\$ 5,587.92	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ 1,800.00	\$ -	\$ 1,800.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 737.08	\$ -	\$ 737.08	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 400.00	\$ -	\$ 400.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 37,805.00	\$ -	\$ 37,805.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Indirect As A Percent of Direct

0.0%

*[Signature]*  
 6/18/21

Exhibit B-22, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: City of Manchester Health Department

Budget Request for: Substance Misuse Prevention

Project Title

Budget Period: FY2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHB contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 62,400.00	\$ -	\$ 62,400.00	\$ -	\$ -	\$ -	\$ 62,400.00	\$ -	\$ 62,400.00
2. Employee Benefits	\$ 12,418.00	\$ -	\$ 12,418.00	\$ -	\$ -	\$ -	\$ 12,418.00	\$ -	\$ 12,418.00
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1,325.00	\$ -	\$ 1,325.00	\$ -	\$ -	\$ -	\$ 1,325.00	\$ -	\$ 1,325.00
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 1,200.00	\$ -	\$ 1,200.00	\$ -	\$ -	\$ -	\$ 1,200.00	\$ -	\$ 1,200.00
7. Occupancy	\$ 2,400.00	\$ -	\$ 2,400.00	\$ -	\$ -	\$ -	\$ 2,400.00	\$ -	\$ 2,400.00
8. Current Expenses	\$ 1,347.00	\$ -	\$ 1,347.00	\$ -	\$ -	\$ -	\$ 1,347.00	\$ -	\$ 1,347.00
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 750.00	\$ -	\$ 750.00	\$ -	\$ -	\$ -	\$ 750.00	\$ -	\$ 750.00
11. Staff Education and Training	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00	\$ -	\$ 600.00
12. Subcontracts/Agreements	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00	\$ -	\$ 600.00
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 83,040.00</b>	<b>\$ -</b>	<b>\$ 83,040.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 83,040.00</b>	<b>\$ -</b>	<b>\$ 83,040.00</b>

Indirect As A Percent of Direct

0.0%

0.0%

Contractor Initials: *[Signature]*  
 Date: *6/18/21*

CERTIFICATE OF VOTE

I, Matthew Normand, do hereby certify that:  
(Name of the City Clerk of the Municipality)

- 1. I am duly elected City Clerk of the City of Manchester
- 2. The following is a true copy of an action duly adopted at a meeting of the Board of Mayor and Aldermen duly held on June 1, 2021,

RESOLVED: That this Municipality enter into a contract amendment with the State of New Hampshire, Department of Health and Human Services.

RESOLVED: That Joyce Craig  
(Mayor of the City of Manchester)

hereby is authorized on behalf of this municipality to enter into the said contract with the State and to execute any and all documents, agreements, and other instruments; and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable, or appropriate.

- 3. The foregoing action on has not been amended or revoked and remains in full force and effect as of June 1, 2021

- 4. Joyce Craig (is/are) the duly elected Mayor of the City of Manchester.

Matthew Normand  
(Signature of the Clerk of the Municipality)

State of New Hampshire  
County of Hillsborough

The foregoing instrument was acknowledge before me this 8 day of June, 2021 by Matthew Normand  
(Name of Person Signing Above)

(NOTARY SEAL) Lisa M. McCarthy  
(Name of Notary Public)

Title: Notary Public/Justice of the Peace  
Commission Expires: \_\_\_\_\_  
**LISA M. MCCARTHY**  
NOTARY PUBLIC  
State of New Hampshire  
My Commission Expires  
June 24, 2025



*Kevin J. O'Neil*  
*Risk Manager*

## **CITY OF MANCHESTER**

*Office of Risk Management*

### **CERTIFICATE OF COVERAGE**

STATE OF NEW HAMPSHIRE  
Department of Health and Human Services  
129 Pleasant Street  
Concord, NH 03301-3857

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage within the financial limits of RSA 507-B as follows:

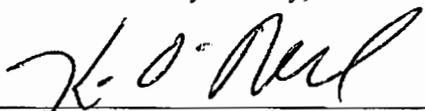
	Limits of Liability (in thousands 000)	
GENERAL LIABILITY	Bodily Injury and Property Damage	
	Each Person	325
	Each Occurrence	1000
AUTOMOBILE LIABILITY	Bodily Injury and Property Damage	
	Each Person	325
	Each Occurrence	1000
WORKER'S COMPENSATION	Statutory Limits	

The City of Manchester, New Hampshire maintains a Self-Insured, Self-Funded Program and retains outside claim service administration. All coverages are continuous until otherwise notified. Effective on the date Certificate issued and expiring upon completion of contract. Notwithstanding any requirements, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the coverage afforded by the limits described herein is subject to all the terms, exclusions and conditions of RSA 507-B.

#### **DESCRIPTION OF OPERATIONS/LOCATION/CONTRACT PERIOD**

For RPHN – Public Health Preparedness from July 1, 2021 through June 30, 2022.

Issued the 19th day of May, 2021.

  
\_\_\_\_\_  
Kevin J. O'Neil Risk Manager

**Subject:** Regional Public Health Network Services (SS-2019-DPHS-28-REGION-11)

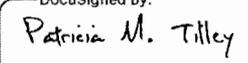
Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

### AGREEMENT

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

### GENERAL PROVISIONS

#### 1. IDENTIFICATION.

1.1 State Agency Name  New Hampshire Department of Health and Human Services		1.2 State Agency Address  129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name  The Cheshire Medical Center		1.4 Contractor Address  580 Court Street Keene, NH, 03431	
1.5 Contractor Phone Number  (603) 354-5400	1.6 Account Number  Sec Attached Fiscal Details	1.7 Completion Date  June 30, 2022	1.8 Price Limitation  \$407,260
1.9 Contracting Officer for State Agency  Nathan D. White, Director		1.10 State Agency Telephone Number  (603) 271-9631	
1.11 Contractor Signature <small>DocuSigned by:</small>  Date: 6/14/2021		1.12 Name and Title of Contractor Signatory  Daniel Gross CFO	
1.13 State Agency Signature <small>DocuSigned by:</small>  Date: 6/14/2021		1.14 Name and Title of State Agency Signatory  Patricia M. Tilley Director	
1.15 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)  By: _____ Director, On: _____			
1.16 Approval by the Attorney General (Form, Substance and Execution) (if applicable)  By:  On: 6/15/2021			
1.17 Approval by the Governor and Executive Council (if applicable)  G&C Item number: _____ G&C Meeting Date: _____			

**2. 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 B 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 1.17, 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 1.13 ("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 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 for Services provided in EXHIBIT B, in whole or in part. 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 reduce or terminate the Services under this Agreement immediately upon giving the Contractor notice of such reduction or termination. The State shall not be required to transfer funds from any other account or source 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 C 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 applicable 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 employment opportunity laws. In addition, if this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all federal executive orders, rules, regulations and statutes, and with any rules, regulations and guidelines as the State or the United States issue to implement these regulations. The Contractor shall also comply with all applicable intellectual property 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. The Contractor 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 cured, 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 give the Contractor a written notice specifying the Event of Default and 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 give the Contractor a written notice specifying the Event of Default, treat the Agreement as breached, terminate the Agreement and pursue any of its remedies at law or in equity, or both.

8.3. 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.

**9. TERMINATION.**

9.1 Notwithstanding paragraph 8, the State may, at its sole discretion, terminate the Agreement for any reason, in whole or in part, by thirty (30) days written notice to the Contractor that the State is exercising its option to terminate the Agreement.

9.2 In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall, at the State's discretion, 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 B. In addition, at the State's discretion, 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.

**10. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.**

10.1 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.

10.2 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.

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

**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.**

12.1 The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice, which shall be provided to the State at least fifteen (15) days prior to the assignment, and a written consent of the State. For purposes of this paragraph, a Change of Control shall constitute assignment. "Change of Control" means (a) merger, consolidation, or a transaction or series of related transactions in which a third party, together with its affiliates, becomes the direct or indirect owner of fifty percent (50%) or more of the voting shares or similar equity interests, or combined voting power of the Contractor, or (b) the sale of all or substantially all of the assets of the Contractor.

12.2 None of the Services shall be subcontracted by the Contractor without prior written notice and consent of the State. The State is entitled to copies of all subcontracts and assignment agreements and shall not be bound by any provisions contained in a subcontract or an assignment agreement to which it is not a party.

**13. INDEMNIFICATION.** Unless otherwise exempted by law, the Contractor shall indemnify and hold harmless the State, its officers and employees, from and against any and all claims, liabilities and costs for any personal injury or property damages, patent or copyright infringement, or other claims asserted against the State, its officers or employees, which arise out of (or which may be claimed to arise out of) the acts or omission of the

Contractor Initials

Date 6/14/2021

bs  
DG

Contractor, or subcontractors, including but not limited to the negligence, reckless or intentional conduct. The State shall not be liable for any costs incurred by the Contractor arising under this paragraph 13. 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 continuously maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 commercial 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 or excess; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 10.2 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.

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 ten (10) days prior to the expiration date of each insurance policy. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference.

**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. The 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. 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.

**17. 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.

**18. CHOICE OF LAW AND FORUM.** This Agreement shall be governed, interpreted and 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. Any actions arising out of this Agreement shall be brought and maintained in New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

**19. CONFLICTING TERMS.** In the event of a conflict between the terms of this P-37 form (as modified in EXHIBIT A) and/or attachments and amendment thereof, the terms of the P-37 (as modified in EXHIBIT A) shall control.

**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 or modifying provisions set forth in the attached EXHIBIT A 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 with respect to the subject matter hereof.

Contractor Initials   
Date 6/14/2021

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**EXHIBIT A**

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**Revisions to Standard Agreement Provisions**

1. Revisions to Form P-37, General Provisions

1.1. Paragraph 12, Assignment/Delegation/Subcontracts, is amended by adding subparagraph 12.3 as follows:

12.3. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions. The Contractor shall have written agreements with all subcontractors, specifying the work to be performed and how corrective action shall be managed if the subcontractor's performance is inadequate. The Contractor shall manage the subcontractor's performance on an ongoing basis and take corrective action as necessary. The Contractor shall annually provide the State with a list of all subcontractors provided for under this Agreement and notify the State of any inadequate subcontractor performance.



**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient, in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Network for the Greater Monadnock Region, as defined by the Department, to provide a broad range of public health services within one or more of the state's thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to ensure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing climate and health adaptation initiatives.
    - 2.1.2.6. Ensuring contract administration and leadership.
- 2.2. Public Health Advisory Council
  - 2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team, and

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direction to public health activities within the assigned region. The Contractor shall:

2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC

2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:

2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.

2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issue.

2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.

2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.

2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.

2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:

2.2.1.3.1. Ensure meeting minutes are available to the public upon request.

2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who responsible for functions that include, but are not limited to:

2.2.1.4.1. Writing and issuing standing orders, as needed to ensure delivery of programs and services funded through this agreement.

2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.

2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.

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- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to public and agency partners, which includes, but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC), and Public Health Emergency Preparedness (PHEP) programs.
- 2.2.1.12. Advance the work of the RPHN by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected and appointed municipal officials, on the PHAC.
- 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purpose of sustaining public health improvement efforts.

2.3. Public Health Emergency Preparedness

2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:

2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control

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- and Prevention's (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.
- 2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) coordinating and/or planning committee and/or workgroup to:
    - 2.3.1.2.1. Improve regional emergency response plans; and
    - 2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.
  - 2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.
  - 2.3.1.4. Ensure and document committee/workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.
  - 2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.
  - 2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative including the workgroup.
  - 2.3.1.7. Submit an annual work plan based on a template provided by the Department.
  - 2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners. Collaborate with the Department's, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
  - 2.3.1.9. Revise the Regional Public Health Emergency Annex (RPHEA) based on guidance from Department. The Contractor shall:
    - 2.3.1.9.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
    - 2.3.1.9.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.

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- 2.3.1.17. Provide training, as needed, to individuals to participate in emergency management using WebEOC.
- 2.3.1.18. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.19. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.20. Implement activities that support the CDC's Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department's SNS Coordinator to identify appropriate actions and priorities that include, but are not limited to:
  - 2.3.1.20.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
  - 2.3.1.20.2. Annual submission of either ORR or self-assessment documentation.
  - 2.3.1.20.3. ORR site visit as scheduled by the CDC and the Department.
  - 2.3.1.20.4. Completion of relevant drills/exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.21. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.21.1. Executing MOUs with agencies to store, inventory, and rotate these supplies prior to purchasing new supplies or equipment.
  - 2.3.1.21.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.22. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.22.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.22.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.

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2.3.1.22.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.

2.3.1.22.4. Conduct quarterly notification drills of volunteers.

2.3.1.23. As requested, participate in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.

2.3.1.24. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health and Human Services Assistant Secretary for Preparedness and Response.

2.3.1.25. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics are held at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

2.4. Substance Misuse Prevention

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.

2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.

2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes assessment, capacity development, planning, implementation and evaluation.

2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based

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guidelines, in accordance with the Department's guidance on what is evidenced informed.

- 2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.
- 2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic models that demonstrates short-, intermediate- and long-term measures in alignment the Three-Year Strategic Plan.
- 2.4.1.7. Advance, promote and implement substance misuse primary prevention strategies that incorporate the Institute of Medicine (IOM) categories of prevention of universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, as directed by the Department's Bureau of Drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

2.5. Continuum of Care

- 2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing

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the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

- 2.5.1.1. Engage regional partners in ongoing updates of regional assets and gaps, and regional CoC plan development and implementation. The Contractor shall ensure regional partners include, but are not limited to:
  - 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Service Providers.
  - 2.5.1.1.2. Primary health care providers.
  - 2.5.1.1.3. Behavioral health care providers.
  - 2.5.1.1.4. Other interested and/or affected parties.
- 2.5.1.2. Work toward, and adapt as necessary and indicated, priorities and actions identified in the regional CoC development plan.
- 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
  - 2.5.1.3.1. Increased awareness of and access to services;
  - 2.5.1.3.2. Increased communication and collaboration among providers; and
  - 2.5.1.3.3. Increases in capacity and delivery of services.
- 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
- 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to the Integrated Delivery Networks.
- 2.5.1.6. Work with the statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance, including but not limited to health care providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.
- 2.5.1.7. Engage regional stakeholders to assist with information dissemination.

2.6. Extreme Weather and Climate Interventions

- 2.6.1. The Contractor shall expand the community interventions to reach a target audience that is larger than the target audience reached from the previous year. Interventions may include trainings or actions to prepare

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for extreme weather due to excess heat, cold, precipitation, or habitat change.

2.6.2. The Contractor shall collaborate with the Department to develop a work plan with methods to implement and evaluate the interventions including specific baseline measures to demonstrate improvements over time through activities that may include, but are not limited to:

2.6.2.1. Pre- and post-testing.

2.6.2.2. Community surveys.

2.6.3. The Contractor shall provide services that include, but are not limited to:

2.6.3.1. Implementing a minimum of two (2) interventions to address a priority weather hazard and/or health impact in order to improve conditions among a specific target population, which include, but are not limited to:

2.6.3.1.1. Youth.

2.6.3.1.2. Older adults.

2.6.3.1.3. At-risk vulnerable groups.

2.6.3.2. Ensuring the interventions include education on trends in regional weather and/or climate change related to the health on the target audience.

2.6.3.3. Completing the intervention and measure any changes in community-level awareness, community-level resilience, or individual-level Knowledge, Skills, and Ability to act (KSAs).

2.6.3.4. Completing a final report on the intervention methods, results, and evaluation of success that is a minimum of ten (10) pages of written narrative in length, excluding appendices.

2.6.3.5. Submitting a draft of the written report to the Department for review and approval no later than one-month prior to the contract completion date.

2.7. Contract Administration and Leadership

2.7.1. The Contactor shall introduce and orient all funded staff to the work of activities conducted through the contract agreement. The Contractor shall:

2.7.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

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- 2.7.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education, as needed, to support staff in areas of deficit in knowledge and/or skills.
- 2.7.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
- 2.7.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
- 2.7.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

2.8. I- CARE Program:

- 2.8.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
- 2.8.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.
- 2.8.3. The Contractor shall ensure activities in the work plan support:
  - 2.8.3.1. The I CARE NH mental health and wellness initiative;
  - 2.8.3.2. 9-8-8 National Suicide Prevention Lifeline expansion project; and/or
  - 2.8.3.3. NH's Suicide Prevention Council's strategic plan.
- 2.8.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of contract effective date.
- 2.8.5. The vendor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of contract effective date.

**3. Training and Technical Assistance Requirements**

- 3.1. The Contractor shall participate in training and technical assistance as follows:
  - 3.1.1. Public Health Advisory Council
    - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by the Department's DPHS and/or BDAS.
    - 3.1.1.2. Complete a technical assistance needs assessment.
  - 3.1.2. Public Health Emergency Preparedness

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- 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department's DPHS and/or the Emergency Services Unit (ESU).
- 3.1.2.2. Complete a technical assistance needs assessment.
- 3.1.2.3. Attend a maximum of two trainings per year offered by the Department's DPHS and/or ESU or the agency contracted by the Department's DPHS to provide training programs.
- 3.1.3. Substance Misuse Prevention
  - 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
  - 3.1.3.2. At the Department's request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including, but not limited to
    - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
    - 3.1.3.2.2. Using appropriate measures and tools.
  - 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
  - 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
  - 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
  - 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and
    - 3.1.4.1.5. Development.

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- 3.1.4.2. Be familiar with RROSC and the Department’s CoC systems development and the “No Wrong Door” approach to systems integration.
- 3.1.4.3. Attend CoC Facilitator meetings, as directed by the Department.
- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Extreme Weather and Climate Interventions
  - 3.1.5.1. The Contractor shall participate in a maximum of two (2) half-day trainings provided by the Department in Concord, NH regarding how to:
    - 3.1.5.1.1. Assess weather-related vulnerabilities;
    - 3.1.5.1.2. Measure community preparedness; and
    - 3.1.5.1.3. Implement the CDC’s Building Resilience Against Climate Effects (BRACE) framework.

**4. Staffing**

- 4.1. The Contractor’s staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning

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and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN's efforts.

- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following three (3) scopes of work: PHEP, SMP, and CoC Facilitator. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

<b>Position Name</b>	<b>Minimum Required Staff Positions</b>
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead

**5. Reporting**

- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work, as described in the sections below.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide reports for the PHAC, which include but are not limited to submitting quarterly PHAC progress reports using an on-line system administered by the Department's DPHS.
- 5.3. The Contractor shall provide reports for the PHEP that include, but are not limited to:
  - 5.3.1. Submitting quarterly PHEP progress reports using an on-line system administered by the Department's DPHS.

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- 5.3.2. Submitting all documentation necessary to complete the MCM ORR review or self-assessment.
- 5.3.3. Submitting semi-annual action plans for MCM ORR activities on a form provided by the Department.
- 5.3.4. Submitting information documenting the required MCM ORR-related drills and exercises.
- 5.3.5. Submitting final After Action Reports for any other drills or exercises conducted.
- 5.4. The Contractor shall provide Reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.4.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.4.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to the plans are approved by the Department's BDAS.
  - 5.4.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.4.4. Inputting data on a monthly basis by the 20th business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes, but is not limited to:
    - 5.4.4.1. Number of individuals served or reached
    - 5.4.4.2. Demographics
    - 5.4.4.3. Strategies and activities per IOM by the six (6) activity types.
    - 5.4.4.4. Dollar Amount and type of funds used in the implementation of strategies and/or interventions
    - 5.4.4.5. Percentage evidence based strategies
  - 5.4.5. Submitting annual reports.
  - 5.4.6. Providing additional reports or data as required by the Department.
  - 5.4.7. Participating and administer the Regional SMP Stakeholder Survey in alternate years.
- 5.5. The Contractor shall provide reports for Continuum of Care that include, but are not limited to:

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- 5.5.1. Submitting updates on regional assets and gaps assessments, as required.
- 5.5.2. Submitting updates on regional CoC development plans, as indicated.
- 5.5.3. Submitting quarterly reports, as indicated.
- 5.5.4. Submitting year-end reports, as indicated.
- 5.6. The Contractor shall provide reports for Extreme Weather and Climate Interventions, that include, but are not limited to:
  - 5.6.1. Publishing all relevant intervention materials from Phase 1 and 2 to a public-facing web page, including any written plans, reports, educational materials and/or other resources.
  - 5.6.2. Publishing all relevant interventions materials from Phase 3 to a public-facing web page.
  - 5.6.3. Presenting the findings of Phase 3 interventions to the Department in both verbal and written formats.
  - 5.6.4. Submit a brief one (1)-page quarterly progress report to the Department within thirty (30) days following the end of each quarter, describing the fulfillment of activities conducted in order to monitor program performance.

**6. Performance Measures**

- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the Department, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision and/or mission statements.
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness

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New Hampshire Department of Health and Human Services  
Regional Public Health Network Services



Exhibit B

- 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
- 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
- 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
- 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
- 6.1.3. Substance Misuse Prevention
  - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
    - 6.1.3.1.1. 30-day alcohol use;
    - 6.1.3.1.2. 30-day marijuana use;
    - 6.1.3.1.3. 30-day illegal drug use;
    - 6.1.3.1.4. Illicit drug use other than marijuana;
    - 6.1.3.1.5. 30-day Nonmedical use of pain relievers;
    - 6.1.3.1.6. Life time heroin use;
    - 6.1.3.1.7. Binge Drinking; and
    - 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
  - 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
    - 6.1.3.2.1. Perception of risk from alcohol use;
    - 6.1.3.2.2. Perception of risk from marijuana use;
    - 6.1.3.2.3. Perception of risk from illegal drug use;
    - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
    - 6.1.3.2.5. Perception of risk from binge drinking;
    - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and

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New Hampshire Department of Health and Human Services  
Regional Public Health Network Services



Exhibit B

6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.

6.1.4. Continuum of Care

6.1.4.1. Evidence of ongoing updates of regional substance use services assets and gaps assessment.

6.1.4.2. Evidence of ongoing update of regional CoC development plan.

6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.

6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:

6.1.4.4.1. Health;

6.1.4.4.2. Safety;

6.1.4.4.3. Education;

6.1.4.4.4. Government; and

6.1.4.4.5. Business.

6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or affected by. substance misuse that the CoC Facilitator leads, participates in, or materially contributes to.

6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.

6.1.5. Extreme Weather and Climate Interventions Performance Measures

6.1.5.1. The Contractor shall expand the interventions to reach a target audience that is a minimum of 25% larger than the prior year.

6.1.5.2. The Contractor shall create a minimum of one (1) baseline measure for each of the objectives in the work plan and measure any changes.

6.1.5.3. The Contractor shall ensure individual-level assessments report an increase in knowledge, skills and ability to respond to extreme weather or climate-related hazards.

6.1.5.4. The Contractor shall ensure community-level surveys report an increase in awareness of weather hazards, related health impacts and how to engage in prevention.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



**Exhibit B**

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- 6.1.5.5. The Contractor shall participate in a monthly one (1)-hour meetings and/or conference calls with the Department to review budgets, activities, and plans of action.



## Additional Scope of Services - COVID-19 Response

### 1. Scope of Services

#### 1.1. Emergency Operations

1.1.1. The Contractor shall enact emergency operations across the Regional Public Health Network for COVID-19 efforts by:

- 1.1.1.1. Activating the regions Multi-Agency Coordination Entity (MACE) at a level appropriate to meet the needs of the response.
- 1.1.1.2. Staffing the MACE with the numbers and skills necessary to support the response and ensure worker safety.
- 1.1.1.3. Assessing the region's public health and healthcare system training needs.
- 1.1.1.4. Providing training designed to improve the regions public health and healthcare system response.
- 1.1.1.5. Ensuring plans and regions response actions incorporate the latest DPHS guidance and direction.

#### 1.2. Responder Safety and Health

1.2.1. The Contractor shall ensure the health and safety of the public health response workforce in the Regional Public Health Network, including but not limited to:

- 1.2.1.1. Implementing staff resiliency programs, information, and referrals to responder mental health support.
- 1.2.1.2. Determining responder safety and health gaps and implementing corrective actions.
- 1.2.1.3. Documenting and tracking the Regional Public Health Network's personal protective equipment inventory.

#### 1.3. Identification of Vulnerable Populations

1.3.1. The Contractor shall identify and implement mitigation strategies for populations at risk for morbidity, mortality, and other adverse outcomes.

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New Hampshire Department of Health and Human Services  
Regional Public Health Network Services



Exhibit B-1

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- 1.3.2. The Contractor shall coordinate with governmental and nongovernmental programs that can be leveraged to provide health and human services and disseminate information to connect the public with available services.
  - 1.4. Information Sharing and Public Information
    - 1.4.1. The Contractor shall ensure information regarding the COVID-19 efforts are provided to the public, including but not limited to:
      - 1.4.1.1. Disseminating information, alerts, warnings, and notifications regarding risks and self-protective measures to the public, particularly with at-risk and vulnerable populations and public health responders.
      - 1.4.1.2. Monitoring local news stories and social media postings to determine if information is accurate, identify messaging gaps, and coordinate with DHHS to adjust communications as needed.
      - 1.4.1.3. Coordinating communication messages, products, and programs with DHHS, key partners and stakeholders to harmonize response messaging.
  - 1.5. Distribution and Use of Medical Material
    - 1.5.1. The Contractor shall ensure capacity for a mass vaccination campaign once a COVID-19 vaccine becomes available, including:
      - 1.5.1.1. Maintaining ability for vaccine-specific cold chain management.
      - 1.5.1.2. Coordinating targeted and mass vaccination clinics for emergency response.
      - 1.5.1.3. Rapidly identifying high-risk persons requiring vaccine.
      - 1.5.1.4. Planning to prioritize limited medical countermeasures (MCM) based on guidance from CDC and the Department.
      - 1.5.1.5. Ensuring capacity for distribution of MCM and supplies.
    - 1.5.2. The Contractor shall plan and conduct mobile and other clinics to provide vaccinations against SARS-CoV-2 as directed by the Department and in accordance with all policies and procedures put forth by the Department.
  - 1.6. Surge Staffing
    - 1.6.1. The Contractor shall activate mechanisms for surging public health responder staff.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**Exhibit B-1**

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- 1.6.2. The Contractor shall recruit, enroll, activate, train and deploy volunteers, including but not limited to:
    - 1.6.2.1. Medical Reserve Corps (MRC).
    - 1.6.2.2. Citizens Emergency Response Teams (CERT).
  
  - 1.7. Public Health Coordination with Healthcare Systems
    - 1.7.1. The Contractor shall coordinate with the Granite State Healthcare Coalition, its member agencies, and other health care organizations, emergency management, and other relevant partners and stakeholders to assess the public health and medical surge needs of the community.
    - 1.7.2. The Contractor shall participate in the activation of Alternative Care Sites as requested by the sponsoring hospital(s).
  
  - 1.8. Jurisdictional Recovery
    - 1.8.1. By September 30, 2020, the Contractor shall conduct an After Action Review of activities conducted to date, including one (1) hotwash, and develop an After-Action Report /Improvement Plan, including corrective actions for improvement, timelines for their implementation and assignment to responsible parties, to guide future actions.
  
  - 1.9. Reporting
    - 1.9.1. The Contractor submit the following Public Health Emergency Preparedness information and reports to the Department.
      - 1.9.1.1. Information about COVID-19 activities in the current quarterly PHEP progress reports using an online system administered by the DPHS.
      - 1.9.1.2. Documentation for pertinent COVID-19 response activities necessary to complete the MCM Operational Readiness Review (ORR) or self-assessment as scheduled by DHHS.
      - 1.9.1.3. Final After Action Report/Improvement Plan for the activity described in paragraph 1.4.1.
      - 1.9.1.4. Final After Action Report(s)/Improvement Plan(s) for any other drill(s) or exercise(s) conducted.
      - 1.9.1.5. Other information that may be required by federal and state funders during the contract period.

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New Hampshire Department of Health and Human Services  
Regional Public Health Network Services



Exhibit B-1

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- 1.10. Training and Technical Assistance Requirements
    - 1.10.1. The Contractor shall attend meetings and trainings specific to COVID-19 preparedness and response convened by the Department.
  - 1.11. Adult Influenza Vaccinations
    - 1.11.1. The Contractor shall coordinate with local community-based agencies for the administration of influenza vaccines supplied by the New Hampshire Immunization Program (NHIP) to adults (nineteen (19) years or older) to clients of these agencies. The Contractor shall:
      - 1.11.1.1. Provide a Medical/Clinical Director to provide medical oversight, standing orders, emergency interventions/protocols and clinical expertise. The Contract shall ensure the Medical/Clinical Director is:
        - 1.11.1.1.1. Able to prescribe medication in the State of New Hampshire.
        - 1.11.1.1.2. Either a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
    - 1.11.2. The Contractor shall execute agreements with community-based agencies to operate vaccination clinics. Such agreements will include requirements to:
      - 1.11.2.1. Have copies of standing orders and emergency interventions/protocols available at all clinics.
      - 1.11.2.2. Recruit, train, and retain qualified medical and non-medical personnel to operate the clinics.
      - 1.11.2.3. Procure necessary supplies to conduct vaccine clinics, including, but not limited to, emergency management medications, equipment, and needles.
      - 1.11.2.4. Ensure proper vaccine storage, handling and management.
      - 1.11.2.5. Annually submit a signed Vaccine Management Agreement to NHIP to ensure that all listed requirements are met.
      - 1.11.2.6. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
      - 1.11.2.7. Record temperatures twice daily (AM and PM), during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator unit.

New Hampshire Department of Health and Human Services  
Regional Public Health Network Services



Exhibit B-1

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- 1.11.2.8. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
  - 1.11.2.9. Utilize a temperature data logger for all vaccine monitoring, including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
  - 1.11.2.10. Submit a monthly temperature log to the NHIP for the primary refrigerator storage.
  - 1.11.2.11. Track each vaccine dose provide by NHIP.
  - 1.11.2.12. Notify NHIP of any adverse event within 24 hours of the event occurring by contacting the NHIP Nursing help line and faxing incident forms, if this occurs:
    - 1.11.2.12.1.1. Immediately quarantine the vaccine in a temperature appropriate setting, separating it from other vaccine and labeling it "DO NOT USE".
    - 1.11.2.12.1.2. Contact the manufacturer immediately to explain the event duration and temperature information to determine if the vaccine is still viable.
    - 1.11.2.12.1.3. Notify NHIP immediately after contacting the manufacturer regarding any temperature excursion.
    - 1.11.2.12.1.4. Submit a Cold Chain Incident Report along with a Data Logger report to NHIP within 24 hours of temperature excursion occurrence.
  - 1.11.2.13. Within 24 hours of the completion of every clinic:
    - 1.11.2.13.1.1. Update the State Vaccination system with total number of vaccines administered and wasted during each mobile clinic.
    - 1.11.2.13.1.2. Ensure that doses administered in the inventory system match the clinical documentation of doses administered.
    - 1.11.2.13.1.3. Submit the hourly vaccine temperature log for the duration the vaccine is kept outside of the contractor's established vaccine refrigerator.
    - 1.11.2.13.1.4. Submit the following totals to NHIP outside of the vaccine ordering system:



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**Exhibit B-1**

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- 1.11.2.13.1.5. Total number of adults vaccinated by age ranges and other demographic indicators as determined by the Department.
  - 1.11.2.13.1.6. Total number of vaccines wasted.
  - 1.11.3. The Contractor in coordination with participating agencies shall complete an annual year-end self-evaluation and improvement plan that includes, but is not limited to, the following:
    - 1.11.3.1. Strategies that worked well in the areas of communication, logistics, or planning.
    - 1.11.3.2. Areas for improvement both at the state and regional levels, emphasizing strategies for implementing improvements.
    - 1.11.3.3. Future strategies and plans for increasing the number of vaccinated adults.
    - 1.11.3.4. Suggestions on how state level resources may aid increasing the number of vaccinated adults.

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**EXHIBIT C**

**Payment Terms**

1. This Agreement is funded by:
  - 1.1. Federal Funds from the US Centers for Disease Control and Prevention, Preventive Health Services, Catalog of Federal Domestic Assistance (CFDA #) 93.991, Federal Award Identification Number (FAIN) #B01OT009205.
  - 1.2. Federal Funds from the US Centers for Disease Control and Prevention, Public Health Emergency Preparedness Program, Catalog of Federal Domestic Assistance (CFDA #) 93.074 and 93.069, Federal Award Identification Number (FAIN) #U90TP000535, and General Funds.
  - 1.3. Federal Funds from the US DHHS, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention, Substance Abuse Prevention and Treatment Block Grant, Catalog of Federal Domestic Assistance (CFDA #) 93.959, Federal Award Identification Number (FAIN) #TI010035, and General Funds
  - 1.4. Federal Funds from the US DHHS, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention, NH Partnership for Success Initiative, Catalog of Federal Domestic Assistance (CFDA #) 93.243, Federal Award Identification Number (FAIN) #SP020796
  - 1.5. Federal Funds from the US Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Diseases, Catalog of Federal Domestic Assistance (CFDA #) 93.268, Federal Award Identification Number (FAIN) #H23IP000757
  - 1.6. Federal Funds from the US Department of Health and Human Services, Public Health Hospital Preparedness Program, Catalog of Federal Domestic Assistance (CFDA #) 93.074 and 93.889, Federal Award Identification Number (FAIN) #U90TP000535.
  - 1.7. Federal Funds from the US Department of Health and Human Services, Childhood Lead Poisoning Prevention and Surveillance Program, Catalog of Federal Domestic Assistance (CFDA #) 93.197, Federal Award Identification Number (FAIN) #NUE2EH001408.
  - 1.8. Federal Funds from the US Department of Health and Human Services, Climate, Catalog of Federal Domestic Assistance (CFDA #) 93.070, Federal Award Identification Number (FAIN) #NUEIEH001332.
  - 1.9. And General Funds from the State of New Hampshire.
2. For the purposes of this Agreement:
  - 2.1. The Department has identified the Contractor as a Subrecipient, in accordance with 2 CFR 200.331.

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**EXHIBIT C**

- 2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
- 2.3. The de minimis Indirect Cost Rate of 10% applies in accordance with 2 CFR §200.414.
3. 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, as specified in Exhibits C-1, Budget through Exhibit C-7, Budget.
  - 3.1. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit B-1 Additional Scope of Services COVID-19 Response.
  - 3.2. Payment for the I-CARE program shall be on a lump sum basis for authorized expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.
4. The Contractor shall submit an invoice in a form satisfactory to the Department by the fifteenth (15th) working day of the following month, which identifies and requests reimbursement for authorized expenses incurred in the prior month. The Contractor shall ensure the invoice is completed, dated and returned to the Department in order to initiate payment.
5. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to [DPHSCContractBilling@dhhs.nh.gov](mailto:DPHSCContractBilling@dhhs.nh.gov), or invoices may be mailed to:

Financial Manager  
Department of Health and Human Services  
129 Pleasant Street  
Concord, NH 03301
6. The Department 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, subject to Paragraph 4 of the General Provisions Form Number P-37 of this Agreement.
7. The final invoice shall be due to the Department no later than forty (40) days after the contract completion date specified in Form P-37, General Provisions Block 1.7 Completion Date.
8. The Contractor must provide the services in Exhibit B, Scope of Services, in compliance with funding requirements.
9. The Contractor agrees that funding under this Agreement may be withheld, in whole or in part in the event of non-compliance with the terms and conditions of Exhibit B, Scope of Services.
10. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this agreement may be withheld, in whole or in part, in the event

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**EXHIBIT C**

of non-compliance with any Federal or State law, rule or regulation applicable to the services provided, or if the said services or products have not been satisfactorily completed in accordance with the terms and conditions of this agreement.

11. Notwithstanding Paragraph 17 of the General Provisions Form P-37, changes limited to adjusting amounts within the price limitation and adjusting encumbrances between State Fiscal Years and budget class lines through the Budget Office may be made by written agreement of both parties, without obtaining approval of the Governor and Executive Council, if needed and justified.

12. Audits

12.1. The Contractor must email an annual audit to [melissa.s.morin@dhhs.nh.gov](mailto:melissa.s.morin@dhhs.nh.gov) if **any** of the following conditions exist:

12.1.1. Condition A - The Contractor expended \$750,000 or more in federal funds received as a subrecipient pursuant to 2 CFR Part 200, during the most recently completed fiscal year.

12.1.2. Condition B - The Contractor is subject to audit pursuant to the requirements of NH RSA 7:28, III-b, pertaining to charitable organizations receiving support of \$1,000,000 or more.

12.1.3. Condition C - The Contractor is a public company and required by Security and Exchange Commission (SEC) regulations to submit an annual financial audit.

12.2. If Condition A exists, the Contractor shall submit an annual single audit performed by an independent Certified Public Accountant (CPA) to the Department within 120 days after the close of the Contractor's fiscal year, conducted in accordance with the requirements of 2 CFR Part 200, Subpart F of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal awards.

12.3. If Condition B or Condition C exists, the Contractor shall submit an annual financial audit performed by an independent CPA within 120 days after the close of the Contractor's fiscal year.

12.4. 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.

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Exhibit C-1 Budget

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

Contractor Name: Cheshire Medical Center

Budget Request for: I-Care

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Consultants	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 2,247.73	\$ 224.77	\$ 2,472.50	\$ -	\$ -	\$ -	\$ 2,247.73	\$ 224.77	\$ 2,472.50
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 5,000.00	\$ 500.00	\$ 5,500.00	\$ -	\$ -	\$ -	\$ 5,000.00	\$ 500.00	\$ 5,500.00
11. Staff Education and Training	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
12. Subcontracts/Agreements	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
13. Other (specify details in hand sticky):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cultural/Linguistic Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 7,272.73</b>	<b>\$ 727.27</b>	<b>\$ 8,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 7,272.73</b>	<b>\$ 727.27</b>	<b>\$ 8,000.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

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Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_

Exhibit C-2 Budget

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

Contractor Name: Cheshire Medical Center

Budget Request for: Climate and Health Adaptation

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 36,363.64	\$ 3,636.36	\$ 40,000.00	\$ -	\$ -	\$ -	\$ 36,363.64	\$ 3,636.36	\$ 40,000.00
13. Other (specific if it is mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cultural/Linguistic Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 36,363.64</b>	<b>\$ 3,636.36</b>	<b>\$ 40,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 36,363.64</b>	<b>\$ 3,636.36</b>	<b>\$ 40,000.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

DS  
06

Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_

Exhibit C-3 Budget

DocuSign Envelope ID: 33FFFF15-E374-49D5-B4C1-5F4C4F5B87F9

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

Contractor Name: Cheshire Medical Center

Budget Request for: Continuum of Care

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 22,547.20	\$ 2,254.72	\$ 24,801.92	\$ -	\$ -	\$ -	\$ 22,547.20	\$ 2,254.72	\$ 24,801.92
2. Employee Benefits	\$ 6,065.20	\$ 606.52	\$ 6,671.72	\$ -	\$ -	\$ -	\$ 6,065.20	\$ 606.52	\$ 6,671.72
3. Consultants	\$ 2,953.40	\$ 295.34	\$ 3,248.74	\$ -	\$ -	\$ -	\$ 2,953.40	\$ 295.34	\$ 3,248.74
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ 370.00	\$ 37.00	\$ 407.00	\$ -	\$ -	\$ -	\$ 370.00	\$ 37.00	\$ 407.00
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
6. Travel	\$ 1,500.00	\$ 150.00	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ 150.00	\$ 1,650.00
7. Occupancy	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 390.57	\$ 39.06	\$ 429.63	\$ -	\$ -	\$ -	\$ 390.57	\$ 39.06	\$ 429.63
Subscriptions	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ 100.00	\$ 10.00	\$ 110.00	\$ -	\$ -	\$ -	\$ 100.00	\$ 10.00	\$ 110.00
9. Software	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
10. Marketing/Communications	\$ 900.00	\$ 90.00	\$ 990.00	\$ -	\$ -	\$ -	\$ 900.00	\$ 90.00	\$ 990.00
11. Staff Education and Training	\$ 1,200.00	\$ 120.00	\$ 1,320.00	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 120.00	\$ 1,320.00
12. Subcontracts/Agreements	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
13. Other (specify details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cultural/Linguistic Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 36,056.37</b>	<b>\$ 3,605.64</b>	<b>\$ 39,662.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 36,056.37</b>	<b>\$ 3,605.64</b>	<b>\$ 39,662.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

DS  
OC

Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_

Exhibit C-4 Budget

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

Contractor Name: Cheshire Medical Center

Budget Request for: Hospital Preparedness

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 7,000.00	\$ 700.00	\$ 7,700.00	\$ -	\$ -	\$ -	\$ 7,000.00	\$ 700.00	\$ 7,700.00
2. Employee Benefits	\$ 1,883.00	\$ 188.30	\$ 2,071.30	\$ -	\$ -	\$ -	\$ 1,883.00	\$ 188.30	\$ 2,071.30
3. Consultants	\$ 162.91	\$ 16.29	\$ 179.20	\$ -	\$ -	\$ -	\$ 162.91	\$ 16.29	\$ 179.20
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
6. Travel	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
7. Occupancy	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
9. Software	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
10. Marketing/Communications	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
11. Staff Education and Training	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
12. Subcontracts/Agreements	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses			\$ -	\$ -	\$ -	\$ -			\$ -
Cultural/Linguistic Support			\$ -	\$ -	\$ -	\$ -			\$ -
<b>TOTAL</b>	<b>\$ 9,090.91</b>	<b>\$ 909.09</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,090.91</b>	<b>\$ 909.09</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

DS  
OC

Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_

Exhibit C-5 Budget

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

Contractor Name: Cheshire Medical Center

Budget Request for: Public Health Advisory Council

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 9,152.00	\$ 915.20	\$ 10,067.20	\$ -	\$ -	\$ -	\$ 9,152.00	\$ 915.20	\$ 10,067.20
2. Employee Benefits	\$ 2,461.89	\$ 246.19	\$ 2,708.08	\$ -	\$ -	\$ -	\$ 2,461.89	\$ 246.19	\$ 2,708.08
3. Consultants	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 100.00	\$ 10.00	\$ 110.00	\$ -	\$ -	\$ -	\$ 100.00	\$ 10.00	\$ 110.00
6. Travel	\$ 995.00	\$ 99.50	\$ 1,094.50	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 100.00	\$ 1,100.00
7. Occupancy	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ 300.00	\$ 30.00	\$ 330.00	\$ -	\$ -	\$ -	\$ 300.00	\$ 30.00	\$ 330.00
9. Software	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 4,995.00	\$ 499.50	\$ 5,494.50	\$ -	\$ -	\$ -	\$ 5,000.00	\$ 500.00	\$ 5,500.00
11. Staff Education and Training	\$ 1,500.00	\$ 150.00	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ 150.00	\$ 1,650.00
12. Subcontracts/Agreements	\$ 7,748.84	\$ 774.88	\$ 8,523.72	\$ -	\$ -	\$ -	\$ 7,748.84	\$ 774.88	\$ 8,523.72
13. Other (specify details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cultural/Linguistic Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 27,272.73</b>	<b>\$ 2,727.27</b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 27,272.73</b>	<b>\$ 2,727.27</b>	<b>\$ 30,000.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

DS  
OC

Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_

Exhibit C-6 Budget

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

Contractor Name: Cheshire Medical Center

Budget Request for: Public Health Emergency Preparedness

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 55,016.00	\$ 5,501.60	\$ 60,517.60	\$ -	\$ -	\$ -	\$ 55,016.00	\$ 5,501.60	\$ 60,517.60
2. Employee Benefits	\$ 14,799.30	\$ 1,479.93	\$ 16,279.23	\$ -	\$ -	\$ -	\$ 14,799.30	\$ 1,479.93	\$ 16,279.23
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1,500.00	\$ 150.00	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ 150.00	\$ 1,650.00
6. Travel	\$ 2,000.00	\$ 200.00	\$ 2,200.00	\$ -	\$ -	\$ -	\$ 2,000.00	\$ 200.00	\$ 2,200.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ 600.00	\$ 60.00	\$ 660.00	\$ -	\$ -	\$ -	\$ 600.00	\$ 60.00	\$ 660.00
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 3,000.00	\$ 300.00	\$ 3,300.00	\$ -	\$ -	\$ -	\$ 3,000.00	\$ 300.00	\$ 3,300.00
11. Staff Education and Training	\$ 1,500.00	\$ 150.00	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ 150.00	\$ 1,650.00
12. Subcontracts/Agreements	\$ 3,287.85	\$ 365.32	\$ 3,653.17	\$ -	\$ -	\$ -	\$ 3,287.85	\$ 365.32	\$ 3,653.17
13. Other (specify details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cultural/Linguistic Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 81,703.15</b>	<b>\$ 8,206.85</b>	<b>\$ 89,910.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 81,703.15</b>	<b>\$ 8,206.85</b>	<b>\$ 89,910.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

DS  
OC

Contractor Initials \_\_\_\_\_

Date \_\_\_\_\_

Exhibit C-7 Budget

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

Contractor Name: Cheshire Medical Center  
Budget Request for: Substance Misuse Prevention  
Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 47,840.00	\$ 4,784.00	\$ 52,624.00	\$ -	\$ -	\$ -	\$ 47,840.00	\$ 4,784.00	\$ 52,624.00
2. Employee Benefits	\$ 12,868.96	\$ 1,286.90	\$ 14,155.86	\$ -	\$ -	\$ -	\$ 12,868.96	\$ 1,286.90	\$ 14,155.86
3. Consultants	\$ 2,000.00	\$ 200.00	\$ 2,200.00	\$ -	\$ -	\$ -	\$ 2,000.00	\$ 200.00	\$ 2,200.00
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
6. Travel	\$ 1,500.00	\$ 150.00	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ 150.00	\$ 1,650.00
7. Occupancy	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 1,500.00	\$ -	\$ 1,500.00	\$ -	\$ -	\$ -	\$ 1,500.00	\$ -	\$ 1,500.00
Subscriptions	\$ 5.00	\$ -	\$ 5.00	\$ -	\$ -	\$ -	\$ 5.00	\$ -	\$ 5.00
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ 300.00	\$ 30.00	\$ 330.00	\$ -	\$ -	\$ -	\$ 300.00	\$ 30.00	\$ 330.00
9. Software	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
10. Marketing/Communications	\$ 4,000.00	\$ 400.00	\$ 4,400.00	\$ -	\$ -	\$ -	\$ 4,000.00	\$ 400.00	\$ 4,400.00
11. Staff Education and Training	\$ 1,756.04	\$ 175.60	\$ 1,931.64	\$ -	\$ -	\$ -	\$ 1,756.04	\$ 175.60	\$ 1,931.64
12. Subcontracts/Agreements	\$ 5.00	\$ 0.50	\$ 5.50	\$ -	\$ -	\$ -	\$ 5.00	\$ 0.50	\$ 5.50
13. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipend/Meeting expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Cultural/Linguistic Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 72,295.00</b>	<b>\$ 7,029.00</b>	<b>\$ 79,324.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 72,295.00</b>	<b>\$ 7,029.00</b>	<b>\$ 79,324.00</b>

Indirect As A Percent of Direct 10.0%

6/14/2021

DS  
06

Vendor Name: The Cheshire Medical Center  
 Contract Name: Regional Public Health Network Services  
 Region: Greater Monadnock

Program Name and Funding Amounts

State Fiscal Year	I-Care	COVID	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Hospital Preparedness	Substance Misuse Prevention	Continuum of Care	Climate and Health Adaptation	Total
2022	\$ 8,000	\$ 110,364	\$ 30,000	\$ 89,910		\$ 10,000	\$ 79,324	\$ 39,662	\$ 40,000	\$ 407,260
<b>Total</b>	<b>\$ 8,000</b>		<b>\$ 30,000</b>	<b>\$ 89,910</b>	<b>\$ -</b>	<b>\$ 10,000</b>	<b>\$ 79,324</b>	<b>\$ 39,662</b>	<b>\$ 40,000</b>	<b>\$ 407,260</b>

Exhibit C-9

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

Instructions: Fill out the Direct/Indirect columns only for Contractor Share (if applicable) and Funded by DHHS. Everything else will automatically populate.

Contractor Name: Cheshire Medical Center

Budget Request for: FEMA COVID Funds

Project Title

Budget Period: FY22 (July 2021 - June 2022)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 65,520.00	\$ 6,552.00	\$ 72,072.00	\$ -	\$ -	\$ -	\$ 65,520.00	\$ 6,552.00	\$ 72,072.00
2. Employee Benefits	\$ 20,311	\$ 2,031	\$ 22,342	\$ -	\$ -	\$ -	\$ 20,311.20	\$ 2,031.12	\$ 22,342.32
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 5,000.00	\$ 500.00	\$ 5,500.00	\$ -	\$ -	\$ -	\$ 5,000.00	\$ 500.00	\$ 5,500.00
Office	\$ 2,000.00	\$ 200.00	\$ 2,200.00	\$ -	\$ -	\$ -	\$ 2,000.00	\$ 200.00	\$ 2,200.00
6. Travel	\$ 2,500.00	\$ 250.00	\$ 2,750.00	\$ -	\$ -	\$ -	\$ 2,500.00	\$ 250.00	\$ 2,750.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 5,000.00	\$ 500.00	\$ 5,500.00	\$ -	\$ -	\$ -	\$ 5,000.00	\$ 500.00	\$ 5,500.00
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ 100,331	\$ 10,033	\$ 110,364	\$ -	\$ -	\$ -	\$ 100,331	\$ 10,033	\$ 110,364

Indirect As A Percent of Direct 10.0%

DS  
 DG

Exhibit C-9  
 The Cheshire Medical Center

Contractor Initials \_\_\_\_\_  
 Date 6/14/2021

**New Hampshire Department of Health and Human Services  
Exhibit D**



**CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS**

The Vendor 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 GRANTEEES 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

<sup>DS</sup>  
DG



New Hampshire Department of Health and Human Services  
Exhibit D

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.

Vendor Name:

6/14/2021

Date

DocuSigned by:  
  
 Name: Daniel Gross  
 Title: CFO

Vendor Initials   
 Date 6/14/2021



New Hampshire Department of Health and Human Services  
Exhibit E

CERTIFICATION REGARDING LOBBYING

The Vendor 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:

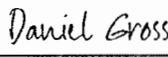
1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection 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.

Vendor Name:

6/14/2021

Date

DocuSigned by:  
  
 Name: Daniel Gross  
 Title: CFO

DS  


**New Hampshire Department of Health and Human Services  
Exhibit F**



**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

<sup>DS</sup>  
DG



**New Hampshire Department of Health and Human Services  
Exhibit F**

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 (l)(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:

6/14/2021

Date

DocuSigned by:  
*Daniel Gross*  
Name: Daniel Gross  
Title: CFO

DS  
DG

Contractor Initials  
Date 6/14/2021



New Hampshire Department of Health and Human Services  
Exhibit G

**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

Contractor Initials DS  
DG

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



New Hampshire Department of Health and Human Services  
Exhibit G

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:

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

Contractor Name:

6/14/2021

Date

DocuSigned by:

*Daniel Gross*

Name: Daniel Gross

Title: CFO

Exhibit G

Contractor Initials <sup>DS</sup>  
DG

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

New Hampshire Department of Health and Human Services  
Exhibit H



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:

6/14/2021

Date

DocuSigned by:

*Daniel Gross*

Name: Daniel Gross

Title: CFO

DS  
DG

Contractor Initials  
Date 6/14/2021



## New Hampshire Department of Health and Human Services

## Exhibit I

**HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY 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.

3/2014

Exhibit I  
 Health Insurance Portability Act  
 Business Associate Agreement  
 Page 1 of 6

Contractor Initials   DG  Date   6/14/2021



New Hampshire Department of Health and Human Services

Exhibit I

- I. “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



New Hampshire Department of Health and Human Services

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



## New Hampshire Department of Health and Human Services

## 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 Associate possesses

3/2014

Contractor Initials DGDate 6/14/2021



## New Hampshire Department of Health and Human Services

## 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. DG



New Hampshire Department of Health and Human Services

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

Cheshire Medical Center

The State

Name of the Contractor

Patricia M. Tilley

Daniel Gross

Signature of Authorized Representative

Signature of Authorized Representative

Patricia M. Tilley

Daniel Gross

Name of Authorized Representative  
Director

Name of Authorized Representative

Title of Authorized Representative

CFO

Title of Authorized Representative

6/14/2021

6/14/2021

Date

Date



New Hampshire Department of Health and Human Services  
Exhibit J

**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.

Contractor Name:

6/14/2021

Date

DocuSigned by:

*Daniel Gross*

Name: Daniel P. Gross

Title: CFO

DS  
DG

Contractor Initials

Date 6/14/2021



New Hampshire Department of Health and Human Services  
Exhibit J

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: 073970238

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: _____

# New Hampshire Department of Health and Human Services

## Exhibit K

### DHHS Information Security Requirements



#### A. Definitions

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

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.
3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

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

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

New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements



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

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

**I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR**

**A. Business Use and Disclosure of Confidential Information.**

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

New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements



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

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

**II. METHODS OF SECURE TRANSMISSION OF DATA**

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

## New Hampshire Department of Health and Human Services

### Exhibit K

## DHHS Information Security Requirements



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

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

### III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS

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

#### A. Retention

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

New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements



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

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

B. Disposition

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

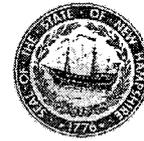
IV. PROCEDURES FOR SECURITY

- A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:
  1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.
  2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

## New Hampshire Department of Health and Human Services

### Exhibit K

### DHHS Information Security Requirements



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

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New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements



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

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

# New Hampshire Department of Health and Human Services

## Exhibit K

### DHHS Information Security Requirements



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

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

#### V. LOSS REPORTING

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

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

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

New Hampshire Department of Health and Human Services

Exhibit K

DHHS Information Security Requirements



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5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

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

**VI. PERSONS TO CONTACT**

A. DHHS Privacy Officer:

DHHSPrivacyOfficer@dhhs.nh.gov

B. DHHS Security Officer:

DHHSInformationSecurityOffice@dhhs.nh.gov

# State of New Hampshire

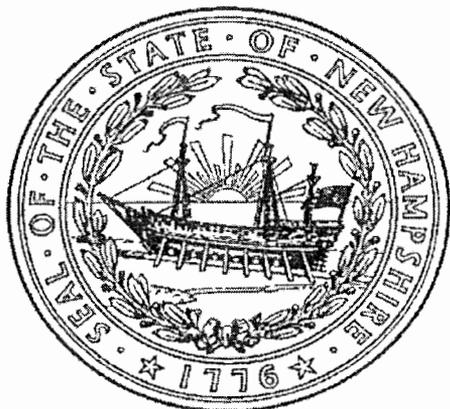
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that THE CHESHIRE MEDICAL CENTER is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on October 31, 1980. 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: **62567**

Certificate Number: **0005380072**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 11th day of June A.D. 2021.

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

William M. Gardner  
Secretary of State

**CERTIFICATE OF AUTHORITY**

I, Robert Mitchell \_\_\_\_\_, hereby certify that  
(Name of the elected Officer of the Corporation/LLC, cannot be contract signatory)

1 I am a duly elected Secretary of Cheshire Medical Center \_\_\_\_\_  
(Corporation/LLC Name)

2 The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on June 10, 2021, at which a quorum of the Directors/shareholders were present and voting  
(Date)

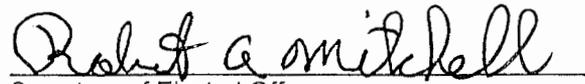
**VOTED:** That Don Caruso, Kathryn Willbarger or Daniel Gross \_\_\_\_\_ (may list more than one person)  
(Name and Title of Contract Signatory)

is duly authorized on behalf of Cheshire Medical Center to enter into contracts or agreements with the State  
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote

3 I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 6/11/21

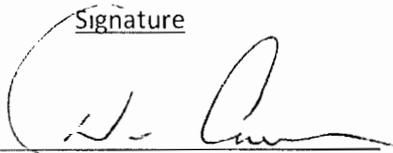
  
\_\_\_\_\_  
Signature of Elected Officer  
Name Robert Mitchell  
Title Secretary, Cheshire Medical Center,  
Board of Trustees

RESOLUTION

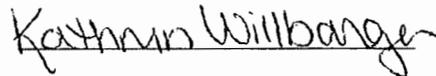
That Don Caruso, Chief Executive Officer/President; Kathryn Willbarger, Chief Operating Officer; Daniel Gross, Chief Financial Officer and their successors in office are hereby jointly and severally authorized and empowered on behalf of Cheshire Medical Center to exercise options and/or rights, warrants, and other securities, and to sell, assign, and transfer all or any stock rights, warrants, bonds, and/or securities hereafter standing or registered in the name of Cheshire Medical Center or Cheshire Health Foundation; to execute the instruments proper or necessary to effect any such purchase and/or transfers and to sell and convey real estate, and to enter into contractual arrangements for any and all Cheshire Medical Center's or Cheshire Health Foundation's regular and program affairs with other institutions and private parties.

That It Be Further Resolved that any and all Resolutions heretofore adopted inconsistent with the above Resolution be and they are hereby rescinded.

Don Caruso

Signature  


Kathryn Willbarger



Daniel Gross



I hereby certify that the above is a true copy of a Resolution unanimously adopted at a meeting of the Board of Trustees of Cheshire Medical Center held on June 10, 2021.



Robert Mitchell  
Secretary

**CERTIFICATE OF INSURANCE**

DATE: June 14, 2021

**COMPANY AFFORDING COVERAGE**

Hamden Assurance Risk Retention Group, Inc.  
P.O. Box 1687  
30 Main Street, Suite 330  
Burlington, VT 05401

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

**INSURED**

Cheshire Medical Center  
580 Court St  
Keene, NH 03431  
(603)653-6850

**COVERAGES**

The Policy listed below has been issued to the Named Insured above for the Policy Period notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued. The insurance afforded by the policy is subject to all the terms, exclusions and conditions of the policy. Limits shown may have been reduced by paid claims.

TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS	
General Liability		0002021-A	07/01/2021	07/01/2022	EACH OCCURRENCE	\$1,000,000
					DAMAGE TO RENTED PREMISES	\$100,000
					MEDICAL EXPENSES	N/A
					PERSONAL & ADV INJURY	\$1,000,000
					GENERAL AGGREGATE	
					PRODUCTS-COMP/OP AGG	\$1,000,000
<b>OTHER</b>					EACH CLAIM	
					ANNUAL AGGREGATE	
<b>OTHER</b>						

**DESCRIPTION OF OPERATIONS/ LOCATIONS/ VEHICLES/ SPECIAL ITEMS (LIMITS MAY BE SUBJECT TO RETENTIONS)**

**Cheshire Medical Center**, is insured under the terms and conditions of Policy No: 0002021-A. This insurance applies to services provided in the states of NH, VT, MA, MD and ME only.

**CERTIFICATE HOLDER**

State of NH  
Department of Health and Human Services  
129 Pleasant Street  
Concord, NH 03301-3857

**CANCELLATION**

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 DAYS written notice to the certificate holder named below, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

**AUTHORIZED REPRESENTATIVES**



DARTHIT-01

LSTILES

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/11/2021

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 License # 1780862 HUB International New England 275 US Route 1 Cumberland Foreside, ME 04110	CONTACT NAME: <b>Lauren Stiles</b> PHONE (A/C, No, Ext): _____ FAX (A/C, No): _____ E-MAIL ADDRESS: <b>Lauren.Stiles@hubinternational.com</b>														
INSURED  <b>Dartmouth-Hitchcock Health</b> <b>1 Medical Center Dr.</b> <b>Lebanon, NH 03756</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : <b>Safety National Casualty Corporation</b></td> <td style="text-align: center;"><b>15105</b></td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : <b>Safety National Casualty Corporation</b>	<b>15105</b>	INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
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INSURER F :															

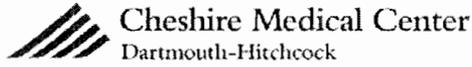
**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: _____						EACH OCCURRENCE \$ _____ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ _____ MED EXP (Any one person) \$ _____ PERSONAL & ADV INJURY \$ _____ GENERAL AGGREGATE \$ _____ PRODUCTS - COMP/OP AGG \$ _____ _____ \$ _____
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ _____ BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____ _____ \$ _____
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED _____ RETENTIONS _____						EACH OCCURRENCE \$ _____ AGGREGATE \$ _____ _____ \$ _____
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A		<b>AGC4063394</b>	<b>7/1/2020</b>	<b>7/1/2021</b>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
**Evidence of Workers Compensation coverage for Cheshire Medical Center.**

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Health and Human Services 129 Pleasant Street Concord, NH 03301-3857	<b>CANCELLATION</b>  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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# Strategic

[Home](#) | [Our Mission, Vision, & Values](#) | [Quality and Safety](#) | [Our Patients](#) | [Our People](#) | [Our Organization](#) | [Our Community](#) | [Messaging Objectives](#)

## **MISSION:**

To lead our community to optimal health and wellness through our clinical and service excellence, collaboration, and compassion for every patient, every time.

Search for:

Strategic Plan - © 2021

# **Dartmouth-Hitchcock Health and Subsidiaries**

**Consolidated Financial Statements  
June 30, 2020 and 2019**

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Index**  
**June 30, 2020 and 2019**

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## Report of Independent Auditors

To the Board of Trustees of  
Dartmouth-Hitchcock Health and subsidiaries

We have audited the accompanying consolidated financial statements of Dartmouth-Hitchcock Health and its subsidiaries (the "Health System"), which comprise the consolidated balance sheets as of June 30, 2020 and 2019, and the related consolidated statements of operations and changes in net assets and of cash flows for the years then ended.

### ***Management's Responsibility for the Consolidated Financial Statements***

Management is responsible for the preparation and fair presentation of the 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.

### ***Auditors' Responsibility***

Our responsibility is to express an opinion on the consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from 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 our 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, we consider internal control relevant to the Health System'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 Health System'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 Dartmouth-Hitchcock Health and its subsidiaries as of June 30, 2020 and 2019, and the results of their operations, changes in net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.



***Emphasis of Matter***

As discussed in Note 2 to the consolidated financial statements, the Health System changed the manner in which it accounts for leases and the presentation of net periodic pension costs in 2020. Our opinion is not modified with respect to these matters.

***Other Matter***

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements taken as a whole. The consolidating 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 consolidating 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 consolidating information is fairly stated, in all material respects, in relation to the consolidated financial statements taken as a whole. The consolidating information is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, results of operations, changes in net assets and cash flows of the individual companies and is not a required part of the consolidated financial statements. Accordingly, we do not express an opinion on the financial position, results of operations, changes in net assets and cash flows of the individual companies.

*Princeton House Cooper LLP*

Boston, Massachusetts  
November 17, 2020

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Balance Sheets

#### June 30, 2020 and 2019

*(in thousands of dollars)*

	<b>2020</b>	<b>2019</b>
<b>Assets</b>		
Current assets		
Cash and cash equivalents	\$ 453,223	\$ 143,587
Patient accounts receivable (Note 4)	183,819	221,125
Prepaid expenses and other current assets	161,906	95,495
Total current assets	798,948	460,207
Assets limited as to use (Notes 5 and 7)	1,134,526	876,249
Other investments for restricted activities (Notes 5 and 7)	140,580	134,119
Property, plant, and equipment, net (Note 6)	643,586	621,256
Right of use assets, net (Note 16)	57,585	-
Other assets	137,338	124,471
Total assets	\$ 2,912,563	\$ 2,216,302
<b>Liabilities and Net Assets</b>		
Current liabilities		
Current portion of long-term debt (Note 10)	\$ 9,467	\$ 10,914
Current portion of right of use obligations (Note 16)	11,775	-
Current portion of liability for pension and other postretirement plan benefits (Note 11 and 14)	3,468	3,468
Accounts payable and accrued expenses	129,016	113,817
Accrued compensation and related benefits	142,991	128,408
Estimated third-party settlements (Note 4 and 17)	302,525	41,570
Total current liabilities	599,242	298,177
Long-term debt, excluding current portion (Note 10)	1,138,530	752,180
Long-term right of use obligations, excluding current portion (Note 16)	46,456	-
Insurance deposits and related liabilities (Note 12)	77,146	58,407
Liability for pension and other postretirement plan benefits, excluding current portion (Note 11 and 14)	324,257	281,009
Other liabilities	143,678	124,136
Total liabilities	2,329,309	1,513,909
Commitments and contingencies (Notes 4, 6, 7, 10, 13, 16 and 17)		
Net assets		
Net assets without donor restrictions (Note 9)	431,026	559,933
Net assets with donor restrictions (Notes 8 and 9)	152,228	142,460
Total net assets	583,254	702,393
Total liabilities and net assets	\$ 2,912,563	\$ 2,216,302

The accompanying notes are an integral part of these consolidated financial statements.

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Consolidated Statements of Operations and Changes in Net Assets**  
**Years Ended June 30, 2020 and 2019**

<i>(in thousands of dollars)</i>	<b>2020</b>	<b>2019</b>
<b>Operating revenue and other support</b>		
Patient service revenue (Note 4)	\$ 1,880,025	\$ 1,999,323
Contracted revenue	74,028	75,017
Other operating revenue (Note 5)	374,622	210,698
Net assets released from restrictions	16,260	14,105
Total operating revenue and other support	<u>2,344,935</u>	<u>2,299,143</u>
<b>Operating expenses</b>		
Salaries	1,144,823	1,062,551
Employee benefits	272,872	262,812
Medications and medical supplies	455,381	407,875
Purchased services and other	360,496	323,435
Medicaid enhancement tax (Note 4)	76,010	70,061
Depreciation and amortization	92,164	88,414
Interest (Note 10)	27,322	25,514
Total operating expenses	<u>2,429,068</u>	<u>2,240,662</u>
Operating (loss) income	<u>(84,133)</u>	<u>58,481</u>
<b>Non-operating gains (losses)</b>		
Investment income, net (Note 5)	27,047	40,052
Other components of net periodic pension and post retirement benefit income (Note 11)	10,810	11,221
Other losses, net (Note 10)	(2,707)	(3,562)
Loss on early extinguishment of debt	-	(87)
Total non-operating gains, net	<u>35,150</u>	<u>47,624</u>
(Deficiency) excess of revenue over expenses	<u>\$ (48,983)</u>	<u>\$ 106,105</u>

Consolidated Statements of Operations and Changes in Net Assets – Continues on Next Page

The accompanying notes are an integral part of these consolidated financial statements.

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Consolidated Statements of Operations and Changes in Net Assets - Continued**  
**Years Ended June 30, 2020 and 2019**

<i>(in thousands of dollars)</i>	2020	2019
<b>Net assets without donor restrictions</b>		
(Deficiency) excess of revenue over expenses	\$ (48,983)	\$ 106,105
Net assets released from restrictions for capital	1,414	1,769
Change in funded status of pension and other postretirement benefits (Note 11)	(79,022)	(72,043)
Other changes in net assets	<u>(2,316)</u>	<u>-</u>
(Decrease) increase in net assets without donor restrictions	<u>(128,907)</u>	<u>35,831</u>
<b>Net assets with donor restrictions</b>		
Gifts, bequests, sponsored activities	26,312	17,436
Investment income, net	1,130	2,682
Net assets released from restrictions	(17,674)	(15,874)
Contribution of assets with donor restrictions from acquisition	<u>-</u>	<u>383</u>
Increase in net assets with donor restrictions	<u>9,768</u>	<u>4,627</u>
Change in net assets	(119,139)	40,458
<b>Net assets</b>		
Beginning of year	<u>702,393</u>	<u>661,935</u>
End of year	<u>\$ 583,254</u>	<u>\$ 702,393</u>

The accompanying notes are an integral part of these consolidated financial statements.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Statements of Cash Flows

#### Years Ended June 30, 2020 and 2019

<i>(in thousands of dollars)</i>	2020	2019
<b>Cash flows from operating activities</b>		
Change in net assets	\$ (119,139)	\$ 40,458
Adjustments to reconcile change in net assets to net cash provided by operating and non-operating activities		
Depreciation and amortization	93,857	88,770
Amortization of right of use asset	8,218	-
Payments on right of use lease obligations - operating	(7,941)	-
Change in funded status of pension and other postretirement benefits	79,022	72,043
Gain on disposal of fixed assets	(39)	(1,101)
Net realized gains and change in net unrealized gains on investments	(14,060)	(31,397)
Restricted contributions and investment earnings	(3,605)	(2,292)
Proceeds from sales of securities	-	1,167
Changes in assets and liabilities		
Patient accounts receivable	37,306	(1,803)
Prepaid expenses and other current assets	(78,907)	2,149
Other assets, net	(13,385)	(9,052)
Accounts payable and accrued expenses	9,772	17,898
Accrued compensation and related benefits	14,583	2,335
Estimated third-party settlements	260,955	429
Insurance deposits and related liabilities	18,739	2,378
Liability for pension and other postretirement benefits	(35,774)	(33,104)
Other liabilities	19,542	12,267
Net cash provided by operating and non-operating activities	<u>269,144</u>	<u>161,145</u>
<b>Cash flows from investing activities</b>		
Purchase of property, plant, and equipment	(128,019)	(82,279)
Proceeds from sale of property, plant, and equipment	2,987	2,188
Purchases of investments	(321,152)	(361,407)
Proceeds from maturities and sales of investments	82,986	219,996
Cash received through acquisition	-	4,863
Net cash used in investing activities	<u>(363,198)</u>	<u>(216,639)</u>
<b>Cash flows from financing activities</b>		
Proceeds from line of credit	35,000	30,000
Payments on line of credit	(35,000)	(30,000)
Repayment of long-term debt	(10,665)	(29,490)
Proceeds from issuance of debt	415,336	26,338
Repayment of finance lease	(2,429)	-
Payment of debt issuance costs	(2,157)	(228)
Restricted contributions and investment earnings	3,605	2,292
Net cash provided by (used in) financing activities	<u>403,690</u>	<u>(1,088)</u>
Increase (decrease) in cash and cash equivalents	309,636	(56,582)
<b>Cash and cash equivalents</b>		
Beginning of year	<u>143,587</u>	<u>200,169</u>
End of year	<u>\$ 453,223</u>	<u>\$ 143,587</u>
<b>Supplemental cash flow information</b>		
Interest paid	\$ 22,562	\$ 23,977
Net assets acquired as part of acquisition, net of cash acquired	-	(4,863)
Construction in progress included in accounts payable and accrued expenses	17,177	1,546
Donated securities	-	1,167

The accompanying notes are an integral part of these consolidated financial statements.

# Dartmouth-Hitchcock Health and Subsidiaries

## Consolidated Notes to Financial Statements

### June 30, 2020 and 2019

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#### 1. Organization and Community Benefit Commitments

Dartmouth-Hitchcock Health (D-HH) serves as the sole corporate member of the following entities: Dartmouth-Hitchcock Clinic and Subsidiaries (DHC), Mary Hitchcock Memorial Hospital and Subsidiaries (MHMH), (DHC and MHMH together are referred to as D-H), The New London Hospital Association and Subsidiaries (NLH), Windsor Hospital Corporation (d/b/a Mt. Ascutney Hospital and Health Center) and Subsidiaries (MAHHC), Cheshire Medical Center and Subsidiaries (Cheshire), Alice Peck Day Memorial Hospital and Subsidiary (APD), and the Visiting Nurse and Hospice for Vermont and New Hampshire and Subsidiaries (VNH). The "Health System" consists of D-HH, its members and their subsidiaries.

The Health System currently operates one tertiary, one community and three acute care (critical access) hospitals in New Hampshire (NH) and Vermont (VT). One facility provides inpatient and outpatient rehabilitation medicine and long-term care. The Health System also operates multiple physician practices, a nursing home, a continuing care retirement community, and a home health and hospice service. The Health System operates a graduate level program for health professions and is the principal teaching affiliate of the Geisel School of Medicine (Geisel), a component of Dartmouth College.

D-HH, Dartmouth-Hitchcock Clinic, Mary Hitchcock Memorial Hospital, The New London Hospital Association, Cheshire Medical Center, and Alice Peck Day Memorial Hospital are NH not-for-profit corporations exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (IRC). Windsor Hospital Corporation and the Visiting Nurse and Hospice for VT and NH are VT not-for-profit corporations exempt from federal income taxes under Section 501(c)(3) of the IRC.

On September 30, 2019, D-HH and GraniteOne Health ("GOH") entered into an agreement ("The Combination Agreement") to combine their respective healthcare systems. The GOH system is comprised of Catholic Medical Center ("CMC"), an acute care community hospital in Manchester, New Hampshire, Huggins Hospital ("HH") located in Wolfeboro, NH and Monadnock Community Hospital, ("MCH") located in Petersborough, NH. Both HH and MCH are designated as Critical Access Hospitals. The three member hospitals of GOH have a combined licensed bed count of 380 beds. GOH is a non-profit, community based health care system. The overarching rationale for the proposed combination is to improve access to high quality primary and specialty care in the most convenient, cost-effective sites of service for patients and the communities served by D-HH and GOH. Other stated benefits of the combination include reinforcing the rural health network, investing in needed capacity to accommodate unmet and anticipated demand, and drawing on our combined strengths to attract the necessary health care workforce. The parties have submitted regulatory filings with the Federal Trade Commission and the New Hampshire Attorney General's office seeking approval of the proposed transaction.

#### Community Benefits

The mission of the Health System is to advance health through clinical practice and community partnerships, research and education, providing each person the best care, in the right place, at the right time, every time.

Consistent with this mission, the Health System provides high quality, cost effective, comprehensive, and integrated healthcare to individuals, families, and the communities it serves regardless of a patient's ability to pay. The Health System actively supports community-based healthcare and promotes the coordination of services among healthcare providers and social services organizations. In addition, the Health System also seeks to work collaboratively with other

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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area healthcare providers to improve the health status of the region. As a component of an integrated academic medical center, the Health System provides significant support for academic and research programs.

Certain member hospitals of the Health System file annual Community Benefits Reports with the State of NH which outline the community and charitable benefits each provides. VT hospitals are not required by law to file a state community benefit report. The categories used in the Community Benefit Reports to summarize these benefits are as follows:

- *Community Health Services* include activities carried out to improve community health and could include community health education (such as classes, programs, support groups, and materials that promote wellness and prevent illness), community-based clinical services (such as free clinics and health screenings), and healthcare support services (enrollment assistance in public programs, assistance in obtaining free or reduced costs medications, telephone information services, or transportation programs to enhance access to care, etc.).
- *Health Professions Education* includes uncompensated costs of training medical students, Residents, nurses, and other health care professionals
- *Subsidized health services* are services provided by the Health System, resulting in financial losses that meet the needs of the community and would not otherwise be available unless the responsibility was assumed by the government.
- *Research support and other grants* represent costs in excess of awards for numerous health research and service initiatives awarded to the organizations within the Health System.
- *Financial Contributions* include financial contributions of cash, as well as in-kind contributions such as time, supplies, and expertise to local organizations to address community health needs.
- *Community-Building Activities* include expenses incurred to support the development of programs and partnerships intended to address public health challenges as well as social and economic determinants of health. Examples include physical improvements and housing, economic development, support system enhancements, environmental improvements, leadership development and training for community members, community health improvement advocacy, and workforce enhancement.
- *Community Benefit Operations* includes costs associated with staff dedicated to administering benefit programs, community health needs assessment costs, and other costs associated with community benefit planning and operations.
- *Charity Care and Costs of Government Sponsored Health Care* includes losses, at-cost, incurred by providing health care services to persons qualifying for hospital financial assistance programs, and uncompensated costs of providing health care services to patients who are Medicaid Beneficiaries.
- *The uncompensated cost of care for Medicaid patients* reported in the unaudited Community Benefits Reports for 2019 was approximately \$143,013,000. The 2020 Community Benefits Reports are expected to be filed in February 2021.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

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The following table summarizes the value of the community benefit initiatives outlined in the Health System's most recently filed Community Benefit Reports for the year ended June 30, 2019:

*(in thousands of dollars)*

Government-sponsored healthcare services	\$ 291,013
Health professional education	40,621
Charity care	15,281
Subsidized health services	15,165
Community health services	6,895
Research	5,238
Community building activities	3,777
Financial contributions	1,597
Community benefit operations	1,219
Total community benefit value	<u>\$ 380,806</u>

In fiscal years 2020 and 2019, funds received to offset or subsidize charity care costs provided were \$1,224,000 and \$487,000, respectively.

## **Dartmouth-Hitchcock Health and Subsidiaries**

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## **2. Summary of Significant Accounting Policies**

### **Basis of Presentation**

The consolidated financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America, and have been prepared consistent with the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 954, *Healthcare Entities*, which addresses the accounting for healthcare entities. The net assets, revenue, expenses, and gains and losses of healthcare entities are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets without donor restrictions are amounts not subject to donor-imposed stipulations and are available for operations. Net assets with donor restrictions are those whose use has been limited by donors to a specific time period or purpose, or whose use has been restricted by donors to be maintained in perpetuity. All significant intercompany transactions have been eliminated upon consolidation.

### **Use of Estimates**

The preparation of the 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 the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the dates of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting periods. The most significant areas that are affected by the use of estimates include implicit and explicit pricing concessions, valuation of certain investments, estimated third-party settlements, insurance reserves, and pension obligations. Actual results may differ from those estimates.

### **(Deficiency) Excess of Revenue over Expenses**

The consolidated statements of operations and changes in net assets include the (deficiency) excess of revenue over expenses. Operating revenues consist of those items attributable to the care of patients, including contributions and investment income on investments of net assets without donor restrictions, which are utilized to provide charity and other operational support. Peripheral activities, including contribution of net assets without donor restrictions from acquisitions, loss on early extinguishment of debt, realized gains/losses on sales of investment securities and changes in unrealized gains/losses on investments are reported as non-operating gains (losses).

Changes in net assets without donor restrictions which are excluded from the (deficiency) excess of revenue over expenses, consistent with industry practice, include contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for the purpose of acquiring such assets, and change in funded status of pension and other postretirement benefit plans.

### **Charity Care**

The Health System provides care to patients who meet certain criteria under their financial assistance policies without charge or at amounts less than their established rates. Because the Health System does not anticipate collection of amounts determined to qualify as charity care, they are not reported as revenue.

## **Dartmouth-Hitchcock Health and Subsidiaries**

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The Health System grants credit without collateral to patients. Most are local residents and are insured under third-party arrangements. The amount of charges for implicit price concessions is based upon management's assessment of historical and expected net collections, business and economic conditions, trends in federal and state governmental healthcare coverage, and other collection indicators (Notes 1 and 4).

#### **Patient Service Revenue**

The Health System applies the accounting provisions of ASC 606, *Revenue from Contracts with Customers* (ASC 606). Patient service revenue is reported at the amount of consideration to which the Health System expects to be entitled from patients, third party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors and implicit pricing concessions. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as estimates change or final settlements are determined (Note 4).

#### **Contracted Revenue**

The Health System has various Professional Service Agreements (PSAs), pursuant to which certain organizations purchase services of personnel employed by the Health System and also lease space and equipment. Revenue pursuant to these PSAs and certain facility and equipment leases and other professional service contracts have been classified as contracted revenue in the accompanying consolidated statements of operations and changes in net assets.

#### **Other Revenue**

The Health System recognizes other revenue which is not related to patient medical care but is central to the day-to-day operations of the Health System. Other revenue primarily consists of revenue from retail pharmacy, which the Health System records as customer revenues in the amounts that reflect the consideration to which it expects to be entitled in exchange for the prescription. Other revenue also includes the Department of Health and Human Services ("HHS") Coronavirus Aid, Relief, and Economic Securities Act ("CARES Act" Provider Relief Funds ("Provider Relief Funds") operating agreements, grant revenue, cafeteria sales and other support service revenue.

#### **Cash Equivalents**

Cash and cash equivalents include amounts on deposit with financial institutions; short-term investments with maturities of three months or less at the time of purchase and other highly liquid investments, primarily cash management funds. Short-term highly liquid investments held within the endowment and similar investment pools are classified as investments rather than cash equivalents and restricted cash is defined as that which is legally restricted to withdrawal and usage.

#### **Investments and Investment Income**

Investments in equity securities with readily determinable fair values, mutual funds, governmental securities, debt securities, and pooled/commingled funds are reported at fair value with changes in fair value included in the (deficiency) excess of revenues over expenses. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (Note 7).

Investments in pooled/commingled investment funds, private equity funds and hedge funds that represent investments where the Health System owns shares or units of funds rather than the underlying securities in that fund are valued using the equity method of accounting with changes in value recorded in the (deficiency) excess of revenues over expenses. All investments, whether

## **Dartmouth-Hitchcock Health and Subsidiaries**

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held at fair value or under the equity method of accounting, are reported at what the Health System believes to be the amount they would expect to receive if it liquidated its investments at the balance sheet dates on a non-distressed basis.

Certain members of the Health System are partners in a NH general partnership established for the purpose of operating a master investment program of pooled investment accounts. Substantially all of the Health System's board-designated and assets with donor restrictions, such as endowment funds, were invested in these pooled funds by purchasing units based on the market value of the pooled funds at the end of the month prior to receipt of any new additions to the funds. Interest, dividends, and realized and unrealized gains and losses earned on pooled funds are allocated monthly based on the weighted average units outstanding at the prior month-end.

Investment income or losses (including change in unrealized and realized gains and losses on investments, change in value of equity method investments, interest, and dividends) are included in the (deficiency) excess of revenue over expenses and classified as non-operating gains and losses, unless the income or loss is restricted by donor or law (Note 9).

#### **Fair Value Measurement of Financial Instruments**

The Health System estimates fair value based on a valuation framework that uses a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of fair value hierarchy, as defined by ASC 820, *Fair Value Measurements and Disclosures*, are described below:

- Level 1      Unadjusted quoted prices in active markets that are accessible at the measurement date for assets or liabilities.
- Level 2      Prices other than quoted prices in active markets that are either directly or indirectly observable as of the date of measurement.
- Level 3      Prices or valuation techniques that are both significant to the fair value measurement and unobservable.

The Health System applies the accounting provisions of Accounting Standards Update (ASU) 2009-12, *Investments in Certain Entities That Calculate Net Asset Value per Share (or its Equivalent)* (ASU 2009-12). ASU 2009-12 allows for the estimation of fair value of investments for which the investment does not have a readily determinable fair value, to use net asset value (NAV) per share or its equivalent as a practical expedient, subject to the Health System's ability to redeem its investment.

The carrying amounts of patient accounts receivable, prepaid and other current assets, accounts payable and accrued expenses approximate fair value due to the short maturity of these instruments.

#### **Property, Plant, and Equipment**

Property, plant, and equipment, and other real estate are stated at cost at the time of purchase or fair value at the time of donation, less accumulated depreciation. The Health System's policy is to capitalize expenditures for major improvements and to charge expense for maintenance and repair expenditures which do not extend the lives of the related assets. The provision for depreciation has been determined using the straight-line method at rates which are intended to amortize the cost of assets over their estimated useful lives which range from 10 to 40 years for buildings and improvements, 2 to 20 years for equipment, and the shorter of the lease term, or 5 to 12 years, for

## **Dartmouth-Hitchcock Health and Subsidiaries**

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leasehold improvements. Certain software development costs are amortized using the straight-line method over a period of up to 10 years. Net interest cost incurred on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets.

The fair value of a liability for legal obligations associated with asset retirements is recognized in the period in which it is incurred, if a reasonable estimate of the fair value of the obligation can be made. When a liability is initially recorded, the cost of the asset retirement obligation is capitalized by increasing the carrying amount of the related long-lived asset. Over time, the liability is accreted to its present value each period and the capitalized cost associated with the retirement is depreciated over the useful life of the related asset. Upon settlement of the obligation, any difference between the actual cost to settle the asset retirement obligation and the liability recorded is recognized as a gain or loss in the consolidated statements of operations and changes in net assets.

Gifts of capital assets such as land, buildings, or equipment are reported as support, and excluded from the (deficiency) excess of revenue over expenses, unless explicit donor stipulations specify how the donated assets must be used. Gifts of capital assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire capital assets are reported as restricted support. Absent explicit donor stipulations about how long those capital assets must be maintained, expirations of donor restrictions are reported when the donated or acquired capital assets are placed in service.

#### **Bond Issuance Costs**

Bond issuance costs, classified on the consolidated balance sheets within long-term debt, are amortized over the term of the related bonds. Amortization is recorded within interest expense in the consolidated statements of operations and changes in net assets using the straight-line method which approximates the effective interest method.

#### **Intangible Assets and Goodwill**

The Health System records within other assets on the consolidated balance sheets goodwill and intangible assets such as trade names and leases-in-place. The Health System considers trade names and goodwill to be indefinite-lived assets, assesses them at least annually for impairment or more frequently if certain events or circumstances warrant and recognizes impairment charges for amounts by which the carrying values exceed their fair values. The Health System has recorded \$10,007,000 and \$10,524,000 as intangible assets associated with its affiliations as of June 30, 2020 and 2019, respectively.

#### **Gifts**

Gifts without donor restrictions are recorded net of related expenses as non-operating gains. Conditional promises to give and indications of intentions to give to the Health System are reported at fair value at the date the gift is received. Gifts are reported with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the consolidated statements of operations and changes in net assets as net assets released from restrictions.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

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#### Recently Issued Accounting Pronouncements

In January 2016, the FASB issued ASU 2016-01- *Recognition and Measurement of Financial Assets and Financial Liabilities*, which addresses certain aspects of recognition, measurement, presentation and disclosure of financial instruments. This guidance allows an entity to choose, investment-by-investment, to report an equity investment that neither has a readily determinable fair value, nor qualifies for the practical expedient for fair value estimation using NAV, at its cost minus impairment (if any), plus or minus changes resulting from observable price changes in orderly transactions for the identical or similar investment of the same issue. Impairment of such investments must be assessed qualitatively at each reporting period. Entities must disclose their financial assets and liabilities by measurement category and form of asset either on the face of the balance sheet or in the accompanying notes. The ASU is effective for annual reporting periods beginning after December 15, 2018 or fiscal year 2020 for the Health System. The provision to eliminate the requirement to disclose the fair value of financial instruments measured at cost (such as the fair value of debt) was early adopted during the year ended June 30, 2017. The standard has been adopted during the current fiscal year and no material impact was noted.

In February 2016, the FASB issued ASU 2016-02 – *Leases (Topic 842)*. Under the new guidance, lessees are required to recognize the following for all leases (with the exception of leases with a term of twelve months or less) at the commencement date: (a) a lease liability, which is a lessee's obligation to make lease payments arising from a lease, measured on a discounted basis; and (b) a right-of-use asset, which is an asset that represents the lessee's right to use, or control the use of, a specified asset for the lease term. Leases are classified as either operating or finance. Operating leases result in straight-line expense in the statement of operations (similar to previous operating leases), while finance leases result in more expense being recognized in the earlier years of the lease term (similar to previous capital leases). The Health System adopted the new standard on July 1, 2019 using the modified retrospective approach. The Health System elected the transition method that allows for the application of the standard at the adoption date rather than at the beginning of the earliest comparative period presented in the consolidated financial statements. The Health System also elected available practical expedients (Note 16).

In March 2017, the FASB issued ASU 2017-07, *Compensation – Retirement Benefits (Topic 715): Improving the Presentation of Net Periodic Pension Cost and Net Periodic Postretirement Benefit Cost*. Under the new standard, the service cost component of the net benefit cost will be included within income from operations as a component of benefits expenses and the other components of net benefit cost as defined by ASC 715 will be reported in non-operating activities within the consolidated statements of operations and changes in net assets. The standard also prohibits reporting of the other components of net benefit cost in the same line as other pension related changes on the statements of operations and changes in net assets. ASU 2017-07 is effective for the fiscal year ended June 30, 2020 and is applied on a retrospective basis.

#### Reclassifications

As a result of adopting the provisions of ASU 2017-07, the Health System reclassified \$11,221,000 from benefits expense to non-operating activities within the consolidated statements of operations and changes in net assets for the fiscal year ended June 30, 2019. The amount included in non-operating activities for the fiscal year ending June 30, 2020 was \$10,810,000.

## **Dartmouth-Hitchcock Health and Subsidiaries**

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### **3. Acquisition**

Effective July 1, 2018, Alice Peck Day Memorial Hospital became the sole corporate member of APD LifeCare Center Inc. (LifeCare). LifeCare owns and operates Harvest Hill, an assisted living facility, the Woodlands, a residential living community and the Elizabeth S. Hughes Care Unit, which provides hospice care.

In accordance with applicable accounting guidance on not-for-profit mergers and acquisitions, Alice Peck Day Memorial Hospital recorded goodwill related to the acquisition of LifeCare of approximately \$5,131,000. Restricted contribution income of \$383,000 was recorded within net assets with donor restrictions in the accompanying consolidated statement of changes in net assets. Included in the transaction was LifeCare's cash balance of \$4,863,000. No consideration was exchanged for the net assets assumed and acquisition costs were expensed as incurred.

### **4. Patient Service Revenue and Accounts Receivable**

The Health System reports patient service revenue at amounts that reflect the consideration to which it expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payers (including managed care payers and government programs), and others; and they include variable consideration for retroactive revenue adjustments due to settlement of audits, reviews, and investigations. Generally, the Health System bills patients and third-party payers several days after the services were performed or shortly after discharge. Revenue is recognized as performance obligations are satisfied under contracts by providing healthcare services to patients.

The Health System determines performance obligations based on the nature of the services provided. Revenues for performance obligations satisfied over time are recognized based on actual charges incurred in relation to total expected charges as this method provides a reasonable estimate of the transfer of services over the term of performance obligations based on inputs needed to satisfy the obligations. Generally, performance obligations satisfied over time relate to patients receiving inpatient acute care services. For inpatient services, performance obligations are measured from admission to the point when there are no further services required for the patient, which is generally the time of discharge. For outpatient services and physician services, performance obligations are recognized at a point in time when the services are provided and no further patient services are deemed necessary.

Generally, the Health System's patient service performance obligations relate to contracts with a duration of less than one year, therefore the Health System has elected to apply the optional exemption provided in ASC 606-10-50-14a and, therefore, we are not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period. This generally refers to inpatient services at the end of the reporting period. The performance obligations for these contracts are generally completed when the patients are discharged, which generally occurs within days or weeks of the end of the reporting period.

Established charges represent gross charges. They are not the same as actual pricing, and they generally do not reflect what a hospital is ultimately entitled to for services it provides. Therefore, they are not displayed in the Health System's consolidated statements of operations and changes in net assets.

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Hospitals are paid amounts negotiated with insurance companies or set by government entities, which are typically less than established or standard charges. Gross charges are used to calculate Medicare outlier payments and to determine certain elements of payment under managed care contracts. Gross charges are what hospitals charge all patients prior to the application of contractual adjustments and implicit price concessions.

#### **Explicit Pricing Concessions**

Revenues for the Health System under the traditional fee-for service Medicare and Medicaid programs are based on prospectively determined rates per discharge or visit, reasonable (allowable) cost, or prospective rates per episodic period, depending on the type of provider.

- Inpatient acute care services provided to Medicare program beneficiaries are paid using the prospective payment system ("PPS") to determine rates-per-discharge. These rates vary according to a patient classification system ("DRG"), based on diagnostic, clinical and other factors. In addition, inpatient capital costs (depreciation and interest) are reimbursed by Medicare on the basis of a prospectively determined rate per discharge. Medicare outpatient services are paid on a prospective payment system, based on a pre-determined amount for each outpatient procedure (APC), subject to various mandated modifications. Retrospectively determined cost-based revenues under these programs, such as indirect medical education, direct graduate medical education, disproportionate share hospital, transplant services, and bad debt reimbursement are based on the hospital's cost reports and are estimated using historical trends and current factors. The Health System's payments for inpatient services rendered to New Hampshire ("NH") and Vermont ("VT") Medicaid beneficiaries are based on PPS, while outpatient services are reimbursed on a retrospective cost basis or fee schedules for NH beneficiaries. VT outpatient beneficiaries are paid on a prospective basis per outpatient procedure.
- Inpatient acute, swing, and outpatient services furnished by critical access hospitals ("CAH") are reimbursed by Medicare at 101% of reasonable costs, subject to 2% sequestration, excluding ambulance services and inpatient hospice care.
- Providers of home health services to patients eligible for Medicare home health benefits are paid on a prospective basis, with no retrospective settlement. The prospective payment is based on the scoring attributed to the acuity level of the patient at a rate determined by federal guidelines.
- Hospice services to patients eligible for Medicare hospice benefits are paid on a per diem basis, with no retrospective settlement, provided the aggregate annual Medicare reimbursement is below a predetermined aggregate capitated rate.
- The Health System's cost based services to Medicare and Medicaid are reimbursed during the year based on varying interim payment methodologies. Final settlement is determined after the submission of an annual cost report and subject to audit of this report by Medicare and Medicaid auditors, as well as administrative and judicial review. Because the laws, regulations, and rule interpretations, governing Medicare and Medicaid reimbursement are complex and change frequently, the estimates recorded could change over time by material amounts.
- Revenues under Managed Care Plans (Plans) consist primarily of payment terms involving mutually agreed upon rates per diagnosis, discounted fee-for service rates, or similar contractual arrangements. These revenues are also subject to review and possible audit.

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The Plans are billed for patient services on an individual patient basis. An individual patient's bill is subject to adjustments in accordance with contractual terms in place with the Plans following their review and adjudication of each bill.

The Health System is not aware of any claims, disputes, or unsettled matters with any payer that would materially affect its revenues for which it has not adequately provided in the accompanying Health System's consolidated financial statements.

The Health System provides charity care to patients who are unable to pay for healthcare services they receive as determined by financial conditions. Patients who qualify receive partial or full adjustments to charges for services rendered. The Health System's policy is to treat amounts qualified as charity care as explicit price concessions and as such are not reported in net patient service revenue.

Vermont imposes a provider tax on home health agencies in the amount of 4.25% of annual net patient revenue. In fiscal years 2020 and 2019, home health provider taxes paid were \$624,000 and \$628,000, respectively.

#### **Medicaid Enhancement Tax & Disproportionate Share Hospital**

On May 22, 2018, the State of New Hampshire and all New Hampshire hospitals (Hospitals) agreed to resolve disputed issues and enter into a seven-year agreement to stabilize Disproportionate Share Hospital (DSH) payments, with provisions for alternative payments in the event of legislative changes to the DSH program. Under the agreement, the State committed to make DSH payments to the Hospitals in an amount no less than 86% of the Medicaid Enhancement Tax (MET) proceeds collected in each fiscal year, in addition to providing for directed payments or increased rates for Hospitals in an amount equal to 5% of MET proceeds collected from state fiscal year (SFY) 2020 through SFY 2024. The agreement prioritizes DSH payments to critical access hospitals in an amount equal to 75% of allowable uncompensated care (UCC), with the remainder distributed to Hospitals without critical access designation in proportion to their allowable UCC amounts.

During the years ended June 30, 2020 and 2019, the Health System received DSH payments of approximately, \$71,133,000 and \$69,179,000 respectively. DSH payments are subject to audit and therefore, for the years ended June 30, 2020 and 2019, the Health System recognized as revenue DSH receipts of approximately \$67,500,000 and approximately \$64,864,000, respectively.

During the years ended June 30, 2020 and 2019, the Health System recorded State of NH MET and State of VT Provider taxes of \$76,010,000 and \$70,061,000, respectively. The taxes are calculated at 5.4% for NH and 6% for VT of certain patient service revenues. The Provider taxes are included in operating expenses in the consolidated statements of operations and changes in net assets.

#### **Implicit Price Concessions**

Generally, patients who are covered by third-party payer contracts are responsible for related co-pays, co-insurance and deductibles, which vary depending on the contractual obligations of patients. The Health System also provides services to uninsured patients and offers those patients a discount from standard charges. The Health System estimates the transaction price for patients with co-pays, co-insurance, and deductibles and for those who are uninsured based on historical collection experience and current market conditions. The discount offered to uninsured patients reduces the transaction price at the time of billing. The uninsured and patient responsible

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accounts, net of discounts recorded, are further reduced through implicit price concessions based on historical collection trends for similar accounts and other known factors that impact the estimation process. Subsequent changes to the estimate of transaction price are generally recorded as adjustments to net patient services revenue in the period of change.

The implicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and the amounts the Health System expects to collect based on collection history with similar patients. Although outcomes vary, the Health System's policy is to attempt to collect amounts due from patients, including co-pays, co-insurance and deductibles due from insurance at the time of service while complying with all federal and state statutes and regulations, including but not limited to, the Emergency Medical Treatment and Active Labor Act (EMTALA). Through various systems and processes the Health System estimates Medicare and Medicaid net patient service revenue and cost report settlements and accrues final expected settlements. For filed cost reports, the accrual is recorded based on those filings, subsequent activity, and on historical trends and other relevant evidence. For periods in which a cost report is yet to be filed, accruals are based on estimates of what is expected to be reported, and any trends and relevant evidence. Cost reports generally must be filed within five months of the closing period.

Settlements with third-party payers for retroactive revenue adjustments due to audits, reviews or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care using the most likely amount. These settlements are estimated based on the terms of the payment agreement with the payer, correspondence from the payer and historical settlement activity, including assessments to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known, or as years are settled or are no longer subject to such audits, reviews or investigations. As of June 30, 2020 and 2019, the Health System had reserves of \$302,525,000 and \$41,570,000, respectively, recorded in Estimated third-party settlements. Included in the 2020 Estimated third party settlements is \$239,500,000 of Medicare accelerated and advanced payments, received as working capital support during the novel coronavirus ("COVID-19") outbreak at June 30, 2020. In addition, \$10,900,000 has been recorded in Other liabilities as of June 30, 2020 and 2019, respectively.

For the years ended June 30, 2020 and 2019, additional increases in revenue of \$2,314,000 and \$1,800,000, respectively, were recognized due to changes in estimates of implicit price concessions for performance obligations satisfied in prior years.

Net operating revenues for the hospital operations of the PPS and CAH, and other business segments consist primarily of patient service revenues, principally for patients covered by Medicare, Medicaid, managed care and other health plans as well as patients covered under the Health System's uninsured discount and charity care programs.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

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The table below shows the Health System's sources of net operating revenues presented at the net transaction price for the years ended June 30, 2020 and 2019.

<i>(in thousands of dollars)</i>	<b>2020</b>		
	<b>PPS</b>	<b>CAH</b>	<b>Total</b>
<b>Hospital</b>			
Medicare	\$ 461,990	\$ 64,087	\$ 526,077
Medicaid	130,901	10,636	141,537
Commercial	718,576	60,715	779,291
Self Pay	2,962	2,501	5,463
Subtotal	<u>1,314,429</u>	<u>137,939</u>	<u>1,452,368</u>
<b>Professional</b>			
Professional	383,503	22,848	406,351
VNA	-	-	21,306
Other Revenue	-	-	376,185
Provider Relief Fund	-	-	88,725
Total operating revenue and other support	<u>\$ 1,697,932</u>	<u>\$ 160,787</u>	<u>\$ 2,344,935</u>

<i>(in thousands of dollars)</i>	<b>2019</b>		
	<b>PPS</b>	<b>CAH</b>	<b>Total</b>
<b>Hospital</b>			
Medicare	\$ 456,197	\$ 72,193	\$ 528,390
Medicaid	134,727	12,794	147,521
Commercial	746,647	64,981	811,628
Self Pay	8,811	2,313	11,124
Subtotal	<u>1,346,382</u>	<u>152,281</u>	<u>1,498,663</u>
<b>Professional</b>			
Professional	454,425	23,707	478,132
VNA	-	-	22,528
Other Revenue	-	-	299,820
Total operating revenue and other support	<u>\$ 1,800,807</u>	<u>\$ 175,988</u>	<u>\$ 2,299,143</u>

#### Accounts Receivable

The following table categorizes payors into four groups based on their respective percentages of patient accounts receivable as of June 30, 2020 and 2019:

	<b>2020</b>	<b>2019</b>
Medicare	36%	34%
Medicaid	13%	12%
Commercial	39%	41%
Self Pay	12%	13%
Patient accounts receivable	<u>100%</u>	<u>100%</u>

## Dartmouth-Hitchcock Health and Subsidiaries

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#### 5. Investments

The composition of investments at June 30, 2020 and 2019 is set forth in the following table:

<i>(in thousands of dollars)</i>	2020	2019
<b>Assets limited as to use</b>		
Internally designated by board		
Cash and short-term investments	\$ 9,646	\$ 21,890
U.S. government securities	103,977	91,492
Domestic corporate debt securities	199,462	196,132
Global debt securities	70,145	83,580
Domestic equities	203,010	167,384
International equities	123,205	128,909
Emerging markets equities	22,879	23,086
Real Estate Investment Trust	313	213
Private equity funds	74,131	64,563
Hedge funds	36,964	32,287
	<u>843,732</u>	<u>809,536</u>
<b>Investments held by captive insurance companies (Note 12)</b>		
U.S. government securities	15,402	23,241
Domestic corporate debt securities	8,651	11,378
Global debt securities	8,166	10,080
Domestic equities	15,150	14,617
International equities	7,227	6,766
	<u>54,596</u>	<u>66,082</u>
<b>Held by trustee under indenture agreement (Note 10)</b>		
Cash and short-term investments	236,198	631
Total assets limited as to use	<u>1,134,526</u>	<u>876,249</u>
<b>Other investments for restricted activities</b>		
Cash and short-term investments	7,186	6,113
U.S. government securities	28,055	32,479
Domestic corporate debt securities	35,440	29,089
Global debt securities	11,476	11,263
Domestic equities	26,723	20,981
International equities	15,402	15,531
Emerging markets equities	2,766	2,578
Private equity funds	9,483	7,638
Hedge funds	4,013	8,414
Other	36	33
Total other investments for restricted activities	<u>140,580</u>	<u>134,119</u>
Total investments	<u>\$ 1,275,106</u>	<u>\$ 1,010,368</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

Investments are accounted for using either the fair value method or equity method of accounting, as appropriate on a case by case basis. The fair value method is used for all debt securities and equity securities that are traded on active markets and are valued at prices that are readily available in those markets. The equity method is used when investments are made in pooled/commingled investment funds that represent investments where shares or units are owned of pooled funds rather than the underlying securities in that fund. These pooled/commingled funds make underlying investments in securities from the asset classes listed above. All investments, whether the fair value or equity method of accounting is used, are reported at what the Health System believes to be the amount that the Health System would expect to receive if it liquidated its investments at the balance sheets date on a non-distressed basis.

The following tables summarize the investments by the accounting method utilized, as of June 30, 2020 and 2019. Accounting standards require disclosure of additional information for those securities accounted for using the fair value method, as shown in Note 7.

<i>(in thousands of dollars)</i>	<b>2020</b>		
	<b>Fair Value</b>	<b>Equity</b>	<b>Total</b>
Cash and short-term investments	\$ 253,030	\$ -	\$ 253,030
U.S. government securities	147,434	-	147,434
Domestic corporate debt securities	198,411	45,142	243,553
Global debt securities	44,255	45,532	89,787
Domestic equities	195,014	49,869	244,883
International equities	77,481	68,353	145,834
Emerging markets equities	1,257	24,388	25,645
Real Estate Investment Trust	313	-	313
Private equity funds	-	83,614	83,614
Hedge funds	-	40,977	40,977
Other	36	-	36
	<b>\$ 917,231</b>	<b>\$ 357,875</b>	<b>\$ 1,275,106</b>

<i>(in thousands of dollars)</i>	<b>2019</b>		
	<b>Fair Value</b>	<b>Equity</b>	<b>Total</b>
Cash and short-term investments	\$ 28,634	\$ -	\$ 28,634
U.S. government securities	147,212	-	147,212
Domestic corporate debt securities	164,996	71,603	236,599
Global debt securities	55,520	49,403	104,923
Domestic equities	178,720	24,262	202,982
International equities	76,328	74,878	151,206
Emerging markets equities	1,295	24,369	25,664
Real Estate Investment Trust	213	-	213
Private equity funds	-	72,201	72,201
Hedge funds	-	40,701	40,701
Other	33	-	33
	<b>\$ 652,951</b>	<b>\$ 357,417</b>	<b>\$ 1,010,368</b>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

For the years ended June 30, 2020 and 2019 investment income is reflected in the accompanying consolidated statements of operations and changes in net assets as other operating revenue of approximately \$936,000 and \$983,000 and as non-operating gains of approximately \$27,047,000 and \$40,052,000, respectively.

Private equity limited partnership shares are not eligible for redemption from the fund or general partner, but can be sold to third party buyers in private transactions that typically can be completed in approximately 90 days. It is the intent of the Health System to hold these investments until the fund has fully distributed all proceeds to the limited partners and the term of the partnership agreement expires. Under the terms of these agreements, the Health System has committed to contribute a specified level of capital over a defined period of time. Through June 30, 2020 and 2019, the Health System has committed to contribute approximately \$172,819,000 and \$164,319,000 to such funds, of which the Health System has contributed approximately \$119,142,000 and \$109,584,000 and has outstanding commitments of \$53,677,000 and \$54,735,000, respectively.

#### 6. Property, Plant, and Equipment

Property, plant, and equipment are summarized as follows at June 30, 2020 and 2019:

<i>(in thousands of dollars)</i>	2020	2019
Land	\$ 40,749	\$ 38,232
Land improvements	39,820	42,607
Buildings and improvements	893,081	898,050
Equipment	927,233	888,138
Equipment under capital leases	-	15,809
	<u>1,900,883</u>	<u>1,882,836</u>
Less: Accumulated depreciation and amortization	1,356,521	1,276,746
Total depreciable assets, net	544,362	606,090
Construction in progress	99,224	15,166
	<u>\$ 643,586</u>	<u>\$ 621,256</u>

As of June 30, 2020, construction in progress primarily consists of two projects. The first project, started in fiscal 2019, consists of the addition of the ambulatory surgical center (ASC) located in Manchester, NH. The estimated cost to complete the project is \$42 million. The anticipated completion date is the second quarter of fiscal 2021. The second project, involves the addition of the in-patient tower located in Lebanon, NH. The estimated cost to complete the tower project is \$140 million over the next three fiscal years.

The construction in progress as of June 30, 2019, included both the ASC, as well as renovations taking place at the various pharmacy locations to bring their facilities compliant with Regulation USP800. The pharmacy upgrade was completed during the first quarter of fiscal year 2021. Capitalized interest of \$2,297,000 and \$0 is included in Construction in progress as of June 30, 2020 and 2019, respectively.

Depreciation and amortization expense included in operating and non-operating activities was approximately \$92,217,000 and \$88,496,000 for 2020 and 2019, respectively.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Consolidated Notes to Financial Statements**

#### **June 30, 2020 and 2019**

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#### **7. Fair Value Measurements**

The following is a description of the valuation methodologies for assets and liabilities measured at fair value on a recurring basis:

##### **Cash and Short-Term Investments**

Consists of money market funds and are valued at net asset value (NAV) reported by the financial institution.

##### **Domestic, Emerging Markets and International Equities**

Consists of actively traded equity securities and mutual funds which are valued at the closing price reported on an active market on which the individual securities are traded (Level 1 measurements).

##### **U.S. Government Securities, Domestic Corporate and Global Debt Securities**

Consists of U.S. government securities, domestic corporate and global debt securities, mutual funds and pooled/commingled funds that invest in U.S. government securities, domestic corporate and global debt securities. Securities are valued based on quoted market prices or dealer quotes where available (Level 1 measurement). If quoted market prices are not available, fair values are based on quoted market prices of comparable instruments or, if necessary, matrix pricing from a third party pricing vendor to determine fair value (Level 2 measurements). Matrix prices are based on quoted prices for securities with similar coupons, ratings and maturities, rather than on specific bids and offers for a designated security. Investments in mutual funds are measured based on the quoted NAV as of the close of business in the respective active market (Level 1 measurements).

The preceding methods may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Health System believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Investments are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The following tables set forth the consolidated financial assets and liabilities that were accounted for at fair value on a recurring basis as of June 30, 2020 and 2019:

# Dartmouth-Hitchcock Health and Subsidiaries

## Consolidated Notes to Financial Statements

### June 30, 2020 and 2019

(in thousands of dollars)	2020				Redemption or Liquidation	Days' Notice
	Level 1	Level 2	Level 3	Total		
<b>Assets</b>						
<b>Investments</b>						
Cash and short term investments	\$ 253,030	\$ -	\$ -	\$ 253,030	Daily	1
U.S. government securities	147,434	-	-	147,434	Daily	1
Domestic corporate debt securities	17,577	180,834	-	198,411	Daily-Monthly	1-15
Global debt securities	22,797	21,458	-	44,255	Daily-Monthly	1-15
Domestic equities	187,354	7,660	-	195,014	Daily-Monthly	1-10
International equities	77,481	-	-	77,481	Daily-Monthly	1-11
Emerging market equities	1,257	-	-	1,257	Daily-Monthly	1-7
Real estate investment trust	313	-	-	313	Daily-Monthly	1-7
Other	2	34	-	36	Not applicable	Not applicable
<b>Total investments</b>	<b>707,245</b>	<b>209,986</b>	<b>-</b>	<b>917,231</b>		
<b>Deferred compensation plan assets</b>						
Cash and short-term investments	5,754	-	-	5,754		
U.S. government securities	51	-	-	51		
Domestic corporate debt securities	7,194	-	-	7,194		
Global debt securities	1,270	-	-	1,270		
Domestic equities	24,043	-	-	24,043		
International equities	3,571	-	-	3,571		
Emerging market equities	27	-	-	27		
Real estate	11	-	-	11		
Multi strategy fund	51,904	-	-	51,904		
Guaranteed contract	-	-	92	92		
<b>Total deferred compensation plan assets</b>	<b>93,825</b>	<b>-</b>	<b>92</b>	<b>93,917</b>	Not applicable	Not applicable
Beneficial interest in trusts	-	-	9,202	9,202	Not applicable	Not applicable
<b>Total assets</b>	<b>\$ 801,070</b>	<b>\$ 209,986</b>	<b>\$ 9,294</b>	<b>\$ 1,020,350</b>		

(in thousands of dollars)	2019				Redemption or Liquidation	Days' Notice
	Level 1	Level 2	Level 3	Total		
<b>Assets</b>						
<b>Investments</b>						
Cash and short term investments	\$ 28,634	\$ -	\$ -	\$ 28,634	Daily	1
U.S. government securities	147,212	-	-	147,212	Daily	1
Domestic corporate debt securities	34,723	130,273	-	164,996	Daily-Monthly	1-15
Global debt securities	28,412	27,108	-	55,520	Daily-Monthly	1-15
Domestic equities	171,318	7,402	-	178,720	Daily-Monthly	1-10
International equities	76,295	33	-	76,328	Daily-Monthly	1-11
Emerging market equities	1,295	-	-	1,295	Daily-Monthly	1-7
Real estate investment trust	213	-	-	213	Daily-Monthly	1-7
Other	-	33	-	33	Not applicable	Not applicable
<b>Total investments</b>	<b>488,102</b>	<b>164,849</b>	<b>-</b>	<b>652,951</b>		
<b>Deferred compensation plan assets</b>						
Cash and short-term investments	2,952	-	-	2,952		
U.S. government securities	45	-	-	45		
Domestic corporate debt securities	4,932	-	-	4,932		
Global debt securities	1,300	-	-	1,300		
Domestic equities	22,403	-	-	22,403		
International equities	3,576	-	-	3,576		
Emerging market equities	27	-	-	27		
Real estate	11	-	-	11		
Multi strategy fund	48,941	-	-	48,941		
Guaranteed contract	-	-	89	89		
<b>Total deferred compensation plan assets</b>	<b>84,187</b>	<b>-</b>	<b>89</b>	<b>84,276</b>	Not applicable	Not applicable
Beneficial interest in trusts	-	-	9,301	9,301	Not applicable	Not applicable
<b>Total assets</b>	<b>\$ 572,289</b>	<b>\$ 164,849</b>	<b>\$ 9,390</b>	<b>\$ 746,528</b>		

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

The following table is a rollforward of financial instruments classified by the Health System within Level 3 of the fair value hierarchy defined above.

	2020		
	Beneficial Interest in Perpetual Trust	Guaranteed Contract	Total
<i>(in thousands of dollars)</i>			
<b>Balances at beginning of year</b>	\$ 9,301	\$ 89	\$ 9,390
Net unrealized (losses) gains	(99)	3	(96)
<b>Balances at end of year</b>	<u>\$ 9,202</u>	<u>\$ 92</u>	<u>\$ 9,294</u>

	2019		
	Beneficial Interest in Perpetual Trust	Guaranteed Contract	Total
<i>(in thousands of dollars)</i>			
<b>Balances at beginning of year</b>	\$ 9,374	\$ 86	\$ 9,460
Net unrealized (losses) gains	(73)	3	(70)
<b>Balances at end of year</b>	<u>\$ 9,301</u>	<u>\$ 89</u>	<u>\$ 9,390</u>

There were no transfers into and out of Level 1 and 2 measurements due to changes in valuation methodologies during the years ended June 30, 2020 and 2019.

#### 8. Net Assets with Donor Restrictions

Net assets with donor restrictions are available for the following purposes at June 30, 2020 and 2019:

<i>(in thousands of dollars)</i>	2020	2019
Investments held in perpetuity	\$ 59,352	\$ 56,383
Healthcare services	33,976	20,140
Research	22,116	26,496
Health education	16,849	19,833
Charity care	12,366	12,494
Other	4,488	3,841
Purchase of equipment	3,081	3,273
	<u>\$ 152,228</u>	<u>\$ 142,460</u>

Income earned on donor restricted net assets held in perpetuity is available for these purposes.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Consolidated Notes to Financial Statements**

#### **June 30, 2020 and 2019**

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#### **9. Board Designated and Endowment Funds**

Net assets include numerous funds established for a variety of purposes including both donor-restricted endowment funds and funds designated by the Board of Trustees to function as endowments. Net assets associated with endowment funds, including funds designated by the Board of Trustees to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

The Board of Trustees has interpreted the NH and VT Uniform Prudent Management of Institutional Funds Acts (UPMIFA or Act) for donor-restricted endowment funds as requiring the preservation of the original value of gifts, as of the gift date, to donor-restricted endowment funds, absent explicit donor stipulations to the contrary. The Health System's net assets with donor restrictions which are to be held in perpetuity consist of (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to be held in perpetuity, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund, if any. Collectively these amounts are referred to as the historic dollar value of the fund.

Net assets without donor restrictions include funds designated by the Board of Trustees to function as endowments, the income from certain donor-restricted endowment funds, and any accumulated investment return thereon, which pursuant to donor intent may be expended based on trustee or management designation. Net assets with donor restrictions that are temporary in nature, either restricted by time or purpose, include funds appropriated for expenditure pursuant to endowment and investment spending policies, certain expendable endowment gifts from donors, and any retained income and appreciation on donor-restricted endowment funds, which are restricted by the donor to a specific purpose or by law. When the restrictions on these funds have been met, the funds are reclassified to net assets without donor restrictions.

In accordance with the Act, the Health System considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: the duration and preservation of the fund; the purposes of the donor-restricted endowment fund; general economic conditions; the possible effect of inflation and deflation; the expected total return from income and the appreciation of investments; other resources available; and investment policies.

The Health System has endowment investment and spending policies that attempt to provide a predictable stream of funding for programs supported by its endowment while ensuring that the purchasing power does not decline over time. The Health System targets a diversified asset allocation that places emphasis on investments in domestic and international equities, fixed income, private equity, and hedge fund strategies to achieve its long-term return objectives within prudent risk constraints. The Health System's Investment Committee reviews the policy portfolio asset allocations, exposures, and risk profile on an ongoing basis.

The Health System, as a policy, may appropriate for expenditure or accumulate so much of an endowment fund as the institution determines is prudent for the uses, benefits, purposes, and duration for which the endowment is established, subject to donor intent expressed in the gift instrument and the standard of prudence prescribed by the Act.

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below their original contributed value. Such market losses were not material as of June 30, 2020 and 2019.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

Endowment net asset composition by type of fund consists of the following at June 30, 2020 and 2019:

<i>(in thousands of dollars)</i>	<b>2020</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
Donor-restricted endowment funds	\$ -	\$ 80,039	\$ 80,039
Board-designated endowment funds	33,714	-	33,714
Total endowed net assets	<u>\$ 33,714</u>	<u>\$ 80,039</u>	<u>\$ 113,753</u>

<i>(in thousands of dollars)</i>	<b>2019</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
Donor-restricted endowment funds	\$ -	\$ 78,268	\$ 78,268
Board-designated endowment funds	31,421	-	31,421
Total endowed net assets	<u>\$ 31,421</u>	<u>\$ 78,268</u>	<u>\$ 109,689</u>

Changes in endowment net assets for the years ended June 30, 2020 and 2019 are as follows:

<i>(in thousands of dollars)</i>	<b>2020</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
<b>Balances at beginning of year</b>	\$ 31,421	\$ 78,268	\$ 109,689
Net investment return	713	1,460	2,173
Contributions	890	2,990	3,880
Transfers	14	267	281
Release of appropriated funds	676	(2,946)	(2,270)
<b>Balances at end of year</b>	<u>\$ 33,714</u>	<u>\$ 80,039</u>	<u>\$ 113,753</u>
<b>Balances at end of year</b>		80,039	
Beneficial interest in perpetual trusts		6,782	
Net assets with donor restrictions		<u>\$ 86,821</u>	

**Dartmouth-Hitchcock Health and Subsidiaries**  
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**June 30, 2020 and 2019**

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<i>(in thousands of dollars)</i>	<b>2019</b>		<b>Total</b>
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	
<b>Balances at beginning of year</b>	\$ 29,506	\$ 78,197	\$ 107,703
Net investment return	1,184	2,491	3,675
Contributions	804	1,222	2,026
Transfers	(73)	(1,287)	(1,360)
Release of appropriated funds	-	(2,355)	(2,355)
<b>Balances at end of year</b>	<u>\$ 31,421</u>	<u>\$ 78,268</u>	<u>\$ 109,689</u>
<b>Balances at end of year</b>		78,268	
Beneficial interest in perpetual trusts		8,422	
Net assets with donor restrictions		<u>\$ 86,690</u>	

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

#### 10. Long-Term Debt

A summary of long-term debt at June 30, 2020 and 2019 is as follows:

<i>(in thousands of dollars)</i>	2020	2019
<b>Variable rate issues</b>		
New Hampshire Health and Education Facilities		
Authority (NHHEFA) Revenue Bonds		
Series 2018A, principal maturing in varying annual amounts, through August 2037 (1)	\$ 83,355	\$ 83,355
<b>Fixed rate issues</b>		
New Hampshire Health and Education Facilities		
Authority Revenue Bonds		
Series 2018B, principal maturing in varying annual amounts, through August 2048 (1)	303,102	303,102
Series 2020A, principal maturing in varying annual amounts, through August 2059 (2)	125,000	-
Series 2017A, principal maturing in varying annual amounts, through August 2040 (3)	122,435	122,435
Series 2017B, principal maturing in varying annual amounts, through August 2031 (3)	109,800	109,800
Series 2019A, principal maturing in varying annual amounts, through August 2043 (4)	99,165	-
Series 2018C, principal maturing in varying annual amounts, through August 2030 (5)	25,160	25,865
Series 2012, principal maturing in varying annual amounts, through July 2039 (6)	24,315	25,145
Series 2014A, principal maturing in varying annual amounts, through August 2022 (7)	19,765	26,960
Series 2014B, principal maturing in varying annual amounts, through August 2033 (7)	14,530	14,530
Series 2016B, principal maturing in varying annual amounts, through August 2045 (8)	10,970	10,970
<b>Note payable</b>		
Note payable to a financial institution due in monthly interest only payments through May 2023 (9)	125,000	-
Total obligated group debt	<u>\$ 1,062,597</u>	<u>\$ 722,162</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

A summary of long-term debt at June 30, 2020 and 2019 is as follows (continued):

<i>(in thousands of dollars)</i>	2020	2019
<b>Other</b>		
Note payable to a financial institution payable in interest free monthly installments through July 2015; collateralized by associated equipment	\$ 287	\$ 445
Note payable to a financial institution with entire principal due June 2029 that is collateralized by land and building. The note payable is interest free	273	323
Mortgage note payable to the US Dept of Agriculture; monthly payments of \$10,892 include interest of 2.375% through November 2046	2,560	2,629
Obligations under capital leases	-	17,526
Total nonobligated group debt	3,120	20,923
Total obligated group debt	1,062,597	722,162
Total long-term debt	1,065,717	743,085
Add: Original issue premium and discounts, net	89,542	25,542
Less: Current portion	9,467	10,914
Debt issuance costs, net	7,262	5,533
	\$ 1,138,530	\$ 752,180

Aggregate annual principal payments for the next five years ending June 30 and thereafter are as follows:

<i>(in thousands of dollars)</i>	2020
2021	\$ 9,467
2022	9,419
2023	131,626
2024	1,871
2025	1,954
Thereafter	911,380
	\$ 1,065,717

#### Dartmouth-Hitchcock Obligated Group (DHOG) Debt

MHMH established the DHOG in 1993 for the original purpose of issuing bonds financed through NHHEFA or the "Authority". The members of the obligated group consist of D-HH, MHMH, DHC, Cheshire, NLH, MAHHC, and, APD. D-HH is designated as the obligated group agent.

## **Dartmouth-Hitchcock Health and Subsidiaries**

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Revenue Bonds issued by members of the DHOG are administered through notes registered in the name of the Bond Trustee and in accordance with the terms of a Master Trust Indenture. The Master Trust Indenture contains provisions permitting the addition, withdrawal, or consolidation of members of the DHOG under certain conditions. The notes constitute a joint and several obligation of the members of the DHOG (and any other future members of the DHOG) and are equally and ratably collateralized by a pledge of the members' gross receipts. The DHOG is also subject to certain annual covenants under the Master Trust Indenture, the most restrictive is the Annual Debt Service Coverage Ratio (1.10x).

#### **(1) Series 2018A and Series 2018B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2018A and Series 2018B in February 2018. The Series 2018A Revenue Bonds were primarily used to refund a portion of Series 2015A and Series 2016A. The Series 2018B were primarily used to refund a portion of Series 2015A and Series 2016A, Revolving Line of Credit, Series 2012 Bank Loan and the Series 2015A and Series 2016A Swap terminations. A loss on the extinguishment of debt of approximately \$578,000 was recognized in non-operating gains (losses) on the statement of operations and changes in net assets, as a result of the refinancing. The interest on the Series 2018A Revenue Bonds is variable with a current interest rate of 5.00% and matures in variable amounts through 2037. The interest on the Series 2018B Revenue Bonds is fixed with an interest rate of 4.18% and matures in variable amounts through 2048.

#### **(2) Series 2020A Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds Series 2020A in February, 2020. The proceeds from the Series 2020A Revenue Bonds are being used primarily to fund the construction of a 212,000 square foot inpatient pavilion in Lebanon, NH as well as various equipment. The interest on the Series 2020A Revenue Bonds is fixed with an interest rate of 5.00% and matures in variable amounts through 2059.

#### **(3) Series 2017A and Series 2017B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2017A and Series 2017B in December, 2017. The Series 2017A Revenue Bonds were primarily used to refund Series 2009 and Series 2010 and the Series 2017B Revenue Bonds were used to refund Series 2012A and Series 2012B. The interest on the Series 2017A Revenue Bonds is fixed with an interest rate of 5.00% and matures in variable amounts through 2040. The interest on the Series 2017B Revenue Bonds is fixed with an interest rate of 2.54% and matures in variable amounts through 2031.

#### **(4) Series 2019A Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds Series 2019A in October, 2019. The proceeds from the Series 2019A Revenue Bonds are being used primarily to fund the construction of a 91,000 square foot expansion of facilities in Manchester, NH to include an Ambulatory Surgical Center as well as various equipment. The interest on the Series 2019A Revenue Bonds is fixed with an interest rate of 4.00% and matures in variable amounts through 2043.

## **Dartmouth-Hitchcock Health and Subsidiaries**

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##### **(5) Series 2018C Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2018C in August, 2018. The Series 2018C Revenue Bonds were used primarily to refinance the Series 2010 Revenue Bonds. The interest on the series 2018C Revenue Bonds is fixed with an interest rate of 3.22% and matures in variable amounts through 2030.

##### **(6) Series 2012 Revenue Bonds**

The NHHEFA issued \$29,650,000 of tax-exempt Revenue Bonds, Series 2012. The proceeds of these bonds were used to refund 1998 and 2009 Series Bonds, to finance the settlement cost of the interest rate swap, and to finance the purchase of certain equipment and renovations. The bonds have fixed interest coupon rates ranging from 2.0% to 5.0% (a net interest cost of 3.96%), and matures in variable amounts through 2039.

##### **(7) Series 2014A and Series 2014B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2014A and Series 2014B in August 2014. The proceeds from the Series 2014A and 2014B Revenue Bonds were used to partially refund the Series 2009 Revenue Bonds and to cover cost of issuance. Interest on the 2014A Revenue Bonds is fixed with an interest rate of 2.63% and matures at various dates through 2022. Interest on the Series 2014B Revenue Bonds is fixed with an interest rate of 4.00% and matures at various dates through 2033.

##### **(8) Series 2016B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2016B in July 2016 through a private placement with a financial institution. The Series 2016B Revenue Bonds were used to finance 2016 projects. The Series 2016B is fixed with an interest rate of 1.78% and matures at various dates through 2045.

##### **(9) Note payable to financial institution**

The DHOG issued a note payable to TD Bank in May 2020. Issued in response to the COVID-19 pandemic, the proceeds from the note will be used to fund working capital as needs require. The interest on the note payable is fixed with an interest rate of 2.02% and matures in 2023.

Outstanding joint and several indebtedness of the DHOG at June 30, 2020 and 2019 approximates \$1,062,597,000 and \$722,162,000, respectively.

The Health System Indenture agreements require establishment and maintenance of debt service reserves and other trustee held funds. Trustee held funds of approximately \$236,198,000 and \$631,000 at June 30, 2020 and 2019, respectively, are classified as assets limited as to use in the accompanying consolidated balance sheets (Note 5). In addition, debt service reserves of approximately \$9,286,000 and \$1,331,000 at June 30, 2020 and 2019, respectively, are classified as other current assets in the accompanying consolidated balance sheets. The debt service reserves are mainly comprised of escrowed construction funds at June 30, 2020 and escrowed funds held for future principal and interest payments at June 30, 2019.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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For the years ended June 30, 2020 and 2019 interest expense on the Health System's long term debt is reflected in the accompanying consolidated statements of operations and changes in net assets as operating expense of approximately \$27,322,000 and \$25,514,000 and other non-operating losses of \$3,784,000 and \$3,784,000, respectively.

#### 11. Employee Benefits

All eligible employees of the Health System are covered under various defined benefit and/or define contribution plans. In addition, certain members provide postretirement medical and life benefit plans to certain of its active and former employees who meet eligibility requirements. The postretirement medical and life plans are not funded.

All of the defined benefit plans within the Health System have been frozen and therefore there are no remaining participants earning benefits in any of the Health System's defined benefit plans.

The Health System continued to execute the settlement of obligations due to retirees in the defined benefit plans through bulk lump sum offerings or purchases of annuity contracts. The annuity purchases follow guidelines established by the Department of Labor (DOL). The Health System anticipates continued consideration and/or implementation of additional settlements over the next several years.

#### Defined Benefit Plans

Net periodic pension expense included in employee benefits in the consolidated statements of operations and changes in net assets is comprised of the components listed below for the years ended June 30, 2020 and 2019:

<i>(in thousands of dollars)</i>	<b>2020</b>	<b>2019</b>
Service cost for benefits earned during the year	\$ 170	\$ 150
Interest cost on projected benefit obligation	43,433	47,814
Expected return on plan assets	(62,436)	(65,270)
Net loss amortization	12,032	10,357
Total net periodic pension expense	<u>\$ (6,801)</u>	<u>\$ (6,949)</u>

The following assumptions were used to determine net periodic pension expense as of June 30, 2020 and 2019:

	<b>2020</b>	<b>2019</b>
Discount rate	3.00% - 3.10%	3.90 % – 4.60%
Rate of increase in compensation	N/A	N/A
Expected long-term rate of return on plan assets	7.50%	7.50%

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

The following table sets forth the funded status and amounts recognized in the Health System's consolidated financial statements for the defined benefit pension plans at June 30, 2020 and 2019:

<i>(in thousands of dollars)</i>	<b>2020</b>	<b>2019</b>
<b>Change in benefit obligation</b>		
Benefit obligation at beginning of year	\$ 1,135,523	\$ 1,087,940
Service cost	170	150
Interest cost	43,433	47,814
Benefits paid	(70,778)	(51,263)
Expenses paid	(168)	(170)
Actuarial loss	139,469	93,358
Settlements	(38,549)	(42,306)
Benefit obligation at end of year	<u>1,209,100</u>	<u>1,135,523</u>
<b>Change in plan assets</b>		
Fair value of plan assets at beginning of year	897,717	884,983
Actual return on plan assets	121,245	85,842
Benefits paid	(70,778)	(51,263)
Expenses paid	(168)	(170)
Employer contributions	19,986	20,631
Settlements	(38,549)	(42,306)
Fair value of plan assets at end of year	<u>929,453</u>	<u>897,717</u>
Funded status of the plans	(279,647)	(237,806)
Less: Current portion of liability for pension	(46)	(46)
Long term portion of liability for pension	<u>(279,601)</u>	<u>(237,760)</u>
Liability for pension	<u>\$ (279,647)</u>	<u>\$ (237,806)</u>

As of June 30, 2020 and 2019, the liability for pension is included in the liability for pension and other postretirement plan benefits in the accompanying consolidated balance sheets.

Amounts not yet reflected in net periodic pension expense and included in the change in net assets without donor restrictions include approximately \$546,818,000 and \$478,394,000 of net actuarial loss as of June 30, 2020 and 2019, respectively.

The estimated amounts to be amortized from net assets without donor restrictions into net periodic pension expense in fiscal year 2021 for net actuarial losses is \$12,752,000.

The accumulated benefit obligation for the defined benefit pension plans was approximately \$1,209,282 and \$1,135,770,000 at June 30, 2020 and 2019, respectively.

The following table sets forth the assumptions used to determine the benefit obligation at June 30, 2020 and 2019:

	<b>2020</b>	<b>2019</b>
Discount rate	3.00% - 3.10%	4.20 % – 4.50 %
Rate of increase in compensation	N/A	N/A

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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The primary investment objective for the Plan's assets is to support the Pension liabilities of the Pension Plans for Employees of the Health System, by providing long-term capital appreciation and by also using a Liability Driven Investing ("LDI") strategy to partially hedge the impact fluctuating interest rates have on the value of the Plan's liabilities. As of both June 30, 2020 and 2019, it is expected that the LDI strategy will hedge approximately 60% of the interest rate risk associated with pension liabilities. To achieve the appreciation and hedging objectives, the Plans utilize a diversified structure of asset classes designed to achieve stated performance objectives measured on a total return basis, which includes income plus realized and unrealized gains and losses.

The range of target allocation percentages and the target allocations for the various investments are as follows:

	<b>Range of Target Allocations</b>	<b>Target Allocations</b>
Cash and short-term investments	0–5%	3%
U.S. government securities	0–10	5
Domestic debt securities	20–58	40
Global debt securities	6–26	7
Domestic equities	5–35	18
International equities	5–15	11
Emerging market equities	3–13	5
Real estate investment trust funds	0–5	1
Private equity funds	0–5	0
Hedge funds	5–18	10

To the extent an asset class falls outside of its target range on a quarterly basis, the Health System shall determine appropriate steps, as it deems necessary, to rebalance the asset class.

The Boards of Trustees of the Health System, as Plan Sponsors, oversee the design, structure, and prudent professional management of the Health System's Plans' assets, in accordance with Board approved investment policies, roles, responsibilities and authorities and more specifically the following:

- Establishing and modifying asset class targets with Board approved policy ranges,
- Approving the asset class rebalancing procedures,
- Hiring and terminating investment managers, and
- Monitoring performance of the investment managers, custodians and investment consultants.

The hierarchy and inputs to valuation techniques to measure fair value of the Plans' assets are the same as outlined in Note 7. In addition, the estimation of fair value of investments in private equity and hedge funds for which the underlying securities do not have a readily determinable value is made using the NAV per share or its equivalent as a practical expedient. The Health System's Plans own interests in these funds rather than in securities underlying each fund and, therefore, are generally required to consider such investments as Level 2 or 3, even though the underlying securities may not be difficult to value or may be readily marketable.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

The following table sets forth the Health System's Plans' investments and deferred compensation plan assets that were accounted for at fair value as of June 30, 2020 and 2019:

2020						
<i>(in thousands of dollars)</i>	Level 1	Level 2	Level 3	Total	Redemption or Liquidation	Days' Notice
<b>Investments</b>						
Cash and short-term investments	\$ -	\$ 7,154	\$ -	\$ 7,154	Daily	1
U.S. government securities	49,843	-	-	49,843	Daily-Monthly	1-15
Domestic debt securities	133,794	318,259	-	452,053	Daily-Monthly	1-15
Global debt securities	-	69,076	-	69,076	Daily-Monthly	1-15
Domestic equities	152,688	24,947	-	177,635	Daily-Monthly	1-10
International equities	13,555	70,337	-	83,892	Daily-Monthly	1-11
Emerging market equities	-	39,984	-	39,984	Daily-Monthly	1-17
REIT funds	-	2,448	-	2,448	Daily-Monthly	1-17
Private equity funds	-	-	17	17	See Note 7	See Note 7
Hedge funds	-	-	47,351	47,351	Quarterly-Annual	60-96
Total investments	<u>\$ 349,880</u>	<u>\$ 532,205</u>	<u>\$ 47,368</u>	<u>\$ 929,453</u>		
2019						
<i>(in thousands of dollars)</i>	Level 1	Level 2	Level 3	Total	Redemption or Liquidation	Days' Notice
<b>Investments</b>						
Cash and short-term investments	\$ 166	\$ 18,232	\$ -	\$ 18,398	Daily	1
U.S. government securities	48,580	-	-	48,580	Daily-Monthly	1-15
Domestic debt securities	122,178	273,424	-	395,602	Daily-Monthly	1-15
Global debt securities	428	75,146	-	75,574	Daily-Monthly	1-15
Domestic equities	159,259	18,316	-	177,575	Daily-Monthly	1-10
International equities	17,232	77,146	-	94,378	Daily-Monthly	1-11
Emerging market equities	321	39,902	-	40,223	Daily-Monthly	1-17
REIT funds	357	2,883	-	3,240	Daily-Monthly	1-17
Private equity funds	-	-	21	21	See Note 7	See Note 7
Hedge funds	-	-	44,126	44,126	Quarterly-Annual	60-96
Total investments	<u>\$ 348,521</u>	<u>\$ 505,049</u>	<u>\$ 44,147</u>	<u>\$ 897,717</u>		

The following tables present additional information about the changes in Level 3 assets measured at fair value for the years ended June 30, 2020 and 2019:

2020			
<i>(in thousands of dollars)</i>	Hedge Funds	Private Equity Funds	Total
<b>Balances at beginning of year</b>	\$ 44,126	\$ 21	\$ 44,147
Net unrealized gains (losses)	3,225	(4)	3,221
<b>Balances at end of year</b>	<u>\$ 47,351</u>	<u>\$ 17</u>	<u>\$ 47,368</u>

**Dartmouth-Hitchcock Health and Subsidiaries**  
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<i>(in thousands of dollars)</i>	<b>2019</b>		
	<b>Hedge Funds</b>	<b>Private Equity Funds</b>	<b>Total</b>
<b>Balances at beginning of year</b>	\$ 44,250	\$ 23	\$ 44,273
Net unrealized losses	(124)	(2)	(126)
<b>Balances at end of year</b>	<u>\$ 44,126</u>	<u>\$ 21</u>	<u>\$ 44,147</u>

The total aggregate net unrealized gains (losses) included in the fair value of the Level 3 investments as of June 30, 2020 and 2019 were approximately \$18,261,000 and \$14,617,000, respectively. There were no transfers into and out of Level 3 measurements during the years ended June 30, 2020 and 2019.

There were no transfers into and out of Level 1 and 2 measurements due to changes in valuation methodologies during the years ended June 30, 2020 and 2019.

The weighted average asset allocation for the Health System's Plans at June 30, 2020 and 2019 by asset category is as follows:

	<b>2020</b>	<b>2019</b>
Cash and short-term investments	1 %	2 %
U.S. government securities	5	5
Domestic debt securities	49	44
Global debt securities	8	9
Domestic equities	19	20
International equities	9	11
Emerging market equities	4	4
Hedge funds	5	5
	<u>100 %</u>	<u>100 %</u>

The expected long-term rate of return on plan assets is reviewed annually, taking into consideration the asset allocation, historical returns on the types of assets held, and the current economic environment. Based on these factors, it is expected that the pension assets will earn an average of 7.50% per annum.

The Health System is expected to contribute approximately \$25,755,000 to the Plans in 2021 however actual contributions may vary from expected amounts.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid for the years ending June 30 and thereafter:

*(in thousands of dollars)*

2021	\$	51,007
2022		53,365
2023		55,466
2024		57,470
2025		59,436
2026 – 2028		321,419

Effective May 1, 2020, the Health System terminated a defined benefit plan and settled the accumulated benefit obligation of \$18,795,000 by purchasing nonparticipating annuity contracts. The plan assets at fair value were \$11,836,000.

#### Defined Contribution Plans

The Health System has an employer-sponsored 401(a) plan for certain of its members, under which the employer makes base, transition and discretionary match contributions based on specified percentages of compensation and employee deferral amounts. Total employer contributions to the plan of approximately \$51,222,000 and \$40,537,000 in 2020 and 2019, respectively, are included in employee benefits in the accompanying consolidated statements of operations and changes in net assets.

Various 403(b) and tax- sheltered annuity plans are available to employees of the Health System. Plan specifications vary by member and plan. No employer contributions were made to any of these plans in 2020 and 2019 respectively.

#### Postretirement Medical and Life Benefits

The Health System has postretirement medical and life benefit plans covering certain of its active and former employees. The plans generally provide medical or medical and life insurance benefits to certain retired employees who meet eligibility requirements. The plans are not funded.

Net periodic postretirement medical and life benefit (income) cost is comprised of the components listed below for the years ended June 30, 2020 and 2019:

*(in thousands of dollars)*

	2020	2019
Service cost	\$ 609	\$ 384
Interest cost	1,666	1,842
Net prior service income	(5,974)	(5,974)
Net loss amortization	469	10
	<u>\$ (3,230)</u>	<u>\$ (3,738)</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

The following table sets forth the accumulated postretirement medical and life benefit obligation and amounts recognized in the Health System's consolidated financial statements at June 30, 2020 and 2019:

<i>(in thousands of dollars)</i>	2020	2019
<b>Change in benefit obligation</b>		
Benefit obligation at beginning of year	\$ 46,671	\$ 42,581
Service cost	609	384
Interest cost	1,666	1,842
Benefits paid	(3,422)	(3,149)
Actuarial loss	2,554	5,013
	<u>48,078</u>	<u>46,671</u>
Benefit obligation at end of year	<u>48,078</u>	<u>46,671</u>
Funded status of the plans	<u>\$ (48,078)</u>	<u>\$ (46,671)</u>
Current portion of liability for postretirement medical and life benefits	\$ (3,422)	\$ (3,422)
Long term portion of liability for postretirement medical and life benefits	<u>(44,656)</u>	<u>(43,249)</u>
Liability for postretirement medical and life benefits	<u>\$ (48,078)</u>	<u>\$ (46,671)</u>

As of June 30, 2020 and 2019, the liability for postretirement medical and life benefits is included in the liability for pension and other postretirement plan benefits in the accompanying consolidated balance sheets.

Amounts not yet reflected in net periodic postretirement medical and life benefit income and included in the change in net assets without donor restrictions are as follows:

<i>(in thousands of dollars)</i>	2020	2019
Net prior service income	\$ (3,582)	\$ (9,556)
Net actuarial loss	10,335	8,386
	<u>\$ 6,753</u>	<u>\$ (1,170)</u>

The estimated amounts that will be amortized from net assets without donor restrictions into net periodic postretirement income in fiscal year 2021 for net prior service cost is \$5,974,000.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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The following future benefit payments, which reflect expected future service, as appropriate, are expected to be paid for the year ending June 30, 2021 and thereafter:

*(in thousands of dollars)*

2021	\$	3,422
2022		3,436
2023		3,622
2024		3,642
2025		3,522
2026-2028		16,268

In determining the accumulated postretirement medical and life benefit obligation, the Health System used a discount rate of 2.90% in 2020 and an assumed healthcare cost trend rate of 6.50%, trending down to 5.00% in 2024 and thereafter. Increasing the assumed healthcare cost trend rates by one percentage point in each year would increase the accumulated postretirement medical benefit obligation as of June 30, 2020 and 2019 by \$1,772,000 and \$1,601,000 and the net periodic postretirement medical benefit cost for the years then ended by \$122,000 and \$77,000, respectively. Decreasing the assumed healthcare cost trend rates by one percentage point in each year would decrease the accumulated postretirement medical benefit obligation as of June 30, 2020 and 2019 by \$1,603,000 and \$1,452,000 and the net periodic postretirement medical benefit cost for the years then ended by \$108,000 and \$71,000, respectively.

#### 12. Professional and General Liability Insurance Coverage

Mary Hitchcock Memorial Hospital and Dartmouth-Hitchcock Clinic, along with Dartmouth College, Cheshire Medical Center, The New London Hospital Association, Mt. Ascutney Hospital and Health Center, and the Visiting Nurse and Hospice for VT and NH are provided professional and general liability insurance on a claims-made basis through Hamden Assurance Risk Retention Group, Inc. (RRG), a VT captive insurance company. Effective November 1, 2018 Alice Peck Day Memorial Hospital is provided professional and general liability insurance coverage through RRG. RRG reinsures the majority of this risk to Hamden Assurance Company Limited (HAC), a captive insurance company domiciled in Bermuda and to a variety of commercial reinsurers. Mary Hitchcock Memorial Hospital, Dartmouth-Hitchcock Clinic, and Dartmouth College have ownership interests in both HAC and RRG. The insurance program provides coverage to the covered institutions and named insureds on a modified claims-made basis which means coverage is triggered when claims are made. Premiums and related insurance deposits are actuarially determined based on asserted liability claims adjusted for future development. The reserves for outstanding losses are recorded on an undiscounted basis.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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Selected financial data of HAC and RRG, taken from the latest available financial statements at June 30, 2020 and 2019, are summarized as follows:

	2020		
	HAC	RRG	Total
<i>(in thousands of dollars)</i>			
Assets	\$ 93,686	\$ 1,785	\$ 95,471
Shareholders' equity	13,620	50	13,670

	2019		
	HAC	RRG	Total
<i>(in thousands of dollars)</i>			
Assets	\$ 75,867	\$ 2,201	\$ 78,068
Shareholders' equity	13,620	50	13,670

### 13. Commitments and Contingencies

#### Litigation

The Health System is involved in various malpractice claims and legal proceedings of a nature considered normal to its business. The claims are in various stages and some may ultimately be brought to trial. While it is not feasible to predict or determine the outcome of any of these claims, it is the opinion of management that the final outcome of these claims will not have a material effect on the consolidated financial position of the Health System.

#### Lines of Credit

The Health System has entered into Loan Agreements with financial institutions establishing access to revolving loans ranging from \$10,000,000 up to \$30,000,000. Interest is variable and determined using LIBOR or the Wall Street Journal Prime Rate. The Loan Agreements are due to expire March 31, 2021. There was no outstanding balance under the lines of credit as of June 30, 2020 and 2019. Interest expense was approximately \$20,000 and \$95,000, respectively, and is included in the consolidated statements of operations and changes in net assets.

### 14. Functional Expenses

Operating expenses are presented by functional classification in accordance with the overall service missions of the Health System. Each functional classification displays all expenses related to the underlying operations by natural classification. Salaries, employee benefits, medical supplies and medications, and purchased services and other expenses are generally considered variable and are allocated to the mission that best aligns to the type of service provided. Medicaid enhancement tax is allocated to program services. Interest expense is allocated based on usage of debt-financed space. Depreciation and amortization is allocated based on square footage and specific identification of equipment used by department.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

Operating expenses of the Health System by functional and natural basis are as follows for the year ended June 30, 2020:

<i>(in thousands of dollars)</i>	2020			
	Program Services	Management and General	Fundraising	Total
<b>Operating expenses</b>				
Salaries	\$ 981,320	\$ 161,704	\$ 1,799	\$ 1,144,823
Employee benefits	231,361	41,116	395	272,872
Medical supplies and medications	454,143	1,238	-	455,381
Purchased services and other	236,103	120,563	3,830	360,496
Medicaid enhancement tax	76,010	-	-	76,010
Depreciation and amortization	26,110	65,949	105	92,164
Interest	5,918	21,392	12	27,322
Total operating expenses	<u>\$ 2,010,965</u>	<u>\$ 411,962</u>	<u>\$ 6,141</u>	<u>\$ 2,429,068</u>
<b>Non-operating income</b>				
Employee benefits	\$ 9,239	\$ 1,549	\$ 22	\$ 10,810
Total non-operating income	<u>\$ 9,239</u>	<u>\$ 1,549</u>	<u>\$ 22</u>	<u>\$ 10,810</u>

Operating expenses of the Health System by functional and natural basis are as follows for the year ended June 30, 2019:

<i>(in thousands of dollars)</i>	2019			
	Program Services	Management and General	Fundraising	Total
<b>Operating expenses</b>				
Salaries	\$ 922,902	\$ 138,123	\$ 1,526	\$ 1,062,551
Employee benefits	188,634	73,845	333	262,812
Medical supplies and medications	406,782	1,093	-	407,875
Purchased services and other	212,209	108,783	2,443	323,435
Medicaid enhancement tax	70,061	-	-	70,061
Depreciation and amortization	37,528	50,785	101	88,414
Interest	3,360	22,135	19	25,514
Total operating expenses	<u>\$ 1,841,476</u>	<u>\$ 394,764</u>	<u>\$ 4,422</u>	<u>\$ 2,240,662</u>
<b>Non-operating income</b>				
Employee benefits	\$ 9,651	\$ 1,556	\$ 14	\$ 11,221
Total non-operating income	<u>\$ 9,651</u>	<u>\$ 1,556</u>	<u>\$ 14</u>	<u>\$ 11,221</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

#### 15. Liquidity

The Health System is substantially supported by cash generated from operations. In addition, the Health System holds financial assets for specific purposes which are limited as to use. Thus, certain financial assets reported on the accompanying consolidated balance sheet may not be available for general expenditure within one year of the balance sheet date.

The Health System's financial assets available at June 30, 2020 and 2019 to meet cash needs for general expenditures within one year of June 30, 2020 and 2019, are as follows:

<i>(in thousands of dollars)</i>	2020	2019
Cash and cash equivalents	\$ 453,223	\$ 143,587
Patient accounts receivable	183,819	221,125
Assets limited as to use	1,134,526	876,249
Other investments for restricted activities	140,580	134,119
Total financial assets	<u>\$ 1,912,148</u>	<u>\$ 1,375,080</u>
Less: Those unavailable for general expenditure within one year:		
Investments held by captive insurance companies	54,596	66,082
Investments for restricted activities	140,580	134,119
Bond proceeds held for capital projects	245,484	-
Other investments with liquidity horizons greater than one year	111,408	97,063
Total financial assets available within one year	<u>\$ 1,360,080</u>	<u>\$ 1,077,816</u>

For the years ended June 30, 2020 and June 30, 2019, the Health System generated positive cash flow from operations of approximately \$269,144,000 and \$161,145,000, respectively. In addition, the Health System's liquidity management plan includes investing excess daily cash in intermediate or long term investments based on anticipated liquidity needs. The Health System has an available line of credit of up to \$30,000,000 which it can draw upon as needed to meet its liquidity needs. See Note 13 for further details on the line of credit.

#### 16. Lease Commitments

In February 2016, the FASB issued ASU 2016-02 (Topic 842) "Leases." Topic 842 supersedes the lease requirements in Accounting Standards Codification Topic 840, "Leases." Under Topic 842, lessees are required to recognize assets and liabilities on the balance sheet for most leases and provide enhanced disclosures. Leases will be classified as either finance or operating. D-HH adopted Topic 842 effective July 1, 2019.

D-HH applied Topic 842 to all leases as of July 1, 2019 with comparative periods continuing to be reported under Topic 840. We have elected the practical expedient package to not reassess at adoption (i) expired or existing contracts for whether they are or contain a lease, (ii) the lease classification of any existing leases or (iii) initial direct costs for existing leases. We have also elected the policy exemption that allows lessees to choose to not separate lease and non-lease components by class of underlying asset and are applying this expedient to all relevant asset classes.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

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D-HH determines if an arrangement is or contains a lease at inception of the contract. Right-of-use assets represent our right to use the underlying assets for the lease term and our lease liabilities represent our obligation to make lease payments arising from the leases. Right-of-use assets and lease liabilities are recognized at commencement date based on the present value of lease payments over the lease term. We use the implicit rate noted within the contract. If not readily available, we use our estimated incremental borrowing rate, which is derived using a collateralized borrowing rate for the same currency and term as the associated lease. A right-of-use asset and lease liability is not recognized for leases with an initial term of 12 months or less and we recognize lease expense for these leases on a straight-line basis over the lease term within lease and rental expense.

Our operating leases are primarily for real estate, including certain acute care facilities, off-campus outpatient facilities, medical office buildings, and corporate and other administrative offices. Our real estate lease agreements typically have initial terms of 5 to 10 years. These real estate leases may include one or more options to renew, with renewals that can extend the lease term from 2 to 5 years. The exercise of lease renewal options is at our sole discretion. When determining the lease term, we included options to extend or terminate the lease when it is reasonably certain that we will exercise that option.

On adoption, the Health System recognized lease liabilities and right-of-use assets of \$60,269,884, respectively.

The components of lease expense for the year ended June 30, 2020 are as follows:

<i>(in thousands of dollars)</i>	<b>12 months ended June 30, 2020</b>
Operating lease cost	8,992
Variable and short term lease cost (a)	1,497
Total lease and rental expense	<u>10,489</u>
Finance lease cost:	
Depreciation of property under finance lease	2,454
Interest on debt of property under finance lease	524
Total finance lease cost	<u>2,978</u>

(a) Includes equipment, month-to-month and leases with a maturity of less than 12 months.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

Supplemental cash flow information related to leases for the year ended June 30, 2020 are as follows:

<i>(in thousands of dollars)</i>	<b>12 months ended June 30, 2020</b>
Cash paid for amounts included in the measurement of lease liabilities:	
Operating cash flows from operating leases	8,755
Operating cash flows from finance leases	542
Financing cash flows from finance leases	2,429
	<u>\$ 11,726</u>

Supplemental balance sheet information related to leases as of June 30, 2020 are as follows:

<i>(in thousands of dollars)</i>	<b>12 months ended June 30, 2020</b>
<b>Operating Leases</b>	
Right of use assets - operating leases	42,621
Accumulated amortization	(8,425)
Right of use assets - operating leases, net	<u>34,196</u>
Current portion of right of use obligations	9,194
Long-term right of use obligations, excluding current portion	25,308
Total operating lease liabilities	<u>34,502</u>
<b>Finance Leases</b>	
Right of use assets - finance leases	26,076
Accumulated depreciation	(2,687)
Right of use assets - finance leases, net	<u>23,389</u>
Current portion of right of use obligations	2,581
Long-term right of use obligations, excluding current portion	21,148
Total finance lease liabilities	<u>23,729</u>
Weighted Average remaining lease term, years	
Operating leases	4.64
Finance leases	19.39
Weighted Average discount rate	
Operating leases	2.24%
Finance leases	2.22%

Included in the \$42.6 million of right-of-use assets obtained in exchange for operating lease obligations is \$5.6 million of new and modified operating leases entered into during the year ended June 30, 2020. Included in the \$26.1 million of right-of-use assets obtained in exchange for finance lease obligations is \$2.3 million of new and modified operating leases entered into during the year ended June 30, 2020.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Notes to Financial Statements

#### June 30, 2020 and 2019

Future maturities of lease liabilities as of June 30, 2020 are as follows:

<i>(in thousands of dollars)</i>	<u>Operating Leases</u>	<u>Finance Leases</u>
Year ending June 30:		
2021	9,852	3,314
2022	8,274	3,003
2023	6,836	2,718
2024	5,650	1,892
2025	3,023	1,109
Thereafter	2,794	17,339
Total lease payments	<u>36,429</u>	<u>29,374</u>
Less: Imputed interest	1,927	5,645
Total lease payments	<u>\$ 34,502</u>	<u>\$ 23,729</u>

Future minimum rental payments under lease commitments with a term of more than one year as of June 30, 2019, prior to our adoption of ASC 842 are as follows:

<i>(in thousands of dollars)</i>	<u>Capital Leases</u>	<u>Operating Leases</u>
Year ending June 30:		
2020	1,706	11,342
2021	1,467	10,469
2022	1,471	7,488
2023	1,494	6,303
2024	1,230	4,127
Thereafter	10,158	5,752
Total lease payments	<u>\$ 17,526</u>	<u>\$ 45,481</u>

The Health System's rental expense totaled approximately \$12,707,000 for the year ended June 30, 2019.

#### 17. COVID - 19

In March 2020, the World Health Organization declared the COVID-19 outbreak a pandemic and the United States federal government declared COVID-19 a national emergency. The Health System quickly developed and implemented an emergency response to the situation to ensure the safety of its patients and staff across the System. A key decision was made to postpone elective and non-urgent care in mid-March. Several factors drove that decision, including efforts to reduce the spread of COVID-19; conservation of personal protective equipment ("PPE"), which was and remains in critically short supply worldwide; and at the urging of the CDC and U.S. Surgeon General who in March urged all hospitals to reduce the number of elective procedures and visits.

On March 27, 2020, the President of the United States signed into law the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") to provide economic assistance to a wide array of industries to ease the financial impact of COVID-19. As part of the CARES Act, the Centers for Medicare and Medicaid Services ("CMS") expanded its Accelerated and Advance Payment Program which allows participants to receive expedited payments during periods of national emergencies.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Consolidated Notes to Financial Statements**

#### **June 30, 2020 and 2019**

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As of June 30, 2020, the Health System has received approximately \$88,877,000 in governmental assistance including funding under the CARES Act. This includes recognition of approximately \$88,725,000 of stimulus revenue recorded as a component of other operating revenue in the consolidated statements of operations and changes in net assets as a result of satisfying the conditions of general and targeted grant funding under the Provider Relief Fund established by the CARES Act. The Health System recognized revenue related to the CARES Act provider relief funding based on information contained in laws and regulations, as well as interpretations issued by the HHS, governing the funding that was publicly available as of June 30, 2020. The Health System recorded approximately \$239,500,000 attributable to the Medicare Accelerated and Advance Payment Program representing working capital financing to be repaid through the provision of future services. These funds are recorded as a contract liability as a payment received before performing services. This amount is reported as a component of estimated third party settlements in the consolidated balance sheet as of June 30, 2020. Subsequent to June 30, 2020, the Health System received additional stimulus funding attributable to a targeted distribution of approximately \$19,700,000 for Safety Net Hospitals and \$2,500,000 for a general distribution.

Additionally, the CARES Act provides for payroll tax relief, including employee retention tax credits and the deferral of all employer Social Security tax payments to help employers in the face of economic hardship related to the COVID-19 pandemic. As of June 30, 2020, the Health System deferred approximately \$13,727,000 attributable to the employer portion of Social Security taxes and \$2,600,000 of employee retention tax credits. D-HH Leadership has also taken advantage of additional Federal and State programs including the Payroll Tax Deferral, Employee Retention Credit, First Responder Support, Front-Line Employees Hazard Pay Grant Program and FEMA funding to help offset some of the incremental costs being incurred to provide comprehensive and safe care during the pandemic.

#### **18. Subsequent Events**

The Health System has assessed the impact of subsequent events through November 17, 2020, the date the audited consolidated financial statements were issued, and has concluded that there were no such events that require adjustment to the audited consolidated financial statements or disclosure in the notes to the audited consolidated financial statements other than as noted below.

#### **HHS Reporting Requirements for the CARES Act**

In September 2020 and October 2020, HHS issued new reporting requirements for the CARES Act provider relief funding. The new requirements first require Hospitals to identify healthcare-related expenses attributable to the COVID-19 pandemic that remain unreimbursed by another source. If those expenses do not exceed the provider relief funding received, Hospitals will need to demonstrate that the remaining provider relief funds were used to compensate for a negative variance in year over year patient service revenue. HHS is entitled to recoup Provider Relief Funding in excess of the sum of expenses attributable to the COVID-19 pandemic that remain unreimbursed by another source and the decline in calendar year over year patient care revenue. Due to these new reporting requirements there is at least a reasonable possibility that amounts recorded under the CARES Act provider relief fund by the Health System may change in future periods.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Consolidated Notes to Financial Statements**

#### **June 30, 2020 and 2019**

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#### **Medicare and Medicaid Services (“CMS”) expanded Accelerated and Advance Payment Program**

In October 2020, new regulations were issued to revise the recoupment start date from August 2020 to April 2021.

#### **Note Payable Amendment**

In October 2020, the note payable issued to TD Bank in May 2020 was amended. Under the amended terms, the interest on the note payable is fixed at a rate of 2.56%, and matures in 2035. Repayment terms are semi-annual, interest only through July 2024, with annual principal payments to begin August 2024. The obligation can be satisfied at any time beforehand, without penalty.

**Consolidating Supplemental Information – Unaudited**

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2020

<i>(in thousands of dollars)</i>	Dartmouth-Hitchcock Health	Dartmouth-Hitchcock	Cheshire Medical Center	Alice Peck Day Memorial	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non-Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Assets</b>											
<b>Current assets</b>											
Cash and cash equivalents	\$ 108,856	\$ 217,352	\$ 43,940	\$ 26,079	\$ 22,874	\$ 14,377	\$ -	\$ 433,478	\$ 19,745	\$ -	\$ 453,223
Patient accounts receivable, net	-	146,886	11,413	8,634	10,200	4,367	-	181,500	2,319	-	183,819
Prepaid expenses and other current assets	25,243	179,432	37,538	3,808	6,105	1,715	(82,822)	171,019	(8,870)	(243)	161,906
Total current assets	134,099	543,670	92,891	38,521	39,179	20,459	(82,822)	785,997	13,194	(243)	798,948
Assets limited as to use	344,737	927,207	19,376	13,044	12,768	12,090	(235,568)	1,093,654	40,872	-	1,134,526
Notes receivable, related party	848,250	593	-	1,211	-	-	(848,843)	1,211	(1,211)	-	-
Other investments for restricted activities	-	98,490	6,970	97	3,077	6,266	-	114,900	25,680	-	140,580
Property, plant, and equipment, net	8	466,938	64,803	20,805	43,612	16,823	-	612,989	30,597	-	643,586
Right of use assets	1,542	32,714	1,822	17,574	621	3,221	-	57,494	91	-	57,585
Other assets	2,242	122,481	1,299	14,748	5,482	4,603	(10,971)	139,884	(2,546)	-	137,338
Total assets	\$ 1,330,878	\$ 2,192,093	\$ 187,161	\$ 106,000	\$ 104,739	\$ 63,462	\$ (1,178,204)	\$ 2,806,129	\$ 106,677	\$ (243)	\$ 2,912,563
<b>Liabilities and Net Assets</b>											
<b>Current liabilities</b>											
Current portion of long-term debt	\$ -	\$ 7,380	\$ 865	\$ 747	\$ 147	\$ 232	\$ -	\$ 9,371	\$ 96	\$ -	\$ 9,467
Current portion of right of use obligations	338	8,752	420	1,316	259	631	-	11,716	59	-	11,775
Current portion of liability for pension and other postretirement plan benefits	-	3,468	-	-	-	-	-	3,468	-	-	3,468
Accounts payable and accrued expenses	272,764	126,283	39,845	3,087	4,250	3,406	(318,391)	131,244	(1,985)	(243)	129,016
Accrued compensation and related benefits	-	122,392	7,732	3,570	3,875	3,582	-	141,151	1,840	-	142,991
Estimated third-party settlements	-	210,144	34,664	25,421	24,667	6,430	-	301,326	1,199	-	302,525
Total current liabilities	273,102	478,419	83,526	34,141	33,198	14,281	(318,391)	598,276	1,209	(243)	599,242
Notes payable, related party	-	814,525	-	-	27,718	6,600	(848,843)	-	-	-	-
Long-term debt, excluding current portion	1,050,694	37,373	23,617	24,312	147	10,595	(10,970)	1,135,768	2,762	-	1,138,530
Right of use obligations, excluding current portion	1,203	24,290	1,432	16,429	368	2,698	-	46,420	36	-	46,456
Insurance deposits and related liabilities	-	75,697	475	325	388	220	-	77,105	41	-	77,146
Liability for pension and other postretirement plan benefits, excluding current portion	-	301,907	21,840	-	-	511	-	324,258	(1)	-	324,257
Other liabilities	-	117,631	1,506	384	2,026	-	-	121,547	22,131	-	143,678
Total liabilities	1,324,999	1,849,842	132,396	75,591	63,845	34,905	(1,178,204)	2,303,374	26,178	(243)	2,329,309
<b>Commitments and contingencies</b>											
<b>Net assets</b>											
Net assets without donor restrictions	5,524	242,824	47,729	29,464	36,158	21,247	-	382,946	48,040	40	431,026
Net assets with donor restrictions	355	99,427	7,036	945	4,736	7,310	-	119,809	32,459	(40)	152,228
Total net assets	5,879	342,251	54,765	30,409	40,894	28,557	-	502,755	80,499	-	583,254
Total liabilities and net assets	\$ 1,330,878	\$ 2,192,093	\$ 187,161	\$ 106,000	\$ 104,739	\$ 63,462	\$ (1,178,204)	\$ 2,806,129	\$ 106,677	\$ (243)	\$ 2,912,563

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2020

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD and Subsidiaries	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Assets</b>									
<b>Current assets</b>									
Cash and cash equivalents	\$ 108,856	\$ 218,295	\$ 47,642	\$ 22,874	\$ 14,568	\$ 34,072	\$ 6,916	\$ -	\$ 453,223
Patient accounts receivable, net	-	146,887	11,413	10,200	4,439	8,634	2,246	-	183,819
Prepaid expenses and other current assets	25,243	180,137	27,607	6,105	1,737	2,986	1,156	(83,065)	161,906
<b>Total current assets</b>	<b>134,099</b>	<b>545,319</b>	<b>86,662</b>	<b>39,179</b>	<b>20,744</b>	<b>45,692</b>	<b>10,318</b>	<b>(83,065)</b>	<b>798,948</b>
<b>Assets limited as to use</b>	<b>344,737</b>	<b>946,938</b>	<b>18,001</b>	<b>12,768</b>	<b>13,240</b>	<b>13,044</b>	<b>21,366</b>	<b>(235,568)</b>	<b>1,134,526</b>
Notes receivable, related party	848,250	593	-	-	-	-	-	(848,843)	-
Other investments for restricted activities	-	105,869	25,272	3,077	6,265	97	-	-	140,580
Property, plant, and equipment, net	8	469,613	68,374	43,612	18,432	40,126	3,421	-	643,586
Right of use assets	1,542	32,714	1,822	621	3,220	17,574	92	-	57,585
Other assets	2,242	122,647	7,429	5,482	2,152	8,199	158	(10,971)	137,338
<b>Total assets</b>	<b>\$ 1,330,878</b>	<b>\$ 2,223,693</b>	<b>\$ 207,560</b>	<b>\$ 104,739</b>	<b>\$ 64,053</b>	<b>\$ 124,732</b>	<b>\$ 35,355</b>	<b>\$ (1,178,447)</b>	<b>\$ 2,912,563</b>
<b>Liabilities and Net Assets</b>									
<b>Current liabilities</b>									
Current portion of long-term debt	\$ -	\$ 7,380	\$ 865	\$ 147	\$ 257	\$ 747	\$ 71	\$ -	\$ 9,467
Current portion of right of use obligations	338	8,752	420	259	631	1,316	59	-	11,775
Current portion of liability for pension and other postretirement plan benefits	-	3,468	-	-	-	-	-	-	3,468
Accounts payable and accrued expenses	272,762	126,684	35,117	4,251	3,517	3,528	1,791	(318,634)	129,016
Accrued compensation and related benefits	-	122,392	7,732	3,875	3,626	3,883	1,483	-	142,991
Estimated third-party settlements	-	210,143	34,664	24,667	6,430	25,421	1,200	-	302,525
<b>Total current liabilities</b>	<b>273,100</b>	<b>478,819</b>	<b>78,798</b>	<b>33,199</b>	<b>14,461</b>	<b>34,895</b>	<b>4,604</b>	<b>(318,634)</b>	<b>599,242</b>
Notes payable, related party	-	814,525	-	27,718	6,600	-	-	(848,843)	-
Long-term debt, excluding current portion	1,050,694	37,373	23,618	147	10,867	24,312	2,489	(10,970)	1,138,530
Right of use obligations, excluding current portion	1,203	24,290	1,433	368	2,700	16,429	33	-	46,456
Insurance deposits and related liabilities	-	75,697	475	388	222	325	39	-	77,146
Liability for pension and other postretirement plan benefits, excluding current portion	-	301,907	21,840	-	510	-	-	-	324,257
Other liabilities	-	117,631	1,506	2,026	-	22,515	-	-	143,678
<b>Total liabilities</b>	<b>1,324,997</b>	<b>1,850,242</b>	<b>127,670</b>	<b>63,846</b>	<b>35,360</b>	<b>98,476</b>	<b>7,165</b>	<b>(1,178,447)</b>	<b>2,329,309</b>
<b>Commitments and contingencies</b>									
<b>Net assets</b>									
Net assets without donor restrictions	5,526	266,327	48,549	36,158	21,385	24,881	28,160	40	431,026
Net assets with donor restrictions	355	107,124	31,341	4,735	7,308	1,375	30	(40)	152,228
<b>Total net assets</b>	<b>5,881</b>	<b>373,451</b>	<b>79,890</b>	<b>40,893</b>	<b>28,693</b>	<b>26,256</b>	<b>28,190</b>	<b>-</b>	<b>583,254</b>
<b>Total liabilities and net assets</b>	<b>\$ 1,330,878</b>	<b>\$ 2,223,693</b>	<b>\$ 207,560</b>	<b>\$ 104,739</b>	<b>\$ 64,053</b>	<b>\$ 124,732</b>	<b>\$ 35,355</b>	<b>\$ (1,178,447)</b>	<b>\$ 2,912,563</b>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2019

<i>(in thousands of dollars)</i>	Dartmouth-Hitchcock Health	Dartmouth-Hitchcock	Cheshire Medical Center	Alice Peck Day Memorial	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non-Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Assets</b>											
<b>Current assets</b>											
Cash and cash equivalents	\$ 42,456	\$ 47,465	\$ 9,411	\$ 7,066	\$ 10,462	\$ 8,372	\$ -	\$ 125,232	\$ 18,355	\$ -	\$ 143,587
Patient accounts receivable, net	-	180,938	15,880	7,279	8,960	5,010	-	218,067	3,058	-	221,125
Prepaid expenses and other current assets	14,178	139,034	8,563	2,401	5,567	1,423	(74,083)	97,083	1,421	(3,009)	95,495
Total current assets	56,634	367,437	33,854	16,746	24,989	14,805	(74,083)	440,382	22,834	(3,009)	460,207
<b>Assets limited as to use</b>	92,602	688,485	18,759	12,684	12,427	11,619	-	836,576	39,673	-	876,249
Notes receivable, related party	553,484	752	-	1,406	-	-	(554,236)	1,406	(1,406)	-	-
Other investments for restricted activities	-	91,882	6,970	31	2,973	6,323	-	108,179	25,940	-	134,119
Property, plant, and equipment, net	22	432,277	67,147	30,945	41,946	17,797	-	590,134	31,122	-	621,256
Right of use assets	-	-	-	-	-	-	-	-	-	-	-
Other assets	3,518	108,208	1,279	15,019	6,042	4,388	(10,970)	127,484	(3,013)	-	124,471
Total assets	\$ 706,260	\$ 1,689,041	\$ 128,009	\$ 76,831	\$ 88,377	\$ 54,932	\$ (639,289)	\$ 2,104,161	\$ 115,150	\$ (3,009)	\$ 2,216,302
<b>Liabilities and Net Assets</b>											
<b>Current liabilities</b>											
Current portion of long-term debt	\$ -	\$ 8,226	\$ 830	\$ 954	\$ 547	\$ 262	\$ -	\$ 10,819	\$ 95	\$ -	\$ 10,914
Current portion of right of use obligations	-	-	-	-	-	-	-	-	-	-	-
Current portion of liability for pension and other postretirement plan benefits	-	3,468	-	-	-	-	-	3,468	-	-	3,468
Accounts payable and accrued expenses	55,499	99,884	15,620	6,299	3,878	2,776	(74,083)	109,873	6,953	(3,009)	113,817
Accrued compensation and related benefits	-	110,639	5,851	3,694	2,313	4,270	-	126,767	1,641	-	128,408
Estimated third-party settlements	-	26,405	103	1,290	10,851	2,921	-	41,570	-	-	41,570
Total current liabilities	55,499	248,622	22,404	12,237	17,589	10,229	(74,083)	292,497	8,689	(3,009)	298,177
Notes payable, related party	-	526,202	-	-	28,034	-	(554,236)	-	-	-	-
Long-term debt, excluding current portion	643,257	44,820	24,503	35,604	643	11,465	(10,970)	749,322	2,858	-	752,180
Right of use obligations, excluding current portion	-	-	-	-	-	-	-	-	-	-	-
Insurance deposits and related liabilities	-	56,786	440	513	388	240	-	58,367	40	-	58,407
Liability for pension and other postretirement plan benefits, excluding current portion	-	266,427	10,262	-	-	4,320	-	281,009	-	-	281,009
Other liabilities	-	98,201	1,104	28	1,585	-	-	100,918	23,218	-	124,136
Total liabilities	698,756	1,241,058	58,713	48,382	48,239	26,254	(639,289)	1,482,113	34,805	(3,009)	1,513,909
<b>Commitments and contingencies</b>											
<b>Net assets</b>											
Net assets without donor restrictions	7,486	356,880	63,051	27,653	35,518	21,242	-	511,830	48,063	40	559,933
Net assets with donor restrictions	18	91,103	6,245	795	4,620	7,436	-	110,218	32,282	(40)	142,460
Total net assets	7,504	447,983	69,296	28,449	40,138	28,678	-	622,048	80,345	-	702,393
Total liabilities and net assets	\$ 706,260	\$ 1,689,041	\$ 128,009	\$ 76,831	\$ 88,377	\$ 54,932	\$ (639,289)	\$ 2,104,161	\$ 115,150	\$ (3,009)	\$ 2,216,302

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2019

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Assets</b>									
Current assets									
Cash and cash equivalents	\$ 42,456	\$ 48,052	\$ 11,952	\$ 11,120	\$ 8,549	\$ 15,772	\$ 5,686	\$ -	\$ 143,587
Patient accounts receivable, net	-	180,938	15,880	8,960	5,060	7,280	3,007	-	221,125
Prepaid expenses and other current assets	14,178	139,832	9,460	5,567	1,401	1,678	471	(77,092)	95,495
Total current assets	56,634	368,822	37,292	25,647	15,010	24,730	9,164	(77,092)	460,207
Assets limited as to use	92,602	707,597	17,383	12,427	12,738	12,685	20,817	-	876,249
Notes receivable, related party	553,484	752	-	-	-	-	-	(554,236)	-
Other investments for restricted activities	-	99,807	24,985	2,973	6,323	31	-	-	134,119
Property, plant, and equipment, net	22	434,953	70,846	42,423	19,435	50,338	3,239	-	621,256
Right of use assets	-	-	-	-	-	-	-	-	-
Other assets	3,518	108,366	7,388	5,476	1,931	8,688	74	(10,970)	124,471
Total assets	\$ 706,260	\$ 1,720,297	\$ 157,894	\$ 88,946	\$ 55,437	\$ 96,472	\$ 33,294	\$ (642,298)	\$ 2,216,302
<b>Liabilities and Net Assets</b>									
Current liabilities									
Current portion of long-term debt	\$ -	\$ 8,226	\$ 830	\$ 547	\$ 288	\$ 954	\$ 69	\$ -	\$ 10,914
Current portion of right of use obligations	-	-	-	-	-	-	-	-	-
Current portion of liability for pension and other postretirement plan benefits	-	3,468	-	-	-	-	-	-	3,468
Accounts payable and accrued expenses	55,499	100,441	19,356	3,879	2,856	6,704	2,174	(77,092)	113,817
Accrued compensation and related benefits	-	110,639	5,851	2,313	4,314	4,192	1,099	-	128,408
Estimated third-party settlements	-	26,405	103	10,851	2,921	1,290	-	-	41,570
Total current liabilities	55,499	249,179	26,140	17,590	10,379	13,140	3,342	(77,092)	298,177
Notes payable, related party	-	526,202	-	28,034	-	-	-	(554,236)	-
Long-term debt, excluding current portion	643,257	44,820	24,503	643	11,763	35,604	2,560	(10,970)	752,180
Right of use obligations, excluding current portion	-	-	-	-	-	-	-	-	-
Insurance deposits and related liabilities	-	56,786	440	388	240	513	40	-	58,407
Liability for pension and other postretirement plan benefits, excluding current portion	-	266,427	10,262	-	4,320	-	-	-	281,009
Other liabilities	-	98,201	1,115	1,585	-	23,235	-	-	124,136
Total liabilities	698,756	1,241,615	62,460	48,240	26,702	72,492	5,942	(642,298)	1,513,909
Commitments and contingencies									
Net assets									
Net assets without donor restrictions	7,486	379,498	65,873	36,087	21,300	22,327	27,322	40	559,933
Net assets with donor restrictions	18	99,184	29,561	4,619	7,435	1,653	30	(40)	142,460
Total net assets	7,504	478,682	95,434	40,706	28,735	23,980	27,352	-	702,393
Total liabilities and net assets	\$ 706,260	\$ 1,720,297	\$ 157,894	\$ 88,946	\$ 55,437	\$ 96,472	\$ 33,294	\$ (642,298)	\$ 2,216,302

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets without Donor Restrictions

#### Year Ended June 30, 2020

<i>(in thousands of dollars)</i>	Dartmouth-Hitchcock Health	Dartmouth-Hitchcock	Cheshire Medical Center	Alice Peck Day Memorial	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non-Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>											
Patient service revenue	\$ -	\$ 1,490,516	\$ 207,416	\$ 65,496	\$ 53,943	\$ 41,349	\$ -	\$ 1,858,720	\$ 21,305	\$ -	\$ 1,880,025
Contracted revenue	5,369	114,906	400	-	10	7,427	(54,543)	73,569	498	(39)	74,028
Other operating revenue	26,349	321,028	16,406	7,179	10,185	7,847	(28,972)	360,022	15,128	(528)	374,622
Net assets released from restrictions	409	13,013	1,315	162	160	84	-	15,143	1,117	-	16,260
Total operating revenue and other support	<u>32,127</u>	<u>1,939,463</u>	<u>225,537</u>	<u>72,837</u>	<u>64,298</u>	<u>56,707</u>	<u>(83,515)</u>	<u>2,307,454</u>	<u>38,048</u>	<u>(567)</u>	<u>2,344,935</u>
<b>Operating expenses</b>											
Salaries	-	947,275	115,777	37,596	33,073	27,600	(34,706)	1,126,615	17,007	1,201	1,144,823
Employee benefits	-	227,138	26,979	6,214	6,741	6,344	(4,864)	268,552	4,009	311	272,872
Medications and medical supplies	-	401,165	36,313	8,390	5,140	2,944	-	453,952	1,429	-	455,381
Purchased services and other	13,615	284,714	31,864	11,639	14,311	13,351	(20,942)	348,552	13,943	(1,999)	360,496
Medicaid enhancement tax	-	59,708	8,476	3,226	2,853	1,747	-	76,010	-	-	76,010
Depreciation and amortization	14	71,108	9,351	3,361	3,601	2,475	-	89,910	2,254	-	92,164
Interest	25,780	23,431	953	906	1,097	252	(25,412)	27,007	315	-	27,322
Total operating expenses	<u>39,409</u>	<u>2,014,539</u>	<u>229,713</u>	<u>71,332</u>	<u>66,816</u>	<u>54,713</u>	<u>(85,924)</u>	<u>2,390,598</u>	<u>38,957</u>	<u>(487)</u>	<u>2,429,068</u>
Operating (loss) margin	<u>(7,282)</u>	<u>(75,076)</u>	<u>(4,176)</u>	<u>1,505</u>	<u>(2,518)</u>	<u>1,994</u>	<u>2,409</u>	<u>(83,144)</u>	<u>(909)</u>	<u>(80)</u>	<u>(84,133)</u>
<b>Non-operating gains (losses)</b>											
Investment income (losses), net	4,877	18,522	714	292	359	433	(198)	24,999	2,048	-	27,047
Other components of net periodic pension and post retirement benefit income	-	8,793	1,883	-	-	134	-	10,810	-	-	10,810
Other (losses) income, net	(3,932)	(1,077)	(569)	(205)	544	4,317	(2,211)	(3,133)	346	80	(2,707)
Total non-operating gains (losses), net	<u>945</u>	<u>26,238</u>	<u>2,028</u>	<u>87</u>	<u>903</u>	<u>4,884</u>	<u>(2,409)</u>	<u>32,676</u>	<u>2,394</u>	<u>80</u>	<u>35,150</u>
(Deficiency) excess of revenue over expenses	<u>(6,337)</u>	<u>(48,838)</u>	<u>(2,148)</u>	<u>1,592</u>	<u>(1,615)</u>	<u>6,878</u>	<u>-</u>	<u>(50,468)</u>	<u>1,485</u>	<u>-</u>	<u>(48,983)</u>
<b>Net assets without donor restrictions</b>											
Net assets released from restrictions for capital	-	564	179	-	344	300	-	1,387	27	-	1,414
Change in funded status of pension and other postretirement benefits	-	(58,513)	(13,321)	-	-	(7,188)	-	(79,022)	-	-	(79,022)
Net assets transferred to (from) affiliates	4,375	(7,269)	(32)	219	1,911	15	-	(781)	781	-	-
Other changes in net assets	-	-	-	-	-	-	-	-	(2,316)	-	(2,316)
Increase in net assets without donor restrictions	<u>\$ (1,962)</u>	<u>\$ (114,056)</u>	<u>\$ (15,322)</u>	<u>\$ 1,811</u>	<u>\$ 640</u>	<u>\$ 5</u>	<u>\$ -</u>	<u>\$ (128,884)</u>	<u>\$ (23)</u>	<u>\$ -</u>	<u>\$ (128,907)</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets without Donor Restrictions

#### Year Ended June 30, 2020

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD and Subsidiaries	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>									
Patient service revenue	\$ -	\$ 1,490,516	\$ 207,416	\$ 53,943	\$ 41,348	\$ 65,496	\$ 21,306	\$ -	\$ 1,880,025
Contracted revenue	5,369	115,403	400	10	7,427	-	-	(54,581)	74,028
Other operating revenue	26,349	323,151	16,472	10,185	9,482	16,726	1,757	(29,500)	374,622
Net assets released from restrictions	409	13,660	1,335	160	83	613	-	-	16,260
Total operating revenue and other support	<u>32,127</u>	<u>1,942,730</u>	<u>225,623</u>	<u>64,298</u>	<u>58,340</u>	<u>82,835</u>	<u>23,063</u>	<u>(84,081)</u>	<u>2,344,935</u>
<b>Operating expenses</b>									
Salaries	-	947,275	115,809	33,073	28,477	41,085	12,608	(33,504)	1,144,823
Employee benefits	-	227,138	26,988	6,741	6,517	7,123	2,918	(4,553)	272,872
Medications and medical supplies	-	401,165	36,313	5,140	2,941	8,401	1,421	-	455,381
Purchased services and other	13,615	287,948	32,099	14,311	13,767	14,589	7,108	(22,941)	360,496
Medicaid enhancement tax	-	59,708	8,476	2,853	1,747	3,226	-	-	76,010
Depreciation and amortization	14	71,109	9,480	3,601	2,596	5,004	360	-	92,164
Interest	25,780	23,431	953	1,097	252	1,159	62	(25,412)	27,322
Total operating expenses	<u>39,409</u>	<u>2,017,774</u>	<u>230,118</u>	<u>66,816</u>	<u>56,297</u>	<u>80,587</u>	<u>24,477</u>	<u>(86,410)</u>	<u>2,429,068</u>
Operating (loss) margin	<u>(7,282)</u>	<u>(75,044)</u>	<u>(4,495)</u>	<u>(2,518)</u>	<u>2,043</u>	<u>2,248</u>	<u>(1,414)</u>	<u>2,329</u>	<u>(84,133)</u>
<b>Non-operating gains (losses)</b>									
Investment income (losses), net	4,877	19,361	1,305	359	463	292	588	(198)	27,047
Other components of net periodic pension and post retirement benefit income	-	8,793	1,883	-	134	-	-	-	10,810
Other (losses) income, net	(3,932)	(1,077)	(569)	(25)	4,318	(205)	914	(2,131)	(2,707)
Total non-operating gains (losses), net	<u>945</u>	<u>27,077</u>	<u>2,619</u>	<u>334</u>	<u>4,915</u>	<u>87</u>	<u>1,502</u>	<u>(2,329)</u>	<u>35,150</u>
(Deficiency) excess of revenue over expenses	<u>(6,337)</u>	<u>(47,967)</u>	<u>(1,876)</u>	<u>(2,184)</u>	<u>6,958</u>	<u>2,335</u>	<u>88</u>	<u>-</u>	<u>(48,983)</u>
<b>Net assets without donor restrictions</b>									
Net assets released from restrictions for capital	-	591	179	344	300	-	-	-	1,414
Change in funded status of pension and other postretirement benefits	-	(58,513)	(13,321)	-	(7,188)	-	-	-	(79,022)
Net assets transferred to (from) affiliates	4,377	(7,282)	10	1,911	15	219	750	-	-
Other changes in net assets	-	-	(2,316)	-	-	-	-	-	(2,316)
Increase in net assets without donor restrictions	<u>\$ (1,960)</u>	<u>\$ (113,171)</u>	<u>\$ (17,324)</u>	<u>\$ 71</u>	<u>\$ 85</u>	<u>\$ 2,554</u>	<u>\$ 838</u>	<u>\$ -</u>	<u>\$ (128,907)</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets without Donor Restrictions

#### Year Ended June 30, 2019

<i>(in thousands of dollars)</i>	Dartmouth- Hitchcock Health	Dartmouth- Hitchcock	Cheshire Medical Center	Alice Peck Day Memorial	New London Hospital Association	Mt. Ascutey Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non- Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>											
Patient service revenue	\$ -	\$ 1,580,552	\$ 220,255	\$ 69,794	\$ 60,166	\$ 46,029	\$ -	\$ 1,976,796	\$ 22,527	\$ -	\$ 1,999,323
Contracted revenue	5,011	109,051	355	-	-	5,902	(46,100)	74,219	790	8	75,017
Other operating revenue	21,128	186,852	3,407	1,748	4,261	2,289	(22,076)	197,609	13,386	(297)	210,698
Net assets released from restrictions	369	11,556	732	137	177	24	-	12,995	1,110	-	14,105
Total operating revenue and other support	<u>26,508</u>	<u>1,888,011</u>	<u>224,749</u>	<u>71,679</u>	<u>64,604</u>	<u>54,244</u>	<u>(68,176)</u>	<u>2,261,619</u>	<u>37,813</u>	<u>(289)</u>	<u>2,299,143</u>
<b>Operating expenses</b>											
Salaries	-	868,311	107,671	37,297	30,549	26,514	(24,682)	1,045,660	15,785	1,106	1,062,551
Employee benefits	-	217,623	25,983	6,454	5,434	7,152	(3,763)	258,883	3,642	287	262,812
Medications and medical supplies	-	354,201	34,331	8,634	6,298	3,032	-	406,496	1,379	-	407,875
Purchased services and other	11,366	242,106	35,083	15,308	13,528	13,950	(21,176)	310,170	14,887	(1,622)	323,435
Medicaid enhancement tax	-	54,954	8,005	3,062	2,264	1,776	-	70,061	-	-	70,061
Depreciation and amortization	14	69,343	7,977	2,305	3,915	2,360	-	85,914	2,500	-	88,414
Interest	20,677	21,585	1,053	1,169	1,119	228	(20,850)	24,981	533	-	25,514
Total operating expenses	<u>32,057</u>	<u>1,828,123</u>	<u>220,108</u>	<u>74,229</u>	<u>63,107</u>	<u>55,012</u>	<u>(70,471)</u>	<u>2,202,165</u>	<u>38,726</u>	<u>(229)</u>	<u>2,240,662</u>
Operating margin (loss)	<u>(5,549)</u>	<u>59,888</u>	<u>4,641</u>	<u>(2,550)</u>	<u>1,497</u>	<u>(768)</u>	<u>2,295</u>	<u>59,454</u>	<u>(913)</u>	<u>(60)</u>	<u>58,481</u>
<b>Non-operating gains (losses)</b>											
Investment income (losses), net	3,929	32,193	227	469	834	623	(198)	38,077	1,975	-	40,052
Other components of net periodic pension and post retirement benefit income	-	9,277	1,758	-	-	186	-	11,221	-	-	11,221
Other (losses) income, net	(3,784)	1,586	(187)	30	(240)	279	(2,097)	(4,413)	791	60	(3,562)
Loss on early extinguishment of debt	-	-	-	(87)	-	-	-	(87)	-	-	(87)
Total non-operating gains (losses), net	<u>145</u>	<u>43,056</u>	<u>1,798</u>	<u>412</u>	<u>594</u>	<u>1,088</u>	<u>(2,295)</u>	<u>44,798</u>	<u>2,766</u>	<u>60</u>	<u>47,624</u>
(Deficiency) excess of revenue over expenses	<u>(5,404)</u>	<u>102,944</u>	<u>6,439</u>	<u>(2,138)</u>	<u>2,091</u>	<u>320</u>	<u>-</u>	<u>104,252</u>	<u>1,853</u>	<u>-</u>	<u>106,105</u>
<b>Net assets without donor restrictions</b>											
Net assets released from restrictions for capital	-	419	565	-	402	318	-	1,704	65	-	1,769
Change in funded status of pension and other postretirement benefits	-	(65,005)	(7,720)	-	-	682	-	(72,043)	-	-	(72,043)
Net assets transferred to (from) affiliates	10,477	(16,360)	1,939	8,760	128	110	-	5,054	(5,054)	-	-
Increase in net assets without donor restrictions	<u>\$ 5,073</u>	<u>\$ 21,998</u>	<u>\$ 1,223</u>	<u>\$ 6,622</u>	<u>\$ 2,621</u>	<u>\$ 1,430</u>	<u>\$ -</u>	<u>\$ 38,967</u>	<u>\$ (3,136)</u>	<u>\$ -</u>	<u>\$ 35,831</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets without Donor Restrictions

#### Year Ended June 30, 2019

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>									
Patient service revenue	\$ -	\$ 1,580,552	\$ 220,254	\$ 60,166	\$ 46,029	\$ 69,794	\$ 22,528	\$ -	\$ 1,999,323
Contracted revenue	5,010	109,842	355	-	5,902	-	-	(46,092)	75,017
Other operating revenue	21,128	188,775	3,549	4,260	3,868	10,951	540	(22,373)	210,698
Net assets released from restrictions	371	12,637	732	177	26	162	-	-	14,105
Total operating revenue and other support	<u>26,509</u>	<u>1,891,806</u>	<u>224,890</u>	<u>64,603</u>	<u>55,825</u>	<u>80,907</u>	<u>23,068</u>	<u>(68,465)</u>	<u>2,299,143</u>
<b>Operating expenses</b>									
Salaries	-	868,311	107,706	30,549	27,319	40,731	11,511	(23,576)	1,062,551
Employee benefits	-	217,623	25,993	5,434	7,319	7,218	2,701	(3,476)	262,812
Medications and medical supplies	-	354,201	34,331	6,298	3,035	8,639	1,371	-	407,875
Purchased services and other	11,366	246,101	35,396	13,390	14,371	18,172	7,437	(22,798)	323,435
Medicaid enhancement tax	-	54,954	8,005	2,264	1,776	3,062	-	-	70,061
Depreciation and amortization	14	69,343	8,125	3,920	2,478	4,194	340	-	88,414
Interest	20,678	21,585	1,054	1,119	228	1,637	63	(20,850)	25,514
Total operating expenses	<u>32,058</u>	<u>1,832,118</u>	<u>220,610</u>	<u>62,974</u>	<u>56,526</u>	<u>83,653</u>	<u>23,423</u>	<u>(70,700)</u>	<u>2,240,662</u>
Operating (loss) margin	<u>(5,549)</u>	<u>59,688</u>	<u>4,280</u>	<u>1,629</u>	<u>(701)</u>	<u>(2,746)</u>	<u>(355)</u>	<u>2,235</u>	<u>58,481</u>
<b>Non-operating gains (losses)</b>									
Investment income (losses), net	3,929	33,310	129	785	645	469	983	(198)	40,052
Other components of net periodic pension and post retirement benefit income	-	9,277	1,758	-	186	-	-	-	11,221
Other (losses) income, net	(3,784)	1,586	(171)	(240)	288	31	765	(2,037)	(3,562)
Loss on early extinguishment of debt	-	-	-	-	-	(87)	-	-	(87)
Total non-operating gains (losses), net	<u>145</u>	<u>44,173</u>	<u>1,716</u>	<u>545</u>	<u>1,119</u>	<u>413</u>	<u>1,748</u>	<u>(2,235)</u>	<u>47,624</u>
(Deficiency) excess of revenue over expenses	<u>(5,404)</u>	<u>103,861</u>	<u>5,996</u>	<u>2,174</u>	<u>418</u>	<u>(2,333)</u>	<u>1,393</u>	<u>-</u>	<u>106,105</u>
<b>Net assets without donor restrictions</b>									
Net assets released from restrictions for capital	-	484	565	402	318	-	-	-	1,769
Change in funded status of pension and other postretirement benefits	-	(65,005)	(7,720)	-	682	-	-	-	(72,043)
Net assets transferred to (from) affiliates	10,477	(16,360)	1,963	128	118	3,629	45	-	-
Increase (decrease) in net assets without donor restrictions	<u>\$ 5,073</u>	<u>\$ 22,980</u>	<u>\$ 804</u>	<u>\$ 2,704</u>	<u>\$ 1,536</u>	<u>\$ 1,296</u>	<u>\$ 1,438</u>	<u>\$ -</u>	<u>\$ 35,831</u>

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Note to Supplemental Consolidating Information**

#### **June 30, 2020 and 2019**

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#### **1. Basis of Presentation**

The accompanying supplemental consolidating information includes the consolidating balance sheet and the consolidating statement of operations and changes in net assets without donor restrictions of D-HH and its subsidiaries. All intercompany accounts and transactions between D-HH and its subsidiaries have been eliminated. The consolidating information presented is prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America consistent with the consolidated financial statements. The consolidating information is presented for purposes of additional analysis of the consolidated financial statements and is not required as part of the basic financial statements.

**Cheshire Medical Center Board - 2021**

<b>LastName</b>	<b>FirstName</b>	<b>MiddleName</b>
Abert	Susan	
Bahl	Ashok	
Bodin	Mark	G
Caruso	Don	
Cotter	Elizabeth	B
Duckett	Barbara	R
Fabian	Claire	
Gavin	Mark	
Hansen	Harold	R
Holmes	Cherie	
Houder	Nathalie	
Kapiloff	Michael	
LeBlanc	Stephen	J
Lovins	Rachel	
Mitchell	Robert	
Padin	Maria	
Tremblay	Andrew	
Waters	Michael	J

# JANE PARAYIL

## SUMMARY

Self-directed Public Health Preparedness Specialist and innovative thinker with a knack for developing creative solutions to complex problems. Seeking a position with the opportunity for new challenges and professional development and advancement.

## SKILLS

- Experienced with eClinical Works and Allscripts EMR system
- Proficient in Malayalam and American Sign Language
- Knowledgeable with SPSS and SAS statistical programming
- Proficient in ArcMap GIS software

## EDUCATION

**Master of Public Health: Public Health Practice** 12/2019  
**Wayne State University - Detroit, MI**

- 3.47 GPA
- Coursework in SAS, SPSS, and ArcMap

**Bachelor of Science: Speech, Language, and Hearing Sciences** 12/2015  
**Purdue University - West Lafayette, IN**

- Minor in Psychology
- Coursework in American Sign Language

## WORK HISTORY

**American Sign Language Instructor**  
**Schoolcraft College Continuing Education - Livonia, MI** 09/2019 - Current

- Selected and revised course curricula to meet current instructional demands
- Adapted teaching strategies to learning styles of students with different skill levels
- Compiled multidimensional cultural and educational resources for students to expand knowledge of key topics beyond classroom limitations

**Public Health Preparedness Specialist**  
**Macomb County Health Department - Mount Clemens, MI** 04/2018 - Current

- During the Covid-19 global pandemic, ran the Macomb County Drive-Through test site, conducted testing at congregate living facilities, as well as conducted contact tracing for positive patients.
- Use GIS data to map out cases of various health outcomes in the county and use results to implement new solutions to reduce the health outcomes.
- Build Closed Points of Dispensing within the county, and run drills/ exercises with PODs as well as the Node Emergency Activation Team

**Quality Improvement Intern** 01/2018 - 04/2018  
**Wayne County Healthy Communities - Hamtramck, MI**

- Observe dynamic between clinic staff from registering patients to patient's discharge to develop and present improvement ideas to make the clinic work efficiently with maximum patient care
- Obtain prenatal data from the UDS reports through the Electronic Medical Record system

**Medical Receptionist** 06/2017 - 11/2017  
**Healthy Urgent Care - West Bloomfield**

- Maintained established policies and procedures, as well as scheduled patients and appointments in person and over the phone.
- Collected co-pays and patient balances, verified insurance through phone calls and online sources, as well as proficient with EMR.

**Direct Line Therapist** 10/2016 - 04/2017  
**Building Bridges Therapy Center - Plymouth, MI**

- Provided ABA therapy to children on the Autism Spectrum
- Collected data about target acquisition and maintenance for each child during ABA session

**Teacher's Assistant** 06/2014 - 08/2016  
**Michigan Montessori Children's Academy - Shelby Township, MI**

- Organized and executed learning modules for children to help them develop skills need to exceed in their education
- Provided one-on-one attention when needed to ensure each child obtained help on academic material

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# ARIEL SOLOMON HOROWITZ

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## PROFESSIONAL SUMMARY

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Multidisciplinary public health specialist experienced in data collection, visualization and programming, community organizing, policy analysis, continuous quality improvement, and project management.

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## SKILLS

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- Project Management
  - Strategic Planning
- Business Development
  - Feasibility Studies
- Performance Assessments
  - Budgeting
  - Case Management
  - Research
- Performance Monitoring
- Documentation Proficiency
  - Data Collection
  - Quality Assurance
  - Staff Development
  - Statistical Analysis
    - Python & R
  - Tableau & Power BI

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## CAREER HIGHLIGHTS

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**Contract COVID-19 Resource Specialist**, 01/2021 to 02/2021

**Maxim Healthcare Group** – Concord, NH

Interviewed and onboarded response personnel, developed staff schedules, and demobilized response staff. Recognized and resolved safety hazards; stopped and prevented unsafe actions during incident operations. Assisted with regular documentation relating to logistics, asset management, general staffing support, and associated duties. Solved information technology needs on behalf of response staff. Supported related projects as requested related to safety, logistics, planning, facilities, communications, ordering of supplies, storage, movement and receipt of goods and services. Collaborated and communicated effectively with all members of the incident management team, including operations, planning, safety, logistics and finance.

**Surgical Technician**, 09/2020 to 12/2020

**Alice Peck Day Health Systems** – Lebanon, NH

Assisted physicians with various procedures including colonoscopies, upper gastrointestinal endoscopies, esophageal dilations, and percutaneous endoscopic gastrostomy. Supported clinical staff in secondary role during total joint procedures in main operating room.

**Public Health Specialist, 07/2018 to 12/2018**

**Schenectady County Department of Health and Human Services – Schenectady, NY**

Advised and educated clients regarding diet, hygiene and effective disease prevention methods. Created and lead multidisciplinary, continuous quality improvement program to improve WIC participant outcomes. Connected clients and families to local resources. Developed health plans for clients to improve overall health or recover from injuries and illness.

**Data and Enrollment Specialist, 11/2017 to 07/2018**

**New York State Donate Life Organ Registry – Troy, NY**

Maintained and grew database by over 30,000 individual donors via effective and targeted backlog management. Processed registry related documentation using optical character recognition software. Performed regular quality control audits on registry data. Worked with local staff, software contractors, and web designers to meet state contract requirements. Engaged community members at local events, through social media, email, phone and educated individuals on social and medical benefits of organ donation.

**Remote International Coordinator, 09/2017 to 07/2018**

**American Homestay Services – Pittsburgh, PA**

Recruited family to host an international student through a rigorous screening process. Conducted new student orientation and facilitated relationship between host family, school, and community centers. Submitted monthly reports on behalf of student to ensure that cultural, familial, and social concerns were addressed immediately and proactively.

**Associate Tween Camp Director, 06/2017 to 08/2017**

**Schenectady Jewish Community Center – Schenectady, NY**

Oversaw development of curriculum for camp activities and coordinated with multiple support staff including division leaders, sports, activities, and operations. Created and maintained daily schedules of all camp programming. Communicated and built relationships with local small businesses in reference to specific and targeted off-site events.

**Contract Lead Organizer, 10/2016 to 03/2017**

**Alaska Nurses Association – Anchorage, AK**

Identified and developed organizers, lead organizers, and member activists. Conducted staff and member training programs within three hospital bargaining units. Directed and participated in day-to-day organizing operations, political outreach, and community action plans.

**Contract Field Organizer, 05/2016 to 10/2016**

**Jason Kander for U.S. Senate – St. Louis, MO**

Recruited, managed and mobilized volunteers in assigned region to persuade prospective voters in St. Louis County. Oversaw voter registration, absentee, early voting programs, and voter contact programs including phone banks and canvasses. Managed data collection and entry into the NGP VAN database.

**Patient Transporter, 03/2015 to 03/2016**

**Tucson Medical Center** – Tucson, AZ

Transported patients, industrial equipment, laboratory specimens, and supplies to assigned treatment areas; adhered to evidence-based best practices established by state and federal regulatory agencies when training and developing new staff.

**Business Development Specialist, 10/2014 to 03/2015**

**Tucson Medical Center** – Tucson, AZ

Developed and implemented marketing strategies to improve provider and physician participation into improved hospital growth and programming, as well as external community development.

**Volunteer Budget Analyst, 04/2014 to 10/2014**

**American Red Cross** – Albany, NY

Analyzed financial and programming data and developed a statistical report accounting for \$3.3 million in Red Cross disaster relief program expenses statewide, later submitted to the state legislature for renewal. Engaged local stakeholders in designing and preparing disaster response programming; created community partnerships with businesses, non-profits, and houses of worship.

**Volunteer ICU Coordinator, 04/2014 to 10/2014**

**Ellis Medicine** – Schenectady, NY

Organized patient visitation within the 36-bed intensive care unit (ICU); served as the primary point of contact for friends and family members.

**Volunteer Outreach Specialist, 04/2014 to 10/2014**

**Albany Stratton VA Medical Center** – Albany, NY

Developed online and person-to-person marketing strategies to promote the mission of Fisher House; Fisher House provides on-site free and low cost lodging to veterans and military families receiving treatment at military medical centers throughout the United States.

**Program Manager, 10/2012 to 10/2014**

**United States Peace Corps, Department of State** – Dar es Salaam, United Republic Of Tanzania

Coordinated outreach activities and events focused on prevention, education and support services for indigent persons at high risk for HIV/STD/HCV in partnership with USAID, the Johns Hopkins Bloomberg School of Public Health, and local health officials in Tanzania. Worked with community medical personnel to monitor and evaluate changes in local disease rates, with a secondary focus on malaria transmission. Partnered with local health directorates and lead joint community-wide health promotion and education campaigns. Formed a community-wide irrigation system through four project grants via private NGOs and USAID. Organized the transport of all building materials, and supervised construction while ensuring that all project phases were completed on schedule and under budget.

**Project Associate, 09/2011 to 09/2012**

**Helene Fuld College of Nursing – New York, NY**

Conducted literature review and identified current trends in nursing education, current curricula, and developments in curricula change. Developed qualitative interview tool and conducted key informant interviews. Identified best practices and provided recommendations to HFCN's current curriculum and proposed programming. Prepared strategic planning recommendations based on previous research and reporting.

**Legal Assistant, 07/2010 to 07/2012**

**Gus P. Haritos, Esquire – New York, NY**

Analyzed and produced closing documents for real estate transactions, updated cross-referenced clientele list for data entries and recorded meeting notes, and maintained financial escrow ledger balance sheets representing over \$1.5 million in assets.

**Continuous Quality Improvement Coordinator, 09/2010 to 09/2011**

**New York University Langone Health – New York, NY**

Created framework to decrease the time frame within each section of the quality cycle altering the existing structure and data relative to enrolling new patients within clinical trials, measuring the difference between present and future statistics best expressed through figures that captured patient information in minutes, hours, days, weeks, and quarters. Monitored results over the course of a year.

**Community Outreach Specialist, 09/2009 to 09/2010**

**U.S. Congressman Joseph Crowley – Bronx, NY**

Represented Bronx district office as initial point of contact for constituents. Worked with staff specialists and district members to monitor and resolve cases primarily involving immigration, housing, and healthcare. Organized community events and fundraising campaigns. Drafted proclamations, proposals, greeting letters, letters of recommendation, letters of support, mailings, donor correspondence, and memorandums.

**Project Analyst, 05/2008 to 09/2008**

**Tucson Medical Center – Tucson, AZ**

Developed recruiting proposal for recent college graduates in the field of physical therapy at universities nationwide; compiled state and national median salary data and demonstrated long-term cost savings through the retention of salaried physical therapists and reduction of temporarily-contracted traveling employees. Evaluated need for an urgent care clinic by analyzing emergency department data examining individual costs per treatment in medical center employees and dependents and presented findings in memorandum to the executive team.

**Project Coordinator**, 08/2005 to 05/2008

**Drexel University: College of Nursing and Health Professions** – Philadelphia, PA

Recruited students and implemented electronic filing system for undergraduate academic records. Contributed to course syllabus design, scheduling, and expansion of student services for all undergraduate health professions programs.

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## EDUCATION

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**Graduate Certificate:** Health Data Science, Expected in 05/2021

**University Of New Hampshire: Department of Health Management and Policy** - Durham, NH

- Coursework in probability and inferential statistics, foundations of linear algebra and matrices, data structures in JMP/SAS, programming in Python and R, presentations using Tableau, and Power BI.

**Master of Public Administration:** Health Policy and Management

**New York University: Robert F. Wagner School of Public Service** - New York, NY

- Coursework in microeconomics, financial management, statistics, management and leadership, public policy, information technology, and continuous quality improvement.

**Bachelor of Science:** Health Services Administration

**Drexel University: College of Nursing and Health Professions** – Philadelphia, PA

- Coursework in business analysis, civic engagement, human resources, ethics, non-profit management, and healthcare policy.

## JOHN J. LETENDRE

### SUBSTANCE MISUSE RELATED EXPERIENCE:

Better Life Partners: (June 2019- Present)

#### Counselor, Substance Abuse-

Work as a (contracted) primary counselor for a Harm-Reduction focused program supporting clients with Opiate Use Disorder (OUD). The counselor facilitates a weekly meeting and clients are provided Medications for Addiction Treatment (MAT). Responsibilities include facilitation of in-person and virtual group sessions, treatment planning and collaboration with prescribing physicians regarding client progress, drug screening results and medication monitoring.

Cheshire Medical Center: (December 2018- Present)

#### Continuum of Care Facilitator-

As part of Center for Population Health, (P/T) work with providers and agencies across the Continuum of Care for mental health and substance abuse. Main objectives are to increase awareness of services, improve communication and help build collaboration among providers. An overall goal is to maximize the utilization and efficiency across the continuum of prevention, intervention treatment and aftercare.

Granite Pathways: (August 2018-December 2018)

#### Recovery Specialist-

Working with patients and families in order to facilitate entry into appropriate SA treatment programs. Main goal is to provide assistance to consumers in navigating the complicated web of treatment, levels of care, insurance and associated documentation. Additionally charged with developing relationships and agreements with area providers to allow timely access to resources needed to facilitate entry into treatment.

Groups Recover Together: (January 2018-June 2018)

#### Substance Abuse Counselor-

Worked as primary counselor for a caseload of 80-130 clients engaged in medication assisted treatment. Responsibilities included facilitation of multiple weekly groups of up to 12 clients, initial assessments, and intakes, treatment planning, discharge planning and individual and family counseling sessions. Worked closely with prescribing physicians on issues of medication compliance, drug screening results and medication tapering.

Phoenix Houses of New England: (March 2011 – Jan 2018)

#### Counselor II/House Manager: Dublin NH-

Performed one on one Substance Abuse counseling with residential clients. Conducted various didactic and process groups such as Anger Management, Seeking Safety, Addiction and the Brain, Meditation / Mindfulness and Men's Gender group. As House Manager, conducted monthly inspection and worked with facilities to help ensure upkeep and general compliance with state regulations and Certification bodies. Assisted Program Director with personnel and managerial duties as assigned.

#### Counselor I –Cheshire County Drug Court Program – Keene NH

Performed one on one counseling with Drug Court participants. Co-facilitated Intensive Outpatient Program, conducting didactic and process curriculum as directed by program guidelines.

#### Case Manager– Transitional Living Program –Keene NH

Worked with clients who successfully completed the 28-day inpatient treatment program and assisted them as they transitioned back into the community. Provided one on one counseling

and support as clients sought employment and established a program of recovery; preparing to leave the controlled environment.

Counselor Assistant –Keene NH

Performed administrative tasks such as admissions and transportation of clients to appointments and meetings. Monitored vital signs of detox clients and administered medication as directed in medication orders. Performed other various duties as assigned by Program Director.

EDUCATION:

Associate of Science in Chemical Dependency (2011 Magna Cum Laude)  
Bachelor of Science in Management (2006 Cum Laude)  
Associate of Science in Chemistry (1996)  
Keene State College, Keene, NH  
Delta Mu Delta, National Honor Society for Business Administration, 2006

LICENSES / CERTIFICATIONS:

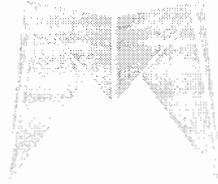
Licensed Alcohol and Drug Counselor (LADC) License# 1001

RELEVANT EMPLOYMENT HISTORY:

Granite Pathways: (August 2018-December 2018)  
Recovery Specialist

Groups Recover Together: (January 2018-June 2018)  
Substance Abuse Counselor

Phoenix Houses of New England, Keene NH, (March 2011 –January 2018)  
Various positions - see above.



## Maera Cramer

**QUALIFICATIONS** 9 years experience working in the main office of the Compass School performing a wide variety of tasks

High levels of experience with computers and the Microsoft Office Suite  
Hard working, dependable and adaptable

**EDUCATION** Bachelor of Fine Arts in Visual Communication, Magna Cum Laude - May 2009  
*Cazenovia College Cazenovia NY*

**EXPERIENCE** **Administrative Assistant** - *Compass School, Westminster VT* 2010-Present  
Managed the office and interacted with parents and students while performing other secretarial duties.  
Other duties include: answering phones; purchasing; data entry; student records processing; attendance tracking; and providing support to both faculty and students.

**Graphics Designer** - *Compass School, Westminster VT* 2010-Present  
Worked closely with the Development Director to unify and produce the Compass School brand.  
Duties include: design and production of printed materials; print ad design and ordering of merchandise.

**Freelance Graphics Designer** - *Main Street Arts* Summer 2011  
Did design and layout of the *SafeMeasures™ Facilitator's Guide To Improving School Climate and Learning* handbook, as well as several smaller design projects for their presentations.

**Customer Support and Web Imager** - *Cremation Solutions, Arlington VT* 2009-2010  
Responsible for providing support through both phone and e-mail to customers.  
Other tasks included: photographing merchandise and maintaining the company's website.

**Quality Control** - *Sajen Jewelry, Putney VT* 2009  
Inspected, packaged and shipped jewelry

**Graphics Design Intern** - *Cazenovia College Communications Department, Cazenovia NY* 2008  
Built projects from concept to production. Projects included mailers, t-shirt designs, and posters

**Web Imager** - *Offerings Jewelry, Putney VT* Summers 2006-2007  
Photographed merchandise and enhanced images for the Offerings sales website

**SKILLS** Proficient in Microsoft Word, PowerPoint, Photoshop, InDesign, and Illustrator.  
Knowledgeable in both the Windows and Mac OS, Microsoft Excel and HTML coding.  
Other Notable Skills: origami, illustration, sculpture and an enjoyment of problem solving.



## Maera Cramer

### REFERENCES

#### **Lyssa Singleton**

Office Manager and Bookkeeper

Compass School

7892 US Route 5, Westminster, VT 05159 • (802) 463-2516

lyssa.singleton@compass-school.org

*Lyssa Singleton is my colleague, together, we manage the Compass School main office.*

#### **Brian Whitehouse**

Director of Admissions

Compass School

7892 US Route 5, Westminster, VT 05159 • (802) 463-2517

brian.whitehouse@compass-school.org

*Brian Whitehouse is my colleague and supervisor, together we work on advertising.*

# Kelsey M. Trombley

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## Education

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In Progress	<b>Master's Degree of Nursing, Family Nurse Practitioner</b> Walden University
July 2016	<b>Bachelor's Degree of Science, Nursing</b> Southern New Hampshire University
December 2014	<b>Associate Degree of Science, Nursing</b> St. Joseph School of Nursing, Nashua, NH Elected Class Treasurer
May 2012	<b>Diploma in Nursing</b> St. Joseph School of Nursing Perfect Attendance Award

## Credentials

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**American Heart Association, Healthcare Provider CPR/AED** (Valid through 11/2021)

**Wound Care Certification**, #170968950 (Valid through 10/13/2022)

**NH Registered Nurse License #071141-21** (Valid through 9/21/2022)

**NH Licensed Practical Nurse (LPN)** - 5/2012 to 2/2015

**NH LPN IV Certification (2013)** Omnicare Pharmacy, Londonderry, NH

**NH Licensed Nursing Assistant (LNA)** - 8/2007 to 5/2012

## Work Experience

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<b>Jan 2017- Current</b> RN, WCC	<b>Dartmouth Hitchcock Medical Center/ Cheshire Medical Center</b> Keene, NH 03431 <ul style="list-style-type: none"><li>• Manage Anticoagulation patients per protocol including management of dosing instructions and pre-op instructions</li><li>• IM/SQ injections as prescribed and as needed following standing orders</li><li>• IV management management and care, including insertion of peripheral IV, port access/de-access and PICCs, includes dressing changes, line maintenance/ de-clotting and PICC removal</li><li>• Collaborate with the physician in the plan of care for wounds, including assessing, changing plan of care as needed, conservative sharp debridement</li><li>• Document all pertinent clinical data into the electronic medical record</li></ul>
<b>April 2015- Jan 2017</b> RN Hospice Case Manager	<b>Home Healthcare Hospice and Community Services</b> Keene, NH 03431 <ul style="list-style-type: none"><li>• Visit patient's in their place of residence to provide End of Life care</li></ul>

# Kelsey M. Trombley

- Assess patients during and implement appropriate nursing interventions
- Perform venipuncture, dressing changes and insert foley catheters, port/PICC maintenance and drain Plurex as needed
- Collaborate with the interdisciplinary healthcare team to provide quality, safe care and maintain quality of life
- Collaborate with patient's Primary Care Physician and Hospice Medical Director for medication and symptom management
- Provide education to caregivers on topics such as medication administration, symptom management, incontinence care, pressure reduction and repositioning
- Provide emotional support to family members and make appropriate referrals for additional services needed
- Document all pertinent information using electronic documentation
- Ensure patient has adequate supply of necessary medication and other supplies

**May 2012- Jan 2017**  
RN/ LPN

**Genesis Healthcare, Applewood Rehabilitation and Nursing Center**  
Winchester, NH 03470

- 68 Bed Facility, including a 12 Bed Skilled Nursing Unit; Resident to Nurse Ratio 24:1
- Assess patients as needed and implement appropriate nursing interventions
- Collaborate with the interdisciplinary healthcare team to provide quality care and maintain quality of life
- Supervise LNAs on assigned unit and ensure care & safety of all residents and staff
- Maintain access to and provide proper care to peripheral lines and peripherally inserted central catheters
- Administer IV antibiotics as needed
- Perform venipuncture as needed
- Document all pertinent information using electronic documentation

**June 2011- May 2012**  
LNA

**Comfort Keepers**  
Keene, NH 03431

- Provide quality in home care to clients in a 1:1 ratio
- Assist clients in maintaining their independence
- Perform errands for residents including grocery shopping, banking and laundry

**Nov 2007 - June 2012**  
LNA

**Staffing Solutions of Vermont**  
Woodstock, VT 05091

- Travel to area Long Term Care Nursing Facilities as needed
- Per Diem Position
- Resident to Staff Ratio 10:1
- Collaborate with healthcare team at each facility to provide safe and quality care
- Perform ADL's for each assigned resident and properly document all care performed

## Tricia J Zahn, MPH

### Summary of Experience

- Worked as a Center for Disease Control and Prevention (CDC) Public Health Associate for the Maricopa County Department of Public Health (MCDPH) serving four million residents
  - Vector-Borne and Zoonotic Disease Team 07/2010 – 07/2011:
  - Office of Preparedness and Response 07/2011 – 5/2012:
- Worked as the Public Health Emergency Preparedness Coordinator and Strategic National Stockpile Coordinator for the Greater Monadnock Public Health Network (GMPHN) serving over 100,000 residents 5/2012 – 12/2015
- Worked as the Partner Manager for the Center for Population Health at Cheshire Medical Center 1/2016 – 2/2020
- Currently serving as the Director of Community Strategic Partnerships for the Center for Population Health at Cheshire Medical Center 2/2020 – present

### Professional Accomplishments

#### Cheshire Medical Center/Dartmouth-Hitchcock Keene

Director, Community Strategic Partnerships  
Center for Population Health

**2/2020 – present**

40 Hours per Week

As a Director in the Center, I create and foster collaborations with a diverse audience to support the implementation of the community focused strategies included in Cheshire's strategic plan as well as the regions first Community Health Improvement Plan.

- Supporting our regional partners to advance the health and well-being of our region by providing process improvement, resources, and removing barriers while providing encouragement and accountability
- Oversee a budget of over a quarter million dollars
- Partner with regional groups to move forward our collective impact approach to population health change

#### Cheshire Medical Center/Dartmouth-Hitchcock Keene

Partner Manager  
Center for Population Health

**1/2016 – 2/2020**

40 Hours per Week

As the Partner Manager in the Center, I worked with many different partners from worksite wellness, tobacco cessation, and emergency preparedness.

- Supported our regional partners to advance the health and well-being of our region specifically in areas that support our Greater Monadnock Public Health Network: Public Health Emergency Preparedness, Regional Substance Misuse Prevention Network Coordination, and the Continuum of Care for Substance Use Disorders
- Partnered with regional and statewide coalitions to deepen relationships and accelerate improvements in population health through technical assistance, coaching, and project management
- Lead multiple grant opportunities including our Spreading Community Accelerators through Learning and Evaluation (SCALE) work in partnership with the Institute of Healthcare Improvement and the Robert Wood Johnson Foundation

**Cheshire Medical Center/Dartmouth-Hitchcock Keene**

Public Health Emergency Preparedness Coordinator  
Greater Monadnock Public Health Network

**5/2012 – 12/2015**

40 Hours per Week

As a Public Health Emergency Preparedness Coordinator I improved my communication and problem-solving skills to be an effective leader and motivator.

- Managed and oversaw the Emergency Preparedness, Public Health Advisory Council, and Medical Reserve Corps budgets and report to our fiscal agent each month
- Partnered with regional organizations such as Healthy Monadnock 2020 and Monadnock Voices for Prevention for diverse public health projects and initiatives

**Centers for Disease Control and Prevention**

Public Health Associate – Field assignee  
Two year assignment in Maricopa County, Arizona detailed below

**7/18/10 – 5/2012**

**Maricopa County Department of Public Health, Phoenix, AZ**

Office of Preparedness and Response (OPR)  
Phoenix, Arizona

**7/18/11 – 5/2012**

40 Hours per Week

*Project Management Specialist, CDC Public Health Associate*

As a field assignee and a project management specialist I was able to hone my skills in public health emergency preparedness planning, response, evaluation, and improvement.

- Coordinated and compiled the Radiation and Nuclear Device Annex of the County's Emergency Response Plan (ERP): Served as MCDPH point person and subject matter expert for the public health nuclear/radiation response
- Coordinated with healthcare facilities to integrate healthcare response with public health

**Maricopa County Department of Public Health, Phoenix, AZ**

Office of Epidemiology  
Phoenix, Arizona 85012

**7/18/10 - 7/17/11**

40 Hours per Week

*Data Analyst, CDC Public Health Associate*

As a data analyst and a CDC field assignee I further developed my analytical skills (reports, trends, intervention recommendations, etc.) along with my communication skills (presentations, press releases, interviews, etc.).

- Served as one of three people in the office that conducted rabies risk assessments and arranging post exposure prophylaxis, which required highly specialized training
- Conducted chart reviews and case phone interviews along with entering relevant information and notes into a database
- Created the first Maricopa County Rabies website including content, photographs, and other visuals

## **Education**

*Master of Public Health*, University of New Hampshire  
Manchester, New Hampshire, 2014

*Bachelor of Science*, Public Health, University of Tampa  
Tampa, Florida, 2010

*Spring Semester Abroad*, Florence University of the Arts  
Florence, Italy, 2009

## **Certifications**

August 2020 – Sworn Notary Public for the State of New Hampshire

November 2017 – Local Improvement Advisor through the Institute for Healthcare Improvement

**Cheshire Medical Center**Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Jane Parayil	Public Health Emergency Preparedness Coordinator	\$55,016.00	100%	\$55,016.00
Ariel Horowitz	Regional Substance Misuse Prevention Network Coordinator	\$47,840.00	100%	\$47,840.00
John Letendre	Continuum of Care Facilitator	\$22,547.20	100%	\$22,547.20
Maera Cramer	Program Assistant	\$36,400.00	50%	\$18,200.00
Kelsey Trombley	RN, Public Health Network	\$69,160.00	30%	\$20,748.00
Tricia Zahn	Director	\$74,880.00	30%	\$22,464.00

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Granite United Way ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), as amended with Governor approval on December 17, 2020 and presented to the Executive Council as an Informational Item on April 7, 2021 (Item# M), as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item on May 19, 2021, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$3,877,623.
3. Modify Exhibit A Scope of Services by replacing it in its entirety with Exhibit A Amendment #8, Scope of Services, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.
    - 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized

Granite United Way

SS-2019-DPHS-28-REGION-04-A08

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Contractor Initials

Date 5/21/2021

expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.

6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
  7. The Contractor shall bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
    - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
    - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
9. Modify Exhibit B-1, Program Funding, Amendment #7 by replacing it in its entirety with Exhibit B-1 Amendment #8 Program Funding, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-57, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-58, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-59, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-60, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-61, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-62, Amendment #8, which is attached hereto and incorporated by reference herein.
16. Add Exhibit B-63, Amendment #8, which is attached hereto and incorporated by reference herein.
17. Add Exhibit B-64, Amendment #8, which is attached hereto and incorporated by reference herein.
18. Add Exhibit B-65, Amendment #8, which is attached hereto and incorporated by reference herein.
19. Add Exhibit B-66, Amendment #8, which is attached hereto and incorporated by reference herein.
20. Add Exhibit B-67, Amendment #8, which is attached hereto and incorporated by reference herein.
21. Add Exhibit B-68, Amendment #8, which is attached hereto and incorporated by reference herein.
22. Add Exhibit B-69, Amendment #8, which is attached hereto and incorporated by reference herein.
23. Add Exhibit B-70, Amendment #8, which is attached hereto and incorporated by reference herein.
24. Add Exhibit B-71, Amendment #8, which is attached hereto and incorporated by reference herein.
25. Add Exhibit B-72, Amendment #8, which is attached hereto and incorporated by reference herein.
26. Add Exhibit B-73, Amendment #8, which is attached hereto and incorporated by reference herein.

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27. Add Exhibit B-74, Amendment #8, which is attached hereto and incorporated by reference herein.
28. Add Exhibit B-75, Amendment #8, which is attached hereto and incorporated by reference herein.
29. Add Exhibit B-76, Amendment #8, which is attached hereto and incorporated by reference herein.
30. Add Exhibit B-77, Amendment #8, which is attached hereto and incorporated by reference herein.
31. Add Exhibit B-78, Amendment #8, which is attached hereto and incorporated by reference herein.
32. Add Exhibit B-79, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

5/27/2021

Date

DocuSigned by:  
*Patricia M. Tilley*

846FB38F5BFD4C8  
Name: Patricia M. Tilley  
Title: Interim Director

Granite United Way

5/21/2021

Date

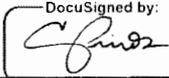
DocuSigned by:  
*Patrick Tufts*

476837A116B116F  
Name: Patrick Tufts  
Title: President

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

OFFICE OF THE ATTORNEY GENERAL

5/27/2021  
Date

DocuSigned by:  
  
Name: Catherine Pinos  
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



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**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient, in accordance with 2 CFR 200.300.

**2. Scope of Services**

2.1. Lead Organization to Host Regional Public Health Networks (RPHN)

- 2.1.1. The Contractor shall serve as a lead organization to host three (3) Regional Public Health Networks for the regions of Carroll County, Capital Area, and South Central, as defined by the Department, to provide a broad range of public health services within one or more of the state's thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to ensure that all communities statewide are covered by initiatives to protect and improve the health of the public.
- 2.1.2. The Contractor agrees that the Scope of Services applies to all regions identified in Section 2.1.1 above, unless otherwise noted as not applicable.
- 2.1.3. The Contractor shall provide services that include, but are not limited to:
  - 2.1.3.1. Sustaining a regional Public Health Advisory Council (PHAC).
  - 2.1.3.2. Planning for and responding to public health incidents and emergencies.
  - 2.1.3.3. Preventing the misuse of substances.
  - 2.1.3.4. Facilitating and sustaining a continuum of care to address substance use disorders
  - 2.1.3.5. Implementing young adult substance misuse prevention strategies

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2.1.3.6. Providing School Based Vaccination Clinics (not applicable to the South Central Region).

2.1.3.7. Ensuring contract administration and leadership.

2.2. Public Health Advisory Council

2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team and direction to public health activities within the assigned region. The Contractor shall:

2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;

2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:

2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.

2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issues.

2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.

2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.

2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.

2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:

2.2.1.3.1. Ensure meeting minutes are available to the public upon request.

2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

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- 2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:
  - 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.
  - 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
  - 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC), YA and PHEP programs.

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- 2.2.1.12. Advance the work of RPHNs by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected officials, on the PHAC.
- 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.

2.3. Public Health Emergency Preparedness

2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:

- 2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention’s (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.
- 2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) coordinating and/or planning committee and/or workgroup to:
  - 2.3.1.2.1. Improve regional emergency response plans; and
  - 2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.
- 2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.
- 2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.
- 2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.

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- 2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative, including the workgroup.
- 2.3.1.7. Submit an annual work plan based on a template provided by the Department.
- 2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.
- 2.3.1.9. Collaborate with the Department's, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) on an annual basis based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:
  - 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
  - 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals



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with functional needs; and other public health, health care, behavioral health and environmental health entities.

- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.
- 2.3.1.13. Regularly communicate with the Department’s Area Agency contractor that provides developmental and acquired brain disorder services in the regions.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State’s emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training as needed to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC’s Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department’s SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:

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- 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
- 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.
- 2.3.1.21.3. ORR site visit as scheduled by the CDC and the Department.
- 2.3.1.21.4. Completion of relevant drills/exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate supplies prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
- 2.3.1.24. Participate, as requested by the Department, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.

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- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health and Human Services Assistant Secretary for Preparedness and Response.
- 2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

2.4. Substance Misuse Prevention

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

- 2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.
- 2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.
- 2.4.1.3. Implement the strategic prevention model in accordance with SAMHSA Strategic Prevention Framework that includes assessment, capacity development, planning, implementation and evaluation.
- 2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department’s guidance on what is evidenced informed.
- 2.4.1.5. Maintain, revise, and publicly promote a data-driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention,

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Treatment, and Recovery Plan, and the State Health Improvement Plan.

- 2.4.1.6. Develop an annual work plan for Department approval, that guides actions and includes outcome-based logic models that demonstrates short-, intermediate- and long-term measures in alignment the Three Year - Strategic Plan.
- 2.4.1.7. Advance, promote and implement substance misuse primary prevention strategies that incorporate the Institute of Medicine (IOM) categories of prevention of universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, as directed by the Department’s Bureau of Drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

2.5. Continuum of Care

- 2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

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- 2.5.1.1. Engage regional partners in ongoing update of regional assets and gaps, and regional CoC plan development and implementation. The Contractor shall ensure regional partners include, but are not limited to:
  - 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Services providers.
  - 2.5.1.1.2. Primary health care providers.
  - 2.5.1.1.3. Behavioral health care providers.
  - 2.5.1.1.4. Other interested and/or affected parties.
- 2.5.1.2. Work toward, and adapt as necessary and indicated, the priorities and actions identified in the regional CoC development plan.
- 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
  - 2.5.1.3.1. Increased awareness of and access to services;
  - 2.5.1.3.2. Increased communication and collaboration among providers; and
  - 2.5.1.3.3. Increases in capacity and delivery of services.
- 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
- 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to the Integrated Delivery Networks.
- 2.5.1.6. Work with statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the regions.
- 2.5.1.7. Engage regional stakeholders to assist with information dissemination.

2.6. Young Adult Substance Misuse Prevention Strategies

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- 2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old, in high-risk and/or high-need communities within the regions.
- 2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:
  - 2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:
    - 2.6.2.1.1. Reducing risk factors;
    - 2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and
    - 2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.
  - 2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.

2.7. School Based Vaccination Clinics (not applicable to South Central Region)

- 2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:
  - 2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.
  - 2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.
  - 2.7.1.3. Distribute state-supplied promotional vaccination materials.
  - 2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardians prior to administration of vaccines, in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.
  - 2.7.1.5. Request the NH Immunization Program (NHIP) to store consent forms once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination consent forms within HIPAA guidelines.

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- 2.7.1.6. Document, verify and store written or electronic record of vaccine administration in compliance with HIPAA and other state and federal regulations.
- 2.7.1.7. Request the NHIP to store written or electronic records of vaccine administration once the Contractor completes data collection and reporting only if the Contractor lacks the ability to store vaccination records within HIPAA guidelines.
- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to parent and/or the legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient's primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care provider. The Contractor shall ensure information includes:
  - 2.7.1.9.1. Patient full name and one other unique patient identifier;
  - 2.7.1.9.2. Vaccine name;
  - 2.7.1.9.3. Vaccine manufacturer;
  - 2.7.1.9.4. Lot number;
  - 2.7.1.9.5. Date of vaccine expiration;
  - 2.7.1.9.6. Date of vaccine administration;
  - 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
  - 2.7.1.9.8. Edition date of the VIS given;
  - 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor's name); and
  - 2.7.1.9.10. Full name and title of the individual who administered the vaccine.
- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian and/or parent, is provided access to the information on the day of vaccination.

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- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in-session school days.
- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise by providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director is able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.
    - 2.7.2.6.5. Non-latex bandages.
- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
  - 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP, annually, ensuring all listed requirements are met.

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- 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
- 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
- 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.
- 2.7.3.5. Utilize NHIP training materials or other educational materials, as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
- 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
- 2.7.3.7. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
- 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
- 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
- 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
- 2.7.3.11. Account for every dose of vaccine.
- 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
- 2.7.3.13. Notify NHIP by contacting the NHIP Nursing helpline and faxing incident forms of any adverse event within 24 hours of event occurring.
- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturer's recommended temperatures, the Contractor shall:
  - 2.7.3.14.1. Immediately quarantine the vaccine in an appropriate temperature setting, separating it from other vaccines and label it "DO NOT USE".

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- 2.7.3.14.2. Contact the manufacturer immediately to explain the event duration and temperature information to determine if the vaccine is still viable.
  - 2.7.3.14.3. Notify NHIP immediately after contacting the manufacturer regarding any temperature excursion.
  - 2.7.3.14.4. Submit a Cold Chain Incident Report with a Data Logger Report to NHIP within 24 hours of the temperature excursion occurrence.
- 2.7.4. The Contractor shall complete tasks within 24 hours of the completion of every clinic that include, but are not limited to:
- 2.7.4.1. Updating State Vaccination System with total number of vaccines administered and wasted during each mobile clinic.
  - 2.7.4.2. Ensuring doses administered and entered in the inventory system match the clinical documentation of doses administered.
  - 2.7.4.3. Submitting the hourly vaccine temperature log for the duration the vaccine is kept outside of the Contractor's established vaccine refrigerator.
  - 2.7.4.4. Submitting totals to the NHIP outside of the vaccine ordering system that include the total number of:
    - 2.7.4.4.1. Students vaccinated.
    - 2.7.4.4.2. Vaccines wasted.
  - 2.7.4.5. Completing an annual year-end self-evaluation and improvement plan for areas that include, but are not limited to:
    - 2.7.4.5.1. Strategies that worked well in the areas of communication, logistics, or planning.
    - 2.7.4.5.2. Areas for improvement both at the state and regional levels, emphasizing strategies for implementing improvements.
    - 2.7.4.5.3. Discussions relative to strategies that worked well for increasing both the number of clinics conducted at schools and the number of students vaccinated.

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- 2.7.4.5.4. Discussions relative to future strategies and plans for increasing students vaccinated, including suggestions on how state-level resources may aid in the effort.
- 2.7.5. The Contractor shall be funded through a combination of base funding and incentivized funding, in order to encourage the Contractor to offer vaccination at schools that have a greater economic disparity, as identified through reports generated by the NHIP in collaboration with the Department of Education (DOE).
- 2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:
  - 2.7.6.1. If the Contractor is unable to provide vaccine to at least 50% of the schools listed, the Contractor may show evidence of providing vaccine to additional schools listed, but not previously served the year before, in order to receive full funding.
  - 2.7.6.2. If NHIP and the Contractor agree that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.
  - 2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 3.7.9.1, funding will be awarded on a sliding scale based on the percentage of schools listed, calculated as follows:
    - 2.7.6.3.1. The percentage of listed school covered divided by 50%.
    - 2.7.6.3.2. The percentage determined by the equation, above, will be multiplied by the total amount of dollars available for funding, beyond the base portion of funding, for a total of dollars awarded for that year.

2.8. Contract Administration and Leadership

- 2.8.1. The Contactor shall introduce and orient all funded staff to the work of activities conducted through the contract agreement. The Contractor shall:
  - 2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

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- 2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.
- 2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
- 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
- 2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

2.9. I-CARE Program

- 2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
- 2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the regions.
- 2.9.3. The Contractor shall ensure activities in the work plan support:
  - 2.9.3.1. The I-CARE NH mental health and wellness initiative;
  - 2.9.3.2. 9-8-8 National Suicide Prevention Lifeline expansion project; and/or
  - 2.9.3.3. NH's Suicide Prevention Council's strategic plan.
- 2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.
- 2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of contract effective date.

**3. Training and Technical Assistance Requirements**

3.1. The Contractor shall participate in training and technical assistance as follows:

- 3.1.1. Public Health Advisory Council
  - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by the Department's DPHS and/or BDAS.
  - 3.1.1.2. Complete a technical assistance needs assessment.
- 3.1.2. Public Health Emergency Preparedness

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- 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department’s DPHS and/or the Emergency Services Unit (ESU).
- 3.1.2.2. Complete a technical assistance needs assessment.
- 3.1.2.3. Attend a maximum of two trainings per year offered by the Department’s DPHS and/or ESU or the agency contracted by the Department’s DPHS to provide training programs.
- 3.1.3. Substance Misuse Prevention
  - 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
  - 3.1.3.2. At the Department’s request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including but not limited to:
    - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
    - 3.1.3.2.2. Using appropriate measures and tools.
  - 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
  - 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
  - 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
  - 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and

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- 3.1.4.1.5. Development.
- 3.1.4.2. Be familiar with RROSC and the Department's CoC systems development and the "No Wrong Door" approach to systems integration.
- 3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.
- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department.
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics (not applicable to the South Central Region)

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- 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
- 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and status, and current BLS certificate shall be retained in the training file.

**4. Staffing**

- 4.1. The Contractor's staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN's efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

<b>Position Name</b>	<b>Minimum Required Staff Positions</b>
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

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## 5. Reporting

- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide reports for the PHAC, which include but are not limited to, submitting quarterly PHAC progress reports using an on-line system administered by the Department's DPHS.
- 5.3. The Contractor shall provide reports for the PHEP that include, but are not limited to:
  - 5.3.1. Submitting quarterly PHEP progress reports using an on-line system administered by the Department's DPHS.
  - 5.3.2. Submitting all documentation necessary to complete the MCM ORR review or self-assessment.
  - 5.3.3. Submitting semi-annual action plans for MCM ORR activities on a form provided by the Department.
  - 5.3.4. Submitting information documenting the required MCM ORR-related drills and exercises.
  - 5.3.5. Submitting final After Action Reports for any other drills or exercises conducted.
- 5.4. The Contractor shall provide reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.4.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.4.2. Ensuring Three-Year Plans are current and posted to the RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.4.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.4.4. Inputting data on a monthly basis by the 20<sup>th</sup> business day of the month to the online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration, 20%





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- 5.7.1. Attending annual debriefing and planning meetings with NHIP staff.
- 5.7.2. Completing a year-end summary of:
  - 5.7.2.1. The total number of children vaccinated.
  - 5.7.2.2. Accomplishments and improvements for future school-based clinics.
- 5.7.3. Providing aggregated data, by school for each school, to NHIP no later than 3 months after SBCs are concluded that include:
  - 5.7.3.1. Number of students at the school;
  - 5.7.3.2. Number of students vaccinated versus the total number at the school; and
  - 5.7.3.3. Number of vaccinated students on Medicaid versus the total number at the school.
- 5.7.4. Providing other reports and updates, as requested by NHIP.

**6. Performance Measures**

- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the Department, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision and/or mission statements.
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.

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- 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
- 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
- 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
- 6.1.3. Substance Misuse Prevention
  - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
    - 6.1.3.1.1. 30-day alcohol use;
    - 6.1.3.1.2. 30-day marijuana use;
    - 6.1.3.1.3. 30-day illegal drug use;
    - 6.1.3.1.4. Illicit drug use other than marijuana;
    - 6.1.3.1.5. 30-day nonmedical use of pain relievers;
    - 6.1.3.1.6. Life time heroin use;
    - 6.1.3.1.7. Binge Drinking; and
    - 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
  - 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
    - 6.1.3.2.1. Perception of risk from alcohol use ;
    - 6.1.3.2.2. Perception of risk from marijuana use;
    - 6.1.3.2.3. Perception of risk from illegal drug use;
    - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
    - 6.1.3.2.5. Perception of risk from binge drinking;
    - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
    - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.

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6.1.4. Continuum of Care

6.1.4.1. Evidence of ongoing updates of regional substance use services assets and gaps assessment.

6.1.4.2. Evidence of ongoing updates of regional CoC development plan.

6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.

6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:

6.1.4.4.1. Health;

6.1.4.4.2. Safety;

6.1.4.4.3. Education;

6.1.4.4.4. Government; and

6.1.4.4.5. Business.

6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or are affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to.

6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.

6.1.5. Young Adult Strategies

6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:

6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.

6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.

6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.

6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:

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- 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
- 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.
- 6.1.6. School-Based Vaccination Clinics (not applicable to the South Central Region)
  - 6.1.6.1. Annual increase in the percentage of students receiving seasonal influenza vaccination in school-based clinics.
  - 6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.
  - 6.1.6.3. Maintain vaccine wastage below 5%.

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Vendor Name: Granite United Way  
 Contract Name: Regional Public Health Network Services

Region: Carroll County

State Fiscal Year	COVID Vaccination	Immunization	Home Care Program	Public Health Advisory Council	Public Health Emergency Preparedness	Medical Reserve Corps	Public Health Crisis Response	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Total
2019				\$0	\$0			\$0	\$0	\$0	\$0	\$1,200	\$10,000	\$ 11,200.00
2020				\$30,000	\$93,600	\$10,000	\$50,000	\$78,121	\$40,264	\$139,100	\$15,000	\$9,633	\$10,000	\$ 465,718.00
2021	\$100,000	\$35,000		\$30,000	\$93,600	\$10,000		\$78,121	\$40,264	\$90,000	\$15,000	\$9,167	\$0	\$ 488,152.00
2022			\$5,000	\$30,000	\$93,600	\$10,000		\$78,121	\$40,264	\$80,000	\$15,000		\$0	\$ 344,985.00
														Subtotal \$ 1,310,055.00

Region: Capitol

State Fiscal Year	COVID Vaccination	Immunization	Home Care Program	Public Health Advisory Council	Public Health Emergency Preparedness	Medical Reserve Corps	Public Health Crisis Response	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Total
2019				\$0	\$0			\$0	\$0	\$0	\$0	\$1,200	\$10,000	\$ 11,200.00
2020				\$30,000.00	\$93,430	\$10,000	\$50,000	\$78,014	\$40,250	\$104,991	\$15,000	\$11,992	\$10,000	\$ 443,667.00
2021	\$100,000	\$35,000		\$30,000.00	\$93,430	\$10,000		\$78,014	\$40,250	\$90,000	\$15,000	\$8,018	\$0	\$ 499,712.00
2022			\$5,000	\$30,000.00	\$93,430	\$10,000		\$78,015	\$40,290	\$80,000	\$15,000		\$0	\$ 354,895.00
														Subtotal \$ 1,309,274.00

Region: South Central

State Fiscal Year	COVID Vaccination	Immunization	Home Care Program	Public Health Advisory Council	Public Health Emergency Preparedness	Medical Reserve Corps	Public Health Crisis Response	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Total
2019				\$0	\$0			\$0	\$0	\$0	not applicable	\$1,200	\$10,000	\$ 11,200.00
2020				\$30,000.00	\$94,360	\$10,000	\$50,000	\$78,375	\$40,137	\$99,678	not applicable	\$9,633	\$10,000	\$ 472,183.00
2021	\$100,000	\$35,000		\$30,000.00	\$94,360	\$10,000		\$78,375	\$40,137	\$99,000	not applicable	\$9,167	\$0	\$ 464,039.00
2022			\$5,000	\$30,000.00	\$94,360	\$10,000		\$78,375	\$40,137	\$80,000	not applicable		\$0	\$ 340,872.00
														Subtotal \$ 1,356,294.00

Total Subtotal \$ 3,677,623.00

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Exhibit B-57 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Public Health Advisory Council, DPHS

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 10,508.00		\$ 10,508.00				\$ 10,508.00		\$ 10,508.00
2. Employee Benefits	\$ 2,266.00		\$ 2,266.00				\$ 2,266.00		\$ 2,266.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
6. Travel	\$ 261.00		\$ 261.00				\$ 261.00		\$ 261.00
7. Occupancy									
8. Current Expenses									
Telephone	\$ 105.00		\$ 105.00				\$ 105.00		\$ 105.00
Postage									
Subscriptions									
Audit and Legal	\$ 250.00		\$ 250.00				\$ 250.00		\$ 250.00
Insurance									
Board Expenses	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
9. Software									
10. Marketing/Communications	\$ 64.00		\$ 64.00				\$ 64.00		\$ 64.00
11. Staff Education and Training	\$ 82.50		\$ 82.50				\$ 82.50		\$ 82.50
12. Subcontracts/Agreements									
13. Other (specify details mandatory)									
translator									
indirect	\$ -	\$ 1,363.50	\$ 1,363.50	\$ -	\$ -	\$ -	\$ -	\$ 1,363.50	\$ 1,363.50
TOTAL	\$ 13,636.50	\$ 1,363.50	\$ 15,000.00	\$ -	\$ -	\$ -	\$ 13,636.50	\$ 1,363.50	\$ 15,000.00

Indirect As A Percent of Direct 10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-58 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Public Health Advisory Council, BDAS

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 10,508.00		\$ 10,508.00				\$ 10,508.00		\$ 10,508.00
2. Employee Benefits	\$ 2,266.00		\$ 2,266.00				\$ 2,266.00		\$ 2,266.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
6. Travel	\$ 261.00		\$ 261.00				\$ 261.00		\$ 261.00
7. Occupancy									
8. Current Expenses:									
Telephone	\$ 105.00		\$ 105.00				\$ 105.00		\$ 105.00
Postage									
Subscriptions									
Audit and Legal	\$ 250.00		\$ 250.00				\$ 250.00		\$ 250.00
Insurance									
Board Expenses	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
9. Software									
10. Marketing/Communications	\$ 64.00		\$ 64.00				\$ 64.00		\$ 64.00
11. Staff Education and Training	\$ 82.50		\$ 82.50				\$ 82.50		\$ 82.50
12. Subcontracts/Agreements									
13. Other (specify details mandatory):									
translator									
indirect		\$ 1,363.50	\$ 1,363.50	\$ -	\$ -	\$ -	\$ -	\$ 1,363.50	\$ 1,363.50
<b>TOTAL</b>	<b>\$ 13,636.50</b>	<b>\$ 1,363.50</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 13,636.50</b>	<b>\$ 1,363.50</b>	<b>\$ 15,000.00</b>

Indirect As A Percent of Direct

10.0%

Vendor Initials PT

Date 5/21/2021

Exhibit B-59 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Public Health Emergency Preparedness / Volunteer Management

Budget Period: FY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,714.00		\$ 5,714.00				\$ 5,714.00		\$ 5,714.00
2. Employee Benefits	\$ 1,493.00		\$ 1,486.00				\$ 1,493.00		\$ 1,486.00
3. Consultants	\$ 1,400.00		\$ 1,400.00				\$ 1,400.00		\$ 1,400.00
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Office	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
6. Travel									
7. Occupancy									
8. Current Expenses									
Telephone	\$ 84.00		\$ 84.00				\$ 84.00		\$ 84.00
Postage									
Subscriptions									
Audit and Legal	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Insurance									
Board Expenses									
9. Software									
10. Marketing/Communications									
11. Staff Education and Training									
12. Subcontracts/Agreements									
13. Other (specify details mandatory):									
translator	\$ 107.00		\$ 107.00				\$ 107.00		\$ 107.00
indirect		\$ 909.00	\$ 909.00	\$ -	\$ -	\$ -	\$ -	\$ 909.00	\$ 909.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 9,098.00</b>	<b>\$ 909.00</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,098.00</b>	<b>\$ 909.00</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct 10.0%

Exhibit B-60 Budget, Amendment # 8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Public Health Emergency Preparedness

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 63,016.00		\$ 63,016.00				\$ 63,016.00		\$ 63,016.00
2. Employee Benefits	\$ 16,280.00		\$ 16,280.00				\$ 16,280.00		\$ 16,280.00
3. Consultants									
4. Equipment									
Rental									
Repair and Maintenance	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
Office	\$ 430.00		\$ 430.00				\$ 430.00		\$ 430.00
6. Travel	\$ 1,988.00		\$ 1,988.00				\$ 1,988.00		\$ 1,988.00
7. Occupancy									
8. Current Expenses									
Telephone	\$ 672.00		\$ 672.00				\$ 672.00		\$ 672.00
Postage									
Subscriptions									
Audit and Legal	\$ 1,600.00		\$ 1,600.00				\$ 1,600.00		\$ 1,600.00
Insurance									
Board Expenses	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
9. Software									
10. Marketing/Communications	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
11. Staff Education and Training	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
12. Subcontracts/Agreements									
13. Other (open to details in laboratory)									
translator	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
indirect	\$ -	\$ 8,494.00	\$ 8,494.00	\$ -	\$ -	\$ -	\$ -	\$ 8,494.00	\$ 8,494.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 84,936.00</b>	<b>\$ 8,494.00</b>	<b>\$ 93,430.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 84,936.00</b>	<b>\$ 8,494.00</b>	<b>\$ 93,430.00</b>

Indirect As A Percent of Direct 10.0%

Exhibit B-61 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: School Based Vaccination Clinics

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,813.00		\$ 6,813.00				\$ 6,813.00		\$ 6,813.00
2. Employee Benefits	\$ 1,766.00		\$ 1,766.00				\$ 1,766.00		\$ 1,766.00
3. Consultants	\$ 2,500.00		\$ 2,500.00				\$ 2,500.00		\$ 2,500.00
4. Equipment	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies			\$ -						\$ -
Educational			\$ -						\$ -
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical	\$ 380.00		\$ 380.00				\$ 380.00		\$ 380.00
Office	\$ 693.00		\$ 693.00				\$ 693.00		\$ 693.00
6. Travel	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone	\$ 105.00		\$ 105.00				\$ 105.00		\$ 105.00
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal	\$ 250.00		\$ 250.00				\$ 250.00		\$ 250.00
Insurance			\$ -						\$ -
Board Expenses			\$ -						\$ -
9. Software			\$ -						\$ -
10. Marketing/Communications	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
11. Staff Education and Training	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
12. Subcontracts/Agreements			\$ -						\$ -
13. Other (specify details mandatory)	\$ 129.00		\$ 129.00				\$ 129.00		\$ 129.00
Translator	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Indirect	\$ -	\$ 1,364.00	\$ 1,364.00	\$ -	\$ -	\$ -	\$ -	\$ 1,364.00	\$ 1,364.00
TOTAL	\$ 13,636.00	\$ 1,364.00	\$ 15,000.00	\$ -	\$ -	\$ -	\$ 13,636.00	\$ 1,364.00	\$ 15,000.00

Indirect As A Percent of Direct

10.0%

Exhibit B-62 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Substance Misuse Prevention

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 53,403.00		\$ 53,403.00				\$ 53,403.00		\$ 53,403.00
2. Employee Benefits	\$ 11,814.00		\$ 11,814.00				\$ 11,814.00		\$ 11,814.00
3. Consultants	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
4. Equipment									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 270.00		\$ 270.00				\$ 270.00		\$ 270.00
5. Supplies									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 1,200.00		\$ 1,200.00				\$ 1,200.00		\$ 1,200.00
6. Travel	\$ 1,297.00		\$ 1,297.00				\$ 1,297.00		\$ 1,297.00
7. Occupancy									
8. Current Expenses									
Telephone	\$ 567.00		\$ 567.00				\$ 567.00		\$ 567.00
Postage									
Subscriptions									
Audit and Legal	\$ 1,350.00		\$ 1,350.00				\$ 1,350.00		\$ 1,350.00
Insurance									
Board Expenses	\$ 120.00		\$ 120.00				\$ 120.00		\$ 120.00
9. Software									
10. Marketing/Communications	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
11. Staff Education and Training	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
12. Subcontracts/Agreements	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
13. Other (specific details mandatory)									
translator									
indirect	\$ -	\$ 7,093.00	\$ 7,093.00	\$ -	\$ -	\$ -	\$ -	\$ 7,093.00	\$ 7,093.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 70,921.00</b>	<b>\$ 7,093.00</b>	<b>\$ 78,015.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 70,921.00</b>	<b>\$ 7,093.00</b>	<b>\$ 78,015.00</b>

Indirect As A Percent of Direct

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-63 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Young Adult Strategies

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 10,470.16		\$ 10,470.16				\$ 10,470.16		\$ 10,470.16
2. Employee Benefits	\$ 2,931.64		\$ 2,931.64				\$ 2,931.64		\$ 2,931.64
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational			\$ -						\$ -
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
6. Travel	\$ 132.00		\$ 132.00				\$ 132.00		\$ 132.00
7. Occupancy			\$ -						\$ -
8. Current Expenses:			\$ -						\$ -
Telephone	\$ 525.00		\$ 525.00				\$ 525.00		\$ 525.00
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal	\$ 1,250.00		\$ 1,250.00				\$ 1,250.00		\$ 1,250.00
Insurance			\$ -						\$ -
Board Expenses			\$ -						\$ -
9. Software			\$ -						\$ -
10. Marketing/Communications	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
11. Staff Education and Training			\$ -						\$ -
12. Subcontracts/Agreements	\$ 60,000.00		\$ 60,000.00				\$ 60,000.00		\$ 60,000.00
13. Other (specify details mandatory):			\$ -						\$ -
translator			\$ -						\$ -
indirect		\$ 4,091.20	\$ 4,091.20	\$ -	\$ -	\$ -	\$ -	\$ 4,091.20	\$ 4,091.20
<b>TOTAL</b>	<b>\$ 75,908.80</b>	<b>\$ 4,091.20</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 75,908.80</b>	<b>\$ 4,091.20</b>	<b>\$ 80,000.00</b>

Indirect As A Percent of Direct

5.4%

Exhibit B-64 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Capital Area Public Health Network

Budget Request for: Continuum of Care

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 27,397.00		\$ 27,397.00				\$ 27,397.00		\$ 27,397.00
2. Employee Benefits	\$ 5,974.00		\$ 5,974.00				\$ 5,974.00		\$ 5,974.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
6. Travel	\$ 696.00		\$ 696.00				\$ 696.00		\$ 696.00
7. Occupancy									
8. Current Expenses									
Telephone	\$ 294.00		\$ 294.00				\$ 294.00		\$ 294.00
Postage									
Subscriptions									
Audit and Legal	\$ 700.00		\$ 700.00				\$ 700.00		\$ 700.00
Insurance									
Board Expenses	\$ 95.00		\$ 95.00				\$ 95.00		\$ 95.00
9. Software									
10. Marketing/Communications	\$ 434.00		\$ 434.00				\$ 434.00		\$ 434.00
11. Staff Education and Training	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
12. Subcontracts/Agreements									
13. Other (specify details mandatory):									
translator									
indirect		\$ 3,660.00	\$ 3,660.00	\$ -	\$ -	\$ -	\$ -	\$ 3,660.00	\$ 3,660.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 36,590.00</b>	<b>\$ 3,660.00</b>	<b>\$ 40,250.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 36,590.00</b>	<b>\$ 3,660.00</b>	<b>\$ 40,250.00</b>

Indirect As A Percent of Direct

10.0%

Exhibit B-65 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: Continuum of Care

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 26,366.00		\$ 26,366.00				\$ 26,366.00		\$ 26,366.00
2. Employee Benefits	\$ 3,649.00		\$ 3,649.00				\$ 3,649.00		\$ 3,649.00
3. Consultants									
4. Equipment									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 711.00		\$ 711.00				\$ 711.00		\$ 711.00
6. Travel	\$ 1,386.00		\$ 1,386.00				\$ 1,386.00		\$ 1,386.00
7. Occupancy	\$ 2,250.00		\$ 2,250.00				\$ 2,250.00		\$ 2,250.00
8. Current Expenses									
Telephone	\$ 687.00		\$ 687.00				\$ 687.00		\$ 687.00
Postage									
Subscriptions									
Audit and Legal	\$ 750.00		\$ 750.00				\$ 750.00		\$ 750.00
Insurance									
Board Expenses	\$ 202.00		\$ 202.00				\$ 202.00		\$ 202.00
9. Software									
10. Marketing/Communications	\$ 202.00		\$ 202.00				\$ 202.00		\$ 202.00
11. Staff Education and Training	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
12. Subcontracts/Agreements									
13. Other (specify details mandatory)									
Translator									
Indirect	\$ -	\$ 3,661.00	\$ 3,661.00	\$ -	\$ -	\$ -	\$ -	\$ 3,661.00	\$ 3,661.00
TOTAL	\$ 36,603.00	\$ 3,661.00	\$ 40,264.00	\$ -	\$ -	\$ -	\$ 36,603.00	\$ 3,661.00	\$ 40,264.00

Indirect As A Percent of Direct 10.0%

Vendor Initials PT

Date 5/21/2021

Exhibit B-66 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: Public Health Advisory Council, BDAS

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 8,000.00		\$ 8,000.00				\$ 8,000.00		\$ 8,000.00
2. Employee Benefits	\$ 2,240.00		\$ 2,240.00				\$ 2,240.00		\$ 2,240.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
6. Travel	\$ 900.00		\$ 900.00				\$ 900.00		\$ 900.00
7. Occupancy	\$ 900.00		\$ 900.00				\$ 900.00		\$ 900.00
8. Current Expenses									
Telephone	\$ 229.00		\$ 229.00				\$ 229.00		\$ 229.00
Postage									
Subscriptions									
Audit and Legal	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
Insurance									
Board Expenses	\$ 218.50		\$ 218.50				\$ 218.50		\$ 218.50
9. Software									
10. Marketing/Communications	\$ 249.00		\$ 249.00				\$ 249.00		\$ 249.00
11. Staff Education and Training	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
12. Subcontracts/Agreements									
13. Other (per the details mandatory)									
Translator									
Indirect		\$ 1,363.50	\$ 1,363.50	\$ -	\$ -	\$ -	\$ -	\$ 1,363.50	\$ 1,363.50
TOTAL	\$ 13,636.50	\$ 1,363.50	\$ 15,000.00	\$ -	\$ -	\$ -	\$ 13,636.50	\$ 1,363.50	\$ 15,000.00

Indirect As A Percent of Direct

10.0%

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-67 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: Public Health Advisory Council

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 8,000.00		\$ 8,000.00				\$ 8,000.00		\$ 8,000.00
2. Employee Benefits	\$ 2,240.00		\$ 2,240.00				\$ 2,240.00		\$ 2,240.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
6. Travel	\$ 900.00		\$ 900.00				\$ 900.00		\$ 900.00
7. Occupancy	\$ 900.00		\$ 900.00				\$ 900.00		\$ 900.00
8. Current Expenses									
Telephone	\$ 229.00		\$ 229.00				\$ 229.00		\$ 229.00
Postage									
Subscriptions									
Audit and Legal	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
Insurance									
Board Expenses	\$ 218.50		\$ 218.50				\$ 218.50		\$ 218.50
9. Software									
10. Marketing/Communications	\$ 249.00		\$ 249.00				\$ 249.00		\$ 249.00
11. Staff Education and Training	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
12. Subcontracts/Agreements									
13. Other (specify details mandatory)									
translator									
indirect		\$ 1,363.50	\$ 1,363.50	\$ -	\$ -	\$ -	\$ -	\$ 1,363.50	\$ 1,363.50
TOTAL	\$ 13,636.50	\$ 1,363.50	\$ 15,000.00	\$ -	\$ -	\$ -	\$ 13,636.50	\$ 1,363.50	\$ 15,000.00

Indirect As A Percent of Direct

10.0%

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-68 Budget, Amendment # 8

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

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: Public Health Emergency Preparedness / Volunteer Management

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 5,500.00		\$ 5,500.00				\$ 5,500.00		\$ 5,500.00
2. Employee Benefits	\$ 1,540.00		\$ 1,540.00				\$ 1,540.00		\$ 1,540.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical	\$ 217.00		\$ 217.00				\$ 217.00		\$ 217.00
Office	\$ 400.00		\$ 400.00				\$ 400.00		\$ 400.00
6. Travel	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
7. Occupancy	\$ 700.00		\$ 700.00				\$ 700.00		\$ 700.00
8. Current Expenses									
Telephone	\$ 184.00		\$ 184.00				\$ 184.00		\$ 184.00
Postage									
Subscriptions									
Audit and Legal	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
Insurance									
Board Expenses									
9. Software									
10. Marketing/Communications									
11. Staff Education and Training									
12. Subcontracts/Agreements									
13. Other (provide details in narrative)									
translator	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
indirect		\$ 909.00	\$ 909.00	\$ -	\$ -	\$ -		\$ 909.00	\$ 909.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 9,091.00</b>	<b>\$ 909.00</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,091.00</b>	<b>\$ 909.00</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct

10.0%

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-69 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: Public Health Emergency Preparedness

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 51,000.00		\$ 51,000.00				\$ 51,000.00		\$ 51,000.00
2. Employee Benefits	\$ 14,280.00		\$ 14,280.00				\$ 14,280.00		\$ 14,280.00
3. Consultants									
4. Equipment									
Rental									
Repair and Maintenance	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies									
Educational									
Lab									
Pharmacy									
Medical	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
Office	\$ 750.00		\$ 750.00				\$ 750.00		\$ 750.00
6. Travel	\$ 1,250.00		\$ 1,250.00				\$ 1,250.00		\$ 1,250.00
7. Occupancy	\$ 4,000.00		\$ 4,000.00				\$ 4,000.00		\$ 4,000.00
8. Current Expenses									
Telephone	\$ 1,500.00		\$ 1,500.00				\$ 1,500.00		\$ 1,500.00
Postage									
Subscriptions									
Audit and Legal	\$ 1,500.00		\$ 1,500.00				\$ 1,500.00		\$ 1,500.00
Insurance									
Board Expenses	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
9. Software									
10. Marketing/Communications	\$ 220.00		\$ 220.00				\$ 220.00		\$ 220.00
11. Staff Education and Training	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
12. Subcontracts/Agreements									
13. Other (provide details mandatory)									
Translator	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Indirect	\$ -	\$ 7,600.00	\$ 7,600.00	\$ -	\$ -	\$ -	\$ -	\$ 7,600.00	\$ 7,600.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 76,000.00</b>	<b>\$ 7,600.00</b>	<b>\$ 83,480.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 76,000.00</b>	<b>\$ 7,600.00</b>	<b>\$83,600</b>

Indirect As A Percent of Direct

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-70 Budget, Amendment # 8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: School Based Vaccination Clinics

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,592.00		\$ 6,592.00				\$ 6,592.00		\$ 6,592.00
2. Employee Benefits	\$ 1,648.00		\$ 1,648.00				\$ 1,648.00		\$ 1,648.00
3. Consultants	\$ 1,467.00		\$ 1,467.00				\$ 1,467.00		\$ 1,467.00
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 250.00		\$ 250.00				\$ 250.00		\$ 250.00
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical	\$ 750.00		\$ 750.00				\$ 750.00		\$ 750.00
Office	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
6. Travel	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
7. Occupancy	\$ 1,000.00		\$ 1,000.00				\$ 1,000.00		\$ 1,000.00
8. Current Expenses									
Telephone	\$ 229.00		\$ 229.00				\$ 229.00		\$ 229.00
Postage									
Subscriptions									
Audit and Legal	\$ 250.00		\$ 250.00				\$ 250.00		\$ 250.00
Insurance									
Board Expenses									
9. Software									
10. Marketing/Communications	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
11. Staff Education and Training	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
12. Subcontracts/Agreements									
13. Other: Medical waste disposal	\$ 150.00		\$ 150.00				\$ 150.00		\$ 150.00
translator	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
indirect	\$ -	\$ 1,364.00	\$ 1,364.00	\$ -	\$ -	\$ -	\$ -	\$ 1,364.00	\$ 1,364.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 13,636.00</b>	<b>\$ 1,364.00</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 13,636.00</b>	<b>\$ 1,364.00</b>	<b>\$ 15,000.00</b>

Indirect As A Percent of Direct

10.0%

Exhibit B-71 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, Carroll County Coalition for Public Health

Budget Request for: Substance Misuse Prevention

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 48,000.00		\$ 48,000.00				\$ 48,000.00		\$ 48,000.00
2. Employee Benefits	\$ 13,440.00		\$ 13,440.00				\$ 13,440.00		\$ 13,440.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 1,085.00		\$ 1,085.00				\$ 1,085.00		\$ 1,085.00
6. Travel	\$ 1,000.00		\$ 1,000.00				\$ 1,000.00		\$ 1,000.00
7. Occupancy	\$ 4,000.00		\$ 4,000.00				\$ 4,000.00		\$ 4,000.00
8. Current Expenses									
Telephone	\$ 1,300.00		\$ 1,300.00				\$ 1,300.00		\$ 1,300.00
Postage									
Subscriptions									
Audit and Lejal	\$ 1,000.00		\$ 1,000.00				\$ 1,000.00		\$ 1,000.00
Insurance									
Board Expenses	\$ 94.00		\$ 94.00				\$ 94.00		\$ 94.00
9. Software									
10. Marketing/Communications	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
11. Staff Education and Training	\$ 500.00		\$ 500.00				\$ 500.00		\$ 500.00
12. Subcontracts/Agreements									
13. Other (specific details mandatory)									
translator		\$ 7,102.00	\$ 7,102.00	\$ -	\$ -	\$ -	\$ -	\$ 7,102.00	\$ 7,102.00
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 71,019.00</b>	<b>\$ 7,102.00</b>	<b>\$ 78,121.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 71,019.00</b>	<b>\$ 7,102.00</b>	<b>\$ 78,121.00</b>

Indirect As A Percent of Direct

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-72 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, Carroll County Public Health Network

Budget Request for: Young Adult Strategies

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$37,000.00		\$37,000.00				\$37,000.00		\$37,000.00
2. Employee Benefits	\$10,360.00		\$10,360.00				\$10,360.00		\$10,360.00
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$760.00		\$760.00				\$760.00		\$760.00
6. Travel	\$1,000.00		\$1,000.00				\$1,000.00		\$1,000.00
7. Occupancy	\$4,000.00		\$4,000.00				\$4,000.00		\$4,000.00
8. Current Expenses									
Telephone	\$1,145.00		\$1,145.00				\$1,145.00		\$1,145.00
Postage									
Subscriptions									
Audit and Legal	\$1,250.00		\$1,250.00				\$1,250.00		\$1,250.00
Insurance									
Board Expenses									
9. Software									
10. Marketing/Communications	\$959.00		\$959.00				\$959.00		\$959.00
11. Staff Education and Training	\$975.00		\$975.00				\$975.00		\$975.00
12. Subcontracts/Agreements	\$15,278.27		\$15,278.27				\$15,278.27		\$15,278.27
13. Other (specify details mandatory)									
translator									
indirect		\$7,272.73	\$7,272.73	\$ -	\$ -	\$ -		\$7,272.73	\$7,272.73
<b>TOTAL</b>	<b>\$72,727.27</b>	<b>\$7,272.73</b>	<b>\$80,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$72,727.27</b>	<b>\$7,272.73</b>	<b>\$80,000.00</b>

Indirect As A Percent of Direct

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-73 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, South Central Public Health Network

Budget Request for: Continuum of Care

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
2. Employee Benefits	\$ 28.00		\$ 28.00				\$ 28.00		\$ 28.00
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
6. Travel	\$ 300.00		\$ 300.00				\$ 300.00		\$ 300.00
7. Occupancy	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
8. Current Expenses			\$ -						\$ -
Telephone	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal	\$ 500		\$ 500.00				\$ 500		\$ 500.00
Insurance			\$ -						\$ -
Board Expenses	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
9. Software			\$ -						\$ -
10. Marketing/Communications	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
11. Staff Education and Training	\$ 50.00		\$ 50.00				\$ 50.00		\$ 50.00
12. Subcontracts/Agreements	\$ 36,181.00		\$ 36,181.00				\$ 36,181.00		\$ 36,181.00
13. Other (specific details mandatory)			\$ -						\$ -
translator			\$ -						\$ -
indirect		\$ 2,578.00	\$ 2,578.00	\$ -	\$ -	\$ -		\$ 2,578.00	\$ 2,578.00
<b>TOTAL</b>	<b>\$ 37,559.00</b>	<b>\$ 2,578.00</b>	<b>\$ 40,137.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 37,559.00</b>	<b>\$ 2,578.00</b>	<b>\$ 40,137.00</b>

Indirect As A Percent of Direct

6.9%

Vendor Initials PT

Date 5/21/2021

Exhibit B-74 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, South Central Public Health Network

Budget Request for: Public Health Advisory Council, BDAS

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -						\$ -
2. Employee Benefits			\$ -						\$ -
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational			\$ -						\$ -
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office			\$ -						\$ -
6. Travel			\$ -						\$ -
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone			\$ -						\$ -
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal			\$ -						\$ -
Insurance			\$ -						\$ -
Board Expenses			\$ -						\$ -
9. Software			\$ -						\$ -
10. Marketing/Communications			\$ -						\$ -
11. Staff Education and Training			\$ -						\$ -
12. Subcontracts/Agreements	\$ 15,000.00		\$ 15,000.00				\$ 15,000.00		\$ 15,000.00
13. Other (provide details mandatory)			\$ -						\$ -
translator			\$ -						\$ -
indirect			\$ -						\$ -
<b>TOTAL</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ 15,000.00</b>

Indirect As A Percent of Direct

0.0%

0.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-75 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, South Central Public Health Network

Budget Request for: Public Health Advisory Council, DPHS

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -						\$ -
2. Employee Benefits			\$ -						\$ -
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies			\$ -						\$ -
Educational			\$ -						\$ -
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office			\$ -						\$ -
6. Travel			\$ -						\$ -
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone			\$ -						\$ -
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal			\$ -						\$ -
Insurance			\$ -						\$ -
Board Expenses			\$ -						\$ -
9. Software			\$ -						\$ -
10. Marketing/Communications			\$ -						\$ -
11. Staff Education and Training			\$ -						\$ -
12. Subcontracts/Agreements	\$ 15,000.00		\$ 15,000.00				\$ 15,000.00		\$ 15,000.00
13. Other (provide details in attachment)			\$ -						\$ -
translator			\$ -						\$ -
indirect			\$ -						\$ -
<b>TOTAL</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ 15,000.00</b>

Indirect As A Percent of Direct

0.0%

0.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-76 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Grante United Way, South Central Public Health Network

Budget Request for: Public Health Preparedness, Volunteer Management

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -						\$ -
2. Employee Benefits			\$ -						\$ -
3. Consultants			\$ -						\$ -
4. Equipment			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational			\$ -						\$ -
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office			\$ -						\$ -
6. Travel			\$ -						\$ -
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone			\$ -						\$ -
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal			\$ -						\$ -
Insurance			\$ -						\$ -
Board Expenses			\$ -						\$ -
9. Software			\$ -						\$ -
10. Marketing/Communications			\$ -						\$ -
11. Staff Education and Training			\$ -						\$ -
12. Subcontracts/Agreements	\$ 9,090.90		\$ 9,090.90				\$ 9,090.90		\$ 9,090.90
13. Other (specify details mandatory)			\$ -						\$ -
translator			\$ -						\$ -
indirect		\$ 909.10	\$ 909.10	\$ -	\$ -	\$ -	\$ -	\$ 909.10	\$ 909.10
<b>TOTAL</b>	<b>\$ 9,090.90</b>	<b>\$ 909.10</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,090.90</b>	<b>\$ 909.10</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct

10.0%

10.0%

Vendor Initials 

Date 5/21/2021

Exhibit B-77 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, South Central Public Health Network

Budget Request for: Public Health Preparedness

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
2. Employee Benefits	\$ 28.00		\$ 28.00				\$ 28.00		\$ 28.00
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
6. Travel	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal	\$ 1,500.00		\$ 1,500.00				\$ 1,500.00		\$ 1,500.00
Insurance			\$ -						\$ -
Board Expenses	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
9. Software			\$ -						\$ -
10. Marketing/Communications	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
11. Staff Education and Training	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
12. Subcontracts/Agreements	\$ 89,189.00		\$ 89,189.00				\$ 89,189.00		\$ 89,189.00
13. Other (specify details mandatory)			\$ -						\$ -
translator			\$ -						\$ -
indirect		\$ 2,743.00	\$ 2,743.00	\$ -	\$ -	\$ -		\$ 2,743.00	\$ 2,743.00
<b>TOTAL</b>	<b>\$ 91,617.00</b>	<b>\$ 2,743.00</b>	<b>\$ 94,360.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 91,617.00</b>	<b>\$ 2,743.00</b>	<b>\$ 94,360.00</b>

Indirect As A Percent of Direct

3.0%

Vendor Initials: US  
PT

Date: 5/21/2021

Exhibit B-78 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, South Central Public Health Network

Budget Request for: Substance Misuse Prevention

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
2. Employee Benefits	\$ 28.00		\$ 28.00				\$ 28.00		\$ 28.00
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
6. Travel	\$ 200.00		\$ 200.00				\$ 200.00		\$ 200.00
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal	\$ 1,000.00		\$ 1,000.00				\$ 1,000.00		\$ 1,000.00
Insurance			\$ -						\$ -
Board Expenses	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
9. Software			\$ -						\$ -
10. Marketing/Communications	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
11. Staff Education and Training	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
12. Subcontracts/Agreements	\$ 73,754.00		\$ 73,754.00				\$ 73,754.00		\$ 73,754.00
13. Other (provide details mandatory):			\$ -						\$ -
translator			\$ -						\$ -
indirect		\$ 2,693.00	\$ 2,693.00	\$ -	\$ -	\$ -		\$ 2,693.00	\$ 2,693.00
<b>TOTAL</b>	<b>\$ 75,682.00</b>	<b>\$ 2,693.00</b>	<b>\$ 78,375.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 75,682.00</b>	<b>\$ 2,693.00</b>	<b>\$ 78,375.00</b>

Indirect As A Percent of Direct

3.6%

Vendor Initials UN PT

Date 5/21/2021

Exhibit B-79 Budget, Amendment # 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Granite United Way, South Central Public Health Network

Budget Request for: Young Adult Strategies

Budget Period: SFY22

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
2. Employee Benefits	\$ 28.00		\$ 28.00				\$ 28.00		\$ 28.00
3. Consultants			\$ -						\$ -
4. Equipment:			\$ -						\$ -
Rental			\$ -						\$ -
Repair and Maintenance			\$ -						\$ -
Purchase/Depreciation			\$ -						\$ -
5. Supplies:			\$ -						\$ -
Educational	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Lab			\$ -						\$ -
Pharmacy			\$ -						\$ -
Medical			\$ -						\$ -
Office	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
6. Travel	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
7. Occupancy			\$ -						\$ -
8. Current Expenses			\$ -						\$ -
Telephone	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
Postage			\$ -						\$ -
Subscriptions			\$ -						\$ -
Audit and Legal	\$ 1,500.00		\$ 1,500.00				\$ 1,500.00		\$ 1,500.00
Insurance			\$ -						\$ -
Board Expenses	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
9. Software			\$ -						\$ -
10. Marketing/Communications	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
11. Staff Education and Training	\$ 100.00		\$ 100.00				\$ 100.00		\$ 100.00
12. Subcontracts/Agreements			\$ -						\$ -
13. Other (provide details separately)	\$ 74,939.00		\$ 74,939.00				\$ 74,939.00		\$ 74,939.00
translator			\$ -						\$ -
indirect		\$ 2,733.00	\$ 2,733.00	\$ -	\$ -	\$ -	\$ -	\$ 2,733.00	\$ 2,733.00
<b>TOTAL</b>	<b>\$ 77,267.00</b>	<b>\$ 2,733.00</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 77,267.00</b>	<b>\$ 2,733.00</b>	<b>\$ 80,000.00</b>

Indirect As A Percent of Direct

3.5%

Vendor Initials US  
PT

Date 5/21/2021

# State of New Hampshire

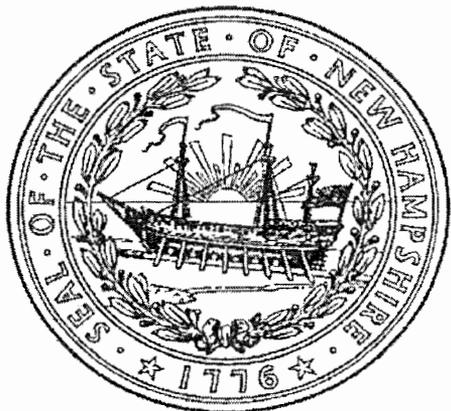
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GRANITE UNITED WAY is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on March 30, 1927. 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: 65650

Certificate Number: 0005363034



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 5th day of May A.D. 2021.

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

William M. Gardner  
Secretary of State

Granite United Way

**Granite United Way Board of Directors Meeting Agenda  
September 24, 2020 4:00 pm – 6:00 pm**



**Zoom Meeting:** <https://us02web.zoom.us/j/87678327689?pwd=dXpOeWx5T1R6dU00Y1QzRUQzWmhTQT09>

**Present:** Joe Bator, Larissa Baia, Kathy Bizarro-Thunberg, Joe Carelli, Jason Cole, Doug deLara, Michael Delahanty, Patricia Donahue, Chris Emond, Marlene Hammond, Charlie Head, Joe Kenney, Chuck Lloyd, Sally Kraft, Christina Lachance, Heather Staples Lavoie, Larry Major, Joe Purington, Beth Rattigan, Peter Rayno, Betsey Rhynhart, Charla Stevens, Tony Speller, Ed Shanshala, Mike Wagner, Patrick Tufts  
**Staff:** Karrie Eaton, Nichole Reimer, Cindy Read, Bill Sherry, Meredith Young, Scoop Welch, Katie Kobe, Shannon Bresaw

**Welcome**

**Tony Speller, Chair**

Tony welcomed everyone to the meeting. He noted that it was a very full agenda and that he was excited to lead the board in his first meeting as Chair. He stated how he was looking forward to hearing from Governor Sununu who would be joining the meeting by 4:30. He asked that we move forward with the consent agenda and president's report and our Diversity and Equity update as we waited for the Governor to join the meeting as our guest speaker.

**Consent Agenda**

**Tony Speller, Chair**

Tony asked for a motion to approve the June 18th Meeting Minutes.

Motion: Joe Bator    Second: Jason Cole    Abstained Larissa Baia

Motion passes with all in favor

**President's Report**

**Patrick Tufts**

Patrick began his report with an update on how the low-density work plan was working during the continued COVID-19 pandemic. He stated that each full-time employee is expected in an office 2 days per week. This allows for us to have no more than 30-50% of employees in person at any given time. All employees undergo daily temperature checks and health screenings. 211 staff follow Eversource building protocols and remain in person. Patrick is looking at more remote time during the holidays and will assess extending the low-density work plan beyond January soon.

Patrick asked for approval of a certificate of vote to allow him to accept and authorize contracts with the state. He asked for the Board to accept "That Patrick Tufts, President & CEO, is duly authorized on behalf of Granite United Way to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his judgment be desirable or necessary to effect the purpose of this vote." Tony asked for a motion to accept this authorization.

Motion: Kathy Bizarro-Thunberg    Second: Chuck Llyod

Motion passes with all in favor.

Patrick then read to the board the United Way Worldwide Membership requirements. Each year, Granite United Way must certify that they have met the requirements of membership. Patrick noted that he had

**Certificate of Authority # 1**

*(Corporation, Non-Profit Corporation)*

**Corporate Resolution**

I, TONY SPELLER, hereby certify that I am duly elected Clerk/Secretary/Officer of  
*(Name)*  
GRANITE UNITED WAY. I hereby certify the following is a true copy of a vote taken at  
*(Name of Corporation)*

a meeting of the Board of Directors/shareholders, duly called and held on SEPT. 24, 2020,  
at which a quorum of the Directors/shareholders were present and voting.

VOTED: That PATRICK THETS, PRESIDENT & CEO (may list more than one person) is  
*(Name and Title)*

duly authorized to enter into contracts or agreements on behalf of

GRANITE UNITED WAY with the State of New Hampshire and any of  
*(Name of Corporation)*

its agencies or departments and further is authorized to execute any documents  
which may in his/her judgment be desirable or necessary to effect the purpose of  
this vote.

I hereby certify that said vote has not been amended or repealed and remains in full force  
and effect as of the date of the contract to which this certificate is attached. This authority  
remains valid for thirty (30) days from the date of this Corporate Resolution. I further certify  
that it is understood that the State of New Hampshire will rely on this certificate as evidence that  
the person(s) listed above currently occupy the position(s) indicated and that they have full  
authority to bind the corporation. To the extent that there are any limits on the authority of any  
listed individual to bind the corporation in contracts with the State of New Hampshire, all such  
limitations are expressly stated herein.

DATED: 4-28-2021

ATTEST: *[Signature]*, Chair  
*(Name & Title)*

NOTARY: *[Signature]*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/7/2021

**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 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).**

<b>PRODUCER</b> THE ROWLEY AGENCY INC. 45 Constitution Avenue P.O. Box 511 Concord NH 03302-0511	<b>CONTACT NAME:</b> Elizabeth Prindiville <b>PHONE (A/C, No, Ext):</b> (603) 224-2562 <b>FAX (A/C, No):</b> (603) 224-8012 <b>E-MAIL ADDRESS:</b> eprindiville@rowleyagency.com
<b>INSURER(S) AFFORDING COVERAGE</b>	
INSURER A: Hanover Ins - Bedford	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

**COVERAGES** **CERTIFICATE NUMBER: 21-22** **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ZHV900337108	1/1/2021	1/1/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OPAGG \$ 2,000,000 Professional Liability \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS			ZHV900337108	1/1/2021	1/1/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			UHV9003210-09	1/1/2021	1/1/2022	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
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 <input checked="" type="checkbox"/> N	N/A	3A States: NH, VT  WHV8996802-09	1/1/2021	1/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 Covering operations of the named insured during the policy period.

<b>CERTIFICATE HOLDER</b>  State of NH Department of Health and Human Services 129 Pleasant Street Concord, NH 03301-3857	<b>CANCELLATION</b>  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 E Prindiville/ESP <span style="float: right;"><i>Elizabeth Prindiville</i></span>
--	---



Granite United Way

# LIVE UNITED

## MISSION STATEMENT

Granite United Way's mission is to improve the quality of people's lives by bringing together the caring power of communities.

## Granite United Way

Meriden County  
45 South Main Street  
Concord, NH 03301  
503.224.2595

Outlier Region  
22 Concord Street  
Manchester, NH 03101  
503.625.6939

North County  
P.O. Box 311  
Littleton, NH 03561  
503.444.1555

Northern Region  
961 Main Street  
Berlin, NH 03570  
503.732.3345

Upper Valley  
21 Technology Drive  
W. Lebanon, NH 03784  
503.298.8499

Central Region  
333 South Main St  
Lisbon, NH 03246  
503.737.1121

White Village  
238 Highland Street  
Plymouth, NH 03264  
503.536.3720

Carroll County United  
448A White Mtn. Highway  
Tamworth, NH 03843  
503.323.8139

GRANITE UNITED WAY

FINANCIAL REPORT

JUNE 30, 2020

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**NATHAN WECHSLER & COMPANY**  
**CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS ADVISORS**

*INDEPENDENT AUDITOR'S REPORT*

To the Board of Directors  
Granite United Way  
Manchester, New Hampshire 03101

*Report on the Financial Statements*

We have audited the accompanying financial statements of Granite United Way, which comprise the statement of financial position as of June 30, 2020, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the 15-month period then ended, and the related notes to the financial statements.

*Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these 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 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 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 financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the 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 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 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 financial statements referred to above present fairly, in all material respects, the financial position of Granite United Way as of June 30, 2020, and the changes in its net assets and its cash flows for the 15-month period then ended in accordance with accounting principles generally accepted in the United States of America.

*Emphasis of Matter*

We draw attention to Note 16 to the financial statements, which describes the uncertainty related to the COVID-19 pandemic and impact on the Granite United Way's business. Our opinion is not modified with respect to this matter.

*Other Matters*

*Other Information*

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

*Other Reporting Required by Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated November 19, 2020 on our consideration of Granite United Way's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Granite United Way's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Granite United Way's internal control over financial reporting and compliance.

*Nathan Nechols & Company*

Concord, New Hampshire  
November 19, 2020

## GRANITE UNITED WAY

## STATEMENT OF FINANCIAL POSITION

June 30, 2020

ASSETS			
	Without Donor/ Time Restrictions	With Donor/ Time Restrictions	Total
<b>CURRENT ASSETS</b>			
Cash	\$ 161,136	\$ 1,044,167	\$ 1,205,303
Prepaid and reimbursable expenses	30,021	-	30,021
Investments	436,473	-	436,473
Accounts and rent receivable	28,732	-	28,732
Contributions and grants receivable, net of allowance for uncollectible contributions \$499,872	-	2,519,281	2,519,281
<i>Total current assets</i>	<u>656,362</u>	<u>3,563,448</u>	<u>4,219,810</u>
<b>OTHER ASSETS</b>			
Property and equipment, net	1,182,068	-	1,182,068
Investments - endowment	11,545	219,554	231,099
Beneficial interest in assets held by others	-	1,681,721	1,681,721
<i>Total other assets</i>	<u>1,193,613</u>	<u>1,901,275</u>	<u>3,094,888</u>
<i>Total assets</i>	<u>\$ 1,849,975</u>	<u>\$ 5,464,723</u>	<u>\$ 7,314,698</u>
<b>LIABILITIES AND NET ASSETS</b>			
<b>CURRENT LIABILITIES</b>			
Current maturities of long-term notes payable	\$ 13,639	\$ -	\$ 13,639
Donor-designations payable	403,578	473,653	877,231
Accounts payable	18,980	-	18,980
Accrued expenses	250,392	-	250,392
Funds held for others	7,205	-	7,205
Current maturities of the Paycheck Protection Program loan	341,904	-	341,904
<i>Total current liabilities</i>	<u>1,035,698</u>	<u>473,653</u>	<u>1,509,351</u>
<b>LONG-TERM LIABILITIES</b>			
Notes payable, less current maturities	186,436	-	186,436
Paycheck Protection Program loan, less current maturities	430,596	-	430,596
<i>Total long-term liabilities</i>	<u>617,032</u>	<u>-</u>	<u>617,032</u>
<i>Total liabilities</i>	<u>1,652,730</u>	<u>473,653</u>	<u>2,126,383</u>
<b>COMMITMENTS (See Notes)</b>			
<b>NET ASSETS:</b>			
Without donor/ time restrictions	197,245	-	197,245
With donor/ time restrictions (Note 9)	-	4,991,070	4,991,070
<i>Total net assets</i>	<u>197,245</u>	<u>4,991,070</u>	<u>5,188,315</u>
<i>Total liabilities and net assets</i>	<u>\$ 1,849,975</u>	<u>\$ 5,464,723</u>	<u>\$ 7,314,698</u>

## GRANITE UNITED WAY

STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS  
15-Month Period Ended June 30, 2020

	Without Donor / Time Restrictions	With Donor / Time Restrictions	Total
Support and revenues:			
Campaign revenue:			
Total contributions pledged	\$ -	\$ 7,285,635	\$ 7,285,635
Less donor designations	-	(1,856,774)	(1,856,774)
Less provision for uncollectible pledges	-	(294,689)	(294,689)
Add prior years' excess provision for uncollectible pledges taken into income in current year	92,189	-	92,189
<i>Net campaign revenue</i>	92,189	5,134,172	5,226,361
Support:			
Grant revenue	-	2,024,091	2,024,091
Sponsors and other contributions	-	1,870,050	1,870,050
In-kind contributions	43,119	-	43,119
<i>Total support</i>	135,308	9,028,313	9,163,621
Other revenue:			
Rental income	104,664	-	104,664
Administrative fees	104,423	-	104,423
Miscellaneous income	5,634	-	5,634
<i>Total support and revenues</i>	350,029	9,028,313	9,378,342
Net assets released from restrictions:			
For satisfaction of time restrictions	5,096,357	(5,096,357)	-
For satisfaction of program restrictions	4,103,229	(4,103,229)	-
	9,549,615	(171,273)	9,378,342
Expenses:			
Program services	6,524,714	-	6,524,714
Support services:			
Management and general	944,017	-	944,017
Fundraising	1,216,880	-	1,216,880
<i>Total expenses</i>	8,685,611	-	8,685,611
<i>Increase (decrease) in net assets         before non-operating activities</i>	864,004	(171,273)	692,731
Non-operating activities:			
Change in value of beneficial interest in trusts, net of fees of \$15,090	-	(44,486)	(44,486)
Realized and unrealized gains on investments	4,285	8,033	12,318
Investment income, net	100,179	7,095	107,274
<i>Total non-operating activities</i>	104,464	(29,358)	75,106
<i>Net increase (decrease) in net assets</i>	968,468	(200,631)	767,837
Net assets (deficit), beginning of year	(771,223)	5,191,701	4,420,478
<i>Net assets, end of year</i>	\$ 197,245	\$ 4,991,070	\$ 5,188,315

## GRANITE UNITED WAY

STATEMENT OF FUNCTIONAL EXPENSES  
15-Month Period Ended June 30, 2020

	Grants and awards	Salaries, employee benefits and taxes	Occupancy	Technology and telephone expenses	United Way Worldwide dues and other dues and subscriptions	Campaign, communications and printing	Professional services and subcontractors	Conferences, travel and staff development	Supplies, office expenses, insurance, and other	Depreciation and amortization	Total
Program services:											
Community impact grants	\$ 148,462	\$ 294,208	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	442,670
Public Health Network	-	608,444	11,704	194	-	1,646	535,278	21,209	111,283	-	1,289,758
211 New Hampshire	-	721,249	-	131,812	7,522	5,809	3,500	5,742	72,774	-	948,408
Volunteer Income Tax Assistance	-	158,286	-	-	-	-	30,795	-	9,650	-	198,731
Whole Village Family Resource Center	-	180,153	68,273	15,600	-	-	38,153	1,047	32,382	39,871	375,479
Work United Program	-	196,675	-	-	-	-	-	19,214	-	-	215,889
COVID-19 Relief Fund	535,558	-	-	-	-	-	-	-	5,800	-	541,358
Leader in Me	172,858	8,476	-	-	-	-	-	-	-	-	181,334
Other program services	55,602	1,070,720	135,321	101,671	90,111	39,691	503,938	39,641	264,181	30,211	2,331,087
<i>Total program services</i>	<i>912,480</i>	<i>3,238,211</i>	<i>215,298</i>	<i>249,277</i>	<i>97,633</i>	<i>47,146</i>	<i>1,111,664</i>	<i>86,853</i>	<i>496,070</i>	<i>70,082</i>	<i>6,524,714</i>
Supporting Services:											
Management and general	-	772,054	32,263	24,240	21,484	-	49,105	8,524	29,418	6,929	944,017
Fundraising	-	1,006,329	42,053	31,596	28,004	49,049	2,771	11,111	36,935	9,032	1,216,880
<i>Total supporting services</i>	<i>-</i>	<i>1,778,383</i>	<i>74,316</i>	<i>55,836</i>	<i>49,488</i>	<i>49,049</i>	<i>51,876</i>	<i>19,635</i>	<i>66,353</i>	<i>15,961</i>	<i>2,160,897</i>
<i>Total functional expenses</i>	<i>\$ 912,480</i>	<i>\$ 5,016,594</i>	<i>\$ 289,614</i>	<i>\$ 305,113</i>	<i>\$ 147,121</i>	<i>\$ 96,195</i>	<i>\$ 1,163,540</i>	<i>\$ 106,488</i>	<i>\$ 562,423</i>	<i>\$ 86,043</i>	<i>\$ 8,685,611</i>

See Notes to Financial Statements.

Page 5

## GRANITE UNITED WAY

STATEMENT OF CASH FLOWS  
15-Month Period Ended June 30, 2020

<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>	
Cash received from donors	\$ 9,769,549
Cash received from grantors	2,182,609
Administrative fees	18,061
Other cash received	91,548
Cash received from trusts	73,555
Designations paid	(2,235,961)
Net cash paid for funds held for others	(1,850)
Cash paid to agencies	(1,550,638)
Cash paid to suppliers, employees, and others	(8,361,082)
<i>Net cash used in operating activities</i>	<u>(14,209)</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>	
Purchase of property and equipment	(19,987)
Proceeds from sale of investments	63,422
<i>Net cash provided by investing activities</i>	<u>43,435</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>	
Proceeds from the Payroll Protection Program loan	772,500
Repayments of long-term debt	(15,861)
<i>Net cash provided by financing activities</i>	<u>756,639</u>
<i>Net increase in cash</i>	785,865
Cash, beginning of year	<u>419,438</u>
<i>Cash, end of year</i>	<u>\$ 1,205,303</u>
<b>SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION</b>	
Cash payments for:	
Interest expense	\$ 18,899

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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#### *Note 1. Nature of Activities*

Granite United Way is the result of six United Ways merging together to create a single, efficient organization that covers more than 80% of New Hampshire and Windsor County, Vermont. Granite United Way improve lives by mobilizing the caring power of their communities. More than fundraisers, Granite United Way is a partner in change, working with a broad range of people and organizations to identify and resolve pressing community issues. Granite United Way works closely with volunteer leadership to invest donor dollars to help the community learn, earn and be healthy. By focusing on these investment initiatives, Granite United Way is helping people in new and strategic ways.

Granite United Way conducts annual campaigns in the fall of each year to support hundreds of local programs, primarily in the subsequent year, while the State Employee Charitable Campaign, managed by Granite United Way, is conducted in May and June. Campaign contributions are used to support local health and human services programs, collaborations and to pay Granite United Way's operating expenses. Donors may designate their pledges to support a region of Granite United Way, a Community Impact area, other United Ways or to any health and human service organization having 501(c)(3) tax-exempt status. Amounts pledged to other United Ways or agencies are included in the total contributions pledged revenue and as designations expense. The related amounts receivable and payable are reported as an asset and liability in the statement of financial position. The net campaign results are reflected as with donor restrictions in the accompanying statement of activities and changes in net assets, as the amounts are to be collected in the following year. Prior year campaign results are reflected as net assets released from restrictions in the current year statement of activities and changes in net assets.

Granite United Way invest in the community through three different vehicles:

June 30,	2020
Community Impact Awards to partner agencies	\$ 148,462
Donor designated gifts to Health and Human Service agencies	1,856,774
Granite United Way Program services	6,376,252
<i>Total</i>	<u>\$ 8,381,488</u>

The Board of Directors approved Community Impact Grant Awards amounting to \$1,100,000 for each of the years ended June 30, 2021 and 2022.

#### *Note 2. Summary of Significant Accounting Policies*

**Change in fiscal year:** During 2020, the United Way changed its fiscal year from March 31 to June 30. Due to the change, the United Way is reporting for the 15-month period ending June 30, 2020.

**Basis of accounting:** The financial statements of Granite United Way (the "United Way") have been prepared on the accrual basis. Under the accrual basis, revenues and gains are recognized when earned and expenses and losses are recognized when incurred. The significant accounting policies followed are described below to enhance the usefulness of the financial statements to the reader.

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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**Estimates and assumptions:** The United Way prepares its financial statements in accordance with generally accepted accounting principles. Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenue and expenses. Accordingly, actual results could differ from those estimates.

**Cash and cash equivalents:** For purposes of reporting cash flows, the United Way considers all highly liquid debt instruments purchased with a maturity of three months or less to be cash equivalents. The United Way had no cash equivalents at June 30, 2020.

**Net assets:** The United Way reports information regarding its financial position and activities according to two categories of net assets: net assets with donor restrictions and net assets without donor restrictions. Descriptions of these net asset categories are as follows:

*Net assets without donor/ time restrictions:* Net assets without donor restrictions are available for use at the discretion of the Board of Directors and/or management for general operating purposes. From time to time the Board of Directors designates a portion of these net assets for specific purposes which makes them unavailable for use at management's discretion. For example, the Board has designated a portion of net assets without donor restrictions as a quasi-endowment (an amount to be treated by management as if it were part of the donor restricted endowment) for the purpose of securing the United Way's long-term financial viability.

The United Way has board designated net assets of \$11,545 for endowment at June 30, 2020.

*Net assets with donor/ time restrictions:* Net assets with donor restrictions consist of assets whose use is limited by donor-imposed, time and/or purpose restrictions.

The United Way reports gifts of cash and other assets as revenue with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, the net assets are reclassified as net assets without donor restrictions and reported in the statement of activities and changes in net assets as net assets released from restrictions.

Some net assets with donor restrictions include a situation that assets provided be maintained permanently (perpetual in nature) while permitting the United Way to expend the income generated by the assets in accordance with the provisions of additional donor imposed stipulations or a Board approved spending policy.

**Contributions receivable:** Campaign pledge contributions are generally paid within one year. The United Way provides an allowance for uncollectible pledges at the time campaign results are recorded. Provisions for uncollectible pledges have been recorded in the amount of \$294,689 for the campaign period ended June 30, 2020. The provision for uncollectible pledges was calculated at 4.5% of the total pledges for the 15-month period ended June 30, 2020.

**Investments:** The United Way's investments in marketable equity securities and all debt securities are reported at their fair value based upon quoted market prices in the accompanying statement of financial position. Unrealized gains and losses are included in the changes in net assets in the accompanying statement of activities. The United Way's investments do not have a significant concentration of credit risk within any industry, geographic location, or specific location.

**GRANITE UNITED WAY****NOTES TO FINANCIAL STATEMENTS**

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**Contributions:** The United Way recognizes contributions received and made, including unconditional promises to give, as revenue in the period received or made. Contributions received are reported as either revenues without donor restrictions or revenues with donor restrictions. Contributions with donor restrictions that are used for the purposes specified by the by the donor in the same year as the contribution is received are recognized as revenues with donor restrictions and are reclassified as net assets released from restrictions in the same year. Promises to contribute that stipulate conditions to be met before the contribution is made are not recorded until the conditions are met. There were no conditional promises to give as of June 30, 2020.

**Donated goods and services:** Contributed services are recognized when the services received would typically need to be purchased if they had not been provided by donation or require specialized skills and are provided by individuals possessing those skills. Various types of in-kind support, including services, call center space, gift certificates, materials and other items, amounting to \$43,119 have been reflected at fair value in the financial statements for the 15-month period ended June 30, 2020.

A substantial number of volunteers have donated significant amounts of their time in United Way's program services; however, the value of this contributed time is not reflected in the accompanying financial statements since the volunteers' time does not meet the criteria for recognition.

**Functional allocation of expenses:** The statement of functional expenses present expenses by function and natural classification. Expenses directly attributable to a specific functional area of the United Way are reported as expenses of those functional areas. A portion of general and administrative costs that benefit multiple functional areas (indirect costs) have been allocated across programs and other supporting services based on estimates of time and effort.

**Property and equipment:** Property and equipment are carried at cost if purchased and fair value if contributed. Maintenance, repairs, and minor renewals are expensed as incurred, and major renewals and betterments are capitalized. The United Way capitalizes additions of property and equipment in excess of \$2,500.

Depreciation of property and equipment is computed using the straight-line method over the following useful lives:

	Years
Building and building improvements.....	5-31½
Leasehold improvements .....	15
Furniture and equipment.....	3-10

**Operating measure:** The United Way has presented the statement of activities and changes in net assets based on an intermediate measure of operations. The measure of operations includes all revenues and expenses that are an integral part of the United Way's programs and supporting activities and net assets released from restrictions to support operating activities. Non-operating activities are limited to resources outside of those program and services and are comprised of investment return, the changes in fair value of the beneficial interest in trusts, and gains and losses on sales and dispositions of assets.

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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**Concentrations of credit risk:** Financial instruments which potentially subject the United Way to concentrations of credit risk, consist primarily of contributions receivable, substantially all of which are from individuals, businesses, or not-for-profit organizations. Concentrations of credit risk are limited due to the large number of donors comprising the United Way's donor base. As a result, at June 30, 2020, the United Way does not consider itself to have any significant concentrations of credit risk with respect to contributions receivable.

In addition, the United Way maintains cash accounts with several financial institutions insured by the Federal Deposit Insurance Corporation up to \$250,000. At June 30, 2020, there was approximately \$932,000 included in cash in excess of federally insured limits.

**Income taxes:** The United Way is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. The United Way is also exempt from state income taxes by virtue of its ongoing exemption from federal income taxes. Accordingly, no provision for income taxes has been recorded in the accompanying financial statements.

The United Way has adopted the provisions of FASB ASC 740 Accounting for Uncertainty in Income Taxes. Accordingly, management has evaluated the United Way's tax positions and concluded the United Way had maintained its tax-exempt status, does not have any significant unrelated business income and had taken no uncertain tax positions that require adjustment or disclosure in the financial statements.

With few exceptions, the United Way is no longer subject to income tax examinations by the U.S. Federal or State tax authorities for tax years before 2017.

**Change in accounting principle:** In January 2016, the FASB issued ASU 2016-01, *Financial Instruments-Overall: Recognition and Measurement of Financial Assets and Financial Liabilities*. This standard is intended to improve recognition, measurement, presentation, and disclosure of financial instruments. The Organization adopted ASU 2016-01 on April 1, 2019. The adoption of ASU 2016-01 did not have a significant impact on the Organization's financial statements.

In June 2018, the FASB issued ASU 2018-08, *Not-for-Profit Entities (Topic 958): Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. This standard provides guidance for evaluating whether transactions should be accounted for as contributions or exchange transactions and clarifies the criteria for evaluating whether contributions are unconditional or conditional. The Organization adopted ASU 2018-08 on April 1, 2019. The adoption of ASU 2018-08 did not have a significant impact on the Organization's financial statements.

**Recent accounting pronouncements:** In May 2014, the FASB issued, *Revenue from Contracts with Customers* (ASU 2014-09), which requires revenue to be recognized when promised goods or services are transferred to customers in amounts that reflect the consideration to which the United Way expects to be entitled in exchange for those goods and services. ASU 2014-09 permits the use of either the retrospective or cumulative effect transition method. In June 2020, the FASB deferred the effective date of this standard for one year for certain entities that have not yet issued their financial statements. This standard will be effective for the United Way for the year ended June 30, 2021. Management is currently evaluating the impact this will have on its financial statements.

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

In February 2016, the FASB issued, *Leases, Topic 842* (ASU 2016-02). Under ASU 2016-02, at the commencement of a long-term lease, lessees will recognize a liability equivalent to the discounted payments due under the lease agreement, as well as an offsetting right-of-use asset. Lessees (for capital and operating leases) must apply a modified retrospective transition approach for leases existing at, or entered into after, the beginning of the earliest comparative period presented in the financial statements. The modified retrospective approach would not require any transition accounting for leases that expired before the earliest comparative period presented. Lessees may not apply a full retrospective transition approach. In June 2020, the FASB deferred the effective date for this standard for one year. This standard will be effective for the United Way for the year ended June 30, 2023, with early adoption permitted. Management is currently evaluating the impact this will have on its financial statements.

#### Note 3. Fair Value Measurements

The Fair Value Measurements Topic of the FASB Accounting Standards Codification (FASB ASC 820-10) establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy are as follows:

- Level 1 - inputs are unadjusted, quoted prices in active markets for identical assets at the measurement date. The types of assets carried at Level 1 fair value generally are securities listed in active markets. The United Way has valued their investments listed on national exchanges at the last sales price as of the day of valuation.
- Level 2 - inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3 - inputs are generally unobservable and typically reflect management's estimates of assumptions that market participants would use in pricing the asset or liability. The fair values are therefore determined using model-based techniques that include option-pricing models, discounted cash flow models, and similar techniques.

Financial assets carried at fair value on a recurring basis consist of the following at June 30, 2020:

	Level 1	Level 2	Level 3
Money market funds	\$ 46,212	\$ 7,214	-
Mutual funds:			
Domestic equity	72,192	-	-
Fixed income	273,459	-	-
Fixed income funds	153,081	6,797	-
Municipal bonds	-	5,089	-
Corporate bonds	-	103,804	-
Beneficial interest in assets held by others	-	-	1,681,721
<i>Total</i>	<u>\$ 544,944</u>	<u>\$ 122,904</u>	<u>\$ 1,681,721</u>

## GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS

	Beneficial interest in assets held by others
<i>Balance, March 31, 2019</i>	\$ 1,726,207
Total unrealized losses, net of fees, included in changes in net assets with donor restrictions	(44,486)
<i>Balance, June 30, 2020</i>	<u>\$ 1,681,721</u>
Amount of unrealized losses, net of fees, attributable to change in unrealized losses relating to assets still held at the reporting date included in the statement of activities and changes in net assets	<u>\$ (44,486)</u>

All assets have been valued using a market approach, except for the beneficial interest in assets held by others, and have been consistently applied. The market approach uses prices and other relevant information generated by market transactions involving identical or comparable assets. Prices may be indicated by pricing guides, sales transactions, market trades, or other sources.

The beneficial interest in assets held by others is valued using the income approach. The value is determined by calculating the present value of future distributions expected to be received, which approximates the value of the trust's assets at June 30, 2020.

GAAP requires disclosure of an estimate of fair value for certain financial instruments. The United Way's significant financial instruments include cash and other short-term assets and liabilities. For these financial instruments, carrying values approximate fair value.

**Note 4. Property and Equipment**

Property and equipment, at cost, at June 30,	2020
Land, buildings and building improvements	\$ 1,425,766
Leasehold improvements	5,061
Furniture and equipment	344,369
<i>Total property and equipment</i>	<u>1,775,196</u>
Less accumulated depreciation	(593,128)
<i>Total property and equipment, net</i>	<u>\$ 1,182,068</u>

**Note 5. Endowment Funds Held by Others**

**Agency endowed funds:** The United Way is a beneficiary of various agency endowment funds at The New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing these funds, property contributed to The New Hampshire Charitable Foundation is held as separate funds designated for the benefit of the United Way.

In accordance with its spending policy, the Foundation may make distributions from the funds to the United Way. The distributions are approximately 4.0% of the market value of each fund per year.

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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The estimated value of the future distributions from the funds is included in these financial statements as required by FASB ASC 958-605, however, all property in the fund was contributed to The New Hampshire Charitable Foundation to be held and administered for the benefit of the United Way.

The United Way received \$69,111 from the agency endowed funds during the 15-month period ended June 30, 2020.

**Designated funds:** The United Way is also a beneficiary of two designated funds at The New Hampshire Charitable Foundation. Pursuant to the terms of the resolution establishing these funds, property contributed to The New Hampshire Charitable Foundation is held as a separate fund designated for the benefit of the United Way. In accordance with its spending policy, the Foundation makes distributions from the funds to the United Way. The distributions are approximately 4.0% of the market value of the fund per year.

These funds are not included in these financial statements, since although all property in these funds was contributed to The New Hampshire Charitable Foundation to be held and administered for the benefit of the United Way, The New Hampshire Charitable Foundation may redirect funds to another organization.

The United Way received \$4,444 from the designated funds during the 15-month period ended June 30, 2020. The market value of these fund's assets amounted to approximately \$108,000 at June 30, 2020.

#### Note 6. Long-term Debt

Long-term debt at June 30,	2020
Mortgage financed with a local bank. Interest rate at the 5-year Federal Home Loan Classic Advance Rate plus 2.5% (3.34% at June 30, 2020). Due in monthly installments of principal and interest of \$1,908 through December, 2031. Collateralized by the United Way's building located in Plymouth, NH.	\$ 200,075
Less portion payable within one year	13,639
<i>Total long-term debt</i>	<u><u>\$ 186,436</u></u>

The scheduled maturities of long-term debt at June 30, 2020 were as follows:

<u>Year Ending June 30,</u>	
2021	\$ 13,639
2022	14,311
2023	15,016
2024	15,756
2025	16,532
Thereafter	124,821
<i>Total</i>	<u><u>\$ 200,075</u></u>

The mortgage note contains a financial covenant for debt service coverage, which is tested annually based on the year-end financial statements.

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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The United Way has a revolving line-of-credit with Citizen's Bank with a maximum borrowing limit of \$250,000. The line-of-credit is subject to annual review and renewal. The line-of-credit agreement bears interest equal to the Wall Street Journal prime rate plus 0.25% (3.5% as of June 30, 2020) and is secured by all assets of the United Way. At June 30, 2020, there were no amounts outstanding on this line-of-credit agreement.

See Note 16 for details about the Payroll Protection loan.

#### *Note 7. Funds Held for Others*

The United Way held funds for others for the following projects:

June 30,	2020
Work United Loan Default Program	\$ 4,092
Concord Multicultural Festival	1,728
Get Moving Manchester	1,140
Better Together Lakes Region	245
<i>Total</i>	<u>\$ 7,205</u>

#### *Note 8. Endowment Funds*

The United Way's endowment consists of four individual funds established for youth programs, Whole Village Resource Center, and general operating support. Its endowment includes both donor-restricted endowment funds and funds designated by the Board of Directors to function as endowments. As required by GAAP, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

*Interpretation of Relevant Law:* The United Way is subject to an enacted version of the Uniform Prudent Management of Institutional Funds Act (UPMIFA) and, thus, classifies amounts in its donor-restricted endowment funds as net assets with donor restrictions because those net assets are time restricted until the Board of Directors appropriates such amounts for expenditures. Most of those net assets are also subject to purpose restrictions that must be met before reclassifying those net assets to net assets without donor restrictions. The Board of Directors of the United Way has interpreted UPMIFA as not requiring the maintenance of purchasing power of the original gift amount contributed to an endowment fund unless a donor stipulates the contrary.

As a result of this interpretation, when reviewing its donor-restricted endowment funds, the United Way considers a fund to be underwater if the fair value of the fund is less than the sum of (a) the original value of initial and subsequent gift amounts donated to the fund and (b) any accumulations to the fund that are required to be maintained in perpetuity in accordance with the direction of the applicable donor gift instrument. The United Way has interpreted UPMIFA to permit spending from underwater funds in accordance with the prudent measures required under the law. Additionally, in accordance with UPMIFA,

## GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS

the United Way considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the fund, (2) the purposes of the organization and the donor-restricted endowment fund, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of the organization, and (7) the investment policies of the United Way.

*Underwater Endowment Funds:* From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor or UPMIFA requires the United Way to retain as a fund of perpetual duration. The United Way did not have any funds with deficiencies of this nature as of June 30, 2020.

*Investment Return Objectives, Risk Parameters and Strategies:* The United Way has adopted investment policies, approved by the Board of Directors, for endowment assets for the long-term. The United Way seeks to achieve an after-cost total real rate of return, including investment income as well as capital appreciation, which exceeds the annual distribution with acceptable level of risk. Investment risk is measured in terms of the total endowment fund; investment assets and allocations between asset classes and strategies are managed to not expose the fund to unacceptable level of risk.

*Spending Policy:* The United Way does not currently have a spending policy for distributions each year as they strive to operate within a budget of their current Campaign's income. To date there have been no distributions from the endowment fund.

Endowment net asset composition by type of fund as of June 30, 2020 is as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Board-designated endowment	\$ 11,545	\$ -	\$ 11,545
Donor-restricted endowment funds:			
Original donor-restricted gift amount and amounts required to be maintained in perpetuity by donor	-	142,652	142,652
Accumulated investment gains	-	76,902	76,902
<i>Total funds</i>	<u>\$ 11,545</u>	<u>\$ 219,554</u>	<u>\$ 231,099</u>

Changes in the endowment net assets as of June 30, 2020 are as follows:

	Without Donor Restrictions	With Donor Restrictions	Total
Endowment net assets, March 31, 2019	\$ 10,750	\$ 204,426	\$ 215,176
Investment return, net	795	15,128	15,923
Endowment net assets, June 30, 2020	<u>\$ 11,545</u>	<u>\$ 219,554</u>	<u>\$ 231,099</u>

## GRANITE UNITED WAY

## NOTES TO FINANCIAL STATEMENTS

*Note 9. Net Assets with Donor Restrictions*

Net assets with donor restrictions are restricted for the following purposes or periods:

June 30,	2020
<hr/>	
Subject to expenditure for specified time period:	
Contributions receivable related to campaigns	\$ 2,391,152
Designations payable to other agencies and United Ways	(473,653)
	<hr/> 1,917,499 <hr/>
Subject to expenditure for specified purpose:	
COVID-19 Relief Fund	351,111
Public Health Network services	310,875
Leader in Me	167,160
Literacy Program	153,486
Manchester Proud	135,554
Work United	39,110
Other programs	15,000
	<hr/> 1,172,296 <hr/>
Endowments subject to the United Way's spending policy and appropriation:	
Investments in perpetuity (original amounts of \$142,652), which once appropriated, is expendable to support:	
Whole Village Resource Center	106,343
General Operations	86,752
Youth Programs	26,459
	<hr/> 219,554 <hr/>
Beneficial interest in assets held by others:	
Agency endowed funds at the New Hampshire Charitable Foundation	1,681,721
	<hr/> 1,681,721 <hr/>
<i>Total net assets with donor restrictions</i>	<hr/> <b>\$ 4,991,070</b> <hr/>

## GRANITE UNITED WAY

## NOTES TO FINANCIAL STATEMENTS

*Note 10. Net Assets Released from Donor Restrictions*

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by occurrence of the passage of time or other events specified by donors. The net assets released from restrictions are as follows:

June 30,	2020
Purpose restrictions accomplished:	
Public Health Network services	\$ 1,355,482
211 New Hampshire	874,453
COVID-19 Relief Fund	540,237
Manchester Proud	492,021
Other program services	280,983
Work United	215,889
Leader in Me	172,858
Volunteer Income Tax Assistance	171,306
	<u>4,103,229</u>
Time restrictions expired	<u>5,096,357</u>
<i>Total net assets released from donor restrictions</i>	<u>\$ 9,199,586</u>

*Note 11. Liquidity and Availability of Resources*

The United Way's financial assets available within one year of the statement of financial position date for general expenditure are as follows:

June 30,	2020
Cash	\$ 1,205,303
Investments	667,572
Contributions receivable, net	2,519,281
Beneficial interest in trust	1,681,721
Accounts and rent receivable	28,732
<i>Total financial assets</i>	<u>6,102,609</u>
Less amounts unavailable for general expenditures within one year, due to:	
Restricted by donors with time or purpose restrictions	(135,554)
Subject to appropriation and satisfaction or donor restrictions	(219,554)
Agency endowed funds at the New Hampshire Charitable Foundation	(1,681,721)
<i>Total amounts unavailable for general expenditure within one year</i>	<u>(2,036,829)</u>
Amounts unavailable to management without Board's approval:	
Board designated endowment	(11,545)
<i>Total financial assets available to management for general expenditure within one year</i>	<u>\$ 4,054,235</u>

## GRANITE UNITED WAY

### NOTES TO FINANCIAL STATEMENTS

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#### *Liquidity Management*

The United Way maintains a policy of structuring its financial assets to be available as its general expenditures, liabilities, and other obligations come due. To help manage unanticipated liquidity needs the United Way has committed a line of credit of \$250,000, which it could draw upon. Additionally, the United Way has board designated net assets without donor restrictions that, while the United Way does not intend to spend these for purposes other than those identified, the amounts could be made available for current operations, if necessary.

#### **Note 12. Pension Fund**

The United Way sponsors a tax-deferred annuity plan qualified under Section 403(b) of the Internal Revenue Code, whereby electing employees contribute a portion of their salaries to the plan. For the 15-month period ended June 30, 2020 the United Way contributed \$123,621 to employees participating in the plan.

#### **Note 13. Lease Commitments**

During a prior year, the United Way entered into an operating lease agreement for a four year term commencing September 1, 2017 through August 31, 2021 for an office space in Concord, New Hampshire. The lease required monthly payments of \$3,337 through August 31, 2018 and increases 3% annually on each anniversary date of the lease thereafter.

During a prior year, the United Way entered into an operating lease agreement for a five year term commencing July 15, 2016 through June 30, 2021 for an office space in Manchester, New Hampshire. The lease required monthly payments of \$5,905 through June 30, 2019 and increases by 3% annually on each anniversary date of the lease thereafter.

During a prior year, the United Way entered into an operating lease agreement for a five year term commencing on September 1, 2018 through August 31, 2023 for an office space in Lebanon, New Hampshire. The lease requires monthly payments of \$1,760 through August 31, 2020. After August 31, 2020, the rent will increase each year depending on the consumer price index. The lease requires payments for common costs.

During a prior year, the United Way entered into an operating lease agreement for a two year term commencing on January 1, 2019 through December 31, 2020 for an office space in Berlin, New Hampshire. The lease requires monthly payments of \$187 through December 31, 2020. The lease continues on a month to month basis after December 31, 2020.

Total rent expense for these leases amounted to approximately \$173,000 for the 15-month period ended June 30, 2020.

The United Way leases multiple copier machines under the terms of operating lease agreements. The monthly lease payments amount to approximately \$2,100. The lease expense amounted to approximately \$31,000 for these leases for the 15-month period ended June 30, 2020.

## GRANITE UNITED WAY

## NOTES TO FINANCIAL STATEMENTS

The United Way's future minimum lease commitments are as follows:

<u>Year ending June, 30</u>	
2021	\$ 161,561
2022	42,633
2023	34,155
2024	3,520
<i>Total</i>	<u>\$ 241,869</u>

**Note 14. Commitments**

In Plymouth, the United Way rents space in a building which they own and occupy to twelve non-affiliated, non-profit organizations. The monthly lease payments range from \$125 to \$1,500 per month. For the 15-month period ended June 30, 2020, the rental income amounted to \$103,758.

**Note 15. Payment to Affiliated Organizations and Related Party**

The United Way pays dues to United Way of Worldwide. The United Way's dues paid to this affiliated organization aggregated \$132,477 for the 15-month period ended June 30, 2020.

**Note 16. COVID - 19 and the Paycheck Protection Program Loan**

In December 2019, a novel strain of coronavirus ("COVID-19") was reported in China. The World Health Organization has declared COVID-19 to constitute a "Public Health Emergency of International Concern." This outbreak has impacted virtually every industry and has created volatility in the stock markets throughout the world. Many federal and state governments have implemented numerous restrictions, mandated various closures and quarantine requirements in connection with the COVID-19 outbreak. The extent of the impact of the COVID-19 on the United Way's operational and financial performance will depend on future developments, including the duration and spread of the outbreak and the impact on the United Way's donors and employees, all of which are uncertain and cannot be predicted.

In April 2020, the United Way received \$772,500 in funds from the federal Paycheck Protection Program (PPP). The PPP is a loan designed to provide a direct incentive for small businesses to keep their workers on the payroll. SBA will forgive loans if all employees are kept on the payroll for the specified period of time and the money is used for payroll, rent, mortgage interest, or utilities. Any amounts not forgiven at the end of the program period convert into a loan with 1% interest, payable over 2 years.

In the absence of forgiveness, the following is a summary of the future maturities due:

<u>Year Ending June 30,</u>	
2021	\$ 341,904
2022	430,596
<i>Total</i>	<u>\$ 772,500</u>

GRANITE UNITED WAY

NOTES TO FINANCIAL STATEMENTS

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*Note 17. Subsequent Events*

The United Way has evaluated subsequent events through November 19, 2020, the date which the financial statements were available to be issued and have not evaluated subsequent events after that date. There were no subsequent events that would require disclosure in financial statements for the 15-month period ended June 30, 2020.

## GRANITE UNITED WAY

## SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

15-Month Period Ended June 30, 2020

Federal Grantor Pass-through Grantor Program Title	Pass-through Entity Identifying Number	Federal CFDA Number	Federal Expenditures	Expenditures to Subrecipients
<b>Regional Public Health Network Services Cluster</b>				
<u>U.S. Department of Health and Human Services</u>				
State of N.H. Department of Health and Human Services - South Central Public Health Network				
Block Grants for Prevention and Treatment of Substance Abuse	05-95-92-920510-3380	93.959	\$ 154,392	\$ 133,953
Hospital Preparedness Program & Public Health Emergency Preparedness Aligned Coop Agreements	05-95-90-902510-7545	93.074	98,599	85,653
Public Health Crisis Response		93.354	545	-
Preventive Health and Health Services Block Grant	05-95-90-901010-5362	93.758	35,199	35,199
Immunization Cooperative Agreements		93.268	603	-
Young Adult Leadership Program	05-95-92-920510-3395	93.243	12,855	12,148
Young Adult Substance Misuse Prevention Strategies	05-95-92-920510-3395	93.243	109,786	99,605
<i>Total State of N.H. Department of Health and Human Services - South Central Public Health Network</i>			<u>411,979</u>	<u>366,558</u>
State of N.H. Department of Health and Human Services - Capital Area Public Health Network				
Block Grants for Prevention and Treatment of Substance Abuse		93.959	137,063	-
Hospital Preparedness Program & Public Health Emergency Preparedness Aligned Coop Agreements		93.074	113,268	-
Public Health Crisis Response		93.354	442	-
Preventive Health and Health Services Block Grant		93.758	37,592	-
Immunization Cooperative Agreements		93.268	16,873	-
Young Adult Leadership Program	05-95-92-920510-3395	93.243	13,451	12,000
Young Adult Substance Misuse Prevention Strategies	05-95-92-920510-3395	93.243	97,430	95,424
<i>Total State of N.H. Department of Health and Human Services - Capital Area Public Health Network</i>			<u>416,119</u>	<u>107,424</u>
State of N.H. Department of Health and Human Services - Carroll County Coalition for Public Health				
Block Grants for Prevention and Treatment of Substance Abuse		93.959	146,157	-
Hospital Preparedness Program & Public Health Emergency Preparedness Aligned Coop Agreements		93.074	101,013	-
Preventive Health and Health Services Block Grant		93.758	36,929	-
Immunization Cooperative Agreements	05-95-90-902510-5178	93.268	14,323	394
Young Adult Leadership Program	05-95-92-920510-3395	93.243	13,296	12,000
Young Adult Substance Misuse Prevention Strategies	05-95-92-920510-3395	93.243	65,856	4,201
<i>Total State of N.H. Department of Health and Human Services - Carroll County Coalition for Public Health</i>			<u>377,574</u>	<u>16,595</u>
<i>Total Regional Public Health Network Services Cluster</i>			<u>1,205,672</u>	<u>490,577</u>
<u>U.S. Internal Revenue Services</u>				
Department of the Treasury				
Volunteer Income Tax Assistance (VITA) Matching Grant Program		21.009	63,089	-
<u>U.S. Department of Health and Human Services</u>				
State of N.H. Division for Behavioral Health, Bureau of Drug and Alcohol Services				
State Opioid Response Grant		93.788	512,032	-
<i>Total Expenditures of Federal Awards</i>			<u>\$ 1,780,793</u>	<u>\$ 490,577</u>

The accompanying notes are an integral part of this schedule.

## GRANITE UNITED WAY

### NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

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#### *Note 1. Basis of Presentation*

The Schedule of Expenditures of Federal Awards ("the Schedule") includes the federal grant activity of Granite United Way ("the United Way"), under programs of the federal government for the 15-month period ended June 30, 2020. The information in this schedule is presented in accordance with the requirements of the Office of Management and Budget (OMB) *Uniform Guidance*. Because the schedule presents only a selected portion of the operations of the United Way, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the United Way.

#### *Note 2. Basis of Accounting*

This schedule is prepared on the same basis of accounting as the United Way's financial statements. The United Way uses the accrual basis of accounting. Expenditures represent only the federally funded portions of the program. Therefore, some amounts presented in this schedule may differ from amounts presented in, or used in the preparation of, the basic financial statements.

#### *Note 3. Program Costs*

The amounts shown as current year expenditures represent only the federal grant portion of the program costs. Entire program costs could be more than shown. Such expenditures are recognized following, as applicable, either the cost principles in the OMB Circular A-122, Cost Principles for Non-Profit Organizations, or the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

#### *Note 4. Major Programs*

In accordance with OMB Uniform Guidance, major programs are determined using a risk-based approach. Programs in the accompanying Schedule are determined by the independent auditor to be major programs.

#### *Note 5. Indirect Cost Rate*

The amount expended includes \$65,600 claimed as an indirect cost recovery. The United Way elected to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.



# NATHAN WECHSLER & COMPANY

CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS ADVISORS

## 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

### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors  
Granite United Way  
Manchester, New Hampshire 03101

We have audited, 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, the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of Granite United Way as of and for the 15-month period ended June 30, 2020, and the related notes to the financial statements, which collectively comprise Granite United Way's basic financial statements, and have issued our report thereon dated November 19, 2020.

#### *Internal Control over Financial Reporting*

In planning and performing our audit of the financial statements, we considered Granite United Way'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 opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Granite United Way's internal control. Accordingly, we do not express an opinion on the effectiveness of Granite United Way'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 entity'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 over financial reporting 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 financial reporting that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control over financial reporting 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 Granite United Way's 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*

The 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 entity'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 entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Nathan Nechuta & Company*

Concord, New Hampshire  
November 19, 2020



**NATHAN WECHSLER & COMPANY**  
**CERTIFIED PUBLIC ACCOUNTANTS & BUSINESS ADVISORS**

**REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND REPORT ON  
INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH THE UNIFORM  
GUIDANCE**

**INDEPENDENT AUDITOR'S REPORT**

To the Board of Directors  
Granite United Way  
Manchester, New Hampshire 03101

*Report on Compliance for Each Major Federal Program*

We have audited Granite United Way's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Granite United Way's major federal programs for the 15-month period ended June 30, 2020. Granite United Way's major federal programs are identified in the summary of auditor's results section of the accompanying Schedule of Findings and Questioned Costs.

*Management's Responsibility*

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

*Auditor's Responsibility*

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

### *Opinion on Each Major Federal Program*

In our opinion, Granite United Way complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the 15-month period ended June 30, 2020.

### *Report on Internal Control over Compliance*

Management of Granite United Way 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 Granite United Way's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Granite United Way's internal control over compliance.

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

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

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



Concord, New Hampshire  
November 19, 2020

**GRANITE UNITED WAY  
SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS  
(UNIFORM GUIDANCE)  
15-MONTH PERIOD ENDED JUNE 30, 2020**

Section I: Summary of Auditor's Results

***Financial Statements***

Type of auditor's report issued: *unmodified*

Internal control over financial reporting:

Are any material weaknesses identified?	___ Yes	_X_ No	
Are any significant deficiencies identified?	___ Yes	_X_ None Reported	
Is any noncompliance material to financial statement noted?	___ Yes	_X_ No	

***Federal Awards***

Internal control over major federal programs:

Are any material weaknesses identified?	___ Yes	_X_ No	
Are any significant deficiencies identified?	___ Yes	_X_ None Reported	
Type of auditor's report issued on compliance for major federal programs:	<i>unmodified</i>		
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	___ Yes	_X_ No	
Identification of major federal programs:			
CFDA Numbers	Name of federal program or cluster		
	Regional Public Health Network Services Cluster		
93.959 - Block Grants for Prevention and Treatment of Substance Abuse			
93.074 - Hospital Preparedness Program and Public Health Emergency Preparedness Aligned Cooperative Agreements			
93.354 - Public Health Crisis Response			
93.069 - Public Health Emergency Preparedness			
93.758 - Preventive Health and Health Services Block Grant			
93.243 - Substance Abuse and Mental Health Services			
93.268 - Immunization Cooperative Agreements			
Dollar threshold used to distinguish between type A and type B programs:	\$750,000		
Auditee qualified as a low-risk auditee?	___ Yes	_X_ No	

**GRANITE UNITED WAY  
SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS  
(UNIFORM GUIDANCE)  
15-MONTH PERIOD ENDED JUNE 30, 2020**

Section II – Financial Statement Findings

No financial statement findings noted.

Section III – Federal Awards Findings

No federal awards findings noted.

**GRANITE UNITED WAY  
SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS  
(UNIFORM GUIDANCE)  
15-MONTH PERIOD ENDED JUNE 30, 2020**

*Audit Finding Reference: 2019-001*

*Status of Prior Finding:*

For the year ended March 31, 2019, we reviewed a selection of subrecipient expenditures and reimbursement requests and noted that supporting documentation was not being monitored by Granite United Way during the first half of the fiscal year. The planned corrective action was completed during the 15-month period ended June 30, 2020.

Granite United Way



## 2020 Board of Directors

BOARD MEMBER	ADDRESS	PHONE/ CELL / FAX / E-MAIL
Dr. Larissa Baia President, Regional College Dept.  Assistant: Liz Lawson	Lakes Region Community College 379 Belmont Road Laconia, NH 03246	[REDACTED]
Joseph Bator	Primary Bank 207 Route 101 Bedford, NH 03110	[REDACTED]
William D. Bedor, CPA (Bill)  <i>Secretary North Country Campaign Chair &amp; Community Impact Chair</i>	Creative Financial Strategies, Inc. PO Box 350 Littleton, NH 03561	[REDACTED]
Kathleen Bizarro-Thunberg (Kathy) Executive Vice President	NH Hospital Association 125 Airport Road Concord, NH 03301	[REDACTED]
Joseph Carelli President of NH and VT  Assistant: Mary Charron	Citizen's Bank 900 Elm Street, NE 1540 Manchester, NH 03101	[REDACTED]
Jason Cole General Counsel  Assistant: Lee Moriarty	Catholic Medical Center 100 McGregor Street Manchester, NH 03102	[REDACTED]
Michael Delahanty Superintendent of Schools  Assistant: Patty Scanlan	Salem School District 38 Geremonty Drive Salem, NH 03079	[REDACTED]
Doug deLara	Baker   Newman   Noyes 650 Elm Street Suite 302 Manchester, NH 03101	[REDACTED]

Granite United Way



## 2020 Board of Directors

BOARD MEMBER	ADDRESS	PHONE/ CELL / FAX / E-MAIL
Patricia Donahue		[REDACTED]
Chris Emond Executive Director	Boys & Girls Club of Central New Hampshire 876 No. Main St. Laconia, NH 03246	[REDACTED]
Paul Falvey President  Assistant: Maggie Bartholomew	Bank of New Hampshire 62 Pleasant Street Laconia, NH 03246	[REDACTED]
Marlene Hammond Underwriting Account Executive	Lincoln Financial Group One Granite Place Concord, NH 03301	[REDACTED]
Charles Head (Charlie) President & CEO	Sanborn, Head & Associates, Inc. 20 Foundry Street Concord, NH 03301	[REDACTED]
Joseph Kenney Senior Vice President, Commercial Lending Officer  Assistant: Linda O'Donnell	The Provident Bank 115 So. River Road Bedford, NH 03110	[REDACTED]
Sally Kraft Vice President, Community Health, Population Health Management Div. Assistant: Brittany Goodwin	Dartmouth Hitchcock Medical Center 46 Centerra Parkway Lebanon, NH 03766	[REDACTED]

Granite United Way

## 2020 Board of Directors

LIVE UNITED



BOARD MEMBER	ADDRESS	PHONE/FAX/CELL/EMAIL
Christina Lachance Director of Early Childhood and Family Initiatives  Assistant: Hannah Robinson	NH Charitable Foundation 37 Pleasant Street Concord, NH 03301	[REDACTED]
Heather Staples Lavoie President <i>Chair</i>	Geneia 50 Commercial Street Manchester, NH 03101	[REDACTED]
Dr. Chuck Lloyd		[REDACTED]
Carolyn Maloney Treasurer	Hypertherm P.O. Box 5010 Hanover, NH 03755	[REDACTED]
Lawrence Major (Larry) Director of Government Relations	Pike Industries, Inc. 3 Eastgate Park Road Belmont, NH 03307	[REDACTED]
Paul Mertzic	Network 4 Health 401 Cypress Street Manchester, NH 03103	[REDACTED]
Nannu Nobis CEO	Nobis Engineering 18 Chenell Drive Concord, NH 03301	[REDACTED]

Granite United Way

LIVE UNITED



## 2020 Board of Directors

BOARD MEMBER	ADDRESS	PHONE/FAX/CELL/EMAIL
Sean Owen President & CEO <i>Immediate Past Chair</i> <i>G UW Marketing Chair</i>  Assistant:	Wedü 20 Market Street Manchester, NH 03101	
Joseph Purington (Joe) Vice President NH Electric Field Operations  Assistant: Roxanne Parkhurst	Eversource Energy 780 No. Commercial Street Manchester, NH 03101	
Beth Rattigan Attorney  <i>Upper Valley CIC Chair</i>	Downs Rachlin Martin 67 Etna Road Lebanon, NH 03766	
Peter Rayno Executive Vice President/NH Banking & Lending Director	Enterprise Bank 130 Main Street Salem, NH 03079	
Betsey Rhynhart Vice President of Population Health	Concord Hospital 250 Pleasant Street Concord, NH 03301	
Jeffery Savage (Jeff) Community Volunteer	P.O. Box 2104 Concord, NH 03302	
Bill Sherry Chief Operating Officer  Assistant: Kathy Scanlon	Granite United Way 22 Concord Street Manchester, NH 03010	
Anthony Speller (Tony) Senior Vice President, Engineering and Technical Operations  <i>First Vice Chair</i>  Assistant: Robin Wright	Comcast 676 Island Pond Road Manchester, NH 03109	

Granite United Way

## 2020 Board of Directors



BOARD MEMBER	ADDRESS	PHONE/FAX/CELL/EMAIL
Charla Stevens Attorney	McLane, Middleton Law Firm 900 Elm Street, Floor 10 Manchester, NH 03101	[REDACTED]
Rodney Tenney (Rod) Community Volunteer	8 Hillside Road Concord, NH 03301	[REDACTED]
Anna Thomas Public Health Director  <i>Southern Region CIC Chair</i>	Manchester Health Department 1528 Elm Street Manchester, NH 03101	[REDACTED]
Robert Tourigny Executive Director	NeighborWorks Southern NH 801 Elm Street, 2 <sup>nd</sup> Floor Manchester, NH 03101	[REDACTED]
Patrick Tufts President & CEO  Assistant: Jennifer Sabin	Granite United Way 22 Concord St, Floor 2 Manchester, NH 03101	[REDACTED]
Jeremy Veilleux Principal <i>Treasurer</i>	Baker   Newman   Noyes 650 Elm Street Suite 302 Manchester, NH 03101	[REDACTED]
Michael Wagner Chief Financial Officer  Assistant: Jen Hamilton	Dartmouth College 7 Lebanon Street, Suite 302 Hanover, NH 03755	[REDACTED]
Cass Walker (Catherine)  <i>Central Region CIC Chair</i>	LRGHealthcare 80 Highland Street Laconia, NH 03246	[REDACTED]

Updated: 1/21/2020

**Mary Reed**

## **Professional Profile**

- Coalition Building
- Plan Development
- Resource Coordination
- Logistics
- Time management
- Budgeting
- Volunteer Management
- Grant/Proposal Writing
- Organization
- Leadership

## **Professional Accomplishments**

### **Public Health**

- Provide direction and leadership towards achievement of the Public Health Regions' philosophy, mission, strategic plans and goals, through: administration and support, program and service delivery, financial management, human resource management, and community and public relations

### **Regional Resource Coordination**

- Collected and disseminated data on available resources critical for response to public health emergency.
- Developed working relationship with stakeholders in Public Health Region.

### **Public Health Coalition**

- Regional Public Health Emergency Response Annex development
- Resource Coordination and Development
- Healthcare Coalition Building
- Regional Partner Development
- Clinic Operation Development
- Medical reserve Corps Volunteer Management and Training
- Policy Development
- Team Building

### **Captain of Operations**

- Developed staff and operational procedures for full time staff
- Oversee Training Program
- Facilitate QA/QI
- Facilitated and maintained data entry system and procedures for all of Fire departments operations and patient tracking
- Created Personnel Manual and operational guidelines
- Secured grant funding
- Volunteer Management

## Work History

<b>Assistant Vice President of Public Health</b>	Granite United Way	2018- present
<b>Senior Director of Public Health</b>	Granite United Way	2016 -2018
<b>Public Health Region Emergency Preparedness Director</b>	Capital Area Public Health Network / G UW Concord NH	2013 - 2016
<b>Executive Director</b>	Carroll County Coalition for Public Health, Ossipee NH	2011 - 2013
<b>Preparedness Planner</b>	Capital Area Public Health Network/Concord Hospital, Concord NH	2009 - 2011
<b>Regional Resource Coordinator</b>	New England Center for Emergency Preparedness/ Dartmouth College, Lebanon NH	2009
<b>Captain of Operations</b>	Barnstead Fire Rescue, Barnstead NH	2001-2010

## Certifications

- Institute for Local Public Health Practices
- Local Government Leadership Institute
- Antioch New England Institute
- DHHS Inventory Management System Training
- FEMA 29, 100, 120.a, 130, 200, 244, 250, 250.7, 300, 546.12, 547a, 700, 701, 702a, 704, 800.B, 806, 808
- Department of Homeland Security Exercise and Evaluation Program (HSEEP)
- CDC SNS/ Mass Dispensing Course, Atlanta GA
- ICS, WebEOC, SNS 101
- HAZMAT Awareness and Operations
- CPR, Blood borne Pathogens
- EMS Field Training Officer
- Fire Fighter C2F2
- Amateur Radio Operator – General Class
- STEP program instructor, Are You Ready instructor



# SHANNON SWETT BRESAW, MSW

## EDUCATION

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*Master of Social Work*

2002 – 2004

University of New Hampshire

Durham, NH

*Bachelor of Arts - Clinical Counseling Psychology*

1999 – 2002

Keene State College

Keene, NH

## EXPERIENCE

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2007 - Present

Granite United Way

Concord, NH

*Vice President of Public Health*

### Accomplishments:

- Provides Program Director support for the NH Governor's Recovery Friendly Workplace initiative through program development, staff oversight, resource development, marketing/communications, and evaluation
- Works to align and leverage Granite United Way investments and strategies with other statewide efforts to address public health, addiction, and social determinants of health
- Provides content expertise and consultation in the areas of substance use disorders, public health, community development, contract management, grant writing, reporting, and evaluation
- Develops and maintains strategic partnerships and relationships with key stakeholders across NH
- Provides contract management and oversight to 3 out of the 13 Regional Public Health Networks in NH, including the Capital Area Public Health Network, the Carroll County Coalition for Public Health and the South Central Public Health Network
- Provides direction and leadership towards achievement of each Network's philosophy, mission, strategic plans and goals, through: administration and support, program and service delivery, financial management, and community/public relations
- Coordinates all aspects of federal, state, and local grants and contracts, including resource development/grant-writing, financial oversight and reporting
- Develops community health improvement plans, evaluation plans, and other data-driven, research-informed strategic plans for the Networks
- Works with community impact committees and volunteers through Granite 



2005 – 2007                      Community Response (CoRe) Coalition                      Belknap County, NH  
*Outreach Coordinator, Project Director*

Accomplishments:

- Provided leadership for a county-wide, regional alcohol, tobacco, and other drug abuse prevention coalition
- Strengthened capacity of coalition through outreach and collaboration, including partnerships with 10 community sectors, including government, schools, businesses, healthcare, and safety
- Coordinated all aspects of federal, state, and local grants, including financial oversight, progress reports, communications, and work plan goals, objectives, and activities
- Developed, coordinated, promoted, and implemented events, programs, and trainings for youth and adults
- Strengthened youth leadership and involvement in substance abuse prevention activities
- Supervised part-time staff, youth leaders, and volunteers

2004 – 2005                      Caring Community Network of the Twin Rivers (CCNTR)                      Franklin, NH  
*Community Program Specialist*

Accomplishments:

- Assisted in development of programming related to strengthening the public health infrastructure
- Recruited new participants to agency committees and projects
- Facilitated organizational collaboration, compiled research, and developed proposals to funding sources to address community needs
- Facilitated several ongoing committees
- Developed and maintained productive relationships with community and state leaders and agencies
- Participated in several trainings/seminars related to issues including substance abuse prevention, emergency preparedness, leadership, and public health infrastructure development
- Wrote numerous articles and press releases concerning community and public health

## **PROFESSIONAL ASSOCIATIONS**

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- American Public Health Association: NH Affiliate Representative to the Governing Council 2018-Current
- NH Public Health Association: Board Member 2018-Current
- Prevention Task Force of the Governor's Commission (Co-Chair): 2017-Current
- NH Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery (Prevention Representative): 2016-2018
- NH Drug Overdose Fatality Review Committee (Prevention Representative): 2016-2018
- NH Alcohol and Other Drug Service Providers Association: Treasurer 2007-2011, 2014-2015
- NH Prevention Certification Board's Peer Review Committee: 2009-2011

**Granite United Way**

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Shannon Bresaw	Vice President of Public Health	\$55.13/hr x 30 hrs = \$86,000	0%	\$0
Mary Reed	Assistant Vice President of Public Health	\$80,000	33%	\$26,400

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Greater Seacoast Community Health ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), as amended with Governor approval on December 17, 2020 and presented to the Executive Council as an Informational Item on April 7, 2021 (Informational Item # M), as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item on May 19, 2021, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,458,695
3. Modify Exhibit A Scope of Services by deleting it in its entirety and replacing it with Exhibit A Amendment #8, Scope of Services, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1, Subsection 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.

- 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.
6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
    - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
  7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
    4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #7, Scope of Services and this Exhibit B Amendment #1.
  8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
    7. The Contractor shall bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
      - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
      - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
  9. Modify Exhibit B-1, Program Funding, Amendment #7 by deleting it in its entirety and replacing it with Exhibit B-1 Amendment #8, Program Funding which is attached hereto and incorporated by reference herein.
  10. Add Exhibit B-21, Amendment #8, which is attached hereto and incorporated by reference herein.
  11. Add Exhibit B-22, Amendment #8, which is attached hereto and incorporated by reference herein.
  12. Add Exhibit B-23, Amendment #8, which is attached hereto and incorporated by reference herein.
  13. Add Exhibit B-24, Amendment #8, which is attached hereto and incorporated by reference herein.
  14. Add Exhibit B-25, Amendment #8, which is attached hereto and incorporated by reference herein.
  15. Add Exhibit B-26, Amendment #8, which is attached hereto and incorporated by reference herein.
  16. Add Exhibit B-27, Amendment #8, which is attached hereto and incorporated by reference herein.
  17. Add Exhibit B-28, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

5/17/2021

Date

DocuSigned by:

Patricia M. Tilley

849FB38F58FD4C8

Name: Patricia M. Tilley

Title: Interim Director

Greater Seacoast Community Health

5/17/2021

Date

DocuSigned by:

Janet Laatsch

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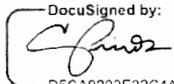
Name: Janet Laatsch

Title: CEO

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

OFFICE OF THE ATTORNEY GENERAL

5/17/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
  
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\_\_\_\_\_  
Name: Catherine Pinos  
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



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**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient, in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Network for the Strafford County region, as defined by the Department, to provide a broad range of public health services within one or more of the state’s thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to ensure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing young adult substance misuse prevention strategies.
    - 2.1.2.6. Ensuring contract administration and leadership.
- 2.2. Public Health Advisory Council
  - 2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership

*[Handwritten Signature]*



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team and direction to public health activities within the assigned region. The Contractor shall:

- 2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;
- 2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:
  - 2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.
  - 2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issues.
  - 2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.
  - 2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.
  - 2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.
- 2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:
  - 2.2.1.3.1. Ensure meeting minutes are available to the public upon request.
  - 2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.
- 2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:
  - 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.



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- 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
- 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies, as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to the public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC), YA and Public Health Emergency Preparedness (PHEP) programs.
- 2.2.1.12. Advance the work of the RPHN by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected and appointed municipal officials, on the PHAC.
- 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the



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purposes of sustaining public health improvement efforts.

2.3. Public Health Emergency Preparedness

2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:

2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention’s (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.

2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) coordinating and/or planning committee and/or workgroup to:

2.3.1.2.1. Improve regional emergency response plans; and

2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.

2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.

2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.

2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.

2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative, including the workgroup.

2.3.1.7. Submit an annual work plan based on a template provided by the Department.

2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.

2.3.1.9. Collaborate with the Department’s Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health



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- Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) on an annual basis based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:
  - 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
  - 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.
- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in



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the planning for and response to a public health incident or emergency.

- 2.3.1.13. Regularly communicate with the Department’s Area Agency contractor that provides developmental and acquired brain disorder services in the region.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State’s emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training, as needed, to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC’s Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department’s SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:
  - 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
  - 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.
  - 2.3.1.21.3. ORR site visit as scheduled by the CDC and Department.

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- 2.3.1.21.4. Completion of relevant drills and/or exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate supplies prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals, as needed, to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
- 2.3.1.24. Participate, as requested, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises, as appropriate and as funding allows.
- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health and Human Services Assistant Secretary for Preparedness and Response.

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2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

2.4. Substance Misuse Prevention

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.

2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.

2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes assessment, capacity development, planning, implementation and evaluation.

2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department’s guidance on what is evidenced informed.

2.4.1.5. Maintain, revise, and publicly promote a data-driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor’s Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.

2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic models that demonstrates short, intermediate and long term measures in alignment with the Three Year Strategic Plan.

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- 2.4.1.7. Advance, promote and implement substance misuse primary prevention strategies that incorporate the Institute of Medicine (IOM) categories of prevention of universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, and outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, at the direction of the Department’s Bureau of Drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

2.5. Continuum of Care

2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

2.5.1.1. Engage regional partners in ongoing updates of regional assets and gaps, and regional CoC plan development and implementation. The Contractor shall ensure regional partners include, but are not limited to:

2.5.1.1.1. Prevention, Intervention, Treatment<sup>ts</sup> and Recovery Support Services.



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- 2.5.1.1.2. Primary health care providers.
  - 2.5.1.1.3. Behavioral health care providers.
  - 2.5.1.1.4. Other interested and/or affected parties.
  - 2.5.1.2. Work toward, and adapt as necessary and indicated, priorities and actions identified in the regional CoC development plan.
  - 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
    - 2.5.1.3.1. Increased awareness of and access to services;
    - 2.5.1.3.2. Increased communication and collaboration among providers; and
    - 2.5.1.3.3. Increases in capacity and delivery of services.
  - 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
  - 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to the Integrated Delivery Networks.
  - 2.5.1.6. Work with statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.
  - 2.5.1.7. Engage regional stakeholders to assist with information dissemination.
- 2.6. Young Adult Substance Misuse Prevention Strategies
- 2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within their region.
  - 2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:



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- 2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:
    - 2.6.2.1.1. Reducing risk factors;
    - 2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and
    - 2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.
  - 2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.
- 2.7. School Based Vaccination Clinics
- 2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:
    - 2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.
    - 2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.
    - 2.7.1.3. Distribute state-supplied promotional vaccination materials.
    - 2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardian prior to administration of vaccine in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.
    - 2.7.1.5. Request the NH Immunization Program (NHIP) to store consent forms once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination consent forms within HIPAA Guidelines.
    - 2.7.1.6. Document, verify and store written or electronic records of vaccine administration in compliance with HIPAA and other state and federal regulations.
    - 2.7.1.7. Request the NHIP to store written or electronic records of vaccine administration once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination records within HIPAA guidelines.

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- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to the parent and/or legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient's primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care provider. The Contractor shall ensure information includes:
  - 2.7.1.9.1. Patient full name and one other unique patient identifier;
  - 2.7.1.9.2. Vaccine name;
  - 2.7.1.9.3. Vaccine manufacturer;
  - 2.7.1.9.4. Lot number;
  - 2.7.1.9.5. Date of vaccine expiration;
  - 2.7.1.9.6. Date of vaccine administration;
  - 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
  - 2.7.1.9.8. Edition date of the VIS given;
  - 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor's name); and
  - 2.7.1.9.10. Full name and title of person who administered the vaccine.
- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian and/or parent, is provided access to this information on the day of vaccination.
- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in session school days.

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- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise by providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director is able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.
    - 2.7.2.6.5. Non-latex bandages.
- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
  - 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP ensuring all listed requirements are met.
  - 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
  - 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
  - 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.



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- 2.7.3.5. Utilize NHIP training materials or other educational materials, as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
- 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
- 2.7.3.7. Ensure vaccine is stored at the manufacturer’s recommended temperatures the entire time the vaccine is in the Contractor’s custody.
- 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
- 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
- 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
- 2.7.3.11. Account for every dose of vaccine.
- 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
- 2.7.3.13. Notify NHIP by contacting the NHIP Nursing help line and faxing incident forms of any adverse event within 24 hours of event occurring.
- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturers recommended temperatures, the Contractor shall:
  - 2.7.3.14.1. Immediately quarantine the vaccine in in an appropriate temperature setting, separating it from other vaccine, and label it “DO NOT USE”.
  - 2.7.3.14.2. Contact the manufacturer immediately to explain the event duration and temperature information to determine if the vaccine is still viable.
  - 2.7.3.14.3. Notify NHIP immediately after contacting the manufacturer regarding any temperature excursion.

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economic disparity, as identified through reports generated by the NHIP in collaboration with Department of Education (DOE).

2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:

2.7.6.1. If the Contractor is unable to provide vaccine to at least 50% of the schools listed, the contractor may show evidence of providing vaccine to additional schools listed, but not previously served the year before, in order to receive full funding.

2.7.6.2. If NHIP and the Contractor agree that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.

2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 2.7, funding will be awarded on a sliding scale based on the percentage of schools listed, calculated as follows:

2.7.6.3.1. The percentage of listed school covered divided by 50%.

2.7.6.3.2. The percentage determined by the equation in 2.7.6.3.1, above, will be multiplied by the total amount of dollars available for funding, beyond the base portion of funding, for a total of dollars awarded for that year.

2.8. Contract Administration and Leadership

2.8.1. The Contactor shall introduce and orient all funded staff to the work activities conducted through the contract agreement. The Contractor shall:

2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.

2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.

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- 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
- 2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

2.9. I-CARE Program

- 2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
- 2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.
- 2.9.3. The Contractor shall ensure activities in the work plan support:
  - 2.9.3.1. The I CARE NH mental health and wellness initiative;
  - 2.9.3.2. 9-8-8 National Suicide Prevention Lifeline expansion project; and/or
  - 2.9.3.3. NH's Suicide Prevention Council's strategic plan.
- 2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.
- 2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of the contract effective date.

**3. Training and Technical Assistance Requirements**

- 3.1. The Contractor shall participate in training and technical assistance as follows:
  - 3.1.1. Public Health Advisory Council
    - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by the Department's DPHS and/or BDAS.
    - 3.1.1.2. Complete a technical assistance needs assessment.
  - 3.1.2. Public Health Emergency Preparedness
    - 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department's DPHS and/or Emergency Services Unit (ESU).
    - 3.1.2.2. Complete a technical assistance needs assessment.
    - 3.1.2.3. Attend a maximum of two trainings per year offered by the Department's DPHS and/or ESU or the agency



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contracted by the Department’s DPHS to provide training programs.

3.1.3. Substance Misuse Prevention

3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.

3.1.3.2. At the Department’s request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including but not limited to:

3.1.3.2.1. Using data to inform plans and evaluate outcomes.

3.1.3.2.2. Using appropriate measures and tools.

3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.

3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.

3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.

3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.

3.1.4. Continuum of Care

3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:

3.1.4.1.1. Assessment;

3.1.4.1.2. Capacity;

3.1.4.1.3. Planning;

3.1.4.1.4. Implementation; and

3.1.4.1.5. Development.

3.1.4.2. Be familiar with RROSC and the Department’s CoC systems development and the “No Wrong Door” approach to systems integration.

3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.

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[Handwritten Initials]



New Hampshire Department of Health and Human Services  
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Exhibit A – Amendment # 8

- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development;
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics
  - 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with a current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
  - 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and

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Exhibit A – Amendment # 8

status, and current BLS certificate shall be retained in the training file.

#### 4. Staffing

- 4.1. The Contractor's staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN's efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

#### 5. Reporting

- 5.1. The Contractor shall participate in Site Visits, which includes, but is not limited to:
- 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.

<sup>DS</sup>  
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**New Hampshire Department of Health and Human Services  
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**Exhibit A – Amendment # 8**

- 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
- 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide reports for the PHAC, which includes, but are not limited to, quarterly PHAC progress reports using an on-line system administered by the Department's DPHS.
- 5.3. The Contractor shall provide reports for the PHEP that include, but are not limited to:
  - 5.3.1. Submitting quarterly PHEP progress reports using an on-line system administered by the Department's DPHS.
  - 5.3.2. Submitting all documentation necessary to complete the MCM ORR review or self-assessment.
  - 5.3.3. Submitting semi-annual action plans for MCM ORR activities on a form provided by the Department.
  - 5.3.4. Submitting information documenting the required MCM ORR-related drills and exercises.
  - 5.3.5. Submitting final After Action Reports for any other drills or exercises conducted.
- 5.4. The Contractor shall provide reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.4.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.4.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.4.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.4.4. Inputting data on a monthly basis by the 20th business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes, but is not limited to:
    - 5.4.4.1. Number of individuals served or reached.
    - 5.4.4.2. Demographics.

**New Hampshire Department of Health and Human Services  
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- 5.4.4.3. Strategies and activities per IOM by the six (6) activity types.
- 5.4.4.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
- 5.4.4.5. Percentage evidence based strategies.
- 5.4.5. Submit annual report.
- 5.4.6. Provide additional reports or data as required by the Department.
- 5.4.7. Participate and administer the Regional SMP Stakeholder Survey in alternate years.
- 5.5. The Contractor shall provide reports for Continuum of Care that include, but are not limited to:
  - 5.5.1. Submitting update on regional assets and gaps assessments, as required.
  - 5.5.2. Submitting updates on regional CoC development plans, as indicated.
  - 5.5.3. Submitting quarterly reports, as indicated.
  - 5.5.4. Submitting year-end report, as indicated.
- 5.6. The Contractor shall provide reports for Young Adult Strategies that include, but are not limited to:
  - 5.6.1. Inputting data on a monthly basis to an online database as required by the Department.
  - 5.6.2. Ensuring the data includes, but is not limited to:
    - 5.6.2.1. Number of individuals served
    - 5.6.2.2. Demographics of individuals served
    - 5.6.2.3. Types of strategies or interventions implemented
    - 5.6.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions
  - 5.6.3. Meeting with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.
- 5.7. The Contractor shall provide reports for School-Based Vaccination Clinics that include, but are not limited to:
  - 5.7.1. Attending annual debriefing and planning meetings with NHIP staff.
  - 5.7.2. Completing a year-end summary of
    - 5.7.2.1. Total numbers of children vaccinated.

<sup>DS</sup>  
[Signature]



New Hampshire Department of Health and Human Services  
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- 5.7.2.2. Accomplishments and improvements to future school-based clinics.
- 5.7.3. Providing aggregated data, by school for each school, to NHIP no later than 3 months after SBCs are concluded, that include:
  - 5.7.3.1. Number of students at that school;
  - 5.7.3.2. Number of students vaccinated out of the total number at that school; and
  - 5.7.3.3. Number of vaccinated students on Medicaid out of the total number at that school.
- 5.7.4. Providing other reports and updates, as requested by NHIP.

**6. Performance Measures**

- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the Department, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision or mission statements.
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
    - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.



New Hampshire Department of Health and Human Services  
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Exhibit A – Amendment # 8

- 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
- 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
- 6.1.3. Substance Misuse Prevention
  - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
    - 6.1.3.1.1. 30-day alcohol use;
    - 6.1.3.1.2. 30-day marijuana use;
    - 6.1.3.1.3. 30-day illegal drug use;
    - 6.1.3.1.4. Illicit drug use other than marijuana;
    - 6.1.3.1.5. 30-day nonmedical use of pain relievers;
    - 6.1.3.1.6. Life time heroin use;
    - 6.1.3.1.7. Binge Drinking; and
    - 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
  - 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
    - 6.1.3.2.1. Perception of risk from alcohol use;
    - 6.1.3.2.2. Perception of risk from marijuana use;
    - 6.1.3.2.3. Perception of risk from illegal drug use;
    - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
    - 6.1.3.2.5. Perception of risk from binge drinking;
    - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
    - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.
- 6.1.4. Continuum of Care
  - 6.1.4.1. Evidence of ongoing updates of regional substance use services assets and gaps assessment.

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New Hampshire Department of Health and Human Services  
Regional Public Health Network Services

Exhibit A – Amendment # 8

- 6.1.4.2. Evidence of ongoing update of regional CoC development plan.
- 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
- 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:
  - 6.1.4.4.1. Health;
  - 6.1.4.4.2. Safety;
  - 6.1.4.4.3. Education;
  - 6.1.4.4.4. Government; and
  - 6.1.4.4.5. Business.
- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to.
- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



**Exhibit A – Amendment # 8**

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6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.

6.1.6. School-Based Vaccination Clinics

6.1.6.1. Annual increase in the percentage of students receiving seasonal influenza vaccination in school-based clinics.

6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.

6.1.6.3. Maintain vaccine wastage below 5%.

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Vendor Name: Greater Seacoast Community Health  
 Contract Name: Regional Public Health Network Services  
 Region: Strafford County

Program Name and Funding Amounts

State Fiscal Year	COVID Vaccinations	Immunization	I-Care	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps Activities	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019				\$0	\$0		\$0	\$0	\$0	\$0	\$0	\$1,200	\$10,000
2020				\$30,000	\$92,580	\$50,000	\$10,000	\$67,360	\$45,634	\$105,912	\$15,000	\$11,982	\$10,000
2021	\$125,800	\$35,000		\$30,000	\$92,580	\$0	\$10,000	\$67,360	\$45,634	\$90,000	\$15,000	\$8,018	\$0
2022	\$141,001		\$5,000	\$30,000	\$92,580	\$0	\$10,000	\$67,360	\$45,634	\$80,000	\$15,000		\$0
												<b>Total</b>	<b>\$1,458,695</b>

Exhibit B-21 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Greater Seacoast Community Health

Budget Request for: Continuum of Care

Budget Period: July 1, 2021 - June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 30,680.00	\$ -	\$ 30,680.00			\$ -	\$ 30,680.00	\$ -	\$30,680.00
2. Employee Benefits	\$ 5,829.20	\$ -	\$ 5,829.20			\$ -	\$ 5,829.20		\$ 5,829.20
3. Consultants	\$ 3,000.00	\$ -	\$ 3,000.00			\$ -	\$ 3,000.00		\$ 3,000.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -			\$ -
Rental	\$ -	\$ -	\$ -			\$ -			\$ -
Repair and Maintenance	\$ -	\$ -	\$ -			\$ -			\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -			\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -			\$ -
Educational	\$ -	\$ -	\$ -			\$ -			\$ -
Lab	\$ -	\$ -	\$ -			\$ -			\$ -
Pharmacy	\$ -	\$ -	\$ -			\$ -			\$ -
Medical	\$ -	\$ -	\$ -			\$ -			\$ -
Office	\$ 973.80	\$ -	\$ 973.80			\$ -	\$ 973.80		\$ 973.80
6. Travel	\$ 351.00	\$ -	\$ 351.00			\$ -	\$ 351.00		\$ 351.00
7. Occupancy	\$ 2,000.00	\$ -	\$ 2,000.00			\$ -	\$ 2,000.00		\$ 2,000.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
Telephone	\$ -	\$ -	\$ -			\$ -			\$ -
Postage	\$ 100.00	\$ -	\$ 100.00			\$ -	\$ 100.00		\$ 100.00
Subscriptions	\$ 250.00	\$ -	\$ 250.00			\$ -	\$ 250.00		\$ 250.00
Audit and Legal	\$ 250.00	\$ -	\$ 250.00			\$ -	\$ 250.00		\$ 250.00
Insurance	\$ -	\$ -	\$ -			\$ -			\$ -
Board Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
9. Software	\$ -	\$ -	\$ -			\$ -			\$ -
10. Marketing/Communications	\$ 1,200.00	\$ -	\$ 1,200.00			\$ -	\$ 1,200.00		\$ 1,200.00
11. Staff Education and Training	\$ 1,000.00	\$ -	\$ 1,000.00			\$ -	\$ 1,000.00		\$ 1,000.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -			\$ -			\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -			\$ -
translator	\$ -	\$ -	\$ -			\$ -			\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -
<b>TOTAL</b>	<b>\$ 45,634.00</b>	<b>\$ -</b>	<b>\$ 45,634.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 45,634.00</b>	<b>\$ -</b>	<b>\$45,634.00</b>

Indirect As A Percent of Direct 0.0%

Vendor Initials 

Date 5/17/2021

Exhibit B-22 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Greater Seacoast Community Health

Budget Request for: Medical Reserve Corps Activities

Budget Period: July 1, 2021 to June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
2. Employee Benefits	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -		\$ -		\$ -	\$ -
12. Subcontracts/Agreements	\$ 10,000.00	\$ -	\$ 10,000.00	\$ -		\$ -	\$ 10,000.00	\$ -	\$ 10,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct 0.0%

Vendor Initials 

Date 5/17/2021

Exhibit B-23 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name:

Budget Request for: Public Health Advisory Council

Budget Period: July 1, 2021 - June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 19,053.05	\$ -	\$ 19,053.05	\$ -	\$ -	\$ -	\$ 19,053.05	\$ -	\$ 19,053.05
2. Employee Benefits	\$ 3,620.08	\$ -	\$ 3,620.08	\$ -	\$ -	\$ -	\$ 3,620.08	\$ -	\$ 3,620.08
3. Consultants	\$ 1,200.00	\$ -	\$ 1,200.00	\$ -	\$ -	\$ -	\$ 1,200.00	\$ -	\$ 1,200.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1,350.00	\$ -	\$ 1,350.00	\$ -	\$ -	\$ -	\$ 1,350.00	\$ -	\$ 1,350.00
6. Travel	\$ 1,000.00	\$ -	\$ 1,000.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ 200.00	\$ -	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00
Audit and Legal	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 2,326.87	\$ -	\$ 2,326.87	\$ -	\$ -	\$ -	\$ 2,326.87	\$ -	\$ 2,326.87
11. Staff Education and Training	\$ 750.00	\$ -	\$ 750.00	\$ -	\$ -	\$ -	\$ 750.00	\$ -	\$ 750.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ 30,000.00</b>

Indirect As A Percent of Direct

0.0%

\$30,000.00

Vendor Initials 

Date 5/17/2021

Exhibit B-24 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Greater Seacoast Community Health

Budget Request for: Public Health Emergency Preparedness

Budget Period: July 1, 2021 to June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 17,566.00	\$ -	\$ 17,566.00	\$ -	\$ -	\$ -	\$ 17,566.00	\$ -	\$ 17,566.00
2. Employee Benefits	\$ 3,337.54	\$ -	\$ 3,337.54	\$ -	\$ -	\$ -	\$ 3,337.54	\$ -	\$ 3,337.54
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 71,676.46	\$ -	\$ 71,676.46	\$ -	\$ -	\$ -	\$ 71,676.46	\$ -	\$ 71,676.46
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 92,580.00</b>	<b>\$ -</b>	<b>\$ 92,580.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 92,580.00</b>	<b>\$ -</b>	<b>\$ 92,580.00</b>

Indirect As A Percent of Direct 0.0%

Vendor Initials 

Date 5/17/2021

Exhibit B-25 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Greater Seacoast Community Health

Budget Request for: Substance Misuse Prevention

Budget Period: 7/1/2021 - 6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 39,312.00	\$ -	\$ 39,312.00			\$ -	\$ 39,312.00		\$ 39,312.00
2. Employee Benefits	\$ 7,469.28	\$ -	\$ 7,469.28			\$ -	\$ 7,469.28		\$ 7,469.28
3. Consultants	\$ 2,300.00	\$ -	\$ 2,300.00			\$ -	\$ 2,300.00		\$ 2,300.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -			\$ -
Rental	\$ -	\$ -	\$ -			\$ -			\$ -
Repair and Maintenance	\$ -	\$ -	\$ -			\$ -			\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -			\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -			\$ -
Educational	\$ 2,500.00	\$ -	\$ 2,500.00			\$ -	\$ 2,500.00		\$ 2,500.00
Lab	\$ -	\$ -	\$ -			\$ -			\$ -
Pharmacy	\$ -	\$ -	\$ -			\$ -			\$ -
Medical	\$ -	\$ -	\$ -			\$ -			\$ -
Office	\$ 2,000.00	\$ -	\$ 2,000.00			\$ -	\$ 2,000.00		\$ 2,000.00
6. Travel	\$ 2,500.00	\$ -	\$ 2,500.00			\$ -	\$ 2,500.00		\$ 2,500.00
7. Occupancy	\$ 2,250.00	\$ -	\$ 2,250.00			\$ -	\$ 2,250.00		\$ 2,250.00
8. Current Expenses	\$ 500.66	\$ -	\$ 500.66			\$ -	\$ 500.66		\$ 500.66
Telephone	\$ -	\$ -	\$ -			\$ -			\$ -
Postage	\$ -	\$ -	\$ -			\$ -			\$ -
Subscriptions	\$ -	\$ -	\$ -			\$ -			\$ -
Audit and Legal	\$ 500.00	\$ -	\$ 500.00			\$ -	\$ 500.00		\$ 500.00
Insurance	\$ -	\$ -	\$ -			\$ -			\$ -
Board Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
9. Software	\$ -	\$ -	\$ -			\$ -			\$ -
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00			\$ -	\$ 5,000.00		\$ 5,000.00
11. Staff Education and Training	\$ 3,048.06	\$ -	\$ 3,048.06			\$ -	\$ 3,048.06		\$ 3,048.06
12. Subcontracts/Agreements	\$ -	\$ -	\$ -			\$ -			\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -			\$ -
translator	\$ -	\$ -	\$ -			\$ -			\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 67,380.00</b>	<b>\$ -</b>	<b>\$ 67,380.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 67,380.00</b>	<b>\$ -</b>	<b>\$ 67,380.00</b>

Indirect As A Percent of Direct 0.0%

Vendor Initials DS  
JL

Date 5/17/2021

Exhibit B-26 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Greater Seacoast Community Health

Budget Request for: Young Adult Strategies

Budget Period: July 1, 2021 to June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 49,175.00	\$ -	\$ 49,175.00	\$ -	\$ -	\$ -	\$ 49,175.00	\$ -	\$ 49,175.00
2. Employee Benefits	\$ 9,343.25	\$ -	\$ 9,343.25	\$ -	\$ -	\$ -	\$ 9,343.25	\$ -	\$ 9,343.25
3. Consultants	\$ 4,500.00	\$ -	\$ 4,500.00	\$ -	\$ -	\$ -	\$ 4,500.00	\$ -	\$ 4,500.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ 1,068.68	\$ -	\$ 1,068.68	\$ -	\$ -	\$ -	\$ 1,068.68	\$ -	\$ 1,068.68
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1,931.32	\$ -	\$ 1,931.32	\$ -	\$ -	\$ -	\$ 1,931.32	\$ -	\$ 1,931.32
6. Travel	\$ 1,200.00	\$ -	\$ 1,200.00	\$ -	\$ -	\$ -	\$ 1,200.00	\$ -	\$ 1,200.00
7. Occupancy	\$ 606.12	\$ -	\$ 606.12	\$ -	\$ -	\$ -	\$ 606.12	\$ -	\$ 606.12
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ 300.00	\$ -	\$ 300.00	\$ -	\$ -	\$ -	\$ 300.00	\$ -	\$ 300.00
Subscriptions	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 5,000.00	\$ -	\$ 5,000.00	\$ -	\$ -	\$ -	\$ 5,000.00	\$ -	\$ 5,000.00
11. Staff Education and Training	\$ 6,775.63	\$ -	\$ 6,775.63	\$ -	\$ -	\$ -	\$ 6,775.63	\$ -	\$ 6,775.63
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ 80,000.00</b>

Indirect As A Percent of Direct

0.0%

\$80,000.00  
\$0.00

Vendor Initials 

Date 5/17/2021

Exhibit B-27 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Greater Seacoast Community Health

Budget Request for: School Based Vaccination Clinics

Budget Period: July 1, 2021 to June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 10,390.00	\$ 1,250.00	\$ 11,640.00		\$ 1,250.00	\$ 1,250.00	\$ 10,390.00	\$ -	\$10,390.00
2. Employee Benefits	\$ 1,974.10	\$ 237.50	\$ 2,211.60		\$ 237.50	\$ 237.50	\$ 1,974.10	\$ -	\$ 1,974.10
3. Consultants	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Medical	\$ 885.90	\$ -	\$ 885.90			\$ -	\$ 885.90	\$ -	\$ 885.90
Office	\$ 300.00	\$ -	\$ 300.00			\$ -	\$ 300.00	\$ -	\$ 300.00
6. Travel	\$ 1,250.00	\$ -	\$ 1,250.00			\$ -	\$ 1,250.00	\$ -	\$ 1,250.00
7. Occupancy	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Postage	\$ 100.00	\$ -	\$ 100.00			\$ -	\$ 100.00	\$ -	\$ 100.00
Subscriptions	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
13. Other (stericycle for sharps):	\$ 100.00	\$ -	\$ 100.00			\$ -	\$ 100.00	\$ -	\$ 100.00
translator	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 15,000.00</b>	<b>\$ 1,487.50</b>	<b>\$ 16,487.50</b>	<b>\$ -</b>	<b>\$ 1,487.50</b>	<b>\$ 1,487.50</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$15,000.00</b>

Indirect As A Percent of Direct 9.9%

Vendor Initials 

Date 5/17/2021

Exhibit B-28 Budget - Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: Strafford County Public Health Network

Budget Request for: COVID VAX

Project Title

Budget Period: 7/1/2021 - 6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 18,600	\$ -	\$ 18,600	\$ -	\$ -	\$ -	\$ 18,600	\$ -	\$ 18,600
2. Employee Benefits	\$ 3,906	\$ -	\$ 3,906	\$ -	\$ -	\$ -	\$ 3,906	\$ -	\$ 3,906
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 10,000	\$ -	\$ 10,000	\$ -	\$ -	\$ -	\$ 10,000	\$ -	\$ 10,000
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 95,677	\$ -	\$ 95,677	\$ -	\$ -	\$ -	\$ 95,677	\$ -	\$ 95,677
13. Other (specify 854a95 mandatory)	\$ 12,818	\$ -	\$ 12,818	\$ -	\$ -	\$ -	\$ 12,818	\$ -	\$ 12,818
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 141,001</b>	<b>\$ -</b>	<b>\$ 141,001</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 141,001</b>	<b>\$ -</b>	<b>\$ 141,001</b>

Indirect As A Percent of Direct

0.0%

# State of New Hampshire

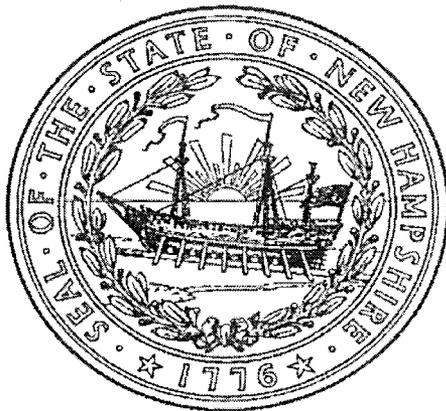
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that GREATER SEACOAST COMMUNITY HEALTH is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on August 18, 1971. 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: **65587**

Certificate Number: **0005310754**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 24th day of March A.D. 2021.

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

William M. Gardner  
Secretary of State

## Filing History

 [Back to Home \(/online\)](#)**Business Name**

Greater Seacoast Community Health

**Business ID**

65587

Filing#	Filing Date	Effective Date	Filing Type	Annual Report Year
0005035739	10/29/2020	10/29/2020	Nonprofit Report	2020
0004774355	01/16/2020	01/16/2020	Annual Report Reminder	N/A
0004108345	06/11/2018	06/11/2018	Change of Officer/Director	N/A
0003796237	01/02/2018	01/02/2018	Amendment	N/A
0003670267	11/15/2017	01/01/2018	Merger	N/A
0003235349	01/28/2016	01/28/2016	Reinstatement	N/A
0003198851	01/01/2016	01/01/2016	Admin Dissolution/Suspension	N/A
0000673563	08/04/2011	08/04/2011	Amendment	N/A
0000673560	12/28/2010	12/28/2010	Annual Report	2010
0000673559	12/06/2010	12/06/2010	Amendment	N/A
0000673558	10/08/2010	10/08/2010	Reminder Letter	N/A
0000673557	11/07/2005	11/07/2005	Annual Report	2005
0000673556	10/17/2003	10/17/2003	Change of Business Address	N/A
0000673555	04/20/2001	04/20/2001	Reinstatement	N/A
0000673554	02/01/2001	02/01/2001	Withdraw/Dissolve/Cancel	N/A
0000673553	07/15/1999	07/15/1999	Amendment	N/A
0000673552	01/26/1995	01/26/1995	Annual Report	1995
0000673551	04/01/1993	04/01/1993	Change of Business Address	N/A
0000673550	02/08/1990	02/08/1990	Annual Report	1990
0000673549	04/26/1977	04/26/1977	Withdraw/Dissolve/Cancel	N/A
0000673548	08/28/1973	08/28/1973	Amendment	N/A
0000673547	08/18/1971	08/18/1971	Business Formation	N/A

Page 1 of 1, records 1 to 22 of 22

[Back](#)NH Department of State, 107 North Main Street, 204 Concord, NH 03301 -- [Contact Us \(/online/Home/ContactUS\)](#)

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**CERTIFICATE OF VOTE**

I, Barbara Henry, of Greater Seacoast Community Health, do hereby certify that:

- 1. I am the duly elected Board ~~Chair~~<sup>Vice</sup> of Greater Seacoast Community Health;
- 2. The following are true copies of two resolutions duly adopted at a meeting of the Board of Directors of Greater Seacoast Community Health, duly held on January 21, 2021;

Resolved: That this corporation enter into a contract with the State of New Hampshire, acting through its Department of Health and Human Services for the provision of Public Health Services.

Resolved: That the Chief Executive Officer, Janet Laatsch, is hereby authorized on behalf of this Corporation to enter into the said contract with the State and to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

- 3. The foregoing resolutions have not been amended or revoked and remain in full force and effect as of May 12<sup>TH</sup>, 2021.

IN WITNESS WHEREOF, I have hereunto set my hand as the Board ~~Chair~~<sup>Vice</sup> of Greater Seacoast Community Health this 12<sup>TH</sup> day of May, 2021

  
Barbara Henry, Board Vice-Chair

STATE OF NH

COUNTY OF STRAFFORD

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_,

2020

by Barbara Henry.

\_\_\_\_\_  
Notary Public/Justice of the Peace

My Commission Expires: \_\_\_\_\_

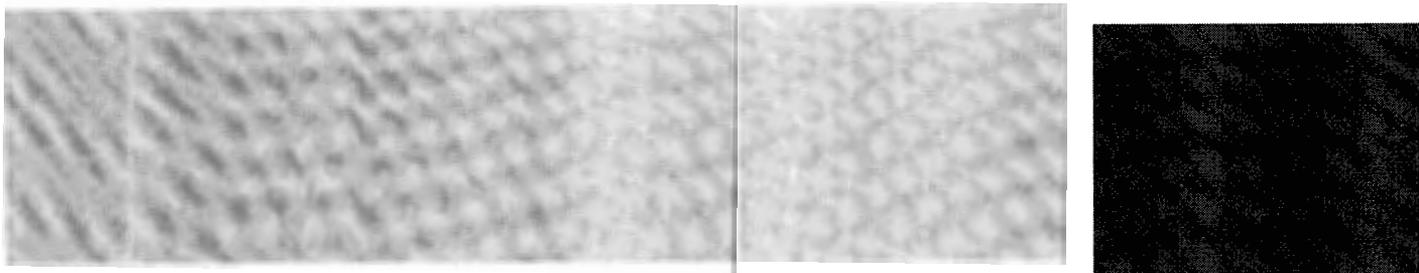


## *Greater Seacoast Community Health*

### *Mission*

*“To deliver innovative, compassionate, integrated health services and support that are accessible to all in our community, regardless of ability to pay.”*

Board Approved on 6-25-2018



GREATER SEACOAST COMMUNITY HEALTH

**Goodwin**  
Community Health

**Families**  
First

**Lilac City**  
Pediatrics

**FINANCIAL STATEMENTS**

**December 31, 2019 and 2018**

**With Independent Auditor's Report**





## INDEPENDENT AUDITOR'S REPORT

Board of Directors  
Greater Seacoast Community Health

We have audited the accompanying financial statements of Greater Seacoast Community Health, which comprise the balance sheets as of December 31, 2019 and 2018, and the related statements of operations, changes in net assets, and cash flows for the years then ended, and the related notes to the financial statements.

### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with U.S. generally accepted accounting principles; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of 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 financial statements based on our audits. We conducted our audits in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the 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 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 financial statements.

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

Board of Directors  
Greater Seacoast Community Health  
Page 2

***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Greater Seacoast Community Health as of December 31, 2019 and 2018, and the results of its operations, changes in its net assets and its cash flows for the years then ended in accordance with U.S. generally accepted accounting principles.

***Change in Accounting Principle***

As discussed in Note 1 to the financial statements, in 2019 Greater Seacoast Community Health adopted new accounting guidance, Financial Accounting Standards Board Accounting Standards Update No. 2014-09, *Revenue from Contracts with Customers* (Topic 606), and related guidance. Our opinion is not modified with respect to this matter.

*Berry Dunn McNeil & Parker, LLC*

Portland, Maine  
July 27, 2020

## GREATER SEACOAST COMMUNITY HEALTH

## Balance Sheets

December 31, 2019 and 2018

## ASSETS

	<u>2019</u>	<u>2018</u>
Current assets		
Cash and cash equivalents	\$ 4,895,949	\$ 3,896,813
Patient accounts receivable	1,178,290	1,560,698
Grants receivable	680,448	424,642
Pledges receivable	33,625	263,557
Inventory	100,428	143,250
Other current assets	<u>53,142</u>	<u>57,987</u>
Total current assets	6,941,882	6,346,947
Investments	1,373,984	1,112,982
Investment in limited liability company	-	38,201
Assets limited as to use	1,621,866	1,421,576
Property and equipment, net	<u>5,784,530</u>	<u>6,107,219</u>
Total assets	<u>\$ 15,722,262</u>	<u>\$15,026,925</u>

## LIABILITIES AND NET ASSETS

Current liabilities		
Accounts payable and accrued expenses	\$ 200,449	\$ 172,852
Accrued payroll and related expenses	1,199,712	1,075,463
Patient deposits	137,239	173,105
Deferred revenue	<u>46,628</u>	<u>7,269</u>
Total current liabilities and total liabilities	<u>1,584,028</u>	<u>1,428,689</u>
Net assets		
Without donor restrictions	12,379,359	11,824,495
With donor restrictions	<u>1,758,875</u>	<u>1,773,741</u>
Total net assets	<u>14,138,234</u>	<u>13,598,236</u>
Total liabilities and net assets	<u>\$15,722,262</u>	<u>\$15,026,925</u>

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The accompanying notes are an integral part of these financial statements.

**GREATER SEACOAST COMMUNITY HEALTH**

**Statements of Operations**

**Years Ended December 31, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
Operating revenue and support		
Patient service revenue	\$11,318,482	\$11,353,111
Provision for bad debts	<u>-</u>	<u>(651,700)</u>
Net patient service revenue	11,318,482	10,701,411
Grants, contracts, and contributions	7,943,253	7,713,908
Other operating revenue	259,394	368,017
Net assets released from restriction for operations	<u>448,507</u>	<u>634,931</u>
Total operating revenue and support	<u>19,969,636</u>	<u>19,418,267</u>
Operating expenses		
Salaries and wages	12,295,009	12,439,986
Employee benefits	2,156,634	2,275,134
Contracted services	1,080,950	1,119,854
Program supplies	1,324,866	1,191,451
Software maintenance	503,376	534,192
Occupancy	787,474	582,900
Other	1,125,378	1,018,477
Depreciation	<u>326,934</u>	<u>349,661</u>
Total operating expenses	<u>19,600,621</u>	<u>19,511,655</u>
Operating income (loss)	<u>369,015</u>	<u>(93,388)</u>
Other revenue and (losses)		
Investment income	48,963	48,204
Loss on disposal of assets	(20,936)	(6,874)
Change in fair value of investments	<u>157,822</u>	<u>(95,246)</u>
Total other revenue and (losses)	<u>185,849</u>	<u>(53,916)</u>
Excess (deficiency) of revenue over expenses and increase (decrease) in net assets without donor restrictions	<u>\$ 554,864</u>	<u>\$ (147,304)</u>

The accompanying notes are an integral part of these financial statements.

**GREATER SEACOAST COMMUNITY HEALTH**

**Statements of Changes in Net Assets**

**Years Ended December 31, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
Net assets without donor restrictions		
Excess (deficiency) of revenue over expenses and increase in net assets without donor restrictions	\$ <u>554,864</u>	\$ <u>(147,304)</u>
Net assets with donor restrictions		
Contributions	169,687	44,649
Investment income	47,540	37,790
Change in fair value of investments	216,414	(147,099)
Net assets released from restriction for operations	<u>(448,507)</u>	<u>(634,931)</u>
Decrease in net assets with donor restrictions	<u>(14,866)</u>	<u>(699,591)</u>
Change in net assets	539,998	(846,895)
Net assets, beginning of year	<u>13,598,236</u>	<u>14,445,131</u>
Net assets, end of year	<u>\$14,138,234</u>	<u>\$13,598,236</u>

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The accompanying notes are an integral part of these financial statements.

**GREATER SEACOAST COMMUNITY HEALTH**

**Statements of Cash Flows**

**Years Ended December 31, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
Cash flows from operating activities		
Change in net assets	\$ 539,998	\$ (846,895)
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation	326,934	349,661
Equity in loss of limited liability company	13,754	2,395
Change in fair value of investments	(374,236)	242,345
Loss on disposal of assets	20,936	6,874
(Increase) decrease in		
Patient accounts receivable	406,855	(319,654)
Grants receivable	(255,806)	304,713
Pledges receivable	229,932	300,635
Inventory	42,822	101,604
Other current assets	4,845	(1,155)
Increase (decrease) in		
Accounts payable and accrued expenses	27,597	(138,262)
Accrued salaries and related amounts	124,249	33,819
Patient deposits	(35,866)	6,790
Deferred revenue	<u>39,359</u>	<u>(2,117)</u>
Net cash provided by operating activities	<u>1,111,373</u>	<u>40,753</u>
Cash flows from investing activities		
Capital acquisitions	(25,181)	(21,463)
Proceeds from sale of investments	244,247	198,458
Purchase of investments	<u>(331,303)</u>	<u>(294,519)</u>
Net cash used by investing activities	<u>(112,237)</u>	<u>(117,524)</u>
Net increase (decrease) in cash and cash equivalents	999,136	(76,771)
Cash and cash equivalents, beginning of year	<u>3,896,813</u>	<u>3,973,584</u>
Cash and cash equivalents, end of year	<u>\$ 4,895,949</u>	<u>\$ 3,896,813</u>

The accompanying notes are an integral part of these financial statements.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### 1. Summary of Significant Accounting Policies

##### Organization

Greater Seacoast Community Health (the Organization) is a not-for-profit corporation organized in New Hampshire. The Organization is a Federally Qualified Health Center (FQHC), providing fully integrated medical, behavioral, oral health, recovery services and social support for underserved populations. The Organization is a network of community health centers, which includes Families First Health & Support Center, Goodwin Community Health, and Lilac City Pediatrics providing healthcare services to individuals living within the greater Seacoast service area.

##### Basis of Presentation

The financial statements of the Organization have been prepared in accordance with U.S. generally accepted accounting principles (U.S. GAAP), which requires the Organization to report information in the financial statements according to the following net asset classifications:

**Net assets without donor restrictions:** Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets may be used at the discretion of the Organization's management and the Board of Directors.

**Net assets with donor restrictions:** Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity.

##### Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

##### Income Taxes

The Organization is a public charity under Section 501(c)(3) of the Internal Revenue Code (IRC). As a public charity, the Organization is exempt from state and federal income taxes on income earned in accordance with its tax-exempt purpose. Unrelated business income is subject to state and federal income tax. Management has evaluated the Organization's tax positions and concluded that the Organization has no unrelated business income or uncertain tax positions that require adjustment to the financial statements.

**GREATER SEACOAST COMMUNITY HEALTH**

**Notes to Financial Statements**

**December 31, 2019 and 2018**

**Cash and Cash Equivalents**

Cash and cash equivalents consist of demand deposits and petty cash funds.

The Organization has cash deposits in major financial institutions which exceed federal depository insurance limits. The Organization has not experienced losses in such accounts and management believes the credit risk related to these deposits is minimal.

**Revenue Recognition and Patient Accounts Receivable**

In 2019, the Organization adopted Financial Accounting Standards Board (FASB) Accounting Standards Update (ASU) No. 2014-09, *Revenue from Contracts with Customers* (Topic 606), and related guidance, which provide guidance for revenue recognition. These standards' core principle is that a company will recognize revenue when it transfers promised goods or services to customers in an amount that reflects the consideration to which the company expects to be entitled in exchange for those goods or services. The most significant change from the adoption of the new standards relates to the presentation of implicit price concessions. Under the previous standards, the estimate for amounts not expected to be collected based upon historical experience was reflected as provision for doubtful accounts, and presented separately as an offset to net patient service revenue. Under the new standards, the estimate for amounts not expected to be collected based on historical experience will continue to be recognized as a reduction to net revenue, but not reflected separately as provision for doubtful accounts. The Organization has adopted the provisions of ASU No. 2014-09 for the year ended December 31, 2019, and elected the modified retrospective method; therefore, the financial statements and related notes have been presented accordingly. Under the modified retrospective method, amounts in the comparative period have not been restated and continue to be reported under the accounting standards in effect for that year.

The impact of the adoption on the statement of operations for the year ended December 31, 2019 follows:

	<u>As Reported</u>	<u>Balance before ASU 2014-09 Adoption</u>	<u>Effect of Change</u>
Patient service revenue	\$ -	\$ 12,036,809	\$ -
Provision for bad debts	<u>-</u>	<u>(718,327)</u>	<u>-</u>
Net patient service revenue	<u>\$ 11,318,482</u>	<u>\$ 11,318,482</u>	<u>\$ -</u>

Patient service revenue is reported at the amount that reflects the consideration to which the Organization expects to be entitled in exchange for providing patient care. These amounts are due from patients and third-party payers (including commercial insurers and governmental programs). Generally, the Organization bills the patients and third-party payers several days after the services are performed. Revenue is recognized as performance obligations are satisfied.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

Performance obligations are determined based on the nature of the services provided by the Organization. The Organization measures the performance obligation for medical, behavioral health, dental and ancillary services from the commencement of a face-to-face encounter with a patient to the completion of the encounter. Ancillary services provided the same day as the face-to-face encounter are considered to be part of the performance obligation and are not deemed to be separate performance obligations. The Organization measures the performance obligation for in-house and contract pharmacy services based on when the prescription is distributed to the patient.

The Organization determines the transaction price based on standard charges for goods and services provided, reduced by contractual adjustments provided to third-party payers, discounts provided to uninsured patients in accordance with the Organization's sliding fee discount program, and implicit price concessions provided to uninsured patients.

The Organization determines its estimates of contractual adjustments and discounts based on contractual agreements, its discount policies, and historical experience. The Organization determines its estimate of implicit price concessions based on its historical collection experience with this class of patients.

The Organization has elected the practical expedient allowed under FASB Accounting Standards Codification Subtopic 606-10-32-18, and does not adjust the promised amount of consideration from patients and third-party payers for the effects of a significant financing component due to the Organization's expectation that the period between the time the service is provided to a patient and the time that the patient or a third-party payer pays for that service will be one year or less.

A summary of the payment arrangements with major third-party payers follows:

#### Medicare

The Organization is primarily reimbursed based on the lesser of actual charges or prospectively set rates for all FQHC services furnished to a Medicare beneficiary on the same day when an FQHC furnishes a face-to-face FQHC visit. Certain other non-FQHC services are reimbursed based on fee-for-service rate schedules.

#### Medicaid

The Organization is entitled to reimbursement based on a minimum per visit reimbursement rate (encounter rate) when providing care to Medicaid beneficiaries which is adjusted annually for inflation using the Medicare Economic Index. Certain other non-FQHC services are reimbursed based on fee-for-service rate schedules.

#### Other Payers

The Organization has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. Under these arrangements, the Organization is reimbursed based on contractually obligated payment rates for each Current Procedural Terminology code which may be less than the Organization's public fee schedule.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### Patients

Patient balances are typically due within 30 days of billing; however, the Organization does, in certain instances, enter into payment agreements with patients that allow payments in excess of one year. For those cases, the financing component is not deemed to be significant to the contract.

#### 340B Pharmacy Program Revenue

The Organization, as an FQHC, is eligible to participate in the 340B Drug Pricing Program. This program requires drug manufacturers to provide outpatient drugs to FQHCs and other covered entities at a reduced price. The Organization operates an in-house pharmacy and contracts with other local pharmacies under this program. The contract pharmacies dispense drugs to eligible patients of the Organization and bill Medicare and commercial insurances on behalf of the Organization. Reimbursement received by the contract pharmacies is remitted to the Organization, less dispensing and administrative fees. The dispensing and administrative fees are costs of the program and not deemed to be implicit price concessions which would reduce the transaction price. The Organization recognizes revenue in the amounts that reflect the consideration to which it expects to be entitled in exchange for the prescription.

Laws and regulations governing the Medicare, Medicaid and 340B programs are complex and subject to interpretation. Management believes that the Organization is in compliance with all laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties and exclusion from the Medicare, Medicaid and 340B programs. Differences between amounts previously estimated and amounts subsequently determined to be recoverable or payable are included in patient service revenue in the year that such amounts become known.

Consistent with the Organization's mission and FQHC designation, care is provided to patients regardless of their ability to pay. Therefore, the Organization has determined it has provided implicit price concessions to uninsured patients and patients with other uninsured balances (for example, copays and deductibles). The implicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and amounts the Organization expects to collection based on its collection history with those patients.

The Organization provides care to patients who meet certain criteria under its sliding fee discount program. The Organization estimates the costs associated with providing this care by calculating the ratio of total cost to total charges, and then multiplying that ratio by the gross uncompensated charges associated with providing care to patients eligible for the sliding fee discount program. The estimated cost of providing services to patients under the Organization's sliding fee discount program amounted to \$1,523,271 and \$1,756,052 for the years ended December 31, 2019 and 2018, respectively. The Organization is able to provide these services with a component of funds received through federal and state grants.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

The Organization has determined that the nature, amount, timing and uncertainty of revenue and cash flows are affected by the payer. In assessing collectability, the Organization has elected the portfolio approach. The portfolio approach is being used as the Organization has a large volume of similar contracts with similar classes of customers (patients). The Organization reasonably expects that the effect of applying a portfolio approach to a group of contracts would not differ materially from considering each contract separately. Management's judgment to group the contracts by portfolio is based on the payment behavior expected in each portfolio category. As a result, aggregating all the contracts (which are at the patient level) by the particular payer or group of payers will result in the recognition of the same amount of revenue as applying the analysis at the individual patient level. A table detailing the payers is presented in Note 7.

Patient accounts receivable are stated at the amount management expects to collect from outstanding balances.

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payer agreements. The accounts receivable from patients and third-party payers, net of contractual allowances, were as follows:

	<u>2019</u>	<u>2018</u>
Governmental plans		
Medicare	7 %	7 %
Medicaid	28 %	29 %
Commercial payers	31 %	32 %
Patient	34 %	32 %
Total	100 %	100 %

#### Grants Receivable

Grants receivable are stated at the amount management expects to collect from outstanding balances. All such amounts are considered collectible. Support received under grants and contracts with governmental agencies is recorded as revenue when terms of the agreements have been met.

The Organization receives a significant amount of grants from the U.S. Department of Health and Human Services (DHHS). For the years ended December 31, 2019 and 2018, grants from DHHS (including both direct awards and awards passed through other organizations) represented approximately 66% and 63%, respectively, of grants, contracts and contributions.

#### Inventory

Inventory consists primarily of pharmaceuticals and is stated at the lower of cost or retail. Cost is determined on the first-in, first-out method.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### **Investments**

The Organization reports investments at fair value. Investments include donor endowment funds and assets held for long-term purposes. Accordingly, investments have been classified as non-current assets in the accompanying balance sheets regardless of maturity or liquidity. The Organization has established policies governing long-term investments, which are held within several investment accounts, based on the purposes for those investment accounts and their earnings.

The Organization has elected the fair value option for valuing its investments, which consolidates all investment performance activity within the other revenue and losses section of the statement of operations. The election was made because the Organization believes reporting the activity in a single performance indicator provides a clearer measure of the investment performance. Accordingly, investment income and the change in fair value are included in the excess (deficiency) of revenue over expenses, unless otherwise stipulated by the donor or State Law.

Investments, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility risks. As such, it is reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the balance sheet.

#### **Investment in Limited Liability Company**

The Organization is one of seven members of Primary Health Care Partners, LLC (PHCP). The Organization's investment in PHCP is reported using the equity method. PHCP dissolved on December 31, 2019 and the Organization's remaining capital balance was subsequently distributed to the Organization.

#### **Assets Limited as to Use**

Assets limited as to use include investments held for others and donor-restricted contributions to be held in perpetuity and earnings thereon, subject to the Organization's spending policy as further discussed in Note 6.

#### **Property and Equipment**

Property and equipment are carried at cost less accumulated depreciation. Maintenance, repairs and minor renewals are expensed as incurred and renewals and betterments are capitalized. Provision for depreciation is computed using the straight-line method over the useful lives of the related assets. Property and equipment costing less than \$5,000 is charged to expense upon purchase.

#### **Patient Deposits**

Patient deposits consist of payments made by patients in advance of significant dental work based on quotes for the work to be performed.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### **Contributions**

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received, which is then treated as cost. The gifts are reported as net assets with donor restrictions if they are received with donor stipulations that limit use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the statements of operations as net assets released from restriction.

Unconditional promises to give that are expected to be collected in future years are recorded at the present value of their estimated future cash flows. All pledges receivable are due within one year. Given the short-term nature of the Organization's pledges, they are not discounted and a reserve for uncollectible pledges has been established in the amount of \$2,000 at December 31, 2019 and 2018. Conditional promises to give are not included as revenue until the conditions are substantially met.

In 2019, the Organization adoption ASU No. 2018-08, *Not-for-Profit Entities (Topic 958), Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. ASU No. 2018-08 applies to all entities that receive or make contributions and clarifies the definition of transactions accounted for as an exchange transaction subject to ASU No. 2014-09 or other applicable guidance, and transactions that should be accounted for as contributions (non-exchange transactions) subject to the contribution accounting model. Further, ASU No. 2018-08 provides criteria for evaluating whether contributions are unconditional or conditional. Conditional contributions must specify a barrier that the recipient must overcome and a right of return that releases the donor from its obligation if the barrier is not achieved, otherwise the contribution is unconditional. ASU No. 2018-08 has been applied retrospectively to 2018; however, there was no impact to total net assets, results of operations or cash flows.

#### **Excess (Deficiency) of Revenue Over Expenses**

The statement of operations reflects the excess (deficiency) of revenue over expenses. Changes in net assets without donor restrictions which are excluded from the excess (deficiency) of revenue over expenses include contributions of long-lived assets (including assets acquired using contributions which, by donor restriction, were to be used for the purposes of acquiring such assets).

#### **Subsequent Events**

On March 11, 2020, the World Health Organization declared coronavirus disease (COVID-19) a global pandemic. Governments have mandated the temporary shut-down of business in many sectors and imposed limitations on travel. Most sectors are experiencing disruption to business operations. There is unprecedented uncertainty surrounding the duration of the pandemic, its potential economic ramifications, and the extent of government actions to mitigate them. While management believes this matter may negatively impact its operating results, the related financial impact and duration cannot be reasonably estimated at this time.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

On March 27, 2020 the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), was enacted into law. The Organization obtained a loan for \$1,479,000 under the Act. The loan is intended to cover 8 weeks of payroll during May and June, and if certain provisions are met, the loan may be forgiven. Amounts not forgiven, if any, are repayable over two years with interest at 1% and six month deferred payment. The Organization has also received approximately \$1,500,000 from a number of stimulus payments and Federal grants under the CARES Act to support ongoing operations as well as COVID related expenses through March 2021.

For financial reporting purposes, subsequent events have been evaluated by management through July 27, 2020, which is the date the financial statements were available to be issued. Management has not evaluated subsequent events after that date for inclusion in the financial statements.

#### 2. Availability and Liquidity of Financial Assets

The Organization regularly monitors liquidity required to meet its operating needs and other contractual commitments. The Organization has various sources of liquidity at its disposal, including cash and cash equivalents and a line of credit.

The Organization had working capital of \$5,357,854 and \$4,918,258 at December 31, 2019 and 2018, respectively. The Organization had average days cash and cash equivalents and investments on hand (based on normal expenditures) of 119 and 95 at December 31, 2019 and 2018, respectively.

Financial assets available for general expenditure within one year were as follows:

	<u>2019</u>	<u>2018</u>
Cash and cash equivalents	\$ 4,895,949	\$ 3,896,813
Patient accounts receivable, net	1,178,290	1,560,698
Grants receivable	680,448	424,642
Pledges receivable	<u>33,625</u>	<u>263,557</u>
Financial assets available for current use	<u>\$ 6,788,312</u>	<u>\$ 6,145,710</u>

The Organization has long-term investments and assets for restricted use, which are more fully described in Note 3, that are not reflected in the amount above.

#### 3. Investments and Assets Limited as to Use

Investments, stated at fair value, consisted of the following:

	<u>2019</u>	<u>2018</u>
Long-term investments	\$ 1,373,984	\$ 1,112,982
Assets limited as to use	<u>1,621,866</u>	<u>1,421,576</u>
Total investments	<u>\$ 2,995,850</u>	<u>\$ 2,534,558</u>

**GREATER SEACOAST COMMUNITY HEALTH**

**Notes to Financial Statements**

**December 31, 2019 and 2018**

Assets limited as to use are restricted for the following purposes:

	<u>2019</u>	<u>2018</u>
Assets held in trust under Section 457(b) deferred compensation plans	\$ 36,304	\$ 26,764
Assets with donor restrictions	<u>1,585,562</u>	<u>1,394,813</u>
Total	<u>\$ 1,621,866</u>	<u>\$ 1,421,576</u>

**Fair Value of Financial Instruments**

U.S. GAAP defines fair value as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants and also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value.

U.S. GAAP distinguishes three levels of inputs that may be utilized when measuring fair value:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the entity has the ability to access as of the measurement date.

Level 2: Significant observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect an entity's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

The following table sets forth by level, within the fair value hierarchy, the Organization's investments at fair value:

	<u>Investments at Fair Value as of December 31, 2019</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and cash equivalents	\$ 193,877	\$ -	\$ -	\$ 193,877
Municipal bonds	-	290,796	-	290,796
Exchange traded funds	330,437	-	-	330,437
Mutual funds	<u>2,180,740</u>	-	-	<u>2,180,740</u>
Total investments	<u>\$ 2,705,054</u>	<u>\$ 290,796</u>	<u>\$ -</u>	<u>\$ 2,995,850</u>

**GREATER SEACOAST COMMUNITY HEALTH**

**Notes to Financial Statements**

**December 31, 2019 and 2018**

	<u>Investments at Fair Value as of December 31, 2018</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and cash equivalents	\$ 13,810	\$ -	\$ -	\$ 13,810
Municipal bonds	-	288,679	-	288,679
Exchange traded funds	411,147	-	-	411,147
Mutual funds	<u>1,820,922</u>	-	-	<u>1,820,922</u>
 Total investments	 <u>\$ 2,245,879</u>	 <u>\$ 288,679</u>	 <u>\$ -</u>	 <u>\$ 2,534,558</u>

Municipal bonds are valued based on quoted market prices of similar assets.

**4. Property and Equipment**

Property and equipment consisted of the following:

	<u>2019</u>	<u>2018</u>
Land	\$ 718,427	\$ 718,427
Building and improvements	5,857,428	5,857,428
Leasehold improvements	302,547	311,561
Furniture, fixtures, and equipment	<u>2,673,943</u>	<u>2,667,663</u>
 Total cost	 9,552,345	 9,555,079
Less accumulated depreciation	<u>3,767,815</u>	<u>3,447,860</u>
 Property and equipment, net	 <u>\$ 5,784,530</u>	 <u>\$ 6,107,219</u>

The Organization's facility was built and renovated with federal grant funding. In accordance with the grant agreements, a Notice of Federal Interest (NFI) was required to be filed in the appropriate official records of the jurisdiction in which the property is located. The NFI is designed to notify any prospective buyer or creditor that the Federal Government has a financial interest in the real property acquired under the aforementioned grant; that the property may not be used for any purpose inconsistent with that authorized by the grant program statute and applicable regulations; that the property may not be mortgaged or otherwise used as collateral without the written permission of the Associate Administrator of the Office of Federal Assistance Management (OFAM) and Health Reimbursement and Services Administration (HRSA); and that the property may not be sold or transferred to another party without the written permission of the Associate Administrator of OFAM and HRSA.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### 5. Net Assets with Donor Restrictions

Net assets with donor restrictions are available for the following purposes:

	<u>2019</u>	<u>2018</u>
Specific purpose		
Program services	\$ 139,688	\$ 115,371
Passage of time		
Pledges receivable	33,625	263,557
Investments to be held in perpetuity, for which the income is without donor restrictions	<u>1,585,562</u>	<u>1,394,813</u>
Total	<u>\$ 1,758,875</u>	<u>\$ 1,773,741</u>

Net assets released from net assets with donor restrictions were as follows:

	<u>2019</u>	<u>2018</u>
Satisfaction of purpose - program services	\$ 53,238	\$ 270,530
Passage of time - pledges receivable	322,064	291,384
Passage of time - endowment earnings	<u>73,205</u>	<u>73,017</u>
Total	<u>\$ 448,507</u>	<u>\$ 634,931</u>

#### 6. Endowments

##### Interpretation of Relevant Law

The Organization's endowments primarily consist of an investment portfolio managed by the Investment Sub-Committee. As required by U.S. GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

The Organization has interpreted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as a donor-restricted endowment (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent donor-restricted endowment gifts, and (c) accumulations to the donor-restricted endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund, if any, is classified as net assets with donor restrictions until those amounts are appropriated for expenditure in a manner consistent with the standard of prudence prescribed by UPMIFA.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

In accordance with UPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (1) The duration and preservation of the fund;
- (2) The purposes of the Organization and the donor-restricted endowment fund;
- (3) General economic conditions;
- (4) The possible effect of inflation and deflation;
- (5) The expected total return from income and the appreciation of investments;
- (6) Other resources of the Organization; and
- (7) The investment policies of the Organization.

#### **Spending Policy**

The Organization has a policy of appropriating for expenditure an amount equal to 5% of the endowment fund's average fair market value over the prior 20 quarters. The earnings on the endowment fund are to be used for operations.

#### **Funds with Deficiencies**

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor requires the Organization to retain as a fund of perpetual duration (underwater). In the event the endowment becomes underwater, it is the Organization's policy to not appropriate expenditures from the endowment assets until the endowment is no longer underwater. There were no such deficiencies as of December 31, 2019 and 2018.

#### **Return Objectives and Risk Parameters**

The Organization has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets of donor-restricted funds that the Organization must hold in perpetuity. Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to produce results that exceed or meet designated benchmarks while incurring a reasonable and prudent level of investment risk.

#### **Strategies Employed for Achieving Objectives**

To satisfy its long-term rate-of-return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Organization targets a diversified asset allocation that places a balanced emphasis on equity-based and income-based investments to achieve its long-term return objectives within prudent risk constraints.

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### Endowment Net Asset Composition by Type of Fund

The Organization's endowment consists of assets with donor restrictions only and had the following related activities:

	<u>2019</u>	<u>2018</u>
Endowments, beginning of year	\$ 1,394,813	\$ 1,577,139
Investment income	47,540	37,790
Change in fair value of investments	216,414	(147,099)
Spending policy appropriations	<u>(73,205)</u>	<u>(73,017)</u>
Endowments, end of year	<u>\$ 1,585,562</u>	<u>\$ 1,394,813</u>

#### 7. Patient Service Revenue

Net patient service revenue by payer and program is as follows:

	<u>2019</u>		
	Medical, Behavioral Health and Dental <u>Services</u>	Pharmacy <u>Services</u>	<u>Total</u>
Governmental payers			
Medicare	\$ 927,218	\$ 241,341	\$ 1,168,559
Medicaid	4,641,469	298,673	4,940,142
Commercial payers	2,806,586	277,352	3,083,938
Patient	<u>470,870</u>	<u>182,195</u>	<u>653,065</u>
Net direct patient service revenue	8,846,143	999,561	9,845,704
340B contract pharmacy revenue	-	<u>1,472,778</u>	<u>1,472,778</u>
Net patient service revenue	<u>\$ 8,846,143</u>	<u>\$ 2,472,339</u>	<u>\$ 11,318,482</u>
	<u>2018</u>		
	Medical, Behavioral Health and Dental <u>Services</u>	Pharmacy <u>Services</u>	<u>Total</u>
Governmental payers			
Medicare	\$ 1,001,792	\$ 171,979	\$ 1,173,771
Medicaid	3,910,040	196,962	4,107,002
Commercial payers	3,154,989	295,839	3,450,828
Patient	<u>1,165,229</u>	<u>137,889</u>	<u>1,303,118</u>
Total direct patient service revenue	9,232,050	802,669	10,034,719
Provision for bad debts	<u>(651,700)</u>	-	<u>(651,700)</u>
Net direct patient service revenue	8,580,350	802,669	9,383,019
340B contract pharmacy revenue	-	<u>1,318,392</u>	<u>1,318,392</u>
Net patient service revenue	<u>\$ 8,580,350</u>	<u>\$ 2,121,061</u>	<u>\$ 10,701,411</u>

## GREATER SEACOAST COMMUNITY HEALTH

### Notes to Financial Statements

December 31, 2019 and 2018

#### 8. Retirement Plans

The Organization has a defined contribution plan under IRC Section 401(k) that covers substantially all employees. For the years ended December 31, 2019 and 2018, the Organization contributed \$193,365 and \$194,214, respectively, to the plan.

The Organization has established an unqualified deferred compensation plan under IRC Section 457(b) for certain key employees of the Organization. The Organization did not contribute to the plan during the year ended December 31, 2019. The balance of the deferred compensation plan amounted to \$36,304 and \$26,764 at December 31, 2019 and 2018, respectively.

#### 9. Food Vouchers

The Organization acts as a conduit for the State of New Hampshire's Special Supplemental Food Program for Women, Infants and Children (WIC). The value of food vouchers distributed by the Organization was \$1,068,417 and \$1,136,875 for the years ended December 31, 2019 and 2018, respectively. These amounts are not included in the accompanying financial statements as they are not part of the contract the Organization has with the State of New Hampshire for the WIC program.

#### 10. Functional Expense

The Organization provides various services to residents within its geographic location. Given the Organization is a service organization, expenses are allocated between healthcare, administrative and support and fundraising services based on the percentage of direct care wages to total wages, with the exception of program supplies which are 100% healthcare in nature. Expenses related to providing these services are as follows:

	<u>Healthcare Services</u>	<u>Administrative and Support Services</u>	<u>Fundraising Services</u>	<u>Total</u>
<b>2019:</b>				
Salaries and wages	\$ 10,587,330	\$ 1,293,845	\$ 413,834	\$ 12,295,009
Employee benefits	1,857,078	226,878	72,678	2,156,634
Contracted services	890,375	183,127	7,448	1,080,950
Program supplies	1,324,866	-	-	1,324,866
Software maintenance	433,457	52,955	16,964	503,376
Occupancy	678,094	82,842	26,538	787,474
Other	963,883	103,415	58,080	1,125,378
Depreciation	<u>281,523</u>	<u>34,393</u>	<u>11,018</u>	<u>326,934</u>
Total	<u>\$ 17,016,606</u>	<u>\$ 1,977,455</u>	<u>\$ 606,560</u>	<u>\$ 19,600,621</u>

**GREATER SEACOAST COMMUNITY HEALTH**

**Notes to Financial Statements**

**December 31, 2019 and 2018**

	<u>Healthcare Services</u>	<u>Administrative and Support Services</u>	<u>Fundraising Services</u>	<u>Total</u>
2018:				
Salaries and wages	\$ 10,726,571	\$ 1,233,194	\$ 480,221	\$ 12,439,986
Employee benefits	1,961,848	225,466	87,820	2,275,134
Contract services	956,218	147,500	16,136	1,119,854
Program supplies	1,191,451	-	-	1,191,451
Software maintenance	460,634	52,938	20,620	534,192
Occupancy	502,635	57,765	22,500	582,900
Other	854,906	88,360	75,211	1,018,477
Depreciation	<u>301,513</u>	<u>34,651</u>	<u>13,497</u>	<u>349,661</u>
Total	<u>\$ 16,955,776</u>	<u>\$ 1,839,874</u>	<u>\$ 716,005</u>	<u>\$ 19,511,655</u>

**11. Medical Malpractice Insurance**

The Organization is protected from medical malpractice risk as an FQHC under the Federal Tort Claims Act (FTCA). The Organization has additional medical malpractice insurance, on a claims-made basis, for coverage outside the scope of the protection of the FTCA. As of December 31, 2019, there were no known malpractice claims outstanding which, in the opinion of management, will be settled for amounts in excess of both FTCA and additional medical malpractice insurance coverage, nor are there any unasserted claims or incidents which require loss accrual. The Organization intends to renew the additional medical malpractice insurance coverage on a claims-made basis and anticipates that such coverage will be available.

**12. Lease Commitments**

The Organization leases office space and certain other office equipment under noncancelable operating leases. Future minimum lease payments under these leases are as follows:

2020	\$ 315,971
2021	274,281
2022	42,211
2023	43,048
2024	23,971
Thereafter	<u>1,191</u>
Total	<u>\$ 700,673</u>

Rental expense amounted to \$316,139 and \$258,695 for the year ended December 31, 2019 and 2018, respectively.

GREATER SEACOAST COMMUNITY HEALTH



**Board of Directors  
Calendar Year 2021**

Name/Address	Phone/Email	Occupation
<b>Chair</b> Jennifer Glidden [Redacted]	[Redacted]	DHHS Admin. Supervisor <b>Consumer</b>
<b>Vice Chair</b> Barbara Henry [Redacted]	[Redacted]	Retired Newspaper Publisher
<b>Board Treasurer</b> Dennis Veilleux [Redacted]	[Redacted]	Accounting Manager
<b>Board Secretary</b> Don Chick [Redacted]	[Redacted]	Photographer <b>Consumer</b>
Karin Barndollar [Redacted]	[Redacted]	Export Manager <b>Consumer</b>
Jody Hoffer Gittell [Redacted]	[Redacted]	Professor
Valerie Goodwin [Redacted]	[Redacted]	Retired Business <b>Consumer</b>
Jo Jordon [Redacted] D	[Redacted]	Emergency Management
Abigail Sykas Karoutas [Redacted]	[Redacted]	Attorney <b>Consumer</b>
Jo Lamprey [Redacted]	[Redacted]	Retired Nurse and Co-founder of healthcare quality Co.
Brendan Markey [Redacted]	[Redacted]	SVP Residential Lending
Allison Neal [Redacted]	[Redacted]	Education Consultant <b>Consumer</b>

Name/Address	Phone/Email	Occupation
Yulia Rothenberg [REDACTED]	[REDACTED]	Education Consultant <b>Consumer</b>
Kathy Scheu [REDACTED]	[REDACTED]	Medical/Laboratory Product Sales
Dan Schwarz [REDACTED]	[REDACTED]	Attorney <b>Consumer</b>
Jeffrey Segil, MD [REDACTED]	[REDACTED]	Physician-OB/GYN
James Sepanski [REDACTED]	[REDACTED]	Financial Executive
David B. Staples, DDS [REDACTED]	[REDACTED]	Dentist <b>Consumer</b>

**JANET M. LAATSCH**

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**Objective: To utilize my leadership skills to create a dynamic, sustainable non-profit organization.**

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**WORK EXPERIENCE:**

**Goodwin Community Health (GCH)**

**Somersworth, NH**

**2001-Present**

**Chief Executive Officer**

**2005-Present**

**Accomplishments:**

- Successfully retained all Directors and Physicians
- Built relationships with donors, foundations, local and state representatives and other non-profit and for-profit organizations
- Retention of an active Board of Directors
- Improvement of patient outcomes
- Successfully implemented mental health integration program
- Successfully acquired a for-profit mental health organization
- Developed a new partnership with Noble High School
- Developed a new partnership with Southeastern NH Services
- Obtained new grant funding of over \$7.0 million
- Expansion of donor base
- Development of a corporate compliance program
- Merged the public health and safety council under AGCHC

**Responsibilities:**

- Oversight of operations, finance, personnel and fund development
- Grant writing and donor development
- New business development
- Compliance with all federal and state regulations
- Build relationships and partnerships locally and statewide
- Strategic planning
- Report directly to the Board of Directors

**Finance Director**

**2002-2005**

**Accomplishments:**

- Brought in over \$3.0 million in grant funds for the organization
- Obtained Federally Qualified Health Center status in 2004
- Designed and implemented a successful new dental program
- Achieved a financial surplus annually

**Responsibilities:**

- Responsible for all financial transactions, billing, collections, patient accounts
- Strategic planning as it relates to capital finding
- Budget development, cost/benefit analysis of existing programs and potential new programs
- Development and implementation of an annual development plan
- Research, write, submit and provide follow-up reports for grant funds

• Oversee human resource functions of the organization  
**Grant Writer/Per Diem Nurse** 2001-2002

**Grant Writing Services,  
N. Hampton, NH  
Sole Proprietor** 1999-2001

**Accomplishments:**

- Successfully researched and submitted grants for health and educational organizations totaling over \$150k

**Responsibilities:**

- Research private, industry, state and federal funds for non-profit organizations

**North Shore Medical Center (Partners Health Care)  
Salem, MA** 1991-1999

**Acting Chief Operations Officer for the  
North Shore Community Health Center** 1997-1999

**Accomplishments:**

- Successfully submitted their competitive Federal grant and other state grants
- Recruited a medical director and re-negotiated existing provider contracts to include productivity standards
- Re-designed operations to improve productivity
- Incorporated the hospital's medical residency program into the Health Center
- Achieved a financial surplus for the first time in five years
- Developed a quality improvement program and framework

**Responsibilities:**

- Placed at the Health Center by the North Shore Medical Center to revamp operations and improve the cash flow for the organization
- Reported directly to the Board of Directors

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**EDUCATION:**

University of New Hampshire:	M.B.A.	
Durham, N.H.	Concentration in Finance	1991
Northern Michigan University:	B.S.N.	
Marquette, M.I.	Minor in Biology	1981

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**LICENSES/CERTIFICATES:**

Real Estate Broker  
N.H. Nursing License

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**PROFESSIONAL:**

Member of the National Association of Community Health Centers  
Previous Board member of the United Way of the Greater Seacoast  
Treasurer for the Health and Safety Council of Strafford County  
Board member of the Community Health Network Access (CHAN)  
Board member of the Rochester Rotary, slotted for President in 2011

**Lara D. Willard**

◆ **PROFESSIONAL EXPERIENCE**

**Somersworth Main Street Inc., Somersworth, New Hampshire**  
*Executive Director, August 2001 – 2004*

- Founded and Directed a 501(c)3 non profit organization dedicated to revitalizing a downtown commercial district
- Energized local planning, historic preservation, economic and real estate development
- Worked with public and private interests to achieve common downtown renewal goals
- Developed and implemented strategic marketing and public relations programs, fundraisers and public planning sessions
- Created and coordinated high visibility downtown events and beautification projects
- Responsible for budget management and all day to day program operations

**LDW Public Relations**

*Self-Employed Marketing/Communications Consultant; May 2000 – August 2001*

- Enhance creativity, professionalism and frequency of outbound marketing/communications and public relations efforts
- Organize mix of publicity, promotion, advertising and Internet presence for milestone company events such as venture capital funding, new store openings, web casts, direct marketing campaigns and celebrity endorsements.
- Drive brand awareness and message consistency through creation of unique and compelling copy for web sites, catalogs, executive speeches, press releases and direct marketing collateral
- Significantly increase media exposure with key audiences resulting in a multitude of image enhancing feature news stories with leading media outlets like the Wall Street Journal, The Red Herring, The Associated Press and ESPN.
- Conduct media training with company executives
- Clients include 1800FACEOFF.Com and General Linen Service, Inc.
- Chairman of Somersworth Main Street Program communications committee

**Unisphere Networks, Inc., Westford, MA**

*Senior Public Relations Manager, April 2001 – November 2001*

- Responsible for managing and creating results-driven public relations programs for multiple product lines and business initiatives
- Successful development and execution of strategies that position the company and its spokespeople as thought leaders in trade and business communities
- Organize industry events to leverage and maximize impact of corporate messaging with key audiences
- Manage outside agency to achieve public relations goals
- Consistently create and edit high-quality, influential materials like press releases, launch plans, abstracts and contributed articles
- Produce stellar coverage results in key media outlets

**LDW Public Relations**

**Self-Employed Marketing/Communications Consultant; May 2000 – August 2001**

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- Manage outside agency to achieve public relations goals
- Consistently create and edit high-quality, influential materials like press releases, launch plans, abstracts and contributed articles
- Produce stellar coverage results in key media outlets

**Cabletron Systems, Rochester, NH**

**Public Relations Manager; June 1998 – April 2000**

**Public Relations Specialist, July 1997 – June 1998**

- Oversee North American Public Relations program for software business unit
- Provide strategic counsel to marketing, engineering and top-level executives
- Guide launch team efforts to create, implement and evaluate corporate communications programs and product launches
- Write and edit press materials, speeches, scripts, messages and quotes for both technology and business audiences
- Consistently deliver excellent and measurable results with trade and business media as well as leading industry analysts
- Coordinate detailed media events, trade shows and press tours
- Manage searches for and relationships with outside agencies

**The Weber Group, Inc., Cambridge, MA**

**Assistant Account Executive; September 1996 – July 1997**

- Write and edit pitch letters, speaker abstracts, press kits, briefing binders and media releases under tight deadlines
- Management and supervision of interns and account coordinators
- Responsible for developing and maintaining editorial and speaking calendars to generate client exposure
- Create and pitch story angles to media
- All activity necessary to meet and surpass client expectations
- Clients included 3Com and DCI

**Erin E. Ross**

**Objective**

Obtain a position in Health Care, which will continue to build knowledge and skills from both education and experiences gained.

**Qualifications**

Mature, energetic individual possessing management experience, organizational skills, multi-tasking abilities, good work initiative and communicates well with internal and external contacts. Proficient in computer skills with a strong background using all applications within Microsoft Office programs.

**Education**

September 1998 – May 2002      **Bachelor of Science in Health Management & Policy**  
University of New Hampshire  
Durham, New Hampshire 03824

**Related Experience**

August 2006 – Present      **Service Expansion Director**  
Avis Goodwin Community Health Center

- Responsible for the overall function of the Winter St location of Avis Goodwin Community Health Center.
- Maintain all clinical equipment and order all necessary supplies.
- Coordinate the scheduling of all clinical and administrative staff in the office.
- Assist with the continued integration of dental services and now mental health services to existing primary care services.
- Assist with the integration of private OB/GYN practice into Avis Goodwin Community Health Center.
- Organize patient outcome data collection and quality improvement measures to monitor multiple aspects and assure sustainability for Avis Goodwin Community Health Center.

May 2005 – August 2006      **Site Manager, Dover Location**  
Avis Goodwin Community Health Center

- Responsible for the overall function of the Dover location of Avis Goodwin Community Health Center.
- Maintain all clinical equipment and order all necessary supplies.
- Assist with the continued integration of dental services and now mental health services to existing primary care services.
- Coordinate the scheduling of all clinical and administrative staff in the office.
- Organize patient outcome data collection and quality improvement measures to monitor multiple aspects and assure sustainability for Avis Goodwin Community Health Center.

January 2005 – November 2005      **Front Office Manager**  
Avis Goodwin Community Health Center

- Supervise, hire and evaluate front office staff of both Avis Goodwin Community Health Center locations.
- Develop and implement policies and procedures for the smooth functioning of the front office.

May 2004 – Present      **Dental Coordinator**  
Avis Goodwin Community Health Center

- Supervise, hire and evaluate dental staff, including Dental Assistant and Hygienists.
- Acted as general contractor during construction and renovation of existing facility for 4 dental exam rooms.
- Responsible for the operations of the dental center, development of educational programs for providers and staff and supervision of the school-based dental program.
- Developed policy and procedure manual, including OSHA and Infection Control protocols.
- Organize patient outcome data collection and quality improvement measures to monitor dental program and assure sustainability.
- Maintain all dental equipment and order all dental supplies.
- Coordinate grant fund requirements to multiple agencies on a quarterly basis.

- Oversee all aspects of billing for dental services, including training existing billing department staff.

July 2003 – May 2004

**Administrative Assistant to Medical Director**  
Avis Goodwin Community Health Center

- Assist with Quality Improvement program by attending all meetings, generating monthly minutes documenting all aspects of the agenda and reporting quarterly data followed by the agency.
- Generate a monthly report reflecting provider productivity including number patients seen by each provider and no show and cancellation rates of appointments.
- Served as a liaison between patients and Chief Financial Officer to effectively handle all patient concerns and compliments.
- Established and re-created various forms and worksheets used by many departments.

December 2002 – May 2004

**Billing Associate**  
Avis Goodwin Community Health Center

- Organize and respond to correspondence, rejections and payments from multiple insurance companies.
- Created an Insurance Manual for Front Office Staff and Intake Specialists as an aide to educate patients on their insurance.
- Responsible for credentialing and Re-credentialing of providers, including physicians, nurse practitioners and physician assistants, within the agency and to multiple insurance companies.
- Apply knowledge of computer skills, including Microsoft Office, Logician, PCN and Centricity.
- Designed a statement to generate from an existing Microsoft Access database for patients on payment plans to receive monthly statements.
- Assist Front Office Staff during times of planned and unexpected staffing shortages.

June 2002 - December 2002

**Billing Associate**  
Automated Medical Systems  
Salem, New Hampshire 03079

- Communicate insurance benefits and explain payments and rejections to patients about their accounts.
- Responsible for organizing and responding to correspondence received for multiple doctor offices.
- Determine effective ways for rejected insurance claims to get paid through communicating with insurance companies and patients.
- Apply knowledge of computer skills, including Microsoft Office, Accuterm and Docstar.

## **Work Experience**

October 1998 – May 2002

**Building Manager**  
Memorial Union Building – UNH  
Durham, New Hampshire 03824

- Recognized as a Supervisor, May 2001-May 2002.
- Supervised Building Manager and Information Center staff.
- Responsible for managing and documenting department monetary transactions.
- Organized and led employee meetings on a weekly basis.
- Established policies and procedures for smooth functioning of daily events.
- Oversaw daily operations of student union building, including meetings and campus events.
- Served as a liaison between the University of New Hampshire, students, faculty and community.
- Organized and maintained a weekly list of rental properties available for students.
- Developed and administered new ideas for increased customer service efficiency.

## **References**

Available upon request

**Greater Seacoast Community Health**

Regional Public Health Network

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Janet Laatsch	Chief Executive Officer	\$213,574	0%	\$0
Erin Ross	Chief Financial Officer	\$146,973	0%	\$0
Lara Drolet	Director of Marketing & Public Relations	\$95,584	5%	\$4,779.20

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Partnership for Public Health, Inc. (d/b/a Lakes Region Partnership for Public Health) ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor approval on December 17, 2020 and presented to the Executive Council as an Informational Item on April 7, 2021 (Informational Item # M), as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item on May 19, 2021, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,361,474.
3. Modify Exhibit A Scope of Work by replacing it in its entirety with Exhibit A Scope of Work, Amendment #8, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.
    - 2.3. Payment for the I-CARE program shall be on a lump sum basis for <sup>DS</sup>authorized

expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.

6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
  7. The Contractor shall bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
    - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
    - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
9. Modify Exhibit B-1, Program Funding, Amendment #7 by replacing it in its entirety with Exhibit B-1 Amendment #8, Program Funding, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-21, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-22, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-23, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-24, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-25, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-26, Amendment #8, which is attached hereto and incorporated by reference herein.
16. Add Exhibit B-27, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

5/28/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
*Patricia M. Tilley*  
\_\_\_\_\_  
Name: Patricia M. Tilley  
Title: Interim Director

Lakes Region Partnership for Public Health

5/27/2021  
\_\_\_\_\_  
Date

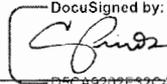
DocuSigned by:  
*Tamera Carmichael*  
\_\_\_\_\_  
Name: Tamera Carmichael  
Title: Executive Director

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

OFFICE OF THE ATTORNEY GENERAL

5/28/2021

Date

DocuSigned by:  


Name: Catherine Pinos

Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:



**New Hampshire Department of Health and Human Services  
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**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient), in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Networks for the Winnepesaukee region, as defined by the Department, to provide a broad range of public health services within one or more of the state's thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to assure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing young adult substance misuse prevention strategies.
    - 2.1.2.6. Ensuring contract administration and leadership.

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2.2. Public Health Advisory Council

2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team and direction to public health activities within the assigned region. The Contractor shall:

2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;

2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:

2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.

2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issue.

2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.

2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.

2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.

2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:

2.2.1.3.1. Ensure meeting minutes are available to the public upon request.

2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:



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- 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.
- 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
- 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to the public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC\_), YA and PHEP programs.
- 2.2.1.12. Advance the work of RPHNs by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected officials, on the PHAC.

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- 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.
- 2.3. Public Health Emergency Preparedness
  - 2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:
    - 2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.
    - 2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) and/or coordinating and/or planning committee and/or workgroup to:
      - 2.3.1.2.1. Improve regional emergency response plans; and
      - 2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.
    - 2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.
    - 2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.
    - 2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.
    - 2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative including the workgroup.
    - 2.3.1.7. Submit an annual work plan based on a template provided by the Department.
    - 2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.

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- 2.3.1.9. Collaborate with the Department’s, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:
  - 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
  - 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.
- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to



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strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.

- 2.3.1.13. Regularly communicate with the Department’s Area Agency contractor that provides developmental and acquired brain disorder services in the region.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State’s emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training as needed to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC’s Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department’s SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:
  - 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
  - 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.

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- 2.3.1.21.3. ORR site visit as scheduled by the CDC and the Department.
- 2.3.1.21.4. Completion of relevant drills/exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate these supplies. prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
- 2.3.1.24. Participate, as requested by the Department, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.
- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health



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and Human Services Assistant Secretary for Preparedness and Response.

- 2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

2.4. Substance Misuse Prevention

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

- 2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.
- 2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.
- 2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes: assessment, capacity development, planning, implementation and evaluation.
- 2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department's guidance on what is evidenced informed.
- 2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.
- 2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic



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models that demonstrates short-, intermediate- and long-term measures in alignment the Three-Year Strategic Plan.

- 2.4.1.7. Advance, promote and implement substance misuse primary prevention of strategies that incorporate the Institute of Medicine (IOM) categories of prevention: universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, as directed by the Department’s Bureau of drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

**2.5. Continuum of Care**

2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

- 2.5.1.1. Engage regional partners in ongoing update of regional assets and gaps, and regional CoC plan development

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- and implementation. The Contractor shall ensure regional partners include, but are not limited to:
  - 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Services providers.
  - 2.5.1.1.2. Primary health care providers.
  - 2.5.1.1.3. Behavioral health care providers.
  - 2.5.1.1.4. Other interested and/or affected parties.
- 2.5.1.2. Work toward, and adapt as necessary and indicated, the priorities and actions identified in the regional CoC development plan.
- 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
  - 2.5.1.3.1. Increased awareness of and access to services;
  - 2.5.1.3.2. Increased communication and collaboration among providers; and
  - 2.5.1.3.3. Increases in capacity and delivery of services.
- 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
- 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to, the Integrated Delivery Networks.
- 2.5.1.6. Work with statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.
- 2.5.1.7. Engage regional stakeholders to assist with information dissemination.

**2.6. Young Adult Substance Misuse Prevention Strategies**

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- 2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within the regions.
- 2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:
  - 2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:
    - 2.6.2.1.1. Reducing risk factors.
    - 2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and
    - 2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.
  - 2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.
- 2.7. School Based Vaccination Clinics
  - 2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:
    - 2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.
    - 2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.
    - 2.7.1.3. Distribute state-supplied promotional vaccination materials.
    - 2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardians prior to administration of vaccines in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.
    - 2.7.1.5. Request the NH Immunization Program (NHIP) to store consent forms once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination consent forms within HIPAA guidelines.

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- 2.7.1.6. Document, verify and store written or electronic record of vaccine administration in compliance with HIPAA and other state and federal regulations.
- 2.7.1.7. Request the NHIP to store written or electronic records of vaccine administration once the Contractor completes data collection and reporting only if the Contractor lacks the ability to store vaccination records within HIPAA guidelines.
- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to the parent and/or legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient's primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care providers. The Contractor shall ensure information includes:
- 2.7.1.9.1. Patient full name and one other unique patient identifier;
- 2.7.1.9.2. Vaccine name;
- 2.7.1.9.3. Vaccine manufacturer;
- 2.7.1.9.4. Lot number;
- 2.7.1.9.5. Date of vaccine expiration
- 2.7.1.9.6. Date of vaccine administration;
- 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
- 2.7.1.9.8. Edition date of the VIS given;
- 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor's name); and
- 2.7.1.9.10. Full name and title of the individual who administered the vaccine.
- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian, <sup>and</sup> and/or

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parent is provided access to the information on the day of vaccination.

- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in session school days.
- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise through providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director is able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.
    - 2.7.2.6.5. Non-latex bandages.
- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
  - 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP, annually, ensuring all listed requirements are met.



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- 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
- 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
- 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.
- 2.7.3.5. Utilize NHIP training materials or other educational materials, as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
- 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
- 2.7.3.7. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
- 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
- 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
- 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
- 2.7.3.11. Account for every dose of vaccine.
- 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
- 2.7.3.13. Notify NHIP by contacting the NHIP Nursing helpline and faxing incident forms of any adverse event within 24 hours of event occurring.
- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturers recommended temperatures, the Contractor shall:
  - 2.7.3.14.1. Immediately quarantine the vaccine in an appropriate temperature setting,

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2.7.4.5.4. Discussions relative to future strategies and plans for increasing students vaccinated, including suggestions on how state-level resources may aid in the effort.

2.7.5. The Contractor shall be funded through a combination of base funding and incentivized funding, in order to encourage the Contractor to offer vaccination at schools that have a greater economic disparity, as identified through reports generated by the NHIP in collaboration with the Department of Education (DOE).

2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:

2.7.6.1. If the Contractor is unable to provide vaccine to at least 50% of the schools listed, the Contractor may show evidence of providing vaccine to additional schools listed but not previously served the year before in order to receive full funding.

2.7.6.2. If NHIP and the Contractor agree that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.

2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 2.7, funding will be awarded on a sliding scale based on the percentage of schools listed, calculated as follows:

2.7.6.3.1. The percentage of listed school covered divided by 50%.

2.7.6.3.2. The percentage determined by the equation above will be multiplied by the total amount of dollars available for funding, beyond the base portion of funding, for a total of dollars awarded for that year.

**2.8. Contract Administration and Leadership**

2.8.1. The Contactor shall introduce and orient all funded staff to the work of activities conducted through the contract agreement. The Contractor shall:

2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.



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- 2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.
- 2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
- 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
- 2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

**2.9. I-CARE Program:**

- 2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
- 2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.
- 2.9.3. The Contractor shall ensure activities in the work plan support:
  - 2.9.3.1. The I-CARE NH mental health and wellness initiative;
  - 2.9.3.2. 9-8-8 National Suicide Prevention lifeline expansion project; and/or
  - 2.9.3.3. NH's Suicide Prevention Council's strategic plan.
- 2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.
- 2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of the contract effective date.

**3. Training and Technical Assistance Requirements**

- 3.1. The Contractor shall participate in training and technical assistance as follows:
  - 3.1.1. Public Health Advisory Council
    - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by Department's DPHS and/or BDAS.
    - 3.1.1.2. Complete a technical assistance needs assessment.
  - 3.1.2. Public Health Emergency Preparedness

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- 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department's DPHS and/or Emergency Services Unit (ESU).
- 3.1.2.2. Complete a technical assistance needs assessment.
- 3.1.2.3. Attend a maximum of two trainings per year offered by Department's DPHS and/or ESU or the agency contracted by the Department's DPHS to provide training programs.
- 3.1.3. Substance Misuse Prevention
  - 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
  - 3.1.3.2. At the Department's request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including, but not limited to:
    - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
    - 3.1.3.2.2. Using appropriate measures and tools.
  - 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
  - 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
  - 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
  - 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and
    - 3.1.4.1.5. Development.



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- 3.1.4.2. Be familiar with RROSC and NH DHHS CoC systems development and the “No Wrong Door” approach to systems integration.
- 3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.
- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics

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**Exhibit A – Amendment # 8**

- 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with a current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
- 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and status, and current BLS certificate shall be retained in the training file.

**4. Staffing**

- 4.1. The Contractor's staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN's efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.

4.3. Table 1 – Minimum Staffing Requirements

Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

**5. Reporting**

Lakes Region Partnership for Public Health Exhibit A – Amendment # 8

Contractor Initials

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**New Hampshire Department of Health and Human Services  
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- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide Reports for the PHAC that include, but are not limited to, submitting quarterly PHAC progress reports using an online system administered by the Department's DPHS.
- 5.3. The Contractor shall provide Reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.3.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.3.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.3.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.3.4. Inputting data on a monthly basis by the 20th business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes but is not limited to:
    - 5.3.4.1. Number of individuals served or reached.
    - 5.3.4.2. Demographics.
    - 5.3.4.3. Strategies and activities per IOM by the six (6) activity types.
    - 5.3.4.4. Dollar Amount and type of funds used in the implementation of strategies and/or interventions.
    - 5.3.4.5. Percentage evidence based strategies.
  - 5.3.5. Submitting annual reports.
  - 5.3.6. Providing additional reports or data as required by the Department.



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- 5.3.7. Participating and administering the Regional SMP Stakeholder Survey in alternate years.
- 5.4. The Contractor shall provide Reports for Continuum of Care that include, but are not limited to:
  - 5.4.1. Submitting update on regional assets and gaps assessments, as required.
  - 5.4.2. Submitting updates on regional CoC development plans, as indicated.
  - 5.4.3. Submitting quarterly reports ,as indicated.
  - 5.4.4. Submitting year-end reports, as indicated.
- 5.5. The Contractor shall provide reports for Young Adult Strategies that include but are not limited to:
  - 5.5.1. Inputting data on a monthly basis to an online database as required by the Department.
  - 5.5.2. Ensuring the data includes but is not limited to:
    - 5.5.2.1. Number of individuals served.
    - 5.5.2.2. Demographics of individuals served.
    - 5.5.2.3. Types of strategies or interventions implemented.
    - 5.5.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
  - 5.5.3. Meeting with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.
- 5.6. The Contractor shall provide reports for School-Based Vaccination Clinics that include but are not limited to:
  - 5.6.1. Attending annual debriefing and planning meetings with NHIP staff.
  - 5.6.2. Completing a year-end summary of:
    - 5.6.2.1. The total numbers of children vaccinated; and
    - 5.6.2.2. Accomplishments and improvements to future school-based clinics.
  - 5.6.3. Providing aggregated data, by school for each school, to the NHIP no later than 3 months after SBCs are concluded, that include:
    - 5.6.3.1. Number of students at that school;
    - 5.6.3.2. Number of students vaccinated out of the total number at that school; and
    - 5.6.3.3. Number of vaccinated students on Medicaid out of the total number at that school.
  - 5.6.4. Provide other reports and updates as requested by NHIP.

**6. Performance Measures**

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- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the DHHS, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision or mission statements/
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
    - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
    - 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
    - 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
  - 6.1.3. Substance Misuse Prevention
    - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
      - 6.1.3.1.1. 30-day alcohol use;
      - 6.1.3.1.2. 30-day marijuana use;
      - 6.1.3.1.3. 30-day illegal drug use;
      - 6.1.3.1.4. Illicit drug use other than marijuana;

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- 6.1.3.1.5. 30-day nonmedical use of pain relievers;
- 6.1.3.1.6. Life time heroin use;
- 6.1.3.1.7. Binge Drinking; and
- 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
- 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
  - 6.1.3.2.1. Perception of risk from alcohol use;
  - 6.1.3.2.2. Perception of risk from marijuana use;
  - 6.1.3.2.3. Perception of risk from illegal drug use;
  - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
  - 6.1.3.2.5. Perception of risk from binge drinking;
  - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
  - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.
- 6.1.4. Continuum of Care
  - 6.1.4.1. Evidence of ongoing update of regional substance use services assets and gaps assessment.
  - 6.1.4.2. Evidence of ongoing update of regional CoC development plan.
  - 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
  - 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:
    - 6.1.4.4.1. Health;
    - 6.1.4.4.2. Safety;
    - 6.1.4.4.3. Education;
    - 6.1.4.4.4. Government; and
    - 6.1.4.4.5. Business.

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- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or are affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to
- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.
- 6.1.6. School-Based Vaccination Clinics
  - 6.1.6.1. Annual increase in the percentage of students receiving seasonal influenza vaccination in school-based clinics.
  - 6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.
  - 6.1.6.3. Maintain vaccine wastage below 5%.

Vendor Name: Partnership for Public Health, Inc.  
 Contract Name: Regional Public Health Network Services  
 Region: Winnepesaukee

Program Name and Funding Amounts

State Fiscal Year	COVID Vaccination	Immunization	I-Care	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Public Health Emergency Preparedness - ASPR MRC	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019				\$ -	\$ -			\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00
2020				\$30,000	\$86,750	\$50,000	\$10,000	\$69,367	\$44,641	\$90,000	\$15,000	\$11,982	\$10,000
2021	\$200,000	\$35,000		\$30,000	\$86,750		\$10,000	\$69,367	\$44,641	\$90,000	\$15,000	\$8,018	\$0
2022			\$8,000	\$30,000	\$86,750		\$10,000	\$69,367	\$44,641	\$80,000	\$15,000		\$0
<b>Total</b>												<b>\$ 1,361,474</b>	

Contractor Initials: DS  
TC

Date: 5/27/2021

Exhibit B-21, Amendment #8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: Public Health Advisory Council

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 15,181.00	\$ 3,020.00	\$ 18,201.00			\$ -	\$ 15,181.00	\$ 3,020.00	\$ 18,201.00
2. Employee Benefits	\$ 2,906.00	\$ 456.00	\$ 3,362.00			\$ -	\$ 2,906.00	\$ 456.00	\$ 3,362.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
Rental	\$ 305.00	\$ -	\$ 305.00			\$ -	\$ 305.00		\$ 305.00
Repair and Maintenance	\$ 360.00	\$ -	\$ 360.00			\$ -	\$ 360.00		\$ 360.00
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
Office	\$ 124.00	\$ -	\$ 124.00			\$ -	\$ 124.00		\$ 124.00
6. Travel	\$ 446.00	\$ -	\$ 446.00			\$ -	\$ 446.00		\$ 446.00
7. Occupancy	\$ 1,340.00	\$ -	\$ 1,340.00			\$ -	\$ 1,340.00		\$ 1,340.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
Telephone	\$ 975.00	\$ -	\$ 975.00			\$ -	\$ 975.00		\$ 975.00
Postage	\$ 99.00	\$ -	\$ 99.00			\$ -	\$ 99.00		\$ 99.00
Subscriptions	\$ 61.00	\$ -	\$ 61.00			\$ -	\$ 61.00		\$ 61.00
Audit and Legal	\$ 325.00	\$ -	\$ 325.00			\$ -	\$ 325.00		\$ 325.00
Insurance	\$ 360.00	\$ -	\$ 360.00			\$ -	\$ 360.00		\$ 360.00
Board Expenses	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
9. Software	\$ 73.00	\$ -	\$ 73.00			\$ -	\$ 73.00		\$ 73.00
10. Marketing/Communications	\$ 820.00	\$ -	\$ 820.00			\$ -	\$ 820.00		\$ 820.00
11. Staff Education and Training	\$ 1,745.00	\$ -	\$ 1,745.00			\$ -	\$ 1,745.00		\$ 1,745.00
12. Subcontracts/Agreements	\$ 803.00	\$ -	\$ 803.00	\$ -		\$ -	\$ 803.00		\$ 803.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
translator	\$ -	\$ -	\$ -			\$ -	\$ -		\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Meeting exp	\$ 600.00	\$ -	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00	\$ -	\$ 600.00
<b>TOTAL</b>	<b>\$ 26,524.00</b>	<b>\$ 3,476.00</b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 26,524.00</b>	<b>\$ 3,476.00</b>	<b>\$ 30,000.00</b>

Indirect As A Percent of Direct

13.1%

13.1%

Vendor Initials DS  
TC

Date 5/27/2021

Exhibit B-22, Amendment #8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: Public Health Emergency Preparedness (CDC PHEP)

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 61,104.00	\$ 8,829.00	\$ 69,933.00			\$ -	\$ 61,104.00	\$ 8,829.00	\$ 69,933.00
2. Employee Benefits	\$ 6,945.00	\$ 1,251.00	\$ 8,196.00			\$ -	\$ 6,945.00	\$ 1,251.00	\$ 8,196.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -			\$ -
Rental	\$ 480.00	\$ -	\$ 480.00			\$ -	\$ 480.00		\$ 480.00
Repair and Maintenance	\$ 598.00	\$ -	\$ 598.00			\$ -	\$ 598.00		\$ 598.00
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -			\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -			\$ -
Office	\$ 268.00	\$ -	\$ 268.00			\$ -	\$ 268.00		\$ 268.00
6. Travel	\$ 415.00	\$ -	\$ 415.00			\$ -	\$ 415.00		\$ 415.00
7. Occupancy	\$ 2,992.00	\$ -	\$ 2,992.00			\$ -	\$ 2,992.00		\$ 2,992.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
Telephone	\$ 1,075.00	\$ -	\$ 1,075.00			\$ -	\$ 1,075.00		\$ 1,075.00
Postage	\$ 202.00	\$ -	\$ 202.00			\$ -	\$ 202.00		\$ 202.00
Subscriptions	\$ 131.00	\$ -	\$ 131.00			\$ -	\$ 131.00		\$ 131.00
Audit and Legal	\$ 774.00	\$ -	\$ 774.00			\$ -	\$ 774.00		\$ 774.00
Insurance	\$ 845.00	\$ -	\$ 845.00			\$ -	\$ 845.00		\$ 845.00
Board Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
9. Software	\$ 79.00	\$ -	\$ 79.00			\$ -	\$ 79.00		\$ 79.00
10. Marketing/Communications	\$ 626.00	\$ -	\$ 626.00			\$ -	\$ 626.00		\$ 626.00
11. Staff Education and Training	\$ 79.00	\$ -	\$ 79.00			\$ -	\$ 79.00		\$ 79.00
12. Subcontracts/Agreements	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -			\$ -
translator	\$ -	\$ -	\$ -			\$ -			\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Meetings	\$ 55.00	\$ -	\$ 55.00	\$ -	\$ -	\$ -	\$ 55.00	\$ -	\$ 55.00
<b>TOTAL</b>	<b>\$ 76,670.00</b>	<b>\$ 10,080.00</b>	<b>\$ 86,750.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 76,670.00</b>	<b>\$ 10,080.00</b>	<b>\$ 86,750.00</b>

Indirect As A Percent of Direct

13.1%

13.1%

Vendor Initials TC<sup>DS</sup>

Date 5/27/2021

Exhibit B-23, Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: Public Health Emergency Preparedness - ASPR MRC

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,050.00	\$ 992.00	\$ 7,042.00			\$ -	\$ 6,050.00	\$ 992.00	\$ 7,042.00
2. Employee Benefits	\$ 1,317.00	\$ 167.00	\$ 1,484.00			\$ -	\$ 1,317.00	\$ 167.00	\$ 1,484.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00	\$ -	\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Rental	\$ 41.00	\$ -	\$ 41.00			\$ -	\$ 41.00	\$ -	\$ 41.00
Repair and Maintenance	\$ 71.00	\$ -	\$ 71.00			\$ -	\$ 71.00	\$ -	\$ 71.00
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Office	\$ 134.00	\$ -	\$ 134.00			\$ -	\$ 134.00	\$ -	\$ 134.00
6. Travel	\$ 315.00	\$ -	\$ 315.00			\$ -	\$ 315.00	\$ -	\$ 315.00
7. Occupancy	\$ 296.00	\$ -	\$ 296.00			\$ -	\$ 296.00	\$ -	\$ 296.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Telephone	\$ 163.00	\$ -	\$ 163.00			\$ -	\$ 163.00	\$ -	\$ 163.00
Postage	\$ 25.00	\$ -	\$ 25.00			\$ -	\$ 25.00	\$ -	\$ 25.00
Subscriptions	\$ 25.00	\$ -	\$ 25.00			\$ -	\$ 25.00	\$ -	\$ 25.00
Audit and Legal	\$ 108.00	\$ -	\$ 108.00			\$ -	\$ 108.00	\$ -	\$ 108.00
Insurance	\$ 96.00	\$ -	\$ 96.00			\$ -	\$ 96.00	\$ -	\$ 96.00
Board Expenses	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
9. Software	\$ 18.00	\$ -	\$ 18.00			\$ -	\$ 18.00	\$ -	\$ 18.00
10. Marketing/Communications	\$ 154.00	\$ -	\$ 154.00			\$ -	\$ 154.00	\$ -	\$ 154.00
11. Staff Education and Training	\$ 25.00	\$ -	\$ 25.00			\$ -	\$ 25.00	\$ -	\$ 25.00
12. Subcontracts/Agreements	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00	\$ -	\$ 1.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Volunteers	\$ 7,502.00	\$ -	\$ 7,502.00	\$ 7,502.00	\$ -	\$ 7,502.00			\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -
Meeting expense	\$ 1.00	\$ -	\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00	\$ -	\$ 1.00
<b>TOTAL</b>	<b>\$ 16,343.00</b>	<b>\$ 1,159.00</b>	<b>\$ 17,502.00</b>	<b>\$ 7,502.00</b>	<b>\$ -</b>	<b>\$ 7,502.00</b>	<b>\$ 8,841.00</b>	<b>\$ 1,159.00</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct

7.1%

13.1%

Vendor Initials 

Date 5/27/2021

Exhibit B-24, Amendment #8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: Continuum of Care

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 24,124.00	\$ 4,498.00	\$ 28,622.00			\$ -	\$ 24,124.00	\$ 4,498.00	\$ 28,622.00
2. Employee Benefits	\$ 5,198.00	\$ 643.00	\$ 5,841.00			\$ -	\$ 5,198.00	\$ 643.00	\$ 5,841.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -			\$ -
Rental	\$ 399.00	\$ -	\$ 399.00			\$ -	\$ 399.00		\$ 399.00
Repair and Maintenance	\$ 450.00	\$ -	\$ 450.00			\$ -	\$ 450.00		\$ 450.00
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -			\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -			\$ -
Office	\$ 503.00	\$ -	\$ 503.00			\$ -	\$ 503.00		\$ 503.00
6. Travel	\$ 1,065.00	\$ -	\$ 1,065.00			\$ -	\$ 1,065.00		\$ 1,065.00
7. Occupancy	\$ 1,660.00	\$ -	\$ 1,660.00			\$ -	\$ 1,660.00		\$ 1,660.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
Telephone	\$ 433.00	\$ -	\$ 433.00			\$ -	\$ 433.00		\$ 433.00
Postage	\$ 124.00	\$ -	\$ 124.00			\$ -	\$ 124.00		\$ 124.00
Subscriptions	\$ 176.00	\$ -	\$ 176.00			\$ -	\$ 176.00		\$ 176.00
Audit and Legal	\$ 484.00	\$ -	\$ 484.00			\$ -	\$ 484.00		\$ 484.00
Insurance	\$ 458.00	\$ -	\$ 458.00			\$ -	\$ 458.00		\$ 458.00
Board Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
9. Software	\$ 90.00	\$ -	\$ 90.00			\$ -	\$ 90.00		\$ 90.00
10. Marketing/Communications	\$ 1,342.00	\$ -	\$ 1,342.00			\$ -	\$ 1,342.00		\$ 1,342.00
11. Staff Education and Training	\$ 1,992.00	\$ -	\$ 1,992.00			\$ -	\$ 1,992.00		\$ 1,992.00
12. Subcontracts/Agreements	\$ 1.00	\$ -	\$ 1.00	\$ -		\$ -	\$ 1.00		\$ 1.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -			\$ -
translator	\$ -	\$ -	\$ -			\$ -			\$ -
indirect	\$ -	\$ -	\$ -			\$ -			\$ -
Meeting exp	\$ 1,000.00	\$ -	\$ 1,000.00	\$ -	\$ -	\$ -	\$ 1,000.00		\$ 1,000.00
<b>TOTAL</b>	<b>\$ 39,500.00</b>	<b>\$ 5,141.00</b>	<b>\$ 44,641.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 39,500.00</b>	<b>\$ 5,141.00</b>	<b>\$ 44,641.00</b>

Indirect As A Percent of Direct 13.0%

Vendor Initials DS  
TC

Date 5/27/2021

Exhibit B-25, Amendment #8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: School Based Vaccination Clinics

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,718.00	\$ 1,474.00	\$ 8,192.00			\$ -	\$ 6,718.00	\$ 1,474.00	\$ 8,192.00
2. Employee Benefits	\$ 1,238.00	\$ 254.00	\$ 1,492.00			\$ -	\$ 1,238.00	\$ 254.00	\$ 1,492.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -			\$ -
Rental	\$ 79.00	\$ -	\$ 79.00			\$ -	\$ 79.00		\$ 79.00
Repair and Maintenance	\$ 83.00	\$ -	\$ 83.00			\$ -	\$ 83.00		\$ 83.00
5. Supplies:	\$ -	\$ -	\$ -			\$ -			\$ -
Medical	\$ 537.00	\$ -	\$ 537.00			\$ -	\$ 537.00		\$ 537.00
Office	\$ 24.00	\$ -	\$ 24.00			\$ -	\$ 24.00		\$ 24.00
6. Travel	\$ 565.00	\$ -	\$ 565.00			\$ -	\$ 565.00		\$ 565.00
7. Occupancy	\$ 407.00	\$ -	\$ 407.00			\$ -	\$ 407.00		\$ 407.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
Telephone	\$ 137.00	\$ -	\$ 137.00			\$ -	\$ 137.00		\$ 137.00
Postage	\$ 29.00	\$ -	\$ 29.00			\$ -	\$ 29.00		\$ 29.00
Subscriptions	\$ 18.00	\$ -	\$ 18.00			\$ -	\$ 18.00		\$ 18.00
Audit and Legal	\$ 163.00	\$ -	\$ 163.00			\$ -	\$ 163.00		\$ 163.00
Insurance	\$ 113.00	\$ -	\$ 113.00			\$ -	\$ 113.00		\$ 113.00
Board Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
9. Software	\$ -	\$ -	\$ -			\$ -			\$ -
10. Marketing/Communications	\$ 59.00	\$ -	\$ 59.00			\$ -	\$ 59.00		\$ 59.00
11. Staff Education and Training	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
12. Subcontracts/Agreements	\$ 4,822.00	\$ -	\$ 4,822.00	\$ 1,822.00		\$ 1,822.00	\$ 3,000.00		\$ 3,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -			\$ -
Volunteer exp	\$ 100.00	\$ -	\$ 100.00			\$ -	\$ 100.00		\$ 100.00
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 15,094.00</b>	<b>\$ 1,728.00</b>	<b>\$ 16,822.00</b>	<b>\$ 1,822.00</b>	<b>\$ -</b>	<b>\$ 1,822.00</b>	<b>\$ 13,272.00</b>	<b>\$ 1,728.00</b>	<b>\$ 15,000.00</b>

Indirect As A Percent of Direct 11.4%

Vendor Initials 

Date 5/27/2021

Exhibit B-26, Amendment #8

New Hampshire Department of Health and Human Services

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: Substance Misuse Prevention

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 42,948.00	\$ 6,999.00	\$ 49,947.00			\$ -	\$ 42,948.00	\$ 6,999.00	\$ 49,947.00
2. Employee Benefits	\$ 11,957.00	\$ 1,065.00	\$ 13,022.00			\$ -	\$ 11,957.00	\$ 1,065.00	\$ 13,022.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00	\$ -	\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Rental	\$ 237.00	\$ -	\$ 237.00			\$ -	\$ 237.00	\$ -	\$ 237.00
Repair and Maintenance	\$ 257.00	\$ -	\$ 257.00			\$ -	\$ 257.00	\$ -	\$ 257.00
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Office	\$ 196.00	\$ -	\$ 196.00			\$ -	\$ 196.00	\$ -	\$ 196.00
6. Travel	\$ 727.00	\$ -	\$ 727.00			\$ -	\$ 727.00	\$ -	\$ 727.00
7. Occupancy	\$ 1,939.00	\$ -	\$ 1,939.00			\$ -	\$ 1,939.00	\$ -	\$ 1,939.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
Telephone	\$ 635.00	\$ -	\$ 635.00			\$ -	\$ 635.00	\$ -	\$ 635.00
Postage	\$ 152.00	\$ -	\$ 152.00			\$ -	\$ 152.00	\$ -	\$ 152.00
Subscriptions	\$ 74.00	\$ -	\$ 74.00			\$ -	\$ 74.00	\$ -	\$ 74.00
Audit and Legal	\$ 702.00	\$ -	\$ 702.00			\$ -	\$ 702.00	\$ -	\$ 702.00
Insurance	\$ 592.00	\$ -	\$ 592.00			\$ -	\$ 592.00	\$ -	\$ 592.00
Board Expenses	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
9. Software	\$ 47.00	\$ -	\$ 47.00			\$ -	\$ 47.00	\$ -	\$ 47.00
10. Marketing/Communications	\$ 523.00	\$ -	\$ 523.00			\$ -	\$ 523.00	\$ -	\$ 523.00
11. Staff Education and Training	\$ 215.00	\$ -	\$ 215.00			\$ -	\$ 215.00	\$ -	\$ 215.00
12. Subcontracts/Agreements	\$ 1.00	\$ -	\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00	\$ -	\$ 1.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Meeting exp	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00	\$ -	\$ 100.00
<b>TOTAL</b>	<b>\$ 61,303.00</b>	<b>\$ 8,064.00</b>	<b>\$ 69,367.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 61,303.00</b>	<b>\$ 8,064.00</b>	<b>\$ 69,367.00</b>

Indirect As A Percent of Direct 13.2%

Vendor Initials 

Date 5/27/2021

Exhibit B-27, Amendment #8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: PARTNERSHIP FOR PUBLIC HEALTH, INC. f/k/a Lakes Region Partnership for Public Health, Inc.

Budget Request for: Young Adult Strategies

Budget Period: SFY 22 (7/1/21 - 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 46,813.00	\$ 8,102.00	\$ 54,915.00			\$ -	\$ 46,813.00	\$ 8,102.00	\$ 54,915.00
2. Employee Benefits	\$ 5,681.00	\$ 1,155.00	\$ 6,836.00			\$ -	\$ 5,681.00	\$ 1,155.00	\$ 6,836.00
3. Consultants	\$ 1.00	\$ -	\$ 1.00			\$ -	\$ 1.00		\$ 1.00
4. Equipment:	\$ -	\$ -	\$ -			\$ -			\$ -
Rental	\$ 420.00	\$ -	\$ 420.00			\$ -	\$ 420.00		\$ 420.00
Repair and Maintenance	\$ 915.00	\$ -	\$ 915.00			\$ -	\$ 915.00		\$ 915.00
Purchase/Depreciation	\$ -	\$ -	\$ -			\$ -			\$ -
5. Supplies:	\$ -	\$ -	\$ -			\$ -			\$ -
Educational	\$ -	\$ -	\$ -			\$ -			\$ -
Lab	\$ -	\$ -	\$ -			\$ -			\$ -
Pharmacy	\$ -	\$ -	\$ -			\$ -			\$ -
Medical	\$ -	\$ -	\$ -			\$ -			\$ -
Office	\$ 686.00	\$ -	\$ 686.00			\$ -	\$ 686.00		\$ 686.00
6. Travel	\$ 800.00	\$ -	\$ 800.00			\$ -	\$ 800.00		\$ 800.00
7. Occupancy	\$ 3,354.00	\$ -	\$ 3,354.00			\$ -	\$ 3,354.00		\$ 3,354.00
8. Current Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
Telephone	\$ 1,241.00	\$ -	\$ 1,241.00			\$ -	\$ 1,241.00		\$ 1,241.00
Postage	\$ 251.00	\$ -	\$ 251.00			\$ -	\$ 251.00		\$ 251.00
Subscriptions	\$ 154.00	\$ -	\$ 154.00			\$ -	\$ 154.00		\$ 154.00
Audit and Legal	\$ 867.00	\$ -	\$ 867.00			\$ -	\$ 867.00		\$ 867.00
Insurance	\$ 906.00	\$ -	\$ 906.00			\$ -	\$ 906.00		\$ 906.00
Board Expenses	\$ -	\$ -	\$ -			\$ -			\$ -
9. Software	\$ 183.00	\$ -	\$ 183.00			\$ -	\$ 183.00		\$ 183.00
10. Marketing/Communications	\$ 3,278.00	\$ -	\$ 3,278.00			\$ -	\$ 3,278.00		\$ 3,278.00
11. Staff Education and Training	\$ 749.00	\$ -	\$ 749.00			\$ -	\$ 749.00		\$ 749.00
12. Subcontracts/Agreements	\$ 3,000.00	\$ -	\$ 3,000.00	\$ -		\$ -	\$ 3,000.00		\$ 3,000.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -			\$ -			\$ -
translator	\$ -	\$ -	\$ -			\$ -			\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			\$ -
Meeting exp	\$ 1,444.00	\$ -	\$ 1,444.00	\$ -	\$ -	\$ -	\$ 1,444.00		\$ 1,444.00
<b>TOTAL</b>	<b>\$ 70,743.00</b>	<b>\$ 9,257.00</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 70,743.00</b>	<b>\$ 9,257.00</b>	<b>\$ 80,000.00</b>

Indirect As A Percent of Direct 13.1%

Vendor Initials DS TC

Date 5/27/2021

# State of New Hampshire

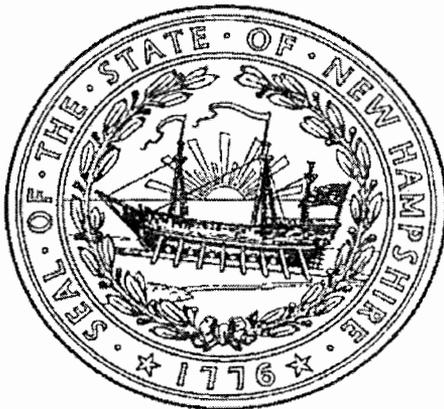
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that PARTNERSHIP FOR PUBLIC HEALTH, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on April 21, 2005. 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: **534847**

Certificate Number: **0005373156**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 26th day of May A.D. 2021.

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

William M. Gardner  
Secretary of State

**CERTIFICATE OF AUTHORITY**

I,      Lisa Dupuis, hereby certify that:  
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of      Partnership For Public Health, Inc..  
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on    October 22, 2020, at which a quorum of the Directors/shareholders were present and voting.  
(Date)

**VOTED:** That    Tamera Carmichael, Executive Director    (may list more than one person)  
(Name and Title of Contract Signatory)

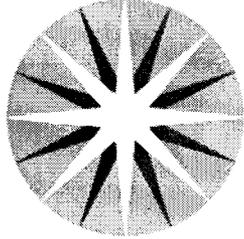
is duly authorized on behalf of Partnership for Public Health, Inc. to enter into contracts or agreements with the State of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated:    5/11/2021     

  
\_\_\_\_\_  
Signature of Elected Officer  
Name: Lisa Dupuis  
Title: Vice President Board of Directors





# Partnership for Public Health

## Mission Statement

*To improve the health and well being of the region  
through inter-organizational collaboration and  
community and public health improvement  
activities*

**Partnership for Public Health, Inc.  
Formerly known as Lakes Region Partnership for  
Public Health, Inc.  
Financial Statements  
June 30, 2020 and 2019  
and  
Independent Auditor's Report**

**PARTNERSHIP FOR PUBLIC HEALTH, INC.  
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH  
FINANCIAL STATEMENTS  
June 30, 2020 and 2019**

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**CERTIFIED PUBLIC ACCOUNTANTS**  
608 Chestnut Street • Manchester, New Hampshire 03104  
(603) 622-7070 • Fax: (603) 622-1452 • www.vachonclukay.com

## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of  
Partnership for Public Health, Inc.  
Formerly known as Lakes Region Partnership for Public Health, Inc.

### **Report on the Financial Statements**

We have audited the accompanying financial statements of Partnership for Public Health, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2020 and 2019, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these 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 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 financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the 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 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 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 financial statements referred to above present fairly, in all material respects, the financial position of Partnership for Public Health, Inc. as of June 30, 2020 and 2019, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

*Vashon Clukay & Company PC*

Manchester, New Hampshire  
December 22, 2020

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statements of Financial Position**  
June 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<b>ASSETS</b>		
CURRENT ASSETS:		
Cash	\$ 304,433	\$ 103,502
Cash, restricted	1,127,389	3,143,898
Contracts receivable	247,731	210,239
Prepaid expenses	15,624	11,168
TOTAL CURRENT ASSETS	<u>1,695,177</u>	<u>3,468,807</u>
PROPERTY AND EQUIPMENT:		
Leasehold improvements	4,561	4,561
Furniture and equipment	14,510	14,510
	<u>19,071</u>	<u>19,071</u>
Less accumulated depreciation	(18,103)	(17,741)
PROPERTY AND EQUIPMENT, NET	<u>968</u>	<u>1,330</u>
OTHER NONCURRENT ASSETS:		
Investments	105,223	102,528
Investments, restricted	180,584	305,362
Investment in LLC	968	1,334
Deposit	2,981	2,981
TOTAL OTHER NONCURRENT ASSETS	<u>289,756</u>	<u>412,205</u>
TOTAL ASSETS	<u>\$ 1,985,901</u>	<u>\$ 3,882,342</u>
<b>LIABILITIES AND NET ASSETS</b>		
CURRENT LIABILITIES:		
Accounts payable	\$ 273,293	\$ 360,403
Accrued payroll	47,122	41,533
Accrued compensated absences	34,340	30,763
Accrued other expenses	35,368	20,140
Refundable advances from contractors	811,569	2,981,016
Fiduciary funds	2,120	3,253
Current portion of SBA note payable	95,085	-
TOTAL CURRENT LIABILITIES	<u>1,298,897</u>	<u>3,437,108</u>
NONCURRENT LIABILITIES:		
SBA note payable, less current portion	121,115	-
TOTAL NONCURRENT LIABILITIES	<u>121,115</u>	<u>-</u>
TOTAL LIABILITIES	<u>1,420,012</u>	<u>3,437,108</u>
NET ASSETS:		
Without donor restrictions:		
Undesignated	368,222	351,356
With donor restrictions:		
Purpose restrictions	197,667	93,878
TOTAL NET ASSETS	<u>565,889</u>	<u>445,234</u>
TOTAL LIABILITIES AND NET ASSETS	<u>\$ 1,985,901</u>	<u>\$ 3,882,342</u>

*See notes to financial statements*

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statements of Activities**  
For the Years Ended June 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<b>CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS</b>		
<b>SUPPORT AND REVENUE:</b>		
Contributions	\$ 11,461	\$ 10,682
In-kind support	50,345	53,195
Federal funds	2,140,533	1,674,127
State funds	1,859,836	1,267,823
Private grants and awards	42,086	32,963
Special events	1,871	2,494
Agent fees	143,025	142,698
Miscellaneous income	856	1,507
Interest income	34,876	40,388
Net assets released from donor restrictions	<u>88,970</u>	<u>91,369</u>
<b>TOTAL SUPPORT AND REVENUE WITHOUT DONOR RESTRICTIONS</b>	<u><b>4,373,859</b></u>	<u><b>3,317,246</b></u>
<b>EXPENSES:</b>		
Program services	4,108,596	3,062,731
Supporting services:		
Management and general	239,670	226,062
Fundraising and development	<u>8,727</u>	<u>3,962</u>
Total supporting services	<u>248,397</u>	<u>230,024</u>
<b>TOTAL EXPENSES</b>	<u><b>4,356,993</b></u>	<u><b>3,292,755</b></u>
<b>INCREASE IN NET ASSETS WITHOUT DONOR RESTRICTIONS</b>	<u><b>16,866</b></u>	<u><b>24,491</b></u>
<b>CHANGES IN NET ASSETS WITH DONOR RESTRICTIONS</b>		
Contributions	1,355	2,945
Federal funds	110,904	
Private grants and awards	80,500	82,202
Net assets released from donor restrictions	<u>(88,970)</u>	<u>(91,369)</u>
<b>INCREASE (DECREASE) IN NET ASSETS WITH DONOR RESTRICTIONS</b>	<u><b>103,789</b></u>	<u><b>(6,222)</b></u>
<b>CHANGE IN NET ASSETS</b>	<b>120,655</b>	<b>18,269</b>
<b>NET ASSETS, JULY 1</b>	<u><b>445,234</b></u>	<u><b>426,965</b></u>
<b>NET ASSETS, JUNE 30</b>	<u><b>\$ 565,889</b></u>	<u><b>\$ 445,234</b></u>

See notes to financial statements

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statement of Functional Expenses**  
**For the Year Ended June 30, 2020**

	Program Services	Supporting Services Management and General	Fundraising	Total Supporting Services	Total Expenses
<b>SALARIES AND RELATED EXPENSES:</b>					
Salaries	\$ 758,527	\$ 194,131	\$ 8,171	\$ 202,302	\$ 960,829
Employee benefits	84,197	8,754	-	8,754	92,951
Payroll taxes	56,681	13,590	548	14,138	70,819
	<u>899,405</u>	<u>216,475</u>	<u>8,719</u>	<u>225,194</u>	<u>1,124,599</u>
<b>OTHER EXPENSES:</b>					
Contract services	59,894	11,925	-	11,925	71,819
Contract and grant subcontractors	2,905,886	-	-	-	2,905,886
Discretionary funds	3,542	-	-	-	3,542
Insurance	8,227	3,680	-	3,680	11,907
Occupancy	58,512	2,425	-	2,425	60,937
Operations	55,347	1,119	-	1,119	56,466
Supplies	46,237	450	-	450	46,687
Travel and meetings	71,361	1,776	-	1,776	73,137
Miscellaneous	185	1,458	8	1,466	1,651
Depreciation	-	362	-	362	362
Total	<u>\$ 4,108,596</u>	<u>\$ 239,670</u>	<u>\$ 8,727</u>	<u>\$ 248,397</u>	<u>\$ 4,356,993</u>

*See notes to financial statements*

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statement of Functional Expenses**  
For the Year Ended June 30, 2019

	<u>Supporting Services</u>			Total Supporting Services	Total Expenses
	Program Services	Management and General	Fundraising		
<b>SALARIES AND RELATED EXPENSES:</b>					
Salaries	\$ 821,401	\$ 176,855	\$ 3,282	\$ 180,137	\$ 1,001,538
Employee benefits	92,610	9,219	-	9,219	101,829
Payroll taxes	61,095	13,328	210	13,538	74,633
	<u>975,106</u>	<u>199,402</u>	<u>3,492</u>	<u>202,894</u>	<u>1,178,000</u>
<b>OTHER EXPENSES:</b>					
Contract services	63,790	14,107	-	14,107	77,897
Contract and grant subcontractors	1,767,075	-	-	-	1,767,075
Discretionary funds	6,000	-	-	-	6,000
Insurance	7,174	4,977	-	4,977	12,151
Fundraising	-	-	50	50	50
Occupancy	59,515	14	-	14	59,529
Operations	66,012	2,552	360	2,912	68,924
Supplies	31,908	608	-	608	32,516
Travel and meetings	84,728	2,240	-	2,240	86,968
Miscellaneous	1,423	1,800	60	1,860	3,283
Depreciation	-	362	-	362	362
Total	<u>\$ 3,062,731</u>	<u>\$ 226,062</u>	<u>\$ 3,962</u>	<u>\$ 230,024</u>	<u>\$ 3,292,755</u>

*See notes to financial statements*

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**Formerly known as Lakes Region Partnership for Public Health, Inc.**  
**Statements of Cash Flows**  
For the Years Ended June 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Change in net assets	\$ 120,655	\$ 18,269
Adjustments to Reconcile Increase in Net Assets to to Net Cash Used by Operating Activities:		
Depreciation	362	362
Change in assets and liabilities:		
Contracts receivable	(37,492)	(101,175)
Prepaid expenses	(4,456)	8,272
Deposit	-	255
Accounts payable	(87,110)	81,582
Accrued liabilities	24,394	(4,855)
Refundable advances from contractors	(2,169,447)	(292,813)
Fiduciary passthrough	(1,133)	(6,589)
Net Cash (Used) by Operating Activities	<u>(2,154,227)</u>	<u>(296,692)</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Proceeds from investments	129,310	-
Purchase of investments	(6,861)	(7,657)
Net Cash Provided (Used) by Investing Activities	<u>122,449</u>	<u>(7,657)</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>		
Proceeds from note payable	<u>216,200</u>	-
Net Cash Provided for Financing Activities	<u>216,200</u>	<u>-</u>
Net Decrease in Cash	(1,815,578)	(304,349)
Cash, beginning of year	<u>3,247,400</u>	<u>3,551,749</u>
Cash, ending of year	<u>\$ 1,431,822</u>	<u>\$ 3,247,400</u>
<b>Supplemental Disclosures:</b>		
In-kind donations received	\$ 50,345	\$ 53,195
In-kind expenses	(50,345)	(53,195)
	<u>\$ -</u>	<u>\$ -</u>

See notes to financial statements

**PARTNERSHIP FOR PUBLIC HEALTH, INC.  
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.  
NOTES TO FINANCIAL STATEMENTS  
For the Years Ended June 30, 2020 and 2019**

**NOTE 1—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

*Organization and Purpose*

Partnership for Public Health, Inc., formerly known as Lakes Region Partnership for Public Health, Inc., (the Entity) was organized on May 21, 2005 to improve the health and well-being of the Lakes Region through inter-organizational collaboration and community and public health improvement activities.

*Accounting Policies*

The accounting policies of the Entity conform to accounting principles generally accepted in the United States of America as applicable to nonprofit entities, except as indicated hereafter. The following is a summary of significant accounting policies.

*Basis of Presentation*

The financial statements have been prepared in accordance with the reporting pronouncements pertaining to Not-for-Profit Entities included within the FASB Accounting Standards Codification. The Entity is required to report information regarding its financial position and activities according to the following net asset classifications:

Net Assets Without Donor Restrictions – Net assets available for use in general operations and not subject to donor or certain grantor restrictions. These net assets may be used at the discretion of management and the Entity’s Board of Directors.

Net Assets With Donor Restrictions – Net assets subject to donor or certain grantor imposed restrictions. Some donor imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

*Recognition of Donor Restrictions*

Contributions are recognized when the donor makes a promise to give to the Entity that is, in substance, unconditional. The Entity reports contributions restricted by donors as increases in net assets without donor restrictions if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized. All other donor restricted contributions are reported as increases in net assets with donor restrictions, depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions.

*Basis of Accounting*

The financial statements have been prepared on the accrual basis of accounting.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**

For the Years Ended June 30, 2020 and 2019

Revenues from program services are recorded when earned. Other miscellaneous revenues are recorded upon receipt.

***Cash and Cash Equivalents***

Cash and cash equivalents include cash on hand and other cash accounts with a maturity of 90 days or less. For purposes of the Statements of Cash Flows, cash and cash equivalents consist of the following:

	<u>2020</u>	<u>2019</u>
As presented on the Statements of Financial Position -		
Cash	\$ 304,433	\$ 103,502
Cash, restricted	<u>1,127,389</u>	<u>3,143,898</u>
	<u>\$ 1,431,822</u>	<u>\$ 3,247,400</u>

***Restricted Cash and Investments***

Restricted cash and investments consist of advanced funding received from the State of New Hampshire for the Integrated Delivery Network (IDN), donor restricted contributions and fiduciary funds.

***Investments***

Investments, which consist principally of certificates of deposit with terms of one to three years, are carried at their approximate market value at June 30, 2020.

***Property and Equipment***

Property and equipment are stated at cost. Donated property and equipment is recorded at fair value determined as of the date of the donation. The Entity's policy is to capitalize expenditures for equipment and major improvements and to charge to operations currently for expenditures which do not extend the lives of related assets in the period incurred. Depreciation is computed using the straight-line method at rates intended to amortize the cost of related assets over their estimated useful lives as follows:

	<u>Years</u>
Leasehold improvements	10-15
Furniture and equipment	5-15

Depreciation expense was \$362 for the years ended June 30, 2020 and 2019, respectively.

***Compensated Absences***

Employees of the Entity working full-time, and part-time employees working at least 20 hours per week, are entitled to paid time off (PTO). PTO is earned from the first day of work. A maximum of 160 hours can be earned based on years of service while 80 hours can be carried over and accumulated to the next year. Accumulated PTO is payable upon termination of employment with proper notice. The Entity accrues accumulated PTO wages accordingly. During fiscal year 2020, due to the pandemic, employees were allowed to carry over an additional 40 hours of accrued PTO.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.  
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)**

For the Years Ended June 30, 2020 and 2019

*Donated Services, Materials and Facilities*

The Entity receives significant volunteer time and efforts. The value of these volunteer efforts, while critical to the success of its mission, is not reflected in the financial statements since it does not meet the criteria necessary for recognition according to generally accepted accounting principles. Donated facilities, supplies, equipment and staff support are recorded as "In-kind" contributions if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Entity. Donated goods and professional services are recorded as both revenues and expenses at estimated fair value, see Note 10 for additional information.

*Functional Allocation of Expenses*

The costs of program and supporting services activities have been summarized on a functional basis in the statements of activities. The statement of functional expenses presents the natural classification detail of expenses by function.

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Accordingly, certain indirect costs have been allocated among the programs and supporting services benefited, based primarily on percentage allocations calculated based on hours worked (time and effort). The expenses that are allocated include salaries, payroll taxes, employee benefits, office supplies, fundraising, operations, and insurance, which are all allocated on the basis of time and effort, as noted previously. In addition, there are some indirect costs which are allocated based on square footage or as a percentage of total expenses.

*Bad Debts*

The Entity uses the reserve method for accounting for bad debts. No allowance has been recorded as of June 30, 2020 and 2019, because management of the Entity believes that all outstanding receivables are fully collectible.

*Estimates*

The preparation of 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 could differ from those estimates.

*Income Taxes*

The Entity is exempt from Federal income taxes under Section 501(c)(3) of the Internal Revenue Code and is also exempt from State of New Hampshire income taxes and, therefore, has made no provision for Federal or State income taxes. In addition, the Entity has been determined by the Internal Revenue Service not to be a "Private Foundation" within the meaning of Section 509(a) of the Code. The Entity is annually required to file a Return of Organization Exempt from Income Tax (Form 990) with the IRS. FASB Accounting Standards Codification Topic 740 entitled *Accounting for Income Taxes* requires the Entity to report uncertain tax positions for financial reporting purposes. The Entity had no uncertain tax positions as of June 30, 2020 and, accordingly does not have any unrecognized tax benefits that need to be recognized or disclosed in the financial statements.

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
For the Years Ended June 30, 2020 and 2019

*Fair Value of Financial Instruments*

Cash and equivalents, investments, contracts receivable, accounts payable and accrued expenses are carried in the financial statements at amounts which approximate fair value due to the inherently short-term nature of the transactions. The fair values determined for financial instruments are estimates, which for certain accounts may differ significantly from the amounts that could be realized upon immediate liquidation.

*Change in Accounting Principle*

The Entity has adopted FASB Accounting Standards Update (ASU) No. 2018-08 *Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*, which is meant to assist entities in evaluating whether transactions should be accounted for as contributions (nonreciprocal transactions), or as exchange (reciprocal) transactions, and determining whether a contribution is conditional. Adoption of ASU 2018-08 was required for financial statements issued for fiscal years beginning after December 15, 2018, accordingly the Entity has adopted the new guidance as of July 1, 2019. The amendments in ASU 2018-08 are applicable only to the portions of revenue or expense not previously recognized, and therefore have no impact on prior period results or on opening balances of net assets.

**NOTE 2—LIQUIDITY AND AVAILABILITY**

The Entity regularly monitors the availability of resources required to meet its operating needs and other contractual commitments. Cash reserves in excess of daily operational needs are invested in certificates of deposit to maximize investment return while maintaining safety and liquidity.

The following table reflects the Entity's financial assets as of June 30, 2020 and 2019, reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date because of donor restrictions.

Financial assets available for general expenditure, reduced by donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

	<u>2020</u>	<u>2019</u>
Cash	\$ 1,431,822	\$ 3,247,400
Investments	285,807	407,980
Contracts receivable	<u>247,731</u>	<u>210,239</u>
Total Financial Assets	1,965,360	3,865,619
Less:		
Obligations from contractor restricted funds	(296,618)	(371,033)
Net assets with donor restrictions	(197,667)	(93,878)
Refundable advances from contractors	(811,569)	(2,981,016)
Fiduciary funds	<u>(2,120)</u>	<u>(3,253)</u>
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year	<u>\$ 657,386</u>	<u>\$ 416,439</u>

**PARTNERSHIP FOR PUBLIC HEALTH, INC.  
FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)**

For the Years Ended June 30, 2020 and 2019

In the event of an unanticipated liquidity need, the Entity also could draw upon \$125,000 of its available line of credit, as further discussed in Note 6.

**NOTE 3—CONCENTRATION OF CREDIT RISK**

The Entity maintains bank deposits at local financial institutions located in New Hampshire. The Entity's demand deposits are insured by the Federal Deposit Insurance Corporation (FDIC) up to a total of \$250,000. As of June 30, 2020 and 2019, all of the Entity's bank deposits were fully insured.

**NOTE 4—INVESTMENT IN LLC**

In January 2016, the Entity became a member of a newly established limited liability corporation, Community Health Services Network, LLC ("CHSN"), to support the enhancement of behavioral health services integration in the region. The Entity will provide financial and administrative services to CHSN.

**NOTE 5—REFUNDABLE ADVANCES FROM CONTRACTORS**

Refundable advances from contractors of \$811,569 and \$2,981,016 as of June 30, 2020 and 2019, respectively, represents unearned grant revenue on contracts from various funding agencies.

**NOTE 6—LINE OF CREDIT**

The Entity has a \$125,000 line of credit with Bank of New Hampshire. The interest rate for the credit line was 5.25% at June 30, 2020, and 7.50% at June 30, 2019. The interest rate is based on the Wall Street Journal Prime Rate as published in the Wall Street Journal. At June 30, 2020 and 2019, the balance on the line of credit was \$0.

**NOTE 7—SBA NOTE PAYABLE**

At June 30, 2020 and 2019, the SBA note payable consists of the following:

	<u>2020</u>	<u>2019</u>
\$216,200 unsecured note payable, payable in 18 monthly installments of \$12,167 including interest at 1.00% beginning November 24, 2020 through April 24, 2022. The balance of the note is payable in full with all accrued interest on May 28, 2022.	<u>\$ 216,200</u>	<u>\$ -</u>

The above SBA note payable is based upon an executed loan agreement that allows for principal forgiveness in whole or part upon satisfaction of certain criteria. The Entity believes all criteria will be successfully met and does not anticipate repayment of principal at this time. Following are the maturities of the SBA note payable as of June 30, 2020:

Year Ending	Amount
<u>June 30,</u>	
2021	\$ 95,085
2022	<u>121,115</u>
	<u>\$ 216,200</u>

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**

For the Years Ended June 30, 2020 and 2019

The SBA note payable was obtained under the Payroll Protection Program. As noted above, the Entity may apply for principal forgiveness in whole or in part by the Small Business Administration under the CARES Act once certain eligibility criteria have been met. Any note balance remaining following forgiveness will be due in minimum monthly payments under the repayment terms detailed above.

**NOTE 8—NET ASSETS WITH DONOR RESTRICTIONS**

Net assets with donor restrictions consist of the following donor restricted funding at June 30, 2020 and 2019:

	<u>2020</u>	<u>2019</u>
Family Caregivers Network	\$ 294	\$ 2,866
ServiceLink	7,885	7,749
Volunteer CERT	1,477	1,477
N4A		1,006
CERT	20,622	18,968
NH Charitable Foundation	39,304	12,185
Tufts Momentum		6,033
DSRIP Incentive	18,114	8,486
Endowment for Health		12,000
CHSN - Public Health Officer	88,937	
Other	21,034	23,108
Total Net Assets with Donor Restrictions	<u>\$ 197,667</u>	<u>\$ 93,878</u>

**NOTE 9—CONCENTRATION OF REVENUE RISK**

The Entity's primary source of revenues is fees and grants received from the State of New Hampshire and directly from the federal government. During the years ended June 30, 2020 and 2019, the Entity recognized revenue of \$4,000,369 (89.3%) and \$2,941,950 (88.7%), respectively, from fees and grants from governmental agencies. Revenue is usually recognized as earned under the terms of the grant contracts and is received on a cost reimbursement basis. However, in the years ended June 30, 2020 and June 30, 2019, the Entity received \$1.1 million and \$1.8 million, respectively, in performance payments on a five-year, \$12.8 million governmental contract waiver to enhance behavioral health integration in the region. This revenue is anticipated to be recognized over a five-year period through fiscal year 2021, dependent on the receipt of State matching funds, achievement of performance metrics and other criteria. Other support originates from other program services, contributions, in-kind donations, and other income.

**NOTE 10—LEASE COMMITMENTS**

The Entity entered into a lease for office space located in Tamworth, NH with monthly lease payments of \$1,008 through December 2019. The lease was renewed through June 30, 2021 with payments of \$1,068 through June 2021. Lease expense for the years ended June 30, 2020 and June 30, 2019 were \$12,336 and \$12,483, respectively.

The Entity also has two leases for office spaces in Laconia, NH. The first lease has monthly payments of \$2,147 through August 31, 2019. An updated agreement was entered into with required payments of \$2,185 through August 31, 2020. The second lease for additional office space was entered into on

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**FORMERLY KNOWN AS LAKES REGION PARTNERSHIP FOR PUBLIC HEALTH, INC.**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**

For the Years Ended June 30, 2020 and 2019

June 1, 2018. Under the terms of the agreement, monthly payments will be \$780 per month through May 2019. The updated agreement effective June 1, 2019 reflects payments of \$795 through May 2020 and was extended at the same terms through May 2021. Lease expense for the years ended June 30, 2020 and June 30, 2019 for these two leases was \$35,765 and \$35,013, respectively.

The following is a schedule, by years, of the future minimum payments for operating leases:

Year Ended <u>June 30,</u>	Annual <u>Lease Commitments</u>
2021	\$ 43,597
2022	3,532
	<u>\$ 47,129</u>

**NOTE 11—DONATED SERVICES, MATERIALS AND FACILITIES**

The Entity receives various donated services, materials and facilities. For the years ended June 30, 2020 and 2019, there has been \$50,345 and \$53,195, respectively, of in-kind donations recognized as revenue. The following amounts of these donations have been included as functional expenses in these financial statements as follows:

	<u>2020</u>	<u>2019</u>
Supplies	\$ 1,983	\$ 2,241
Contract services	33,460	34,132
Occupancy	-	600
Travel and meetings	1,500	3,450
Operations	10,950	10,950
Contract and grant subcontractors	2,452	1,822
	<u>\$ 50,345</u>	<u>\$ 53,195</u>

**NOTE 12—CONTINGENCIES**

The Entity participates in a number of federally assisted grant programs. These programs are subject to financial and compliance audits by the grantors or their representatives. The amounts, if any, of additional expenses which may be disallowed by the granting agency cannot be determined at this time, although the Entity expects such amounts, if any, to be immaterial.

**NOTE 13—SUBSEQUENT EVENTS**

The Entity entered into a copier lease in November 2020 for 60 months with monthly payments of \$495, including interest.

Subsequent events have been evaluated through December 22, 2020, which is the date the financial statements were available to be issued.

## Partnership for Public Health, Inc.

Board Matrix December 2020	Profession	City/Town-Live- work
1. Sandi Moore- Beinoras	Psychiatric Nurse -Private Practice	Gilford
2 Rich Crocker	Retired CEO, Lakes Region Community Services	Meredith
3. Trish Stafford, Pres	Town Manager - Sanbornton	Gilford - Sanbornton
4 Maureen MacDonald	DHHS Public Health Nurse	Belmont
5. Susanne Chisholm, Sec	Attorney, Partner	Sanbornton
6 Lisa Dupuis, VP	CEO, Central NH VNA and Hospice	Gilmanton
7. Brian Lamontagne, Treas.	FSB Branch Manager, Gilford	Meredith
8. Sarah Stanley	NH Veteran's Home, Marketing Specialist	Franklin
9. Lisa Garcia	Registered Dietitian - business owner	Meredith (W)/Laconia (L)
10. Michelle Lennon	CRSW, Executive Director - Greater Tilton Family Resource Center	Tilton
11. Sandra VanGundy	BS, EdD, RN, CPHQ; LRGH Director Quality and Population Health	
12. Margaret Franckhauser	MS, MPH, RN; JSI Director of Aging Services	New Hampton

# Tamera S. Carmichael

## SUMMARY

A Proven program administrator with 29 years of experience developing effective social support programs. Secured over \$1.4 million in program funding to rectify the social detriments of health for underserved families and individuals. Served on over 15 boards and coalitions to establish inter-organizational partnerships and foster community collaboration. Supervised 5 diverse programs with 25 team members to create and implement holistic public policies.

## EDUCATION

**University of South Florida** Tampa, FL  
*Bachelor of Arts in Sociology* 1988

**Saint Petersburg College** Clearwater, FL  
*Associate of Arts Degree* 1986

## PROFESSIONAL EXPERIENCE

**State of Florida Department of Health** Gainesville, FL  
*Program Development Administrator* 2008 – Present

- ☞ Responsible for development and management of 5 public health programs whose budgets exceed \$2 million
- ☞ Establish and monitor contracts for North Central Florida Health Department Consortium
- ☞ Effective management and development of 25 diverse employees, interns, and volunteers
- ☞ Over 8 years member of CHIP/CHA Steering Committee and Performance Management Council

**Bay Area Bail Bonds & Investigations, Inc.** Clearwater, FL  
*Owner/Operator* 2001 – 2008

- ☞ Qualified and wrote more than \$2 million monthly in commercial bail indemnities
- ☞ Managed 9 employees of diverse backgrounds as well as payroll, accounts receivable, and accounts payable
- ☞ Served as Secretary of the Pinellas County Bail Bond Association
- ☞ Used investigation techniques and critical analytical skills to locate and retrieve delinquent sureties

**Mease Manor Inc.** Dunedin, FL  
*Social Services Director* 1998 – 2001

- ☞ Monitored compliance and documentation per State and Federal Regulations in a long-term care facility
- ☞ Established interdepartmental plans of care for residents and supervised multiple employees of diverse backgrounds and responsibilities
- ☞ Inaugural winner of the Florida Healthcare Association's Social Service Worker of the Year award
- ☞ Established family/caregiver support group
- ☞ Collaborated with community services to provide quality care and ensure psychosocial well-being of residents and responsible parties

**Highland Pines Nursing Manor** Clearwater, FL  
*Social Services Director* 1995 – 1998

- ☞ Monitored compliance and documentation per State and Federal Regulations in a long-term care facility
- ☞ Established interdepartmental plans of care for residents and supervised multiple employees of diverse backgrounds and responsibilities
- ☞ Coordinated quality care and psychosocial well-being for residents and responsible parties

**Suncoast Hospital**

*Patient Service Coordinator I*

Largo, FL  
1993 – 1995

- ☞ Monitored compliance and documentation per State and Federal Regulations in a skilled nursing and acute care facilities
- ☞ Provided individualized discharge planning and interdepartmental coordination for patients
- ☞ On-call rotation as Patient Service Coordinator for all hospital departments (surgery, Maternity, ICU, etc.)

**Family Resources, Inc.**

*Youth Care Worker III*

St. Petersburg, FL  
1990 – 1993

- ☞ Care and Supervision of children 9-18 years old in a crisis/runaway shelter, phone crisis counsel
- ☞ Supervised staff and volunteers, recruited and trained volunteers, marketing and fund raising
- ☞ Interfaced with law enforcement, child protective services, and victims' advocates
- ☞ Supervised visits with parents and children
- ☞ Completed necessary documentation for a non-profit organization per guidelines

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**LICENSURE AND CERTIFICATIONS**

State of Florida Notary Public  
Florida Certified Contract Manager  
State Certified Contract Administrator

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**SKILLS**

**Soft:** Program Development, Employee Recruitment and Empowerment, Community Collaboration, Effective Communication, Public Speaking, Strategic Planning, and Quality Improvement

**Hard:** Microsoft Office Suite, Proprietary Software, Database Management, Financial Management, Regulatory Compliance, Contract Administration, and Grant Writing

## **Shelley M. Carita, CFRE**

*Highly motivated leader with over 20 years successful leadership experience in individual and corporate fundraising, marketing, corporate, foundation and federal grant writing, program development, volunteer recruitment, strategic planning and organizational development.*

### **Professional Experience**

#### **EXECUTIVE DIRECTOR**

**Partnership for Public Health, Laconia, NH**

**Jan 2017 -- Present**

Organization Leader for a regional public health agency serving New Hampshire's Lakes Region. Responsible for resource development, grants/contracts management, program development and implementation, strategic planning and community relations. Provides staff supervision and all human resource activities.

#### **VICE PRESIDENT FOR DEVELOPMENT**

**New Hampshire Association for the Blind Concord, NH**

**June 2006 – Jan 2017**

Fundraising and marketing leader for a statewide organization serving the blind and visually impaired. Develops and manages a comprehensive development program raising over \$1.2 million dollars annually. Works closely with Board of Directors and Regional Advisory Committees to organize fundraising and awareness events across the state. Identifies opportunities for foundation and corporate support. Cultivates and stewards major gift and planned giving prospects. Supervises professional fundraising and marketing staff.

#### ***Notable Accomplishments:***

- Created state-wide marketing and public education plan that provides broad outreach to service clubs, retirement communities, eye care professionals, the media, and the community at large.
- Created a sustainable revenue source for Agency by developing project introducing occupational therapy as a sustainable revenue source.
- Secured foundation grant funding of over \$500,000 annually including two awards in excess of \$100,000.
- Identified key major/planned giving donor prospects and initiated a successful donor cultivation strategy resulting in the receipt of significant gifts and gift expectancies.
- Recruited and motivated volunteers across the state to establish regional advisory committees in Manchester, Portsmouth, Concord and Lakes Region. Committees raise money in their respective regions through "Dinners in the Dark" and other third party fundraising events.

#### **EXECUTIVE DIRECTOR**

**DEVELOPMENT AND MARKETING DIRECTOR**

**2001-2006**

**American Red Cross**

**Laconia and Concord, New Hampshire**

Developed and managed a comprehensive fund development and marketing program for two merging Red Cross chapters. Coordinated all fund development programs including planned giving, direct mail, major gifts, special events, grant writing and marketing. Developed and monitored agency budget. Supervised staff and coordinated volunteers for disaster response as well as public relations and special event assignments.

***Notable Accomplishments:***

- Promoted to Executive Director from Fund Development Director
- Decreased operating budget while expanding service delivery level.
- Doubled municipal revenue allocations by educating communities about Red Cross services.

**Summary of Prior Non-Profit Management Experience**

**Case Management Supervisor**, (1998-2000) Lakes Region Community Services Council, Laconia, NH - Provided training and supervision to case managers and family home providers serving adults with developmental disabilities. Worked closely with public guardians to ensure services were carried out according to ISP. Negotiated contracts with vendors.

**Director of Social Services**, (1996-1998) Dover Housing Authority, Dover, NH  
Developed and implemented all social service programs for seniors and families living in Dover's public housing community. Supervised program staff and volunteers. Negotiated contracts with service agencies. Raised over 1 million dollars in federal funding. Worked collaboratively with agencies throughout Strafford County.

**Manager of Housing Services**, (1993-1996) Strafford Guidance Center, Dover, NH  
Established intensive supported housing programs for adults with severe mental illness. Worked closely with doctors and treatment teams to ensure smooth transition from state hospital to community based model. Supervised department with over 30 direct service providers. Secured funding through federal grants and state Medicaid program. Served as HUD's administrator of federal homeless housing funds for Strafford County.

**Director of Family Services**, (1991-1993) Manchester Housing and Redevelopment Authority, Manchester, NH – Developed and managed all family empowerment and drug prevention programs in Manchester's 3 family public housing communities. Created State's first small business training program for public housing residents. Secured federal grant funding for all programs including a model after-school program.

**Education**

**Master of Business Administration (MBA) - 1996**

Southern New Hampshire University, Graduate School of Business Manchester, NH

**M.S. Community Economic Development - 1993**

Southern New Hampshire University, Graduate School of Business, Manchester, NH

**B.A. Marketing - 1984**

New Hampshire College, Manchester, NH

**Volunteer Activities/ Memberships**

- Certified Fundraising Executive -CFRE
- Reviewer, National Accreditation Council for Agencies Serving People with Blindness or Visual Impairment (NAC) - 2009 to present
- American Red Cross – Trainer - Lakes Region Disaster Action Team, 2006 to 2009
- Board of Directors - Lakes Region Partnership for Public Health 2005-2006
- Past President- Gilford Rotary Club, Paul Harris Fellow
- Past Officer, Horseshoe Pond Toastmasters International, Concord, NH
- PGNNE –Planned Giving Council of Northern New England
- Upper Valley Planned Giving Council

## Marie L. Tule, CPA, MSA

### Educational Experience

CPA –continuing professional education – 40 hours annually

Bentley University – MS in Accountancy

University of Vermont – BA degree

### Work Experience

**Lakes Region Partnership for Public Health, Laconia, NH**      2013 – Current  
Finance Director

- Prepare and analyze monthly financial statements
- Develop budgets and forecasts, and manage cash flow
- Responsible for contract billing and reporting
- Responsible for annual financial statement and compliance audits
- Supervise accounting staff.

**Melanson Heath & Company, PC, Nashua, NH**      1994 – 2013  
Manager

- Planned, supervised, and prepared audited GAAP financial statements and compliance reports for nonprofit and commercial clients.
- Performed financial statement and data analytics, reconciled general ledger accounts, prepared audit schedules and adjusting entries.
- Documented accounting systems, evaluated client internal controls, and prepared management letters of recommendations.
- Proficient in Microsoft Excel, Word, PowerPoint, QuickBooks, and Fixed Asset software.
- Conducted presentations to Boards and audit committees of financial statements and compliance audit results.

**Price Waterhouse Coopers, LLP, Manchester, NH**      1989 – 1994  
Senior Accountant

- Planned, supervised, and performed audits, reviews, and compilations of financial statements.
- Clients included manufacturing, financial, and higher educational institutions.
- Performed Federal compliance (A-133) audits of sponsored research programs.

**The Donoghue Organization, Holliston, MA**      1986 – 1988  
Controller/Financial Analyst

- Prepared and analyzed monthly financial statements for newsletter publishing company.
- Supervised accounting staff including general ledger, accounts receivables, payroll, and accounts payables functions.

- Prepared budgets and forecasts, and managed cash flow.
- Responsible for human resource function.

**Dennison Computer Supplies, Waltham, MA** 1984 - 1986

Payroll Administrator

- Responsible for payroll function including filing monthly and quarterly tax reports (Forms 940,941)

Billing Coordinator

- Responsible for invoicing all shipments, rentals, and maintenance contracts. Filed sales & use tax returns.

Senior Accounts Payable

- Processed invoices and prepared vendor checks.

Accounts Receivable

- Applied cash receipts to AR ledger and researched discrepancies.

**Volunteer Experience**

NH Society of Certified Public Accountants  
Committee Chair

May, 2010 – Present

Greater Nashua Mental Health Center – Treasurer  
Audit & Finance Committee Chair

March, 2011 - Present

Various local nonprofits – Treasurer, Trustee

2001 – 2013

**References** - Available upon request.

## KELLEEN GASPA

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### QUALIFICATION HIGHLIGHTS

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- Experienced in working with and advocating for at-risk populations
- Strict adherence with organization confidentiality policies
- Exceptional communication, interviewing and assessment skills
- Demonstrated excellence in community outreach and education
- Excellent organizational and time management skills
- Experienced in working with the Strategic Prevention Framework
- Accomplished public speaker

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### PROFESSIONAL EXPERIENCE

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Partnership for Public Health, Laconia, NH

**Assistant Director/Director of Substance Use Disorder Systems Integration** 11/2016-Present

- Support state & regional initiatives across the SUD continuum of care
- Develop and maintain regional assets & gaps analysis
- Promote evidence-based strategies for prevention, intervention, treatment & recovery
- Facilitate regional leadership team meetings
- Serve as a content expert on the Winnepesaukee Public Health Council
- Build capacity & expand service delivery in the Winnepesaukee Region of New Hampshire
- Increase awareness and access to SUD services
- Plan & facilitate quarterly regional Educator's Prevention Summits
- Maintain records and submit data for federal reporting
- Supervise Regional Substance Misuse Prevention Team

**Regional Substance Misuse Prevention Coordinator** 08/2015-11/2016

- Provide education, training & technical assistance to schools, organizations & local coalitions
- Facilitate Connect Suicide Prevention Trainings throughout the region
- Increase awareness of best practices in prevention, intervention, treatment & recovery
- Organize DEA Rx Drug Take Back and other various community events throughout the region
- Identify, build and maintain community partnerships in various sectors
- Support regional work across the Continuum of Care
- Advise Partners in Community Wellness Team
- Maintain records and submit data for federal reporting (PWITS)

Ascentria Care Alliance, Manchester, NH

2013-2015

**Outreach/Employment Specialist, Health Profession Opportunity Project (HPOP)**

- Recruitment and enrollment into the HPOP program
- Facilitate Information Sessions throughout New Hampshire
- Determine participant eligibility
- Assess participant need and provide links to relevant community resources
- Identify, build and maintain community partnerships
- Design and facilitate participant professional development training
- Assist in employment placement of trained participants
- Maintain records and submit data for federal reporting

Project EXTRA/LMS Para, Laconia, NH

2006-2013

**Site Director Pleasant Street School, Project EXTRA Program**

- Manage daily operation of program
- Oversee curriculum links to Common Core Standards
- Supervise 12 lead staff, junior staff, volunteers and subcontractors
- Handle case sensitive information including disclosures of abuse and neglect
- Develop and implement behavior modification plans tailored to student needs

**John J. Beland**

**SUMMARY**

- Proven professional with experience in all ranks of municipal fire department operations, administration, and community relations efforts.
- Proven participant in improving the quality of life for others through civic activities and service organizations.
- Dedicated team player with high code of conduct and integrity.

**AREAS OF EXPERIENCE**

DEVELOPMENT

- Develop and administration of 1.8-million-dollar municipal fire department budget.
- Plan, develop, execute, and direct all phases of fire department administration and operations including but not limited to, budget development and administration, delivery of high quality emergency services in a safe, efficient and effective manner, development and enforcement of Standard Operating Guidelines, Rules & Regulations and administration of town policy, provide training and educational opportunities for 15 career personnel and 30 call company personnel.
- Pursue local, state and federal grant opportunities to enhance response capabilities through equipment purchases, training and exercise delivery.

COMMUNITY RELATIONS

- Build and maintain strong working relationships with internal/external customers, political/civic leaders.
- Leadership role to raise approximately \$30,000.00 to construct the Gilford Fire-Rescue Training Facility.
- Strong ability to build working relationships with various organizations, customers, community individuals and professionals.

**WORK EXPERIENCE**

Partnership for Public Health  
Emergency Preparedness & Response Coordinator  
January 2018-Present  
67 Water St. Suite 105  
Laconia NH 03246

Lakes Region Mutual Fire Aid  
Deputy Coordinator  
October 2011-January 2018  
62 Communication Drive  
Laconia, New Hampshire 03246

Town of Gilford-Fire-Rescue Department  
June 1983-September 2011 (Retired)  
39 Cherry Valley Road  
Gilford, New Hampshire 03249  
Live-In Student, Career Firefighter, Lieutenant, Captain, Deputy Chief, Fire Chief

NH Fire Academy  
Senior Staff Instructor  
1987-Present

Lakes Region Mutual Fire Aid  
Training & Education Committee  
Late 1980's- 2018

NH Community College  
Laconia NH  
Adjunct Professor  
1993 - 2012

**EDUCATION**

New Hampshire Technical College  
Laconia, NH  
A.S. Fire Protection  
1981-1983

Notre Dame College  
Manchester, NH  
92 Credits toward B.S. Degree  
in Elementary Education  
1999-2001

Certified Public Manger  
NH Bureau of Training & Education  
Concord NH  
2010 - 2011

**Position Relevant Certifications:**

IS-00800.b National Response Framework; ICS 402 Overview for Executives & Senior Officials; G775 EOC Management & Operations, Command & General Staff Functions for Local Incident Management Teams; IS-00703 NIMS Resource Management; IS-00700; National Incident Management System; Incident Command System-Instructor; National Fire Academy-Incident Command System; Emergency Management Institute-IS-00120.An introduction to Exercises; Homeland Security Exercise & Evaluation Program; Incident Management Symposium-Phoenix AZ  
Strategic National Stockpile - Center for Domestic Preparedness, Anniston AL  
L0489 Managing Spontaneous Volunteers - Homeland Security & Emergency Management

CERT, Train the Trainer; CERT Team Manager; Essentials of POD's, Train the Trainer; FEMA, Management of Volunteers

\*Certificates available upon request.

**PROFESSIONAL AFFILIATIONS**

Certified Public Managers Association  
2011 - Present

NH Fire Instructor and Officers Association  
Past Director, Past President

Leadership Lakes Region  
Board of Directors  
2006-Present

Gilford Rotary Club  
Board of Directors-Present  
President 7/2018 - 6/2019

Lakes Region Partnership for Public Health  
Board of Directors  
2011-2014

Lakes Region St. Baldrick's-Event Organizer  
Childhood Cancer Fundraiser  
Gilford NH/Monrovia, CA  
2004-Present

**AWARDS**

Gilford Fire Department Fire Officer of the Year  
John T Ayers-Fire Instructor of the Year Award  
NH Fire Academy Award  
Proclamation-John Beland Day, City of Laconia, Lakes Region Respite Project

NH Law Enforcement/Fire Service; Firefighter of the Year  
Knight of the Bald Table-St. Baldrick's Foundation, Childhood Cancer Treatment and  
Research  
Gilford Rotary Club-Paul Harris Fellow+1

**Kimbyl L. Wade**

**EMPLOYMENT  
EXPERIENCE**

**Partnership for Public Health (PPH)**

**Laconia, NH**

***Substance Misuse & Suicide Prevention Manager***

***April 2020 - Current***

Report to the Executive Director and the Board as asked and when needed  
Provide oversight for all projects and outreach performed by this department  
Oversee substance misuse and suicide prevention work as defined by various contracts  
Ensure deliverables are produced as expected, as agreed, promptly, and on time  
Collaborate with community partners and regional organizations on public health matters  
Make certain that best practices are utilized and evidence-based strategies are applied  
Direct and support staff doing substance misuse and suicide prevention work

***Community Health Educator***

***July 2017 - March 2020***

Report to Dept Director, the Executive Director, and the Board as asked and when needed  
Fulfilled the responsibilities of Continuum of Care Facilitator and Young Adult Coordinator  
Performed substance misuse prevention outreach and work for the Winnepesaukee Region  
Performed suicide prevention training, outreach and work for the Winnepesaukee Region  
Ensure deliverables are produced as expected, as agreed, promptly, and on time  
Collaborate with community partners and regional organizations on public health matters  
Make certain that best practices are utilized and evidence-based strategies are applied

**LRGHealthcare**

**Laconia, NH**

***Financial Counselor***

***March 2016 - July 2017***

Similar responsibilities as outlined in previous role in addition to the following:  
Provide financial counseling for calls received on the Financial Counselor line  
Visit LRGH ER and inpatients to help with health coverage and payment options  
Prepare and distribute daily inpatient and self-pay reports to LRGH colleagues  
Process Healthlink applications and determine possible eligibility for assistance  
Submit birth notifications for newborns who will be insured through Medicaid  
Initiated and administered inmate outreach visits for Belknap and Merrimack jails  
Occasionally perform surgical approvals, payment plans, and pre-authorizations

***Enrollment Coordinator***

***March 2014 - March 2016***

Assisted consumers in enrolling in health insurance through the Marketplace  
Aided consumers in obtaining health coverage within different Medicaid programs  
Maintained and managed applications for patients applying for Medicaid coverage  
Provide assistance and answers for phone calls received on the Healthlink line  
Met with inpatients and consumers at FRH to coordinate insurance enrollment  
Initiated and administered inmate outreach visits for Belknap and Merrimack jails  
Participated in a variety of outreach and educational events in public settings  
Worked collaboratively with other community organizations involved with the ACA

**PARTNERSHIP FOR PUBLIC HEALTH, INC.**Key Personnel

FY 2019 – FY 2022

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Shelley Carita/ Tamera Carmichael	Executive Director	\$ 82,000	20%	\$ 16,400
Marie Tule	Finance Director	\$ 74,641	17%	\$ 12,943
Kelley Gaspa/ Kimby Wade	Director of Behavior Health Initiatives, Substance Misuse & Suicide Prevention Mgr	\$ 56,000	76%	\$ 43,300
John Beland	Emergency Preparedness & Response Manager	\$ 65,400	100%	\$ 65,400

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Lamprey Health Care, Inc. ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), as amended with Governor approval on December 17, 2020 and presented to the Executive Council as an Informational Item on April 7, 2021 (Informational Item # M), as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item on May 19, 2021, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,496,473.
3. Modify Exhibit A Scope of Services by replacing it in its entirety and with Exhibit A, Amendment #8, Scope of Services, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.

- 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.
6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B-1, Program Funding, Amendment #7 by replacing it in its entirety with Exhibit B-1 Amendment #8, Program Funding, which is attached hereto and incorporated by reference herein.
9. Add Exhibit B-21, Amendment #8, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-22, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-23, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-24, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-25, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-26, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-27, Amendment #8, which is attached hereto and incorporated by reference herein.
16. Add Exhibit B-28, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

6/1/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
*Patricia M. Tilley*  
\_\_\_\_\_  
Name: Patricia M. Tilley  
Title: Interim Director

Lamprey Health Care, Inc.

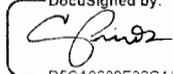
6/1/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
*Gregory White*  
\_\_\_\_\_  
Name: Gregory white  
Title: CEO

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

OFFICE OF THE ATTORNEY GENERAL

6/1/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
  
\_\_\_\_\_  
Name: Catherine Pinos  
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient, in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Network for the Seacoast region, as defined by the Department, to provide a broad range of public health services within one or more of the state’s thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to ensure that all communities statewide are covered by initiatives to protect and improve the health of the public
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing young adult substance misuse prevention strategies,
    - 2.1.2.6. Conducting a community-based assessment related to childhood lead poisoning prevention.
      - 2.1.2.6.1. At least one (1) representative from the RPHN attends a one-day meeting hosted

<sup>DS</sup>  
GW





New Hampshire Department of Health and Human Services  
Regional Public Health Network Services

Exhibit A – Amendment #8

- 2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:
  - 2.2.1.3.1. Ensure meeting minutes are available to the public upon request.
  - 2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.
- 2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:
  - 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.
  - 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
  - 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and



New Hampshire Department of Health and Human Services  
Regional Public Health Network Services

Exhibit A – Amendment #8

outcomes and progress towards addressing CHIP priorities.

- 2.2.1.11. Maintain a website that provides information to the public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC), YA and Public Health Emergency Preparedness (PHEP) programs.
- 2.2.1.12. Advance the work of the RPHN by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected and appointed municipal officials, on the PHAC.
- 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.

2.3. Public Health Emergency Preparedness

2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:

- 2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention’s (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.
- 2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) coordinating/planning committee and/or workgroup to:
  - 2.3.1.2.1. Improve regional emergency response plans; and
  - 2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.

2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.

Lamprey Health Care Inc.

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Contractor Initials

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- 2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA) annually.
- 2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.
- 2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative, including the workgroup.
- 2.3.1.7. Submit an annual work plan based on a template provided by the Department.
- 2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.
- 2.3.1.9. Collaborate with the Department's, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) on an annual basis based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:

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- 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
- 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.
- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.
- 2.3.1.13. Regularly communicate with the Department’s Area Agency contractor that provides developmental and acquired brain disorder services in the region.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State’s emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training, as needed, to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.

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- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC’s Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department’s SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:
  - 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
  - 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.
  - 2.3.1.21.3. ORR site visit, as scheduled by the CDC and the Department.
  - 2.3.1.21.4. Completion of relevant drills and/or exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate these supplies prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.

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- 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
  - 2.3.1.24. Participate, as requested, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.
  - 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health and Human Services Assistant Secretary for Preparedness and Response.
  - 2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.
- 2.4. Substance Misuse Prevention
- 2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:
    - 2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.
    - 2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.
    - 2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes: assessment, capacity development, planning, implementation and evaluation.

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- 2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department's guidance on what is evidenced informed.
- 2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.
- 2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic models that demonstrates short-, intermediate- and long-term measures in alignment the Three-Year Strategic Plan.
- 2.4.1.7. Advance, promote and implement substance misuse primary prevention of strategies that incorporate the Institute of Medicine (IOM) categories of prevention: universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, and outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, at the direction of the Department's Bureau of Drug and Alcohol Services (BDAS), SMP staff with the

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Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts, youth involvement, and policy and advocacy efforts.

2.5. Continuum of Care

2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

2.5.1.1. Engage regional partners in ongoing update of regional assets and gaps, and regional CoC plan development and implementation. The Contractor shall ensure regional partners include, but are not limited to:

2.5.1.1.1. Prevention, Intervention, Treatment, and Recovery Support Service Providers.

2.5.1.1.2. Primary health care providers.

2.5.1.1.3. Behavioral health care providers.

2.5.1.1.4. Other interested and/or affected parties.

2.5.1.2. Work toward, and adapt as necessary and indicated, priorities and actions identified in the regional CoC development plan.

2.5.1.3. Facilitate and/or provide support for initiatives that result in:

2.5.1.3.1. Increased awareness of and access to services;

2.5.1.3.2. Increased communication and collaboration among providers; and

2.5.1.3.3. Increases in capacity and delivery of services.

2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.

2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work such as Integrated Delivery Networks.

2.5.1.6. Work with the statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance, including but not limited to, health care

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providers, public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.

2.5.1.7. Engage regional stakeholders to assist with information dissemination.

2.6. Young Adult Substance Misuse Prevention Strategies

2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within their region.

2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:

2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:

2.6.2.1.1. Reducing risk factors while enhancing protective factors to positively impact healthy decisions around the use of substances; and

2.6.2.1.2. Increasing knowledge of the consequences of substance misuse.

2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.

2.7. Extreme Weather and Climate Interventions

2.7.1. The Contractors shall expand the community interventions to reach a target audience that is larger than the target audience reached from the previous year. Interventions may include trainings or actions to prepare for extreme weather due to excess heat, cold, precipitation, or habitat change.

2.7.2. The Contractor shall collaborate with the Department to develop a work plan with methods to implement and evaluate the intervention including specific baseline measure to demonstrate improvements over time through activities that may include, but are not limited to:

2.7.2.1. Pre- and post-testing.

2.7.2.2. Community surveys.

2.7.3. The Contractor shall provide services that include, but are not limited to:

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- 2.7.3.1. Implementing a minimum of two (2) interventions to address a priority weather hazard and/or health impact in order to improve conditions among a specific target population, which include, but are not limited to:
    - 2.7.3.1.1. Youth.
    - 2.7.3.1.2. Older adults.
    - 2.7.3.1.3. At-risk vulnerable groups.
  - 2.7.3.2. Ensuring the interventions include education on trends in regional weather and/or climate change related to the health on the target audience.
  - 2.7.3.3. Completing the intervention and measure any changes in community-level awareness, community-level resilience, or individual-level Knowledge, Skills, and Ability to act (KSAs).
  - 2.7.3.4. Completing a final report on the intervention methods, results, and evaluation of success that is a minimum of ten (10) pages of written narrative in length, excluding appendices.
  - 2.7.3.5. Submitting a draft of the written report to the Department for review and approval no later than one-month prior to the contract completion date.
- 2.8. Contract Administration and Leadership
- 2.8.1. The Contactor shall introduce and orient all funded staff to the work of all the activities conducted through the contract agreement. The Contractor shall:
    - 2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.
    - 2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education, as needed, to support staff in areas of deficit in knowledge and/or skills.
    - 2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
    - 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.

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2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

2.9. I-CARE Program:

2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.

2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the Region.

2.9.3. The Contractor shall ensure activities in the work plan support:

2.9.3.1. The -CARE NH mental health and wellness initiative;

2.9.3.2. 9-8-8 National Suicide Prevention Lifeline expansion project; and/or

2.9.3.3. NH's Suicide Prevention Council's strategic plan.

2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of contract effective date.

2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of contract effective date.

**3. Training and Technical Assistance Requirements**

3.1. The Contractor shall participate in training and technical assistance as follows:

3.1.1. Public Health Advisory Council

3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by Department's DPHS and/or BDAS.

3.1.1.2. Complete a technical assistance needs assessment.

3.1.2. Public Health Emergency Preparedness

3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department's DPHS and/or Emergency Services Unit (ESU).

3.1.2.2. Complete a technical assistance needs assessment.

3.1.2.3. Attend up to two trainings per year offered by the Department's DPHS and/or ESU or the agency contracted by the Department's DPHS to provide training programs.

3.1.3. Substance Misuse Prevention

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- 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
- 3.1.3.2. At the Department’s request engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including but not limited to:
  - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
  - 3.1.3.2.2. Using appropriate measures and tools, etc.)
- 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
- 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
- 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
- 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and
    - 3.1.4.1.5. Development.
  - 3.1.4.2. Be familiar with RROSC and the Department’s CoC systems development and the “No Wrong Door” approach to systems integration.
  - 3.1.4.3. Attend CoC Facilitator meetings, as directed by the Department.
  - 3.1.4.4. Participate in the CoC learning opportunities as they become available to:

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- 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
- 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
- 3.1.4.4.3. Exchange information on CoC development work and techniques;
- 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
- 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. Extreme Weather and Climate Interventions
  - 3.1.6.1. The Contractor shall participate in a maximum of two (2) half-day trainings provided by the Department in Concord, NH regarding how to:
    - 3.1.6.1.1. Assess weather-related vulnerabilities;
    - 3.1.6.1.2. Measure community preparedness; and
    - 3.1.6.1.3. Implement the CDC’s Building Resilience Against Climate Effects (BRACE) framework.

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**4. Staffing**

- 4.1. The Contractor’s staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN’s efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

**5. Reporting**

- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department’s DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.

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- 5.1.2. Participating in site visits and technical assistance specific to a single scope of work, as described in the sections below.
- 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide reports for the PHAC, which include but are not limited to submitting quarterly PHAC progress reports using an on-line system administered by the Department's DPHS.
- 5.3. The Contractor shall provide reports for the PHEP that including but are not limited to:
  - 5.3.1. Submitting quarterly PHEP progress reports using an on-line system administered by the Department's DPHS.
  - 5.3.2. Submitting all documentation necessary to complete the MCM ORR review or self-assessment.
  - 5.3.3. Submitting semi-annual action plans for MCM ORR activities on a form provided by the Department.
  - 5.3.4. Submitting information documenting the required MCM ORR-related drills and exercises.
  - 5.3.5. Submitting final After Action Reports for any other drills or exercises conducted.
- 5.4. The Contractor shall provide reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.4.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.4.2. Ensuring Three-Year Plans are current and posted to the RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.4.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.4.4. Inputting data on a monthly basis by the 20<sup>th</sup> business day of the month to the online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes, but is not limited to:
    - 5.4.4.1. Number of individuals served or reached.
    - 5.4.4.2. Demographics.



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- 5.4.4.3. Strategies and activities per IOM by the six (6) activity types.
- 5.4.4.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
- 5.4.4.5. Percentage evidence based strategies.
- 5.4.5. Submit annual report.
- 5.4.6. Provide additional reports or data as required by the Department.
- 5.4.7. Participate and administer the Regional SMP Stakeholder Survey in alternate years.
- 5.5. The Contractor shall provide reports for Continuum of Care that include, but are not limited to:
  - 5.5.1. Submitting update on regional assets and gaps assessments, as required.
  - 5.5.2. Submitting updates on regional CoC development plans, as indicated.
  - 5.5.3. Submitting quarterly reports, as indicated.
  - 5.5.4. Submitting year-end report, as indicated.
- 5.6. The Contractor shall provide reports for Young Adult Strategies that include, but are not limited to:
  - 5.6.1. Inputting data on a monthly basis to an online database, as required by the Department.
  - 5.6.2. Ensuring the data includes but is not limited to:
    - 5.6.2.1. Number of individuals served.
    - 5.6.2.2. Demographics of individuals served.
    - 5.6.2.3. Types of strategies or interventions implemented.
    - 5.6.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
  - 5.6.3. Meet with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.
- 5.7. The Contractor shall provide reports for Extreme Weather and Climate Interventions, that include but are not limited to:
  - 5.7.1. Publishing all relevant intervention materials from Phase 1 and 2 to a public-facing web page, including any written plans, reports, educational materials and/or other resources.
  - 5.7.2. Publishing all relevant interventions materials from Phase 3 to a public facing web page.



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- 5.7.3. Presenting the findings of Phase 3 interventions to the Department in both verbal and written formats.
- 5.8. The Contractor shall participate in a monthly one (1)-hour meetings and/or conference calls with the Department to review the budget, activities, and plan of action.
- 5.9. The Contractor shall submit a brief one (1)-page quarterly progress report to the Department within thirty (30) days following the end of each quarter, describing the fulfillment of activities conducted in order to monitor program performance.

**6. Performance Measures**

- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the Department, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision or mission statements.
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
    - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
    - 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.

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- 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
- 6.1.3. Substance Misuse Prevention
  - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
    - 6.1.3.1.1. 30-day alcohol use;
    - 6.1.3.1.2. 30-day marijuana use;
    - 6.1.3.1.3. 30-day illegal drug use;
    - 6.1.3.1.4. Illicit drug use other than marijuana;
    - 6.1.3.1.5. 30-day Nonmedical use of pain relievers;
    - 6.1.3.1.6. Life time heroin use;
    - 6.1.3.1.7. Binge Drinking; and
    - 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
  - 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
    - 6.1.3.2.1. Perception of risk from alcohol use;
    - 6.1.3.2.2. Perception of risk from marijuana use;
    - 6.1.3.2.3. Perception of risk from illegal drug use;
    - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
    - 6.1.3.2.5. Perception of risk from binge drinking;
    - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
    - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.
- 6.1.4. Continuum of Care
  - 6.1.4.1. Evidence of ongoing updates of regional substance use services assets and gaps assessment.
  - 6.1.4.2. Evidence of ongoing update of regional CoC development plan.

DS  
CW



New Hampshire Department of Health and Human Services  
Regional Public Health Network Services

Exhibit A – Amendment #8

- 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
- 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:
  - 6.1.4.4.1. Health;
  - 6.1.4.4.2. Safety;
  - 6.1.4.4.3. Education;
  - 6.1.4.4.4. Government; and
  - 6.1.4.4.5. Businesses.
- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to
- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.



New Hampshire Department of Health and Human Services  
Regional Public Health Network Services

Exhibit A – Amendment #8

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- 6.1.6. Extreme Weather and Climate Interventions Performance Measures
  - 6.1.6.1. The Contractor shall expand the interventions to reach a target audience that is a minimum of 25% larger than the prior year.
  - 6.1.6.2. The Contractor shall create a minimum of one (1) baseline measure for each of the objectives in the workplan and measure any changes
  - 6.1.6.3. The Contractor shall ensure individual-level assessments report an increase in knowledge, skills and ability to respond to extreme weather or climate-related hazards.
  - 6.1.6.4. The Contractor shall ensure community-level surveys report an increase in awareness of weather hazards, related health impacts and how to engage in prevention.

<sup>DS</sup>  
GW



Exhibit B-21, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Lamprey Health Care Inc.

Budget Request for: Building Resilience Against Severe Weather and Climate Effects

Budget Period: July 1, 2021 to June 30 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 17,896.66	\$ 1,789.67	\$ 19,686.33						
2. Employee Benefits	\$ 3,060.33	\$ 306.03	\$ 3,366.36						
3. Consultants	\$ -	\$ -	\$ -						
4. Equipment:	\$ -	\$ -	\$ -						
Rental	\$ -	\$ -	\$ -						
Repair and Maintenance	\$ -	\$ -	\$ -						
Purchase/Depreciation	\$ -	\$ -	\$ -						
5. Supplies	\$ -	\$ -	\$ -						
Educational	\$ 2,800.00	\$ 280.00	\$ 3,080.00						
Lab	\$ -	\$ -	\$ -						
Pharmacy	\$ -	\$ -	\$ -						
Medical	\$ -	\$ -	\$ -						
Office	\$ 200.00	\$ 20.00	\$ 220.00						
6. Travel	\$ 300.00	\$ 30.00	\$ 330.00						
7. Occupancy	\$ 300.00	\$ 30.00	\$ 330.00						
8. Current Expenses	\$ -	\$ -	\$ -						
Telephone	\$ 360.00	\$ 36.00	\$ 396.00						
Postage	\$ -	\$ -	\$ -						
Subscriptions	\$ -	\$ -	\$ -						
Audit and Legal	\$ -	\$ -	\$ -						
Insurance	\$ -	\$ -	\$ -						
Board Expenses	\$ 500.00	\$ 50.00	\$ 550.00						
9. Software	\$ -	\$ -	\$ -						
10. Marketing/Communications	\$ 2,796.65	\$ 279.67	\$ 3,076.32						
11. Staff Education and Training	\$ 600.00	\$ 60.00	\$ 660.00						
12. Subcontracts/Agreements	\$ 6,900.00	\$ 690.00	\$ 7,590.00						
13. Other (specify details in addendum)	\$ -	\$ -	\$ -						
computer operation	\$ 650.00	\$ 65.00	\$ 715.00						
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 36,363.64</b>	<b>\$ 3,636.36</b>	<b>\$ 40,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Indirect As A Percent of Direct 10.0%  
 \$ 40,000.00  
 \$ (0.00)

Vendor Initials 

Date 6/1/2021

Exhibit B-22, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Lamprey Health Care/SPHN

Budget Request for: Continuum of Care

Budget Period: July 1, 2021- June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 30,181.99	\$ 3,018.20	\$ 33,200.19						
2. Employee Benefits	\$ 5,161.12	\$ 516.11	\$ 5,677.23						
3. Consultants	\$ -	\$ -	\$ -						
4. Equipment:	\$ -	\$ -	\$ -						
Rental	\$ -	\$ -	\$ -						
Repair and Maintenance	\$ -	\$ -	\$ -						
Purchase/Depreciation	\$ -	\$ -	\$ -						
5. Supplies:	\$ -	\$ -	\$ -						
Educational	\$ -	\$ -	\$ -						
Lab	\$ -	\$ -	\$ -						
Pharmacy	\$ -	\$ -	\$ -						
Medical	\$ -	\$ -	\$ -						
Office	\$ 730.00	\$ 73.00	\$ 803.00						
6. Travel	\$ 500.00	\$ 50.00	\$ 550.00						
7. Occupancy	\$ 300.00	\$ 30.00	\$ 330.00						
8. Current Expenses	\$ -	\$ -	\$ -						
Telephone	\$ -	\$ -	\$ -						
Postage	\$ -	\$ -	\$ -						
Subscriptions	\$ -	\$ -	\$ -						
Audit and Legal	\$ -	\$ -	\$ -						
Insurance	\$ -	\$ -	\$ -						
Board Expenses	\$ 200.00	\$ 20.00	\$ 220.00						
9. Software	\$ -	\$ -	\$ -						
10. Marketing/Communications	\$ 713.25	\$ 71.33	\$ 784.58						
11. Staff Education and Training	\$ 600.00	\$ 60.00	\$ 660.00						
12. Subcontracts/Agreements	\$ -	\$ -	\$ -						
13. Other (specify details mandatory):	\$ -	\$ -	\$ -						
computer operation	\$ 250.00	\$ 25.00	\$ 275.00						
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 38,636.36	\$ 3,863.64	\$ 42,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect As A Percent of Direct		10.0%	\$ 42,500.00	\$ 0.00					

Exhibit B-23, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Lamprey Health Care/Seacoast Public Health Network

Budget Request for: Medical Reserve Corps

Budget Period: SFY 2022 (7/1/21 through 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages		\$ -	\$ -						
2. Employee Benefits		\$ -	\$ -						
3. Consultants		\$ -	\$ -						
4. Equipment:		\$ -	\$ -						
Rental		\$ -	\$ -						
Repair and Maintenance		\$ -	\$ -						
Purchase/Depreciation		\$ -	\$ -						
5. Supplies:		\$ -	\$ -						
Educational		\$ -	\$ -						
Lab		\$ -	\$ -						
Pharmacy		\$ -	\$ -						
Medical		\$ -	\$ -						
Office		\$ -	\$ -						
6. Travel		\$ -	\$ -						
7. Occupancy		\$ -	\$ -						
8. Current Expenses		\$ -	\$ -						
Telephone		\$ -	\$ -						
Postage		\$ -	\$ -						
Subscriptions		\$ -	\$ -						
Audit and Legal		\$ -	\$ -						
Insurance		\$ -	\$ -						
Board Expenses		\$ -	\$ -						
9. Software		\$ -	\$ -						
10. Marketing/Communications		\$ -	\$ -						
11. Staff Education and Training		\$ -	\$ -						
12. Subcontracts/Agreements	\$ 10,000.00	\$ -	\$ 10,000.00						
13. Other (specify details mandatory)		\$ -	\$ -						
computer operation		\$ -	\$ -						
indirect		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Indirect As A Percent of Direct

0.0%

Vendor Initials 

Date 6/1/2021

Exhibit B-24, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Lamprey Health Care/SPHN

Budget Request for: Public Health Advisory Council

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 21,954.51	\$ 2,195.45	\$ 24,149.96				\$ 21,954.51	\$ 2,195.45	\$ 24,149.96
2. Employee Benefits	\$ 3,754.22	\$ 375.42	\$ 4,129.64				\$ 3,754.22	\$ 375.42	\$ 4,129.64
3. Consultants	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 300.00	\$ 30.00	\$ 330.00				\$ 300.00	\$ 30.00	\$ 330.00
6. Travel	\$ 200.00	\$ 20.00	\$ 220.00				\$ 200.00	\$ 20.00	\$ 220.00
7. Occupancy	\$ 180.00	\$ 18.00	\$ 198.00				\$ 180.00	\$ 18.00	\$ 198.00
8. Current Expenses	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Board Expenses	\$ 200.00	\$ 20.00	\$ 220.00				\$ 200.00	\$ 20.00	\$ 220.00
9. Software	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 484.00	\$ 48.40	\$ 532.40				\$ 484.00	\$ 48.40	\$ 532.40
11. Staff Education and Training	\$ 200.00	\$ 20.00	\$ 220.00				\$ 200.00	\$ 20.00	\$ 220.00
12. Subcontracts/Agreements	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
13. Other (specify details mandatory)	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 27,272.73</b>	<b>\$ 2,727.27</b>	<b>\$ 30,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 27,272.73</b>	<b>\$ 2,727.27</b>	<b>\$ 30,000.00</b>

Indirect As A Percent of Direct

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

Bidder/Program Name: Lamprey Health Care/Seacoast Public Health Network

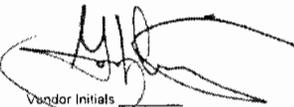
Budget Request for: Public Health Emergency Preparedness

Budget Period: SFY 2022 (7/1/21 through 6/30/22)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 68,455	\$ 6,846	\$ 75,301				\$ 68,455	\$ 6,846	\$ 75,301
2. Employee Benefits	\$ 11,706	\$ 1,171	\$ 12,876				\$ 11,706	\$ 1,171	\$ 12,876
3. Consultants		\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment	\$ 500	\$ 50	\$ 550				\$ 500	\$ 50	\$ 550
Rental		\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance		\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation		\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies:		\$ -	\$ -				\$ -	\$ -	\$ -
Educational		\$ -	\$ -				\$ -	\$ -	\$ -
Lab		\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy		\$ -	\$ -				\$ -	\$ -	\$ -
Medical		\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 250	\$ 25	\$ 275				\$ 250	\$ 25	\$ 275
6. Travel	\$ 500	\$ 50	\$ 550				\$ 500	\$ 50	\$ 550
7. Occupancy	\$ 300	\$ 30	\$ 330				\$ 300	\$ 30	\$ 330
8. Current Expenses		\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ 600	\$ 60	\$ 660				\$ 600	\$ 60	\$ 660
Postage		\$ -	\$ -				\$ -	\$ -	\$ -
Subscriptions		\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal		\$ -	\$ -				\$ -	\$ -	\$ -
Insurance		\$ -	\$ -				\$ -	\$ -	\$ -
Board Expenses	\$ 200	\$ 20	\$ 220				\$ 200	\$ 20	\$ 220
9. Software		\$ -	\$ -				\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 237	\$ 24	\$ 261				\$ 237	\$ 24	\$ 261
11. Staff Education and Training	\$ 600	\$ 60	\$ 660				\$ 600	\$ 60	\$ 660
12. Subcontracts/Agreements	\$ 2,500	\$ 250	\$ 2,750				\$ 2,500	\$ 250	\$ 2,750
13. Other (specific details mandatory)		\$ -	\$ -				\$ -	\$ -	\$ -
computer operation	\$ 220	\$ 22	\$ 242				\$ 220	\$ 22	\$ 242
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 86,068</b>	<b>\$ 8,607</b>	<b>\$ 94,675</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 86,068</b>	<b>\$ 8,607</b>	<b>\$ 94,675</b>

Indirect As A Percent of Direct

10.0%  
 \$ 94,675.00  
 \$ 0.08

  
 Vendor Initials

Date 6/2/21

Exhibit B-26, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Lamprey Health Care/SPHN

Budget Request for: Substance Misuse Prevention

Budget Period: July 1, 2021-June 30, 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 49,621.58	\$ 4,962.16	\$ 54,583.74						
2. Employee Benefits	\$ 8,485.06	\$ 848.51	\$ 9,333.57						
3. Consultants	\$ -	\$ -	\$ -						
4. Equipment	\$ -	\$ -	\$ -						
Rental	\$ -	\$ -	\$ -						
Repair and Maintenance	\$ -	\$ -	\$ -						
Purchase/Depreciation	\$ -	\$ -	\$ -						
5. Supplies:	\$ -	\$ -	\$ -						
Educational	\$ 300.00	\$ 30.00	\$ 330.00						
Lab	\$ -	\$ -	\$ -						
Pharmacy	\$ -	\$ -	\$ -						
Medical	\$ -	\$ -	\$ -						
Office	\$ 824.00	\$ 82.40	\$ 906.40						
6. Travel	\$ 500.00	\$ 50.00	\$ 550.00						
7. Occupancy	\$ 300.00	\$ 30.00	\$ 330.00						
8. Current Expenses	\$ -	\$ -	\$ -						
Telephone	\$ -	\$ -	\$ -						
Postage	\$ 150.00	\$ 15.00	\$ 165.00						
meeting expense	\$ 200.00	\$ 20.00	\$ 220.00						
Audit and Legal	\$ -	\$ -	\$ -						
Insurance	\$ -	\$ -	\$ -						
Board Expenses	\$ -	\$ -	\$ -						
9. Software	\$ -	\$ -	\$ -						
10. Marketing/Communications	\$ 3,573.00	\$ 357.30	\$ 3,930.30						
11. Staff Education and Training	\$ 2,400.00	\$ 240.00	\$ 2,640.00						
12. Subcontracts/Agreements	\$ -	\$ -	\$ -						
13. Other computer operation	\$ 600.00	\$ 60.00	\$ 660.00						
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 66,953.64</b>	<b>\$ 6,695.36</b>	<b>\$ 73,649.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
Indirect As A Percent of Direct		10.0%	\$ 73,649.00						
			\$ 0.00						



Exhibit B-28, Amendment 8

New Hampshire Department of Health and Human Services

Contractor Name: Lamprey Health Care Inc. for Seacoast PHN

Budget Request for:

Project Title

Budget Period: July 1, 2021 through June 30 2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 44,040	\$ 4,404	\$ 48,444	\$ -	\$ -	\$ -	\$ 44,040	\$ 4,404	\$ 48,444
2. Employee Benefits	\$ 7,531	\$ 753	\$ 8,284	\$ -	\$ -	\$ -	\$ 7,531	\$ 753	\$ 8,284
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 2,000	\$ 200	\$ 2,200	\$ -	\$ -	\$ -	\$ 2,000	\$ 200	\$ 2,200
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 74,777	\$ 7,478	\$ 82,254	\$ -	\$ -	\$ -	\$ 74,777	\$ 7,478	\$ 82,254
13. Other (specify detail mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 128,347</b>	<b>\$ 12,835</b>	<b>\$ 141,182</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 128,347</b>	<b>\$ 12,835</b>	<b>\$ 141,182</b>
Indirect As A Percent of Direct			10.0%						10.0%

# State of New Hampshire

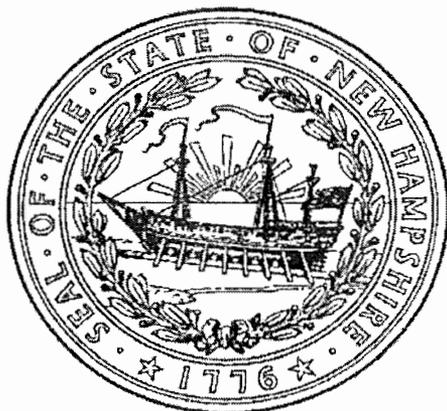
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that LAMPREY HEALTH CARE, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on August 16, 1971. 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: 66382

Certificate Number: 0005334125



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 1st day of April A.D. 2021.

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

William M. Gardner  
Secretary of State

### CERTIFICATE OF AUTHORITY

I, Thomas Christopher Drew, hereby certify that:  
(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Lamprey Health Care, Inc..  
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on March 25, 2020, at which a quorum of the Directors/shareholders were present and voting.  
(Date)

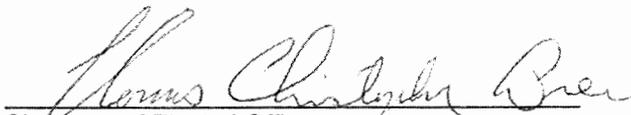
**VOTED:** That Gregory A. White (may list more than one person)  
(Name and Title of Contract Signatory)

is duly authorized on behalf of Lamprey Health Care, Inc. to enter into contracts or agreements with the State  
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30)** days from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: May 14, 2021

  
\_\_\_\_\_  
Signature of Elected Officer  
Name: Thomas Christopher Drew  
Title: Secretary, Board of Directors



# LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

## Our Mission

The mission of Lamprey Health Care is to provide high quality primary medical care and health related services, with an emphasis on prevention and lifestyle management, to all individuals regardless of ability to pay.

- We seek to be a **leader in providing access** to medical and health services that improve the health status of the individuals and families in the communities we serve.
- Our mission is to **remove barriers that prevent access to care**; we strive to eliminate such barriers as language, cultural stereotyping, finances and/or lack of transportation.
- Lamprey Health Care's **commitment to the community** extends to providing and/or coordinating access to a full range of comprehensive services.
- Lamprey Health Care is committed to achieving the highest level of patient satisfaction through a personal and caring approach and **exceeding standards of excellence in quality and service**.

## Our Vision

- We will be the **outstanding primary care choice** for our patients, our communities and our service area, and the standard by which others are judged.
- We will continue as **pacesetter** in the use of new knowledge for lifestyle improvement, quality of life.
- We will be a **center of excellence** in service, quality and teaching.
- We will be **part of an integrated system** of care to ensure access to medical care for all individuals and families in our communities.
- We will be an **innovator** to foster development of the best primary care practices, adoption of the tools of technology and teaching.
- We will **establish partnerships**, linkages, networks and referrals with other organizations to provide access to a full range of services to meet our communities' needs.

## Our Values

- We exist to **serve the needs of our patients**.
- We value a positive **caring approach** in delivering patient services.
- We are committed to **improving the health** and total well-being of our communities.
- We are committed to **being proactive** in identifying and meeting our communities' health care needs.
- We provide a supportive environment for **the professional and personal growth, and healthy lifestyles of our employees**.
- We provide an **atmosphere of learning** and growth for both patients and employees as well as for those seeking training in primary care.
- We succeed by utilizing a **team approach** that values a positive, constructive commitment to Lamprey Health Care's mission.

Affirmed 12/16/2020



**LAMPREY  
HEALTH CARE**  
Where Excellence and Caring go Hand in Hand

**CONSOLIDATED FINANCIAL STATEMENTS**

and

**SUPPLEMENTARY INFORMATION**

September 30, 2020 and 2019

With Independent Auditor's Report





## INDEPENDENT AUDITOR'S REPORT

Board of Directors  
Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc.

We have audited the accompanying consolidated financial statements of Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc., which comprise the consolidated balance sheets as of September 30, 2020 and 2019, and the related consolidated statements of operations, functional expenses, changes in net assets and cash flows for the years 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 U.S. generally accepted accounting principles; 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 audits. We conducted our audits in accordance with U.S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from 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.

Board of Directors  
Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc.  
Page 2

### **Opinion**

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Lamprey Health Care, Inc. and Friends of Lamprey Health Care, Inc. as of September 30, 2020 and 2019, and the results of their operations, changes in their net assets and their cash flows for the years then ended, in accordance with U.S. generally accepted accounting principles.

### **Other Matter**

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying consolidating balance sheets as of September 30, 2020 and 2019, and the related consolidating statements of operations and changes in net assets for the years then ended, are presented for purposes of additional analysis rather than to present the financial position, results of operations and changes in net assets of the individual entities, and are 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 audits 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 U.S. generally accepted auditing standards. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

*Berry Dunn McNeil & Parker, LLC*

Portland, Maine  
January 28, 2021

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Balance Sheets****September 30, 2020 and 2019****ASSETS**

	<u>2020</u>	<u>2019</u>
Current assets		
Cash and cash equivalents	\$ 3,504,514	\$ 1,422,407
Patient accounts receivable, net	1,277,013	1,237,130
Grants receivable	658,568	452,711
Other receivables	130,004	236,798
Inventory	129,591	81,484
Other current assets	<u>147,799</u>	<u>78,405</u>
Total current assets	5,847,489	3,508,935
Investment in limited liability company	-	19,101
Assets limited as to use	2,953,580	2,943,714
Fair value of interest rate swap	-	13,512
Property and equipment, net	<u>7,795,861</u>	<u>7,608,578</u>
Total assets	<u>\$16,596,930</u>	<u>\$14,093,840</u>

**LIABILITIES AND NET ASSETS**

Current liabilities		
Accounts payable and accrued expenses	\$ 578,888	\$ 641,818
Accrued payroll and related expenses	1,322,364	961,024
Deferred revenue	72,421	85,418
Provider Relief Funds	196,549	-
COVID-19 Emergency Healthcare System Relief Fund refundable advance	250,000	-
Current maturities of long-term debt	<u>88,027</u>	<u>106,190</u>
Total current liabilities	2,508,249	1,794,450
Long-term debt, less current maturities	2,821,023	2,031,076
Fair value of interest rate swaps	<u>217,657</u>	<u>-</u>
Total liabilities	<u>5,546,929</u>	<u>3,825,526</u>
Net assets		
Without donor restrictions	10,579,230	9,732,208
With donor restrictions	<u>470,771</u>	<u>536,106</u>
Total net assets	<u>11,050,001</u>	<u>10,268,314</u>
Total liabilities and net assets	<u>\$16,596,930</u>	<u>\$14,093,840</u>

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The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statements of Operations****Years Ended September 30, 2020 and 2019**

	<u>2020</u>	<u>2019</u>
Operating revenue		
Patient service revenue	<b>\$10,206,803</b>	\$ 9,424,048
Provision for bad debts	<b><u>(497,961)</u></b>	<u>(398,544)</u>
Net patient service revenue	<b>9,708,842</b>	9,025,504
Rental income	<b>176,353</b>	194,443
Grants, contracts and contributions	<b>5,663,601</b>	6,104,270
Paycheck Protection Program	<b>2,152,212</b>	-
Other operating revenue	<b>410,309</b>	1,162,855
Net assets released from restriction for operations	<b><u>242,945</u></b>	<u>75,197</u>
Total operating revenue	<b><u>18,354,262</u></b>	<u>16,562,269</u>
Operating expenses		
Salaries and wages	<b>11,106,208</b>	10,583,987
Employee benefits	<b>2,096,040</b>	2,056,956
Supplies	<b>747,665</b>	646,620
Purchased services	<b>1,691,285</b>	1,752,050
Facilities	<b>574,422</b>	580,711
Other operating expenses	<b>474,659</b>	614,501
Insurance	<b>140,572</b>	145,114
Depreciation	<b>462,768</b>	461,062
Interest	<b><u>111,808</u></b>	<u>108,017</u>
Total operating expenses	<b><u>17,405,427</u></b>	<u>16,949,018</u>
Excess (deficiency) of revenue over expenses	<b>948,835</b>	(386,749)
Change in fair value of interest rate swaps	<b>(231,169)</b>	26,916
Net assets released from restriction for capital acquisition	<b><u>129,356</u></b>	<u>31,012</u>
Increase (decrease) in net assets without donor restrictions	<b><u>\$ 847,022</u></b>	<u>\$ (328,821)</u>

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The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statement of Functional Expenses****Year Ended September 30, 2020**

	Healthcare Services	AHEC/PHN	Transportation	Total Program Services	Administration and Support Services	Total
Salaries and wages	\$ 8,372,143	\$ 498,707	\$ 69,857	\$ 8,940,707	\$ 2,165,501	\$ 11,106,208
Employee benefits	1,567,514	93,157	12,726	1,673,397	422,643	2,096,040
Supplies	708,447	7,255	-	715,702	31,963	747,665
Purchased services	879,416	114,614	-	994,030	697,255	1,691,285
Facilities	23,488	402	8,652	32,542	541,880	574,422
Other	166,743	61,261	-	228,004	246,655	474,659
Insurance	-	-	7,673	7,673	132,899	140,572
Depreciation	-	-	26,400	26,400	436,368	462,768
Interest	-	-	-	-	111,808	111,808
Allocated program support	754,724	74,216	14,538	843,478	(843,478)	-
Allocated occupancy costs	817,796	35,153	4,641	857,590	(857,590)	-
Total	<u>\$ 13,290,271</u>	<u>\$ 884,765</u>	<u>\$ 144,487</u>	<u>\$ 14,319,523</u>	<u>\$ 3,085,904</u>	<u>\$ 17,405,427</u>

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The accompanying notes are an integral part of these consolidated financial statements.

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

## Consolidated Statement of Functional Expenses

Year Ended September 30, 2019

	Healthcare Services	AHEC/PHN	Transportation	Total Program Services	Administration and Support Services	Total
Salaries and wages	\$ 8,599,552	\$ 418,785	\$ 127,054	\$ 9,145,391	\$ 1,438,596	\$ 10,583,987
Employee benefits	1,531,182	76,015	23,346	1,630,543	426,413	2,056,956
Supplies	614,474	12,839	47	627,360	19,260	646,620
Purchased services	912,746	225,590	407	1,138,743	613,307	1,752,050
Facilities	4,020	477	23,155	27,652	553,059	580,711
Other	264,063	157,524	120	421,707	192,794	614,501
Insurance	-	-	8,922	8,922	136,192	145,114
Depreciation	-	-	27,509	27,509	433,553	461,062
Interest	-	-	-	-	108,017	108,017
Allocated program support	886,269	-	-	886,269	(886,269)	-
Allocated occupancy costs	714,331	34,319	4,531	753,181	(753,181)	-
Total	<u>\$ 13,526,637</u>	<u>\$ 925,549</u>	<u>\$ 215,091</u>	<u>\$ 14,667,277</u>	<u>\$ 2,281,741</u>	<u>\$ 16,949,018</u>

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The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statements of Changes in Net Assets****Years Ended September 30, 2020 and 2019**

	<u>2020</u>	<u>2019</u>
Net assets without donor restrictions		
Excess (deficiency) of revenue over expenses	\$ 948,835	\$ (386,749)
Change in fair value of interest rate swaps	(231,169)	26,916
Net assets released from restriction for capital acquisition	<u>129,356</u>	<u>31,012</u>
Increase (decrease) in net assets without donor restrictions	<u>847,022</u>	<u>(328,821)</u>
Net assets with donor restrictions		
Contributions	224,245	205,027
Grants for capital acquisition	82,721	126,142
Net assets released from restriction for operations	(242,945)	(75,197)
Net assets released from restriction for capital acquisition	<u>(129,356)</u>	<u>(31,012)</u>
(Decrease) increase in net assets with donor restrictions	<u>(65,335)</u>	<u>224,960</u>
Change in net assets	781,687	(103,861)
Net assets, beginning of year	<u>10,268,314</u>	<u>10,372,175</u>
Net assets, end of year	<u>\$11,050,001</u>	<u>\$10,268,314</u>

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The accompanying notes are an integral part of these consolidated financial statements.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Consolidated Statements of Cash Flows**

**Years Ended September 30, 2020 and 2019**

	<u>2020</u>	<u>2019</u>
Cash flows from operating activities		
Change in net assets	\$ 781,687	\$ (103,861)
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation	462,768	461,062
Equity in earnings of limited liability company	6,877	3,489
Change in fair value of interest rate swaps	231,169	(26,916)
Grants for capital acquisition	(82,721)	(126,142)
(Increase) decrease in the following assets:		
Patient accounts receivable	(39,883)	93,540
Grants receivable	(205,857)	(223,739)
Other receivable	106,794	(63,959)
Inventory	(48,107)	(9,265)
Other current assets	(69,394)	61,163
(Decrease) increase in the following liabilities:		
Accounts payable and accrued expenses	(3,984)	25,215
Accrued payroll and related expenses	361,340	41,334
Deferred revenue	(12,997)	(32,278)
Provider Relief Funds	196,549	-
COVID-19 Emergency Healthcare System Relief Fund refundable advance	<u>250,000</u>	<u>-</u>
Net cash provided by operating activities	<u>1,934,241</u>	<u>99,643</u>
Cash flows from investing activities		
Equity distribution from limited liability company	12,224	-
Capital acquisitions	<u>(708,997)</u>	<u>(306,944)</u>
Net cash used by investing activities	<u>(696,773)</u>	<u>(306,944)</u>
Cash flows from financing activities		
Grants for capital acquisition	82,721	126,142
Proceeds from issuance of long-term debt	2,100,000	-
Principal payments on long-term debt	<u>(1,328,216)</u>	<u>(99,085)</u>
Net cash provided by financing activities	<u>854,505</u>	<u>27,057</u>
Net increase (decrease) in cash and cash equivalents and restricted cash	2,091,973	(180,244)
Cash and cash equivalents and restricted cash, beginning of year	<u>4,366,121</u>	<u>4,546,365</u>
Cash and cash equivalents and restricted cash, end of year	\$ <u>6,458,094</u>	\$ <u>4,366,121</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidated Statements of Cash Flows (Concluded)****Years Ended September 30, 2020 and 2019**

	<u>2020</u>	<u>2019</u>
Breakdown of cash and cash equivalents and restricted cash, end of year		
Cash and cash equivalents	\$ 3,504,514	\$ 1,422,407
Assets limited as to use	<u>2,953,580</u>	<u>2,943,714</u>
	<u>\$ 6,458,094</u>	<u>\$ 4,366,121</u>
Supplemental disclosure of cash flow information		
Cash paid for interest	<u>\$ 111,808</u>	<u>\$ 108,017</u>
Capital expenditures included in accounts payable	<u>\$ 118,827</u>	<u>\$ 177,773</u>

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The accompanying notes are an integral part of these consolidated financial statements.

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

### Notes to Consolidated Financial Statements

September 30, 2020 and 2019

#### Organization

Lamprey Health Care, Inc. (LHC) is a not-for-profit corporation organized in the State of New Hampshire. LHC is a Federally Qualified Health Center (FQHC) whose primary purpose is to provide high quality family health, medical and behavioral health services to residents of southern New Hampshire without regard to the patient's ability to pay for these services.

#### Subsidiary

Friends of Lamprey Health Care, Inc. (FLHC) is a not-for-profit corporation organized in the State of New Hampshire. FLHC's primary purpose is to support LHC. FLHC is also the owner of the property occupied by LHC's administrative and program offices in Newmarket, New Hampshire. LHC is the sole member of FLHC.

### 1. Summary of Significant Accounting Policies

#### Basis of Presentation

The consolidated financial statements of the Organization have been prepared in accordance with U.S. generally accepted accounting principles (U.S. GAAP), which require the Organization to report information in the consolidated financial statements according to the following net asset classifications:

**Net assets without donor restrictions:** Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization. These net assets may be used at the discretion of the Organization's management and the Board of Directors.

**Net assets with donor restrictions:** Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity, of which there were none.

#### Principles of Consolidation

The consolidated financial statements include the accounts of LHC and its subsidiary, FLHC (collectively, the Organization). All significant intercompany balances and transactions have been eliminated in consolidation.

#### Use of Estimates

The preparation of consolidated financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2020 and 2019**

**Income Taxes**

Both LHC and FLHC are public charities under Section 501(c)(3) of the Internal Revenue Code. As public charities, the entities are exempt from state and federal income taxes on income earned in accordance with their tax-exempt purposes. Unrelated business income is subject to state and federal income tax. Management has evaluated the Organization's tax positions and concluded that the Organization has no unrelated business income or uncertain tax positions that require adjustment to the consolidated financial statements.

**COVID-19**

In March 2020 the World Health Organization declared coronavirus disease (COVID-19) a global pandemic and the United States federal government declared COVID-19 a national emergency. The Organization implemented an emergency response to ensure the safety of its patients, staff and the community. The school based dental health program has been suspended until schools reopen and are able to provide adequate space for the services in accordance with regulatory guidelines. The Organization's senior transportation program was suspended due to the pandemic and has since been permanently discontinued with other local transportation programs providing these services to the communities. In adhering to guidelines issued by the State of New Hampshire and the Center for Disease Control, the Organization took steps to create safe distances between both staff and patients. These efforts resulted in the temporary furlough and reduction of hours for 17% of staff and a temporary reduction in clinic hours. All providers received the necessary equipment to allow for medical and behavioral health visits using telehealth. Facility modifications included installation of plexi-glass partitions, restructuring of work stations to allow for 6 feet between staff, heating, ventilation, and air conditioning systems were modified to improve air exchange rates and the tents and awnings were setup to allow screening, testing and vaccine administration outside of the four walls of the clinics. In addition, the Organization created infection control wings at all sites for positively screened patients.

The Coronavirus Aid, Relief, and Economic Security (CARES) Act and the Paycheck Protection Program and Health Care Enhancement Act (PPHCE) Act established the Provider Relief Fund (PRF) to support healthcare providers in the battle against the COVID-19 outbreak. The PRF is being administered by the U.S. Department of Health and Human Services (HHS). The Organization received PRF in the amount of \$196,549 during the year ended September 30, 2020. These funds are to be used for qualifying expenses and to cover lost revenue due to COVID-19 through June 30, 2021. The PRF are considered contributions and are recognized as income when qualifying expenditures have been incurred. The Organization has not incurred qualifying expenses or lost revenue necessary to recognize these contributions during the year ended September 30, 2020 and as a result the funds are recorded as a refundable advance on the consolidated balance sheet. Management expects to fully expend the funds prior to June 30, 2021.

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

### Notes to Consolidated Financial Statements

September 30, 2020 and 2019

On April 19, 2020, the Organization qualified for and received a loan in the amount of \$2,152,212 pursuant to the Paycheck Protection Program (PPP), a program implemented by the U.S. Small Business Administration (SBA) under the CARES Act and the PPPHCE Act. The principal amount of the PPP is subject to forgiveness, upon the Organization's request, to the extent that the proceeds are used to pay qualifying expenditures, including payroll costs, rent and utilities, incurred by the Organization during a specific covered period. The Organization is following the conditional contribution model to account for the PPP and management believes the Organization has met the conditions for forgiveness and has recognized the full amount of the PPP as revenue for the year ended September 30, 2020. The Organization has not yet applied for forgiveness and is required to do so no later than May 2021.

The SBA has indicated it will review PPP loans in excess of \$2,000,000 to determine whether the Organization can support the good-faith certification made when applying for the PPP that economic uncertainty made the loan request necessary to support ongoing operations. Management believes there is sufficient evidence to support the Organization's necessity of the PPP to support ongoing operations due to the economic uncertainty at the time of the loan application. Any difference between amounts previously estimated to be forgiven and amounts subsequently determined to be forgivable will be reflected in the year that such amounts become known.

On May 10, 2020, the Organization qualified for and received a loan in the amount of \$250,000 from the COVID-19 Emergency Healthcare System Relief Fund (Relief Loan), a program implemented by the State of New Hampshire (the State), Department of Health and Human Services. The principal amount of the Relief Loan has the potential to be converted to a grant at the sole discretion of the State. The Relief Loan was converted to a grant subsequent to September 30, 2020.

During 2020, the Organization was awarded cost reimbursable grants from HHS to support the Organization in preventing, preparing for, and responding to COVID-19 in the amount of \$1,237,052, of which \$856,195 has not been recognized at September 30, 2020 because qualifying expenditures have not yet been incurred.

#### **Cash and Cash Equivalents**

Cash and cash equivalents consist of business checking and savings accounts as well as petty cash funds.

The Organization maintains cash balances at several financial institutions. The balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At various times throughout the year, the Organization's cash balances may exceed FDIC insurance. The Organization has not experienced any losses in such accounts and management believes it is not exposed to any significant risk.

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

### Notes to Consolidated Financial Statements

September 30, 2020 and 2019

#### **Patient Accounts Receivable**

Patient accounts receivable are stated at the amount management expects to collect from outstanding balances. Patient accounts receivable are reduced by an allowance for uncollectible accounts. In evaluating the collectibility of patient accounts receivable, the Organization analyzes its past collection history from insured and uninsured patients and identifies trends for all funding sources in the aggregate. Management regularly reviews revenue and payer mix data in evaluating the sufficiency of the allowance for uncollectible accounts. Amounts not collected after all reasonable collection efforts have been exhausted are applied against the allowance for uncollectible accounts.

#### **Grants and Other Receivables**

Grants and other receivables are stated at the amount management expects to collect from outstanding balances. All such amounts are considered collectible.

The Organization receives a significant amount of grants from HHS. As with all government funding, these grants are subject to reduction or termination in future years. For the years ended September 30, 2020 and 2019, grants from HHS (including both direct awards and awards passed through other organizations) represented approximately 80% and 76%, respectively, of grants, contracts and contributions revenue.

A portion of the Organization's revenue is derived from cost-reimbursable grants, which are conditioned upon certain performance requirements and/or the incurrence of allowable qualifying expenses. Amounts received are recognized as revenue when the Organization has met the performance requirements or incurred expenditures in compliance with specific contract or grant provisions, as applicable. Amounts received prior to incurring qualifying expenditures are reported as deferred revenue. The Organization has been awarded cost reimbursable grants in the amount of \$4,233,420, the majority of which are available through May and June 2021, that have not been recognized at September 30, 2020 because qualifying expenditures have not yet been incurred.

#### **Investment in Limited Liability Company**

The Organization was one of eight partners in Primary Health Care Partners (PHCP), a limited liability company organized in New Hampshire. The Organization's investment in PHCP was reported on the equity method due to the Organization's ability to exercise significant influence over reporting and financial policies. The Organization's investment in PHCP amounted to \$19,101 at September 30, 2019. PHCP was terminated on December 31, 2019 due to changes in the regulatory environment in New Hampshire. The Organization's capital balance was distributed to the Organization during 2020 in the amount of \$12,224, resulting in a recognized loss of \$6,877.

#### **Property and Equipment**

Property and equipment are carried at cost. Maintenance, repairs and minor renewals are expensed as incurred and renewals and betterments are capitalized. Provision for depreciation is computed using the straight-line method over the useful lives of the related assets. The Organization's capitalization policy is applicable for acquisitions greater than \$5,000.

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

### Notes to Consolidated Financial Statements

September 30, 2020 and 2019

#### **Patient Service Revenue**

Patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

#### **340B Drug Pricing Program**

LHC, as an FQHC, is eligible to participate in the 340B Drug Pricing Program. The program requires drug manufacturers to provide outpatient drugs to FQHCs and other identified entities at a reduced price. LHC contracts with local pharmacies under this program. The local pharmacies dispense drugs to eligible patients of LHC and bill insurances on behalf of LHC. Reimbursement received by the pharmacies is remitted to LHC net of dispensing and administrative fees.

#### **Contributions**

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received, which is then treated as cost. The gifts are reported as net assets with donor restrictions if they are received with donor stipulations that limit use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the consolidated statements of operations as net assets released from restriction. Contributions whose restrictions are met in the same period as the support was received are recognized as net assets without donor restrictions.

The Organization has adopted Financial Accounting Standards Board Accounting Standards Update (ASU) No. 2018-08, *Not-for-Profit Entities (Topic 958), Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. ASU No. 2018-08 applies to all entities that receive or make contributions and clarifies the definition of transactions accounted for as an exchange transaction subject to applicable guidance for revenue recognition, and transactions that should be accounted for as contributions (non-exchange transactions) subject to the contribution accounting model. Further, ASU No. 2018-08 provides criteria for evaluating whether contributions are unconditional or conditional. Conditional contributions specify a barrier that the recipient must overcome and a right of return that releases the donor from its obligation if the barrier is not achieved, otherwise the contribution is unconditional. The adoption of ASU No. 2018-08 had no impact on the Organization's net assets, results of its operations, or cash flows.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2020 and 2019****Functional Expenses**

The consolidated financial statements report certain categories of expenses that are attributable to more than one program or supporting function of the Organization. Expenses which are allocated between program services and administrative support include employee benefits which are allocated based on direct wages and facilities and related costs which are allocated based upon square footage occupied by the program.

**Excess (Deficiency) of Revenue Over Expenses**

The consolidated statements of operations reflect the excess (deficiency) of revenue over expenses. Changes in net assets without donor restriction which are excluded from this measure include contributions of long-lived assets (including assets acquired using contributions which, by donor restriction, were to be used for the purposes of acquiring such assets) and changes in fair value of an interest rate swap that qualifies for hedge accounting.

**Subsequent Events**

For purposes of the preparation of these consolidated financial statements, management has considered transactions or events occurring through January 28, 2021, the date that the consolidated financial statements were available to be issued. Management has not evaluated subsequent events after that date for inclusion in the consolidated financial statements.

**2. Availability and Liquidity of Financial Assets**

The Organization regularly monitors liquidity required to meet its operating needs and other contractual commitments. The Organization has various sources of liquidity at its disposal, including cash and cash equivalents and a line of credit.

The Organization had working capital of \$3,339,240 and \$1,714,485 at September 30, 2020 and 2019, respectively. The Organization had average days cash and cash equivalents on hand (based on normal expenditures) of 75 and 31 at September 30, 2020 and 2019, respectively.

Financial assets available for general expenditure within one year as of September 30 were as follows:

	<u>2020</u>	<u>2019</u>
Cash and cash equivalents	\$ 3,504,514	\$ 1,422,407
Patient accounts receivable, net	1,277,013	1,237,130
Grants receivable	658,568	452,711
Other receivables	<u>130,004</u>	<u>236,798</u>
Financial assets available	<u>\$ 5,570,099</u>	<u>\$ 3,349,046</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2020 and 2019**

The Organization has certain board-designated assets limited as to use which are available for general expenditure within one year in the normal course of operations upon obtaining approval from the Board of Directors and other assets limited as to use for donor-restricted purposes, which are more fully described in Note 4. Accordingly, these assets have not been included in the quantitative information above.

The Organization's goal is generally to have, at the minimum, the U.S. Health Resources and Services Administration recommended days cash and cash equivalents on hand for operations of 30 days.

The Organization has a \$1,000,000 line of credit, as discussed in more detail in Note 6.

**3. Patient Accounts Receivable**

Patient accounts receivable consisted of the following at September 30:

	<u>2020</u>	<u>2019</u>
Patient accounts receivable	\$ 1,587,492	\$ 1,397,194
Contract 340B pharmacy program receivables	<u>178,003</u>	<u>75,586</u>
Total patient accounts receivable	<b>1,765,495</b>	1,472,780
Allowance for doubtful accounts	<u>(488,482)</u>	<u>(235,650)</u>
Patient accounts receivable, net	<b><u>\$ 1,277,013</u></b>	<b><u>\$ 1,237,130</u></b>

A reconciliation of the allowance for uncollectible accounts follows:

	<u>2020</u>	<u>2019</u>
Balance, beginning of year	\$ 235,650	\$ 254,097
Provision for bad debts	<b>497,961</b>	398,544
Write-offs	<u>(245,129)</u>	<u>(416,991)</u>
Balance, end of year	<b><u>\$ 488,482</u></b>	<b><u>\$ 235,650</u></b>

The provision for bad debts and allowance for uncollectible accounts increased for the year ended and at September 30, 2020, respectively, as a result of complications in the collection process during the COVID-19 pandemic.

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payer agreements. Primary payers representing 10% or more of the Organization's gross patient accounts receivable are as follows at September 30:

	<u>2020</u>	<u>2019</u>
Medicare	<b>15%</b>	17%
Medicaid	<b>19%</b>	19%

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2020 and 2019**

**4. Assets Limited as To Use**

Assets limited as to use are made up of cash and cash equivalents which are to be used for the following purposes at September 30:

	<u>2020</u>	<u>2019</u>
Repairs and maintenance on the real property collateralizing loans with the United States Department of Agriculture, Rural Development (Rural Development)	\$ _____ -	\$ <u>142,092</u>
Board-designated for		
Transportation	<b>16,982</b>	16,982
Working capital	<b>1,391,947</b>	1,391,947
Capital improvements	<b><u>1,139,165</u></b>	<u>951,717</u>
Total board-designated	<b><u>2,548,094</u></b>	<u>2,360,646</u>
Donor restricted	<b><u>405,486</u></b>	<u>440,976</u>
Total	<b><u>\$ 2,953,580</u></b>	<b><u>\$ 2,943,714</u></b>

**5. Property and Equipment**

Property and equipment consists of the following at September 30:

	<u>2020</u>	<u>2019</u>
Land and improvements	\$ <b>1,154,753</b>	\$ 1,154,753
Building and improvements	<b>11,661,674</b>	10,970,378
Furniture, fixtures and equipment	<b><u>1,887,073</u></b>	<u>1,799,636</u>
Total cost	<b>14,703,500</b>	13,924,767
Less accumulated depreciation	<b><u>7,115,614</u></b>	<u>6,667,847</u>
	<b>7,587,886</b>	7,256,920
Construction in progress and assets not in service	<b><u>207,975</u></b>	<u>351,658</u>
Property and equipment, net	<b><u>\$ 7,795,861</u></b>	<b><u>\$ 7,608,578</u></b>

Property and equipment acquired with Federal grant funds are subject to specific federal standards for sales and other dispositions. In many cases, the Federal government retains a residual ownership interest in the assets, requiring prior approval and restrictions on disposition.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2020 and 2019**

**6. Line of Credit**

The Organization has an available \$1,000,000 revolving line of credit from a local bank through May 31 2021, with an interest rate at Prime, but not less than 3.25% (3.25% at September 30, 2020). The line of credit is collateralized by all business assets. There was no outstanding balance as of September 30, 2020 and 2019.

**7. Long-Term Debt**

Long-term debt consists of the following at September 30:

	<u>2020</u>	<u>2019</u>
Promissory note payable to local bank; see terms outlined below. (1)	\$ 829,242	\$ 851,934
Promissory note payable to local bank; see terms outlined below. (2)	2,079,808	-
5.375% promissory note payable to Rural Development, paid in monthly installments of \$4,949, which includes interest, through June 2026. The note was collateralized by all tangible property owned by the Organization. The note was paid in full through refinancing on October 2, 2019; see (2) below.	-	335,509
4.75% promissory note payable to Rural Development, paid in monthly installments of \$1,892, which includes interest, through November 2033. The note was collateralized by all tangible property owned by the Organization. The note was paid in full through refinancing on October 2, 2019; see (2) below.	-	231,091
4.375% promissory note payable to Rural Development, paid in monthly installments of \$5,000, which includes interest, through December 2036. The note was collateralized by all tangible property owned by the Organization. The note was paid in full through refinancing on October 2, 2019; see (2) below.	-	<u>718,732</u>
Total long-term debt	<b>2,909,050</b>	2,137,266
Less current maturities	<b><u>88,027</u></b>	<u>106,190</u>
Long-term debt, less current maturities	<b><u>\$ 2,821,023</u></b>	<b><u>\$ 2,031,076</u></b>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2020 and 2019**

(1) The Organization has a promissory note with a local bank which is a ten-year balloon note to be paid at the amortization rate of 30 years, with variable monthly payments of principal and interest at 85% of the one-month LIBOR rate plus 2.125% through January 2022 when the balloon payment is due. The note is collateralized by the real estate. The Organization has an interest rate swap agreement for the ten-year period through 2022 that limits the potential interest rate fluctuation and substantively fixes the rate at 4.13%.

(2) On October 2, 2019, the Organization obtained a \$2,100,000 promissory note with a local bank, which repaid the notes payable due to Rural Development in the amount of \$1,285,332 and included additional financing to renovate the Organization's Newmarket clinical building. The note has a ten-year balloon and is to be paid at the amortization rate of 30 years, with variable monthly principal payments plus interest at the one-month LIBOR rate plus 1.5% through October 2029 when the balloon payment is due. The note is collateralized by the real estate. The Organization has an interest rate swap agreement for the ten-year period through 2029 that limits the potential interest rate fluctuation and substantially fixes the rate at 3.173%.

The fair value of the interest rate swap agreements and a previous swap agreement in 2019 was a liability of \$217,657 and an asset of \$13,512 at September 30, 2020 and 2019, respectively.

The Organization is required to meet certain administrative and financial covenants under the loan agreements included above. In the event of default, the bank has the option to terminate the agreement and immediately request payment of the outstanding debt without notice of any kind to the Organization. The Organization was in compliance with all loan covenants at September 30, 2020.

Maturities of long-term debt for the next five years and thereafter are as follows at September 30:

2021	\$ 88,027
2022	829,785
2023	46,465
2024	47,812
2025	49,543
Thereafter	<u>1,847,418</u>
Total	<u>\$ 2,909,050</u>

**8. Derivative Financial Instruments**

The Organization participates in certain fixed-payor swap contracts related to underlying, variable rate debt obligations. The purpose of these contracts is to protect the Organization against rising interest rates related to the variable rate debt. These contracts qualify for hedge accounting as a cash flow hedge and are reported at fair value as an asset or a liability. The change in fair value of the contracts are reported as change in net assets without donor restrictions. The Organization expects to hold the swap contracts until their respective maturities.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2020 and 2019**

The interest swap contract terms are summarized as follows at September 30:

<u>Entity</u>	<u>Fixed Rate Paid</u>	<u>Variable Rate Received</u>	<u>Notional Amount</u>	<u>2020 Fair Value Asset (Liability)</u>	<u>2019 Fair Value Asset (Liability)</u>	<u>Termination Date</u>	<u>Counterparty</u>
LHC	4.1300 %	2.2578 %	\$ 829,242	\$ (18,241)	\$ 13,512	11-19-2021	TD Bank
FLHC	3.1730 %	1.6568 %	2,061,527	<u>(199,416)</u>	<u>-</u>	10-02-2029	TD Bank
Cumulative unrealized loss				<u>\$ (217,657)</u>	<u>\$ 13,512</u>		

U.S. GAAP establish a fair value hierarchy that distinguishes between market participant assumptions based on market data obtained from sources independent of the reporting entity (observable inputs that are classified within Levels 1 and 2 of the hierarchy) and the reporting entity's own assumptions about market participant assumptions (unobservable inputs classified within Level 3 of the hierarchy).

*Level 1* — Quoted prices (unadjusted) for identical assets or liabilities in active markets that the entity has the ability to access as of the measurement date.

*Level 2* — Significant other observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

*Level 3* — Significant unobservable inputs that reflect an entity's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

The Organization uses inputs other than quoted prices that are observable to value the interest rate swaps. The Organization considers these inputs to be Level 2 inputs in the context of the fair value hierarchy. These values represent the estimated amounts the Organization would receive or pay to terminate agreements, taking into consideration current interest rates and the current creditworthiness of the counterparty.

**9. Net Assets**

Net assets without donor restrictions are designated for the following purposes at September 30:

	<u>2020</u>	<u>2019</u>
Undesignated	\$ 8,031,136	\$ 7,371,562
Board-designated	<u>2,548,094</u>	<u>2,360,646</u>
Total	<u>\$10,579,230</u>	<u>\$ 9,732,208</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Notes to Consolidated Financial Statements****September 30, 2020 and 2019**

Net assets with donor restrictions were restricted for the following specific purposes at September 30:

	<u>2020</u>	<u>2019</u>
Temporary in nature:		
Capital improvements	\$ 214,647	\$ 231,437
Community programs	170,745	181,151
Substance abuse prevention	20,094	28,388
Grants for capital acquisitions not in service	<u>65,285</u>	<u>95,130</u>
Total	<u>\$ 470,771</u>	<u>\$ 536,106</u>

**10. Patient Service Revenue**

Patient service revenue was as follows for the years ended September 30:

	<u>2020</u>	<u>2019</u>
Gross charges	\$13,852,130	\$13,786,408
340B contract pharmacy revenue	<u>1,617,196</u>	<u>1,139,085</u>
Total gross revenue	<b>15,469,326</b>	14,925,493
Contractual adjustments	(5,010,816)	(4,793,060)
Sliding fee discounts	(811,423)	(964,485)
Other patient related revenue	<u>559,716</u>	<u>256,100</u>
Total patient service revenue	<u>\$10,206,803</u>	<u>\$ 9,424,048</u>

The mix of gross patient service revenue from patients and third-party payers was as follows for the years ended September 30:

	<u>2020</u>	<u>2019</u>
Medicare	14 %	17 %
Medicaid	34 %	31 %
Blue Cross Blue Shield	17 %	17 %
Other payers	22 %	21 %
Self-pay and sliding fee scale patients	<u>13 %</u>	<u>14 %</u>
	<u>100 %</u>	<u>100 %</u>

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

### Notes to Consolidated Financial Statements

September 30, 2020 and 2019

Laws and regulations governing the Medicare, Medicaid and 340B programs are complex and subject to interpretation. The Organization believes that it is in compliance with all laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties and exclusion from the Medicare, Medicaid and 340B programs. Differences between amounts previously estimated and amounts subsequently determined to be recoverable or payable are included in patient service revenue in the year that such amounts become known.

A summary of the payment arrangements with major third-party payers follows:

#### Medicare

The Organization is primarily reimbursed for medical and ancillary services based on the lesser of actual charges or prospectively set rates for an encounter furnished to a Medicare beneficiary. Certain other services are reimbursed based on fee-for-service rate schedules.

#### Medicaid

The Organization is primarily reimbursed for medical and ancillary services based on prospectively set rates for an encounter furnished to a Medicaid beneficiary. Certain other services, including most dental services, are reimbursed based on fee-for-service rate schedules.

#### Other Payers

The Organization has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. Under these arrangements, the Organization is reimbursed for services based on contractually obligated payment rates for each Current Procedural Terminology code, which may be less than the Organization's public fee schedule.

#### Uninsured Patients

The Organization provides care to patients who meet certain criteria under its sliding fee discount policy without charge or at amounts less than its established rates. Because the Organization does not pursue collection of amounts determined to qualify as charity care, they are not reported as net patient service revenue. The Organization estimates the costs associated with providing this care by calculating the ratio of total cost to total charges, and then multiplying that ratio by the gross uncompensated charges associated with providing care to patients eligible for the sliding fee discount program. The estimated cost of providing services to patients under the Organization's sliding fee discount program amounted to \$1,041,631 and \$1,053,562 for the years ended September 30, 2020 and 2019, respectively. The Organization is able to provide these services with a component of funds received through federal grants.

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.**

**Notes to Consolidated Financial Statements**

**September 30, 2020 and 2019**

**11. Retirement Plan**

The Organization has a defined contribution plan under Internal Revenue Code Section 403(b). The Organization contributed \$292,808 and \$300,572 for the years ended September 30, 2020 and 2019, respectively.

**12. Medical Malpractice**

The Organization is protected from medical malpractice risk as an FQHC under the Federal Tort Claims Act (FTCA). The Organization has additional medical malpractice insurance, on a claims-made basis, for coverage outside the scope of the protection of the FTCA. As of September 30, 2020, there were no known malpractice claims outstanding which, in the opinion of management, will be settled for amounts in excess of either FTCA or medical malpractice insurance coverage, nor are there any unasserted claims or incidents which require loss accrual. The Organization intends to renew medical malpractice insurance coverage on a claims-made basis and anticipates that such coverage will be available.

**13. Litigation**

From time-to-time certain complaints are filed against the Organization in the ordinary course of business. Management vigorously defends the Organization's actions in those cases and utilizes insurance to cover material losses. In the opinion of management, there are no matters that will materially affect the Organization's consolidated financial statements.

**SUPPLEMENTARY INFORMATION**

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Balance Sheet****September 30, 2020****ASSETS**

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	Eliminations	2020 Consolidated
Current assets				
Cash and cash equivalents	\$ 2,205,696	\$ 1,298,818	\$ -	\$ 3,504,514
Patient accounts receivable, net	1,277,013	-	-	1,277,013
Grants receivable	658,568	-	-	658,568
Other receivables	130,004	-	-	130,004
Inventory	129,591	-	-	129,591
Other current assets	<u>147,799</u>	<u>-</u>	<u>-</u>	<u>147,799</u>
Total current assets	4,548,671	1,298,818	-	5,847,489
Assets limited as to use	2,953,580	-	-	2,953,580
Property and equipment, net	<u>6,009,215</u>	<u>1,786,646</u>	<u>-</u>	<u>7,795,861</u>
Total assets	<u>\$ 13,511,466</u>	<u>\$ 3,085,464</u>	<u>\$ -</u>	<u>\$ 16,596,930</u>

**LIABILITIES AND NET ASSETS**

Current liabilities				
Accounts payable and accrued expenses	\$ 578,888	\$ -	\$ -	\$ 578,888
Accrued payroll and related expenses	1,322,364	-	-	1,322,364
Deferred revenue	72,421	-	-	72,421
Due to affiliate				
Provider Relief Funds	196,549	-	-	196,549
COVID-19 Emergency Healthcare System Relief Fund refundable advance	250,000	-	-	250,000
Due to (from) affiliate	22,604	(22,604)	-	-
Current maturities of long-term debt	<u>44,453</u>	<u>43,574</u>	<u>-</u>	<u>88,027</u>
Total current liabilities	2,487,279	20,970	-	2,508,249
Long-term debt, less current maturities	784,789	2,036,234	-	2,821,023
Fair value of interest rate swap	18,241	199,416	-	217,657
Due to (from) affiliate	<u>1,104,410</u>	<u>(1,104,410)</u>	<u>-</u>	<u>-</u>
Total liabilities	<u>4,394,719</u>	<u>1,152,210</u>	<u>-</u>	<u>5,546,929</u>
Net assets				
Without donor restrictions	8,645,976	1,933,254	-	10,579,230
With donor restrictions	<u>470,771</u>	<u>-</u>	<u>-</u>	<u>470,771</u>
Total net assets	<u>9,116,747</u>	<u>1,933,254</u>	<u>-</u>	<u>11,050,001</u>
Total liabilities and net assets	<u>\$ 13,511,466</u>	<u>\$ 3,085,464</u>	<u>\$ -</u>	<u>\$ 16,596,930</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Balance Sheet****September 30, 2019****ASSETS**

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	Eliminations	2019 Consolidated
Current assets				
Cash and cash equivalents	\$ 453,924	\$ 968,483	\$ -	\$ 1,422,407
Patient accounts receivable, net	1,237,130	-	-	1,237,130
Grants receivable	452,711	-	-	452,711
Other receivables	236,798	59,797	(59,797)	236,798
Inventory	81,484	-	-	81,484
Other current assets	<u>78,405</u>	<u>-</u>	<u>-</u>	<u>78,405</u>
Total current assets	2,540,452	1,028,280	(59,797)	3,508,935
Investment in limited liability company	19,101	-	-	19,101
Assets limited as to use	2,861,010	82,704	-	2,943,714
Fair value of interest rate swap	13,512	-	-	13,512
Property and equipment, net	<u>5,718,217</u>	<u>1,890,361</u>	<u>-</u>	<u>7,608,578</u>
Total assets	<u>\$ 11,152,292</u>	<u>\$ 3,001,345</u>	<u>\$ (59,797)</u>	<u>\$ 14,093,840</u>

**LIABILITIES AND NET ASSETS**

Current liabilities				
Accounts payable and accrued expenses	\$ 701,615	\$ -	\$ (59,797)	\$ 641,818
Accrued payroll and related expenses	961,024	-	-	961,024
Deferred revenue	85,418	-	-	85,418
Current maturities of long-term debt	<u>65,417</u>	<u>40,773</u>	<u>-</u>	<u>106,190</u>
Total current liabilities	1,813,474	40,773	(59,797)	1,794,450
Long-term debt, less current maturities	<u>1,122,027</u>	<u>909,049</u>	<u>-</u>	<u>2,031,076</u>
Total liabilities	<u>2,935,501</u>	<u>949,822</u>	<u>(59,797)</u>	<u>3,825,526</u>
Net assets				
Without donor restrictions	7,680,685	2,051,523	-	9,732,208
With donor restrictions	<u>536,106</u>	<u>-</u>	<u>-</u>	<u>536,106</u>
Total net assets	<u>8,216,791</u>	<u>2,051,523</u>	<u>-</u>	<u>10,268,314</u>
Total liabilities and net assets	<u>\$ 11,152,292</u>	<u>\$ 3,001,345</u>	<u>\$ (59,797)</u>	<u>\$ 14,093,840</u>

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

## Consolidating Statement of Operations

Year Ended September 30, 2020

	Lamprey Health Care Inc.	Friends of Lamprey Health Care, Inc.	Eliminations	2020 Consolidated
Operating revenue				
Patient service revenue	\$10,206,803	\$ -	\$ -	\$10,206,803
Provision for bad debts	<u>(497,961)</u>	<u>-</u>	<u>-</u>	<u>(497,961)</u>
Net patient service revenue	9,708,842	-	-	9,708,842
Rental income	176,353	227,916	(227,916)	176,353
Grants, contracts and contributions	5,663,601	-	-	5,663,601
Paycheck Protection Program	2,152,212	-	-	2,152,212
Other operating revenue	410,188	121	-	410,309
Net assets released from restriction for operations	<u>242,945</u>	<u>-</u>	<u>-</u>	<u>242,945</u>
Total operating revenue	<u>18,354,141</u>	<u>228,037</u>	<u>(227,916)</u>	<u>18,354,262</u>
Operating expenses				
Salaries and wages	11,106,208	-	-	11,106,208
Employee benefits	2,096,040	-	-	2,096,040
Supplies	747,665	-	-	747,665
Purchased services	1,691,103	182	-	1,691,285
Facilities	798,038	4,300	(227,916)	574,422
Other operating expenses	474,659	-	-	474,659
Insurance	140,572	-	-	140,572
Depreciation	352,880	109,888	-	462,768
Interest expense	<u>79,288</u>	<u>32,520</u>	<u>-</u>	<u>111,808</u>
Total operating expenses	<u>17,486,453</u>	<u>146,890</u>	<u>(227,916)</u>	<u>17,405,427</u>
Excess of revenue over expenses	867,688	81,147	-	948,835
Change in fair value of interest rate swap	(31,753)	(199,416)	-	(231,169)
Net assets released from restriction for capital acquisition	<u>129,356</u>	<u>-</u>	<u>-</u>	<u>129,356</u>
Increase (decrease) in net assets without donor restrictions	<u>\$ 965,291</u>	<u>\$ (118,269)</u>	<u>\$ -</u>	<u>\$ 847,022</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Statement of Operations****Year Ended September 30, 2019**

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	Eliminations	2019 Consolidated
Operating revenue				
Patient service revenue	\$ 9,424,048	\$ -	\$ -	\$ 9,424,048
Provision for bad debts	<u>(398,544)</u>	<u>-</u>	<u>-</u>	<u>(398,544)</u>
Net patient service revenue	9,025,504	-	-	9,025,504
Rental income	194,443	227,916	(227,916)	194,443
Grants, contracts and contributions	6,104,270	-	-	6,104,270
Other operating revenue	1,162,752	103	-	1,162,855
Net assets released from restriction for operations	<u>75,197</u>	<u>-</u>	<u>-</u>	<u>75,197</u>
Total operating revenue	<u>16,562,166</u>	<u>228,019</u>	<u>(227,916)</u>	<u>16,562,269</u>
Operating expenses				
Salaries and wages	10,583,987	-	-	10,583,987
Employee benefits	2,056,956	-	-	2,056,956
Supplies	646,620	-	-	646,620
Purchased services	1,751,922	128	-	1,752,050
Facilities	808,327	300	(227,916)	580,711
Other operating expenses	611,489	3,012	-	614,501
Insurance	145,114	-	-	145,114
Depreciation	351,790	109,272	-	461,062
Interest	<u>64,359</u>	<u>43,658</u>	<u>-</u>	<u>108,017</u>
Total operating expenses	<u>17,020,564</u>	<u>156,370</u>	<u>(227,916)</u>	<u>16,949,018</u>
(Deficiency) excess of revenue over expenses	(458,398)	71,649	-	(386,749)
Change in fair value of interest rate swap	26,916	-	-	26,916
Net assets released from restriction for capital acquisition	<u>31,012</u>	<u>-</u>	<u>-</u>	<u>31,012</u>
(Decrease) increase in net assets without donor restrictions	<u>\$ (400,470)</u>	<u>\$ 71,649</u>	<u>\$ -</u>	<u>\$ (328,821)</u>

## LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.

## Consolidating Statement of Changes in Net Assets

Year Ended September 30, 2020

	Lamprey Health Care, Inc.	Friends of Lamprey Health Care, Inc.	2020 Consolidated
Net assets without donor restrictions			
Excess of revenue over expenses	\$ 867,688	\$ 81,147	\$ 948,835
Change in fair value of interest rate swap	(31,753)	(199,416)	(231,169)
Net assets released from restriction for capital acquisition	<u>129,356</u>	<u>-</u>	<u>129,356</u>
Increase (decrease) in net assets without donor restrictions	<u>965,291</u>	<u>(118,269)</u>	<u>847,022</u>
Net assets with donor restrictions			
Contributions	224,245	-	224,245
Grants for capital acquisition	82,721	-	82,721
Net assets released from restriction for operations	(242,945)	-	(242,945)
Net assets released from restrictions for capital acquisition	<u>(129,356)</u>	<u>-</u>	<u>(129,356)</u>
Decrease in net assets with donor restrictions	<u>(65,335)</u>	<u>-</u>	<u>(65,335)</u>
Change in net assets	899,956	(118,269)	781,687
Net assets, beginning of year	<u>8,216,791</u>	<u>2,051,523</u>	<u>10,268,314</u>
Net assets, end of year	<u>\$ 9,116,747</u>	<u>\$ 1,933,254</u>	<u>\$11,050,001</u>

**LAMPREY HEALTH CARE, INC. AND FRIENDS OF LAMPREY HEALTH CARE, INC.****Consolidating Statement of Changes in Net Assets****Year Ended September 30, 2019**

	<u>Lamprey Health Care, Inc.</u>	<u>Friends of Lamprey Health Care, Inc.</u>	<u>2019 Consolidated</u>
Net assets without donor restrictions			
(Deficiency) excess of revenue over expenses	\$ (458,398)	\$ 71,649	\$ (386,749)
Change in fair value of interest rate swap	26,916	-	26,916
Net assets released from restriction for capital acquisition	<u>31,012</u>	<u>-</u>	<u>31,012</u>
(Decrease) increase in net assets without donor restrictions	<u>(400,470)</u>	<u>71,649</u>	<u>(328,821)</u>
Net assets with donor restrictions			
Contributions	205,027	-	205,027
Grants for capital acquisition	126,142	-	126,142
Net assets released from restrictions for operations	(75,197)	-	(75,197)
Net assets released from restriction for capital acquisition	<u>(31,012)</u>	<u>-</u>	<u>(31,012)</u>
Increase in net assets with donor restrictions	<u>224,960</u>	<u>-</u>	<u>224,960</u>
Change in net assets	(175,510)	71,649	(103,861)
Net assets, beginning of year	<u>8,392,301</u>	<u>1,979,874</u>	<u>10,372,175</u>
Net assets, end of year	<u>\$ 8,216,791</u>	<u>\$ 2,051,523</u>	<u>\$10,268,314</u>

# LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

## 2021 Board of Directors

**Frank Goodspeed** (President/Chair)



Term Ends 2023

Affiliation: Tropic Star Development

**Michelle Boom**



Term Ends 2022

Affiliation: Homemaker

**Raymond Goodman, III** (Vice President)



Term ends 2021

Affiliation: Children's Trust

**James Brewer**



Term Ends 2022

Affiliation: Kennebunk Savings Bank

**Arvind Ranade**, (Treasurer)



Term Ends 2021

Affiliation: SymbioSys Solutions, Inc.

**Michael Chouinard**



Term Ends 2022

Affiliation: Retired

**Thomas "Chris" Drew** (Secretary)



Term Ends 2022

Affiliation: Seacoast Mental Health Center

**Elizabeth Crepeau**



Term ends 2021

Affiliation: Retired

**Audrey Ashton-Savage** (Immediate Past Chair/President)



Term Ends 2021

Affiliation: University of New Hampshire

**Carol LaCross**



Term Ends 2021

Affiliation: Retired

# LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

## 2021 Board of Directors

**Andrea Laskey**



Term Ends 2022  
Affiliation: Retired

**Wilberto Torres**



Term Ends 2022  
Affiliation: Torres Management and  
Research Corporation

**Mark Marandola**



Term Ends 2023  
Affiliation: Fidelity

**Laura Valencia**



Term Ends 2021  
Affiliation: Student

**Michael Reinke**



Term Ends 2023  
Affiliation: Nashua Soup Kitchen &  
Shelter

**Robert S. Woodward**



Term Ends 2022  
Affiliation: Retired

**Paula K. Smith, MBA, EdD**

**EDUCATION**

Rivier University, Nashua NH

Doctoral Program in Education. Leadership and Learning, May 2018

American Evaluation Association/Centers for Disease Control, Summer Institute, June 2012

The Dartmouth Institute of Health Policy and Clinical Practice, Coach the Coach: The Art of Coaching and Improving Quality, Microsystems Process Improvement Training, 2009

American Society of Training & Development, Professional Trainer Certificate Program, Concord, NH, 2002.

Cultural Competency; Training of Trainers Program, CCHCP Training Institute, Seattle, WA, 2000

University of Massachusetts, Boston, Harbor Campus, Boston, MA 02125  
Masters in Business Administration, 1991

Boston University School of Public Health, Boston, MA  
Negotiation and Conflict Resolution for Health Care Management  
(Training Program), 1991

University of New Hampshire, Durham, NH  
Bachelor of Science, Health Administration and Planning, 1985

**PROFESSIONAL EXPERIENCE**

**February 1998**

**Director, Southern New Hampshire Area Health Education Center (AHEC)**

**Present**

**Lamprey Health Care, Raymond, NH**

- Coordinates, plans and supervises the establishment and operation of a new AHEC center and programs designed to increase access to quality health care in southern NH.
- Partners with community-based providers and academic institutions to improve the supply and distribution of primary health care professionals and facilitates student placements in the community with an emphasis on medically underserved areas.
- Provides training opportunities for residents, nurse practitioners, social worker, physician assistant, nursing and medical students, as well as practicing providers.
- Develops and coordinates health care awareness programs for high school students with a focus on minority and disadvantaged populations.
- Coaches health center microteams in quality improvement initiatives.
- Oversees implementation of "Better Choices, Better Health" Chronic Disease Self-Management Program, including marketing, reporting, recruitment and management of leaders, and coordination of NH CDSMP Network, a learning community of leaders.
- Directs activities of the Seacoast Public Health Network, implementing the Community Health Improvement Plan.
- Develops and oversees the Nurse Practitioner Fellowship Program, including supervising staff to implement day to day operations, maintaining relationships with preceptors and specialty practices, and pursuing accreditation.

**October 1995 to  
February 1998**

**Regional Services Coordinator**

**New England Community Health Center Association, Woburn, MA**

- Provided technical assistance, policy analysis, and other membership services to state primary care associations in New England and the community health centers they serve;
- Coordinated educational sessions for primary care clinicians and administrators on a variety of health care topics; assisted in developing program for two community health conferences a year, as well as one-day programs;
- Acted as liaison for members of MIS/Fiscal Directors and other regional committees;
- Wrote grants, including concept development, implementation plans and budget, for government and foundation proposals;
- Designed survey instruments, analyzed data, and wrote reports for region-wide surveys of community health centers, including compensation survey, needs assessment for locum tenens, survey on management information systems, and survey on productivity and staffing ratios;
- Acted as Project Director of Phase III of the Mammography Access Project;
- Wrote and distributed quarterly newsletter to health centers and public health organizations throughout New England.

**February 1992 to  
October 1995**                    **Program Director**  
**Paula K. Smith**                    **Department of Medical Security, Boston, MA**  
**Page 2**

- Managed the Labor Shortage Initiative, a \$23 million state-wide program providing education and training opportunities in health care occupations; oversaw the allocation of funds to participating hospitals, colleges and universities, and community organizations; supervised the development of contracts; monitored program achievements.
- Developed, implemented, and managed the *Children's Medical Security Plan*, a health insurance program for uninsured children under the age of 13; negotiated and monitored contracts totaling nearly \$12 million with participating insurers; coordinated public relations and outreach activities related to the program; acted as a liaison with various advocacy groups.
- Managed *CenterCare*, a \$4 million managed care program providing services through contracts with 30 community health centers across the state; allocated resources to participating centers; developed and conducted training sessions on *CenterCare* program operations for health center staff; analyzed demographic and utilization data of participants.

**May 1990 to  
February 1992**                    **Contract Manager**  
**Department of Medical Security, Boston, MA**

- Coordinated the procurement process for both *CenterCare* and the Labor Shortage Initiative, which included writing Requests for Proposals (RFPs), reviewing and analyzing proposals, monitoring the contracting and administration of funded proposals, and acting as a liaison between interested parties;
- Monitored *CenterCare* by coordinating payments to contractors, conducting site visits at participating community health centers, and reporting on program status; managed administrative procedures and acted as a liaison between agencies for all contracts in accordance with regulations.

**October 1988 to  
May 1990**                    **Contract Specialist**  
**Office of the State Comptroller, Boston, MA**

- Assisted and instructed departments in the process of contract approval, as well as utilization of the state-wide automated accounting systems (MMARS);
- Developed policies in support of state regulations pertaining to contract approval.
- Supervised contract officers in the review and approval of statewide consultant contracts; created reports to monitor departmental activities; organized special projects.

**January 1988 to  
October 1988**                    **Contract Officer**  
**Office of the State Comptroller, Boston, MA**

- Reviewed and approved transactions on MMARS submitted by departments throughout the Commonwealth;
- Managed Tax Exempt Lease Purchase program of all departments in the Commonwealth;
- Utilized word processing and spreadsheet programs.

**September 1985 to  
January 1988**                    **Administrative Assistant**  
**Joseph M. Smith Community Health Center, Alston, MA**

- Provided assistance to the Executive Director in overall administration of health center,
- Assisted Finance Director in management of accounts, and prepared monthly invoices for all grant reimbursement, utilizing word processing and spreadsheet programs.
- Supervised the payroll system and managed personnel files for 60 employees;
- Acted as liaison between outside vendors and health center;
- Interviewed candidates for support staff positions.

#### **AFFILIATIONS**

Endowment for Health Board of Advisors, 2013-Present  
Recipient of 2007 NH Office of Minority Health Women's Health Recognition Award  
NH Leadership Board: American Lung Association, 2007-present  
Recipient of 2006 National AHEC Center for Excellence Award in Community Programming  
Leadership New Hampshire 2003 Associate  
Member of National AHEC Organization  
Organizational Recipient of 2002 Champions in Diversity Award for Education

**References Available Upon Request**

## MARIA REYES

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### ***Professional Summary***

Innovative senior level director with over 15 years of versatile non-profit management and social services experience. Demonstrated track record of managing financially sustainable federal, state and private foundation programs with measurable outcomes and community impact. Resourceful experience overseeing youth and adult community programs in a variety of settings including health, social services, public schools, libraries and other institutions. Over twenty years' experience of substance abuse and mental health counseling, case management, and community education in both inpatient/outpatient psychiatric and substance abuse treatment with diverse populations.

### **Skills and knowledge include:**

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- Health/cultural competency training
  - Strategic planning
  - Public Speaker/consultant
  - Community Outreach
  - Substance Abuse and Mental Health
  - Community mobilization
  - Government, state and private grant management
  - Outcome measurement
- 

### **YWCA Tulsa**

Tulsa, Oklahoma

Director of Immigrant and Refugee Center

2000-April 2015

Responsible for the direct oversight of a team of 25+ diverse professionals from over 10 countries and all operations. Diversified agency funding portfolio thru fee for service, augmented new foundation dollars thru solid community/donor relationships, and generated state/local government funding from \$450,000 to 1 million plus. Responsible for direct oversight of core program services: Immigration legal services, English Language classes to adult immigrants, refugee social services and numerous community projects/collaborations that provided health education and outreach to underserved communities. Forged solid partnerships and collaborations to implement community projects that address community health issues such as substance misuse/abuse, diabetes prevention, American Heart Association, Parenting skills, HIV/Aids, Alzheimer's awareness and others.

### **Highlights:**

- Instituted first medical Spanish elective course at Oklahoma State University Osteopathic College of Medicine for first and second year medical students.
- Reputation as skilled collaborator with strong partnerships-key member of community wide coalition that helped facilitate a one million dollar Robert Wood Johnson Foundation grant for Latino diabetes prevention health program.
- Spearheaded diabetes prevention academy of health for first generation Spanish speakers.
- Selected to participate and implement state wide Meth-360 program thru Drug Free America Campaign.

## **Maria Reyes**

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### **Tulsa Community College**

Adjunct Professor, Part-Time

Tulsa, Oklahoma

2003-2006

- Taught Chemical Dependency and Treatment Course to community college students.
- Community presenter on culture and mental health/substance abuse education to Tulsa's immigrant populations.

### **Parkside Hospital,**

Oklahoma Certified Drug and Alcohol Counselor #226

Tulsa, Oklahoma

1990-2000

- First mental health professional in Tulsa to create and implement community depression screenings to limited English proficiency populations.
- Launched the first Spanish-speaking case management caseload in the hospital's history.
- Provided group and individual counseling, case management and education to adults in inpatient and outpatient treatment/aftercare.
- Vital member of multidisciplinary team that assisted with court order evaluations and treatment placement.

### **CREDENTIALS**

EDUCATION	Plymouth State University, Plymouth New Hampshire-B.A. Spanish, Latin American Studies University of Valencia Spain-Junior Year Abroad program
CERTIFICATION	Certified Oklahoma Drug and Alcohol Counselor since 1990, (current) #226-Hospital based two year certification program (Maintain 20 CEU's yearly in addiction/mental health) Oklahoma Non-Profit Management Training
SKILLS	Proficient in Microsoft products, bilingual in Spanish and English Public Speaking, Teaching
ACHIEVEMENTS	YWCA Tulsa Community Outstanding Service Award-2015 Tulsa Partners-Language Cultural Bank Volunteer of the Year 2011 Tulsa Mental Health Association Education Award 2005 Parkside Hospital Employee of the Year 1985 Plymouth State University, New Hampshire- Foreign Language Award
COMMUNITY	Vice President of Coalition of Hispanic Organizations Board member of Tulsa Mental Health Association Board member and Co-President of Tulsa Language Cultural Bank Appointed Commissioner for the Tulsa Mayor's Commission on the Status of Women

References available upon request

# Julia B. Meuse

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## Education

### **University of New Hampshire, Durham, NH**

Bachelor of Science: Health Management and Policy

Dean's List: Spring 2017, Fall 2017, Spring 2018, Fall 2018, Spring 2019

**May 2019**

**GPA: 3.53**

## Experience

### **Lamprey Health Care, Raymond, NH**

*Program Coordinator*

*Program Assistant*

*Intern*

**July 2019- Present**

**September 2018- July 2019**

**May 2018-August 2018**

- Coordinate vaccination clinics and manage vaccine storage and ordering processes.
- Assist in the process of developing and implementing a tickborne illness prevention project with the Seacoast Public Health Network
- Collaborated in planning programs for health professionals with the Southern New Hampshire Area Health Education Center
- Coordinate Lamprey Healthcare's Nurse Practitioner Fellowship Program

### **Family Centered Counseling of New England, Nashua, NH**

*Remote Office Assistant*

- Demonstrated time management skills and self-motivation from working remotely
- Mastered insurance claim process
- Responsibly managed patient payments

**May 2017- August 2018**

### **Pinnacle Rehabilitation Network, Multiple Locations**

*Office Coordinator*

- Exeter Sport and Spine Therapy, Exeter, NH
- Hampton Physical Therapy of Seabrook, Seabrook, NH

- Provided courteous and knowledgeable front-end assistance
- Was responsible for managing copays, scheduling appointments, completing insurance verifications, and data entry

**May 2016- August 2016**

**June 2012- August 2015**

## Certifications

### **Community Health Worker Course**

Received certificate for completing Southern NH AHEC's 56 hour Community Health Worker training. Trained in healthcare service coordination, cultural effectiveness, community assessment skills, etc.

**June 2018- July 2018**

### **Child and Infant CPR Certified**

Completed objectives and skills in accordance with the American Heart Association CPR AED program for child and infant certification

**July 2018**

## Campus Involvement

### **Member of Student Organization for Health Leadership**

Attend meetings, healthcare panels, and network with Health Management and Policy alumni

**September 2015-Present**

## Volunteer Experience

### **The Fabulous Find Resale Boutique**

Partnered with non-profit boutique to sell my original artwork and donate profits to local community charities. Currently maintain inventory and fill special orders

**June 2017- Present**

## LINDSEY MESSINA

Passionate young adult with over two years of experience on the ground in prevention and advocacy efforts. Can manage multiple tasks at hand while maintaining and working toward the mission and vision of an organization. Looking to be more hands on and involved in community prevention efforts in the seacoast and surrounding counties.

### Experience

#### **Substance Misuse Prevention Coordinator; Seacoast Public Health Network — 2019 Present**

- Works in every region of the state to promote effective population level substance misuse prevention policies, programs, and practices.

#### **Coordinator, Programs and Education; Addiction Policy Forum — 2018–Present**

- Jan 2018 - May 2018 National Coordinator for the northeast. Scheduled introductory phone calls, follow up emails and provided resources to families in crisis.
- Assisted CEO in creating eBooks and online toolkits for community educators, first responders and professionals in the field of addiction.
  - i.e. Addiction and the Brain, Rx Disposal Toolkit
- Assisted and traveled around the country with the Executive Vice President of Community Relations in partnership with NDAA to bring trainings to District Attorneys on addiction and criminal justice reform.
- Assisted the Chief of Staff in administrative efforts and communication with national partners i.e. NDAA, FAVOR, CADCA etc.
  - Kept organized online files and created work-plans in Excel, Word and PowerPoint.
- Create, schedule and coordinate social media content for current and future online advocacy.

#### **Volunteer Director; Austin17House — 2017-Present**

- Built a non-profit from the ground up including infrastructure, mission/vision and funding.
- Network with partners in the Seacoast and Rockingham County to collaborate on prevention, treatment, recovery and advocacy efforts.
- Wrote grants and other proposals to organizations to sustain current and future programs.
- Created and implemented extended learning opportunities and programs for youth two nights a week.
- Schedule and host educational community workshops for youth and parents. i.e. understanding teen depression, suicide prevention, drug and alcohol prevention.
- Create and schedule social media content for Facebook, Instagram and current website.
- Manage volunteers including scheduling, training and staff appreciation.

### Certifications

- Signs of Suicide (SOS) Train the Trainer Certification (12 hour)

- National Alliance on Mental Illness (NAMI) Train the Trainer for Young Adults (12 hours)
- American Foundation for Suicide Prevention Train the Trainer (2 hour)
- Youth Mental Health First Aid Certification (8 hours)
- Emotional CPR (eCPR) training by Dr. Fisher from National Empowerment Center (14 hours)
- Teen Empowerment Youth Development Training Certification Program (18 hours)
- New Hampshire Children's Behavioral Health Collaborative Advocacy Training
- National Wellness Institute Resilience and Thriving Train the Trainer Certification (6 hours)
- National Wellness Institute Empowered Health Consciousness Train the Trainer Certification (6 hours)

## Education

Great Bay Community College – 2013 to 2015

- Liberal Arts Business

**Southern New Hampshire University – 2015 to 2017**

- AS Marketing with High Honors (GPA: 3.818)
  - Introduction to Psychology
  - English Composition
  - Introduction to Humanities
  - Consumer Behavior
  - Financial Accounting
  - Services Marketing

## Skills

- Self-motivated leader
- High communication skills with the ability to speak in front of large groups of people
- Ability to facilitate and/or work on a team
- Generate flyers and marketing materials for events
- Proficient in Microsoft Office including Word, Excel and PowerPoint
- SEO Marketing

## Awards and Acknowledgements

### *10 To Watch Awards 2019*

10 to Watch each year honors young professionals who make positive contributions to social and economic development in the Seacoast.

**CONTRACTOR NAME**

Key Personnel

<b>Name</b>	<b>Job Title</b>	<b>Salary</b>	<b>% Paid from this Contract</b>	<b>Amount Paid from this Contract</b>
Paula K. Smith	AHEC Director	\$115190	15.8%	\$18167
Maria Reyes	COC Facilitator	\$64634.40	94.5%	\$61096.39
Vacant	EP Manager	\$60,772	66.4%	\$40368
Lindsey Messina	Substance Misuse Prevention Coordinator	\$47587.50	96.4%	\$45882.66
Julia Meuse	Program Coordinator	\$43706.00	100%	\$43706
Vacant	CHW/Equity Coordinator	\$14040	100%	\$14040

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Mary Hitchcock Memorial Hospital ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended on January 22, 2021 (Item #28), as amended with Governor approval on December 17, 2020 and presented to the Executive Council as an Informational Item on April 7, 2020 (Informational Item #M), as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item on May 19, 2021, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$2,702,331
3. Modify Exhibit A Scope of Services by replacing it in its entirety with Exhibit A Scope of Work, Amendment #8, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor shall be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.
    - 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized

expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.

6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
  7. The Contractor may bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
    - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
    - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
9. Modify Exhibit B-1, Program Funding, Amendment #7 by deleting it in its entirety and replacing it with Exhibit B-1 Amendment #8, Program Funding, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-35, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-36, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-37, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-38, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-39, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-40, Amendment #8, which is attached hereto and incorporated by reference herein.
16. Add Exhibit B-41, Amendment #8, which is attached hereto and incorporated by reference herein.
17. Add Exhibit B-42, Amendment #8, which is attached hereto and incorporated by reference herein.
18. Add Exhibit B-43, Amendment #8, which is attached hereto and incorporated by reference herein.
19. Add Exhibit B-44, Amendment #8, which is attached hereto and incorporated by reference herein.
20. Add Exhibit B-45, Amendment #8, which is attached hereto and incorporated by reference herein.
21. Add Exhibit B-46, Amendment #8, which is attached hereto and incorporated by reference herein.
22. Add Exhibit B-47, Amendment #8, which is attached hereto and incorporated by reference herein.
23. Add Exhibit B-48, Amendment #8, which is attached hereto and incorporated by reference herein.
24. Add Exhibit B-49, Amendment #8, which is attached hereto and incorporated by reference herein.
25. Add Exhibit B-50, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

5/24/2021  
Date

DocuSigned by:  
*Patricia M. Tilley*  
Name: Patricia M. Tilley  
Title: Interim Director

Mary Hitchcock Memorial Hospital

5/24/2021  
Date

DocuSigned by:  
*Jennifer Lopez*  
Name: Jennifer Lopez  
Title: Director of Research Operations Finance

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

OFFICE OF THE ATTORNEY GENERAL

5/24/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
  
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\_\_\_\_\_  
Name: Catherine Pinos  
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



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**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient), in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host Regional Public Health Networks (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host two (2) Regional Public Health Networks for the regions of Upper Valley and Greater Sullivan County, as defined by the Department, to provide a broad range of public health services within one or more of the state's thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to ensure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor agrees that the Scope of Services applies to all regions identified in Section 2.1.1 above, unless otherwise noted as not applicable.
  - 2.1.3. The Contractor shall provide services that include, but are not limited to:
    - 2.1.3.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.3.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.3.3. Preventing the misuse of substances.
    - 2.1.3.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.3.5. Implementing young adult substance misuse prevention strategies.

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- 2.1.3.6. Providing School Based Vaccination Clinics.
- 2.1.3.7. Ensuring contract administration and leadership.
- 2.2. Public Health Advisory Council
  - 2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team and direction to public health activities within the assigned region. The Contractor shall:
    - 2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;
    - 2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:
      - 2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.
      - 2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issues.
      - 2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.
      - 2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.
      - 2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and collection.
    - 2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:
      - 2.2.1.3.1. Ensure meeting minutes are available to the public upon request.
      - 2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

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- 2.2.1.12. Advance the work of the RPHN by conducting a minimum of two educational and training programs annually to RPHN partners and others..
  - 2.2.1.13. Educate partners and stakeholder groups, including elected and appointed municipal officials, on the PHAC.
  - 2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.
- 2.3. Public Health Emergency Preparedness
- 2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:
    - 2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention’s (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.
    - 2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) coordinating and/or planning committee and/or workgroup to:
      - 2.3.1.2.1. Improve regional emergency response plans; and
      - 2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.
    - 2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.
    - 2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.
    - 2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.





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hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.

- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.
- 2.3.1.13. Regularly communicate with the Department's Area Agency contractor that provides developmental and acquired brain disorder services in the region.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State's emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training as needed to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC's Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department's SNS Coordinator to

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identify appropriate actions and priorities, that include, but are not limited to:

- 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans;
- 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.
- 2.3.1.21.3. ORR site visit as scheduled by the CDC and the Department.
- 2.3.1.21.4. Completion of relevant drills and/or exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate supplies prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.

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- 2.3.1.24. Participate, as requested, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.
- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health and Human Services Assistant Secretary for Preparedness and Response.
- 2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

2.4. Substance Misuse Prevention

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

- 2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.
- 2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.
- 2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes: assessment, capacity development, planning, implementation and evaluation.
- 2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department's guidance on what is evidenced informed.

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- 2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.
- 2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic models that demonstrates short, intermediate and long term measures in alignment the Three-Year Strategic Plan.
- 2.4.1.7. Advance, promote and implement substance misuse primary prevention strategies that incorporate the Institute of Medicine (IOM) categories of prevention of universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, and outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, at the direction of the Department's Bureau of Drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

2.5. Continuum of Care

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- 2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:
  - 2.5.1.1. Engage regional partners in ongoing updates of regional assets and gaps, and regional CoC plan development and implementation. The Contractor shall ensure regional partners include, but are not limited to:
    - 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Services providers.
    - 2.5.1.1.2. Primary health care providers.
    - 2.5.1.1.3. Behavioral health care providers.
    - 2.5.1.1.4. Other interested and/or affected parties.
  - 2.5.1.2. Work toward, and adapt as necessary and indicated, priorities and actions identified in the regional CoC development plan.
  - 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
    - 2.5.1.3.1. Increased awareness of and access to services;
    - 2.5.1.3.2. Increased communication and collaboration among providers; and
    - 2.5.1.3.3. Increases in capacity and delivery of services.
  - 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
  - 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work such as Integrated Delivery Networks.
  - 2.5.1.6. Work with the statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance, including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.

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2.5.1.7. Engage regional stakeholders to assist with information dissemination.

2.6. Young Adult Substance Misuse Prevention Strategies

2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within their region.

2.6.2. The contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:

2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:

2.6.2.1.1. Reducing risk factors;

2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and

2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.

2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.

2.7. School Based Vaccination Clinics

2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:

2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.

2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.

2.7.1.3. Distribute state-supplied promotional vaccination material

2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardian prior to administration of vaccine in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.

2.7.1.5. Request the NH Immunization Program (NHIP) to store consent form once the Contractor has completed data



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collection and reporting only if the contractor lacks the ability to store vaccination consents within HIPAA Guidelines.

- 2.7.1.6. Document, verify and store written or electronic record of vaccine administration in compliance with HIPAA and other state and federal regulations.
- 2.7.1.7. Request the NHIP to store records of vaccination administration once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination record within HIPAA Guidelines.
- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to the parent and/or legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient's primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care provider. The Contractor shall ensure information includes:
  - 2.7.1.9.1. Patient full name and one other unique patient identifier;
  - 2.7.1.9.2. Vaccine name;
  - 2.7.1.9.3. Vaccine manufacturer;
  - 2.7.1.9.4. Lot number;
  - 2.7.1.9.5. Date of vaccine expiration;
  - 2.7.1.9.6. Date of vaccine administration;
  - 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
  - 2.7.1.9.8. Edition date of the VIS given;
  - 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor's name); and
  - 2.7.1.9.10. Full name and title of person who administered the vaccine.

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- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian and/or parent, is provided access to this information on the day of vaccination.
- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in session school days.
- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise by providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director needs to be able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.

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2.7.2.6.5. Non-latex bandages.

- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
- 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP ensuring that listed requirements are met.
  - 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
  - 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
  - 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.
  - 2.7.3.5. Utilize NHIP training materials, or other educational materials as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
  - 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
  - 2.7.3.7. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
  - 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
  - 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
  - 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
  - 2.7.3.11. Account for every dose of vaccine.
  - 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
  - 2.7.3.13. Notify NHIP by contacting the NHIP Nursing help line and faxing incident forms of any adverse event within 24 hours of event occurring.

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- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturers recommended temperatures, the Contractor shall:
  - 2.7.3.14.1. Immediately quarantine the vaccine in an appropriate temperature setting, separating it from other vaccine, and label it "DO NOT USE".
  - 2.7.3.14.2. Contact the manufacturer immediately to explain the event duration and temperature information to determine if the vaccine is still viable.
  - 2.7.3.14.3. Notify NHIP immediately after contacting the manufacturer regarding any temperature excursion.
  - 2.7.3.14.4. Submit a Cold Chain Incident Report with a Data Logger Report to NHIP within 24 hours of temperature excursion occurrence.
  
- 2.7.4. The Contractor shall complete tasks within 24 hours of the completion of every clinic that include, but are not limited to:
  - 2.7.4.1. Updating State Vaccination system with total number of vaccines administered and wasted during each mobile clinic.
  - 2.7.4.2. Ensuring that doses administered and entered in the inventory system match the clinical documentation of doses administered.
  - 2.7.4.3. Submitting the hourly vaccine temperature log for the duration the vaccine is kept outside of the Contractor's established vaccine refrigerator.
  - 2.7.4.4. Submitting the following totals to NHIP outside of the vaccine ordering system that include the total number of:
    - 2.7.4.4.1. Students vaccinated.
    - 2.7.4.4.2. Vaccines wasted.
  - 2.7.4.5. Completing an annual year-end self-evaluation and improvement plan for areas that include, but are not limited to:



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- 2.7.4.5.1. Strategies that worked well in the areas of communication, logistics, or planning.
- 2.7.4.5.2. Areas for improvement both at the state and regional levels emphasizing strategies for implementing improvements.
- 2.7.4.5.3. Discussions relative to strategies that worked well for increasing both the number of clinics conducted at schools and the number of students vaccinated.
- 2.7.4.5.4. Discussions relative to future strategies and plans for increasing students vaccinated, including suggestions on how state level resources may aid in the effort.
- 2.7.5. The Contractor shall be funded through a combination of base funding and incentivized funding, in order to encourage the Contractor to offer vaccination at schools that have a greater economic disparity, as identified through reports generated by the NHIP in collaboration with the Department of Education (DOE).
- 2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:
  - 2.7.6.1. If a the Contractor is unable to provide vaccine to at least 50% of the schools listed, the contractor may show evidence of providing vaccine to additional schools listed but not previously served the year before in order to receive full funding.
  - 2.7.6.2. If NHIP and the Contractor both that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.
  - 2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 2.7, funding will be awarded on a sliding scale based on the percentage of schools listed, as follows:
    - 2.7.6.3.1. The percentage of listed school covered divided by 50%.
    - 2.7.6.3.2. The percentage determined by that equation in 2.7.6.3.1, above, will be multiplied by the total amount of dollars available for funding, beyond the Base

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portion of funding for a total of dollars awarded for that year.

2.8. Contract Administration and Leadership

2.8.1. The Contactor shall introduce and orient all funded staff to the work activities conducted through the contract agreement. The Contractor shall:

2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.

2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.

2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes .

2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

2.9. I-CAREProgram:

2.9.1. The Contractor shall support the suicide prevention goals of the department and NH's Suicide Prevention Council.

2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.

2.9.3. The Contractor shall ensure activities in the work plan support:

2.9.3.1. The I-CARE NH mental health and wellness initiative;

2.9.3.2. 9-8-8 National Suicide Prevention Lifeline expansion project; and/or

2.9.3.3. NH's Suicide Prevention Council's strategic plan.

2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.

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2.9.5. The Contractor shall submit an I-CARENH work plan and budget for Department approval within thirty (30) days of the contract effective date.

**3. Training and Technical Assistance Requirements**

3.1. The Contractor shall participate in training and technical assistance as follows:

3.1.1. Public Health Advisory Council

3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by the Department's DPHS and/or BDAS.

3.1.1.2. Complete a technical assistance needs assessment.

3.1.2. Public Health Emergency Preparedness

3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by Department's DPHS and/or Emergency Services Unit (ESU).

3.1.2.2. Complete a technical assistance needs assessment.

3.1.2.3. Attend up to two trainings per year offered by the Department's DPHS and/or ESU or the agency contracted by the Department's DPHS to provide training programs.

3.1.3. Substance Misuse Prevention

3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.

3.1.3.2. At the Department's request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including but not limited to:

3.1.3.2.1. Using data to inform plans and evaluate outcomes.

3.1.3.2.2. Using appropriate measures and tools.

3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.

3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.

3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.



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- 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and Development.
  - 3.1.4.2. Be familiar with RROSC and the Department's CoC systems development and the "No Wrong Door" approach to systems integration.
  - 3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.
  - 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
    - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
    - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
    - 3.1.4.4.3. Exchange information on CoC development work and techniques;
    - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development;
    - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
  - 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.

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Exhibit A Amendment #8

- 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
- 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
- 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics
  - 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with a current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
  - 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and status, and current BLS certificate shall be retained in training file.

#### 4. Staffing

- 4.1. The Contractor's staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN's efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.

4.3. Table 1 – Minimum Staffing Requirements

Mary Hitchcock Memorial Hospital

Exhibit A Amendment #8

Contractor Initials

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Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

## 5. Reporting

- 5.1. The Contractor shall participate in Site Visits, which includes, but is not limited to:
- 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide reports for the PHAC, that includes, but are not limited to submitting quarterly PHAC progress reports using an on-line system administered by the Department's DPHS.
- 5.3. The Contractor shall provide reports for the PHEP that include, but are not limited to:
- 5.3.1. Submitting quarterly PHEP progress reports using an on-line system administered by the Department's DPHS.
  - 5.3.2. Submitting all documentation necessary to complete the MCM ORR review or self-assessment.
  - 5.3.3. Submitting semi-annual action plans for MCM ORR activities on a form provided by the Department.
  - 5.3.4. Submitting information documenting the required MCM ORR-related drills and exercises.
  - 5.3.5. Submitting final After Action Reports for any other drills or exercises conducted.

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Regional Public Health Network Services  
Exhibit A Amendment #8**

- 5.4. The Contractor shall provide reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.4.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.4.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.4.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.4.4. Inputting data on a monthly basis by the 20<sup>th</sup> business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes but is not limited to:
    - 5.4.4.1. Number of individuals served or reached.
    - 5.4.4.2. Demographics.
    - 5.4.4.3. Strategies and activities per IOM by the six (6) activity types.
    - 5.4.4.4. Dollar Amount and type of funds used in the implementation of strategies and/or interventions.
    - 5.4.4.5. Percentage evidence based strategies.
  - 5.4.5. Submit annual report.
  - 5.4.6. Provide additional reports or data as required by the Department.
  - 5.4.7. Participate and administer the Regional SMP Stakeholder Survey in alternate years.
- 5.5. The Contractor shall provide reports for Continuum of Care that include, but are not limited to:
  - 5.5.1. Submitting update on regional assets and gaps assessments, as required.
  - 5.5.2. Submitting updates on regional CoC development plans, as indicated.
  - 5.5.3. Submitting quarterly reports, as indicated.
  - 5.5.4. Submitting year-end report, as indicated.

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5.6. The Contractor shall provide reports for Young Adult Strategies that include, but are not limited to:

5.6.1. Inputting data on a monthly basis to an online database as required by the Department.

5.6.2. Ensuring the data includes but is not limited to:

5.6.2.1. Number of individuals served.

5.6.2.2. Demographics of individuals served.

5.6.2.3. Types of strategies or interventions implemented.

5.6.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.

5.6.3. Meeting with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.

5.7. The Contractor shall provide reports for School-Based Vaccination Clinics as follows:

5.7.1. Attending annual debriefing and planning meetings with NHIP staff.

5.7.2. Complete a year-end summary of:

5.7.2.1. Total numbers of children vaccinated/

5.7.2.2. Accomplishments and improvements to future school-based clinics.

5.7.3. Providing aggregated data, by school for each school, no later than 3 months after SBCs are concluded, that include:

5.7.3.1. Number of students at that school;

5.7.3.2. Number of students vaccinated out of the total number at that school; and

5.7.3.3. Number of vaccinated students on Medicaid out of the total number at that school.

5.7.4. Providing other reports and updates as requested by NHIP.

**6. Performance Measures**

6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the Department, to measure the effectiveness of the agreement as follows:

6.1.1. Public Health Advisory Council

6.1.1.1. Documented organizational structure for the PHAC, including, but not limited to:

6.1.1.1.1. Vision or mission statements.

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- 6.1.1.1.2. Organizational charts.
- 6.1.1.1.3. MOUs.
- 6.1.1.1.4. Meeting minutes.
- 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
- 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
- 6.1.1.4. Publication of an annual report to the community.
- 6.1.2. Public Health Emergency Preparedness
  - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
  - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
  - 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
  - 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
- 6.1.3. Substance Misuse Prevention
  - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
    - 6.1.3.1.1. 30-day alcohol use;
    - 6.1.3.1.2. 30-day marijuana use;
    - 6.1.3.1.3. 30-day illegal drug use;
    - 6.1.3.1.4. Illicit drug use other than marijuana;
    - 6.1.3.1.5. 30-day nonmedical use of pain relievers;
    - 6.1.3.1.6. Life time heroin use;
    - 6.1.3.1.7. Binge Drinking; and
    - 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.

Mary Hitchcock Memorial Hospital

Exhibit A Amendment #8

Contractor Initials

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- 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
  - 6.1.3.2.1. Perception of risk from alcohol use;
  - 6.1.3.2.2. Perception of risk from marijuana use;
  - 6.1.3.2.3. Perception of risk from illegal drug use;
  - 6.1.3.2.4. Perception of risk from Nonmedical use of prescription drugs without a prescription;
  - 6.1.3.2.5. Perception of risk from binge drinking;
  - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
  - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.

6.1.4. Continuum of Care

- 6.1.4.1. Evidence of ongoing update of regional substance use services assets and gaps assessment.
- 6.1.4.2. Evidence of ongoing update of regional CoC development plan.
- 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
- 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including
  - 6.1.4.4.1. Health;
  - 6.1.4.4.2. Safety;
  - 6.1.4.4.3. Education;
  - 6.1.4.4.4. Government; and
  - 6.1.4.4.5. Business.
- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to or affected by substance misuse that the CoC Facilitator leads, participates in, or materially contributes to.

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- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.
- 6.1.6. School-Based Vaccination Clinics
  - 6.1.6.1. Annual increase in the percent of students receiving seasonal influenza vaccination in school-based clinics.
  - 6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.
  - 6.1.6.3. Maintain vaccine wastage below 5%.

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Vendor Name: Mary Hitchcock Memorial Hospital  
 Contract Name: Regional Public Health Network Services

Region: Upper Valley

State Fiscal Year	COVID-19 Vaccination	FEMA Vaccination	Flu Vaccination	I-Care	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Blood Lead Surveillance Quality Improvement
2019					\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00	\$ 5,714.00
2020					\$ 30,000.00	\$ 83,600.00	\$55,000	\$ 10,000.00	\$84,575.00	\$ 37,037.00	\$ 127,267.00	\$ 15,000.00	\$ 13,094.00	\$ 10,000.00	\$ 34,266.00
2021	\$ 25,000.00	\$ 100,000.00	\$ 10,000.00		\$ 30,000.00	\$ 83,600.00		\$ 10,000.00	\$84,575.00	\$ 37,037.00	\$ 83,220.00	\$ 15,000.00	\$ 10,308.00		
2022	\$ 61,467.00			\$8,000	\$ 30,000.00	\$ 83,600.00		\$ 10,000.00	\$84,575.00	\$ 37,037.00	\$ 75,000.00	\$ 15,000.00			
Subtotal															\$ 1,410,212.00

Region: Greater Sullivan

State Fiscal Year	COVID-19 Vaccination	FEMA Vaccination	Flu Vaccination	I-Care	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics	Blood Lead Surveillance Quality Improvement
2019					\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00	not applicable
2020					\$ 30,000.00	\$ 83,600.00	\$50,000	\$ 10,000.00	\$84,275.00	\$ 37,137.00	\$80,850	\$ 15,000.00	\$ 1,000.00	\$ 10,000.00	not applicable
2021	\$ 25,000.00	\$ 100,000.00	\$ 10,000.00		\$ 30,000.00	\$ 83,600.00		\$ 10,000.00	\$84,275.00	\$ 37,187.00	\$ 80,850.00	\$ 15,000.00	\$ 22,400.00		not applicable
2022	\$ 37,783.00			\$8,000	\$ 30,000.00	\$ 83,600.00		\$ 10,000.00	\$84,275.00	\$ 37,087.00	\$ 75,000.00	\$ 15,000.00			not applicable
Subtotal															\$ 1,252,119.00
<b>Total</b>															<b>\$ 2,702,331.00</b>

Exhibit B-35 Budget, Amendment #8

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

Contractor Name: MHMH Greater Sullivan County

Budget Request for: PHAC GSC DGR15152A

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 13,447	\$ 2,084	\$ 15,531	\$ -	\$ -	\$ -	\$ 13,447	\$ 2,084	\$ 15,531
2. Employee Benefits	\$ 4,276	\$ 663	\$ 4,939	\$ -	\$ -	\$ -	\$ 4,276	\$ 663	\$ 4,939
3. Consultants	\$ 4,300	\$ 667	\$ 4,967	\$ -	\$ -	\$ -	\$ 4,300	\$ 667	\$ 4,967
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 725	\$ 112	\$ 837	\$ -	\$ -	\$ -	\$ 725	\$ 112	\$ 837
6. Travel	\$ 1,120	\$ 174	\$ 1,294	\$ -	\$ -	\$ -	\$ 1,120	\$ 174	\$ 1,294
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 600	\$ 93	\$ 693	\$ -	\$ -	\$ -	\$ 600	\$ 93	\$ 693
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1,000	\$ 155	\$ 1,155	\$ -	\$ -	\$ -	\$ 1,000	\$ 155	\$ 1,155
11. Staff Education and Training	\$ 500	\$ 78	\$ 578	\$ -	\$ -	\$ -	\$ 500	\$ 78	\$ 578
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specify details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 25,974</b>	<b>\$ 4,026</b>	<b>\$ 30,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 25,974</b>	<b>\$ 4,026</b>	<b>\$ 30,000</b>

Indirect As A Percent of Direct

15.5%

Exhibit B-36 Budget, Amendment #8

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

Contractor Name: MMH Greater Sullivan County

Budget Request for: Public Health Emergency Preparedness DGR15152B

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 50,064	\$ 7,760	\$ 57,824	\$ -	\$ -	\$ -	\$ 50,064	\$ 7,760	\$ 57,824
2. Employee Benefits	\$ 15,920	\$ 2,468	\$ 18,388	\$ -	\$ -	\$ -	\$ 15,920	\$ 2,468	\$ 18,388
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Repair and Maintenance	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ 625	\$ 97	\$ 722	\$ -	\$ -	\$ -	\$ 625	\$ 97	\$ 722
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 866	\$ 134	\$ 1,000	\$ -	\$ -	\$ -	\$ 866	\$ 134	\$ 1,000
Office	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
6. Travel	\$ 2,500	\$ 388	\$ 2,888	\$ -	\$ -	\$ -	\$ 2,500	\$ 388	\$ 2,888
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 400	\$ 62	\$ 462	\$ -	\$ -	\$ -	\$ 400	\$ 62	\$ 462
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 2,000	\$ 310	\$ 2,310	\$ -	\$ -	\$ -	\$ 2,000	\$ 310	\$ 2,310
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specify details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 72,381</b>	<b>\$ 11,219</b>	<b>\$ 83,600</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 72,381</b>	<b>\$ 11,219</b>	<b>\$ 83,600</b>

Indirect As A Percent of Direct

15.5%

Exhibit B-37 Budget, Amendment #8

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

Contractor Name: MHMH Greater Sullivan County

Budget Request for: Substance Misuse Prevention DGR15152C

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 54,260	\$ 8,410	\$ 62,670	\$ -	\$ -	\$ -	\$ 54,260	\$ 8,410	\$ 62,670
2. Employee Benefits	\$ 17,255	\$ 2,674	\$ 19,929	\$ -	\$ -	\$ -	\$ 17,255	\$ 2,674	\$ 19,929
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
6. Travel	\$ 844	\$ 131	\$ 975	\$ -	\$ -	\$ -	\$ 844	\$ 131	\$ 975
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 600	\$ 93	\$ 693	\$ -	\$ -	\$ -	\$ 600	\$ 93	\$ 693
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specify in table mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 72,967</b>	<b>\$ 11,308</b>	<b>\$ 84,275</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 72,967</b>	<b>\$ 11,308</b>	<b>\$ 84,275</b>

Indirect As A Percent of Direct

15.5%

Exhibit B-38 Budget, Amendment #8

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

Contractor Name: MHMH Greater Sullivan County

Budget Request for: Continuum of Care Greater Sullivan County

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 23,800	\$ 3,689	\$ 27,489	\$ -	\$ -	\$ -	\$ 23,800	\$ 3,689	\$ 27,489
2. Employee Benefits	\$ 7,568	\$ 1,173	\$ 8,741	\$ -	\$ -	\$ -	\$ 7,568	\$ 1,173	\$ 8,741
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 2	\$ -	\$ 2	\$ -	\$ -	\$ -	\$ 2	\$ -	\$ 2
6. Travel	\$ 732	\$ 113	\$ 845	\$ -	\$ -	\$ -	\$ 732	\$ 113	\$ 845
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 32,112</b>	<b>\$ 4,975</b>	<b>\$ 37,087</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 32,112</b>	<b>\$ 4,975</b>	<b>\$ 37,087</b>

Indirect As A Percent of Direct

15.5%

Exhibit B-39 Budget, Amendment #8

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

Contractor Name: MHMH Greater Sullivan County

Budget Request for: Young Adult GSC DGR15152E

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 30,283	\$ 4,694	\$ 34,977	\$ -	\$ -	\$ -	\$ 30,283	\$ 4,694	\$ 34,977
2. Employee Benefits	\$ 9,630	\$ 1,493	\$ 11,123	\$ -	\$ -	\$ -	\$ 9,630	\$ 1,493	\$ 11,123
3. Consultants	\$ 5,000	\$ 775	\$ 5,775	\$ -	\$ -	\$ -	\$ 5,000	\$ 775	\$ 5,775
4. Equipment	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 2,000	\$ 310	\$ 2,310	\$ -	\$ -	\$ -	\$ 2,000	\$ 310	\$ 2,310
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 577	\$ 89	\$ 666	\$ -	\$ -	\$ -	\$ 577	\$ 89	\$ 666
6. Travel	\$ 840	\$ 130	\$ 970	\$ -	\$ -	\$ -	\$ 840	\$ 130	\$ 970
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 400	\$ 62	\$ 462	\$ -	\$ -	\$ -	\$ 400	\$ 62	\$ 462
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 15,000	\$ 2,325	\$ 17,325	\$ -	\$ -	\$ -	\$ 15,000	\$ 2,325	\$ 17,325
11. Staff Education and Training	\$ 1,200	\$ 186	\$ 1,386	\$ -	\$ -	\$ -	\$ 1,200	\$ 186	\$ 1,386
12. Subcontracts/Agreements	\$ 2	\$ -	\$ 2	\$ -	\$ -	\$ -	\$ 2	\$ -	\$ 2
13. Other (specify details in narrative)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 64,936</b>	<b>\$ 10,064</b>	<b>\$ 75,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 64,936</b>	<b>\$ 10,064</b>	<b>\$ 75,000</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-40 Budget, Amendment #8

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

Contractor Name: MHMH Greater Sullivan County

Budget Request for: School Based Flu Greater Sullivan County DGR15152F

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 5,563	\$ 862	\$ 6,425	\$ -	\$ -	\$ -	\$ 5,563	\$ 862	\$ 6,425
2. Employee Benefits	\$ 1,769	\$ 274	\$ 2,043	\$ -	\$ -	\$ -	\$ 1,769	\$ 274	\$ 2,043
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 1,200	\$ 186	\$ 1,386	\$ -	\$ -	\$ -	\$ 1,200	\$ 186	\$ 1,386
Office	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
6. Travel	\$ 697	\$ 108	\$ 805	\$ -	\$ -	\$ -	\$ 697	\$ 108	\$ 805
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ 450	\$ 70	\$ 520	\$ -	\$ -	\$ -	\$ 450	\$ 70	\$ 520
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 3,300	\$ 512	\$ 3,812	\$ -	\$ -	\$ -	\$ 3,300	\$ 512	\$ 3,812
13. Other (specify in item narrative)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 12,988</b>	<b>\$ 2,012</b>	<b>\$ 15,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 12,988</b>	<b>\$ 2,012</b>	<b>\$ 15,000</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-41 Budget, Amendment #8

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

Contractor Name: MHMH GSC

Budget Request for: Medical Reserve Corps DGR15348

Budget Period: 07/1/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 6,181	\$ 958	\$ 7,139	\$ -	\$ -	\$ -	\$ 6,181	\$ 958	\$ 7,139
2. Employee Benefits	\$ 1,966	\$ 305	\$ 2,271	\$ -	\$ -	\$ -	\$ 1,966	\$ 305	\$ 2,271
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Repair and Maintenance	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Purchase/Depreciation	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
5. Supplies	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Office	\$ 197	\$ 31	\$ 228	\$ -	\$ -	\$ -	\$ 197	\$ 31	\$ 228
6. Travel	\$ 300	\$ 47	\$ 347	\$ -	\$ -	\$ -	\$ 300	\$ 47	\$ 347
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specify in this mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 8,659</b>	<b>\$ 1,341</b>	<b>\$ 10,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 8,659</b>	<b>\$ 1,341</b>	<b>\$ 10,000</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-42 Budget, Amendment #8

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

Contractor Name: MHMH Upper Valley

Budget Request for: PHAC Upper Valley

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 7,787	\$ 1,207	\$ 8,994	\$ -	\$ -	\$ -	\$ 7,787	\$ 1,207	\$ 8,994
2. Employee Benefits	\$ 2,476	\$ 384	\$ 2,860	\$ -	\$ -	\$ -	\$ 2,476	\$ 384	\$ 2,860
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 600	\$ 93	\$ 693	\$ -	\$ -	\$ -	\$ 600	\$ 93	\$ 693
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 601	\$ 93	\$ 694	\$ -	\$ -	\$ -	\$ 601	\$ 93	\$ 694
6. Travel	\$ 500	\$ 78	\$ 578	\$ -	\$ -	\$ -	\$ 500	\$ 78	\$ 578
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ 250	\$ 39	\$ 289	\$ -	\$ -	\$ -	\$ 250	\$ 39	\$ 289
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 555	\$ 96	\$ 641	\$ -	\$ -	\$ -	\$ 555	\$ 96	\$ 641
11. Staff Education and Training	\$ 1,000	\$ 155	\$ 1,155	\$ -	\$ -	\$ -	\$ 1,000	\$ 155	\$ 1,155
12. Subcontracts/Agreements	\$ 12,200	\$ 1,891	\$ 14,091	\$ -	\$ -	\$ -	\$ 12,200	\$ 1,891	\$ 14,091
13. Other (specify details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 25,974</b>	<b>\$ 4,026</b>	<b>\$ 30,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 25,974</b>	<b>\$ 4,026</b>	<b>\$ 30,000</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-43 Budget, Amendment #8

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

Contractor Name: MHMH Upper Valley

Budget Request for: Public Health Emergency Preparedness DGR15151B

Budget Period: 07/1/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 44,774	\$ 6,940	\$ 51,714	\$ -	\$ -	\$ -	\$ 44,774	\$ 6,940	\$ 51,714
2. Employee Benefits	\$ 14,238	\$ 2,207	\$ 16,445	\$ -	\$ -	\$ -	\$ 14,238	\$ 2,207	\$ 16,445
3. Consultants	\$ 8,200	\$ 1,271	\$ 9,471	\$ -	\$ -	\$ -	\$ 8,200	\$ 1,271	\$ 9,471
4. Equipment	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Repair and Maintenance	\$ 1,500	\$ 233	\$ 1,733	\$ -	\$ -	\$ -	\$ 1,500	\$ 233	\$ 1,733
Purchase/Depreciation	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
5. Supplies	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 611	\$ 95	\$ 706	\$ -	\$ -	\$ -	\$ 611	\$ 95	\$ 706
6. Travel	\$ 1,400	\$ 217	\$ 1,617	\$ -	\$ -	\$ -	\$ 1,400	\$ 217	\$ 1,617
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 350	\$ 54	\$ 404	\$ -	\$ -	\$ -	\$ 350	\$ 54	\$ 404
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 1,300	\$ 202	\$ 1,502	\$ -	\$ -	\$ -	\$ 1,300	\$ 202	\$ 1,502
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specify details in narrative)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 72,381</b>	<b>\$ 11,219</b>	<b>\$ 83,600</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 72,381</b>	<b>\$ 11,219</b>	<b>\$ 83,600</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-44 Budget, Amendment #8

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

Contractor Name: MHMH Upper Valley

Budget Request for: Substance Misuse Prevention DGR15151C

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 55,081	\$ 8,538	\$ 63,619	\$ -	\$ -	\$ -	\$ 55,081	\$ 8,538	\$ 63,619
2. Employee Benefits	\$ 17,516	\$ 2,715	\$ 20,231	\$ -	\$ -	\$ -	\$ 17,516	\$ 2,715	\$ 20,231
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
6. Travel	\$ 360	\$ 56	\$ 416	\$ -	\$ -	\$ -	\$ 360	\$ 56	\$ 416
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specific details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ 72,966	\$ 11,309	\$ 84,275	\$ -	\$ -	\$ -	\$ 72,966	\$ 11,309	\$ 84,275

Indirect As A Percent of Direct 15.5%

Exhibit B-45 Budget, Amendment #8

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

Contractor Name: MHMH Upper Valley

Budget Request for: CoC Upper Valley DGR15151D

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 23,800	\$ 3,689	\$ 27,489	\$ -	\$ -	\$ -	\$ 23,800	\$ 3,689	\$ 27,489
2. Employee Benefits	\$ 7,568	\$ 1,173	\$ 8,741	\$ -	\$ -	\$ -	\$ 7,568	\$ 1,173	\$ 8,741
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
6. Travel	\$ 689	\$ 107	\$ 796	\$ -	\$ -	\$ -	\$ 689	\$ 107	\$ 796
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (-specific if less mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 32,068</b>	<b>\$ 4,969</b>	<b>\$ 37,037</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 32,068</b>	<b>\$ 4,969</b>	<b>\$ 37,037</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-46 Budget, Amendment #8

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

Contractor Name: MHM Upper Valley

Budget Request for: Young Adult UV DGR15151E

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 30,283	\$ 4,694	\$ 34,977	\$ -	\$ -	\$ -	\$ 30,283	\$ 4,694	\$ 34,977
2. Employee Benefits	\$ 9,630	\$ 1,493	\$ 11,123	\$ -	\$ -	\$ -	\$ 9,630	\$ 1,493	\$ 11,123
3. Consultants	\$ 10,000	\$ 1,550	\$ 11,550	\$ -	\$ -	\$ -	\$ 10,000	\$ 1,550	\$ 11,550
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 2,200	\$ 341	\$ 2,541	\$ -	\$ -	\$ -	\$ 2,200	\$ 341	\$ 2,541
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 718	\$ 111	\$ 829	\$ -	\$ -	\$ -	\$ 718	\$ 111	\$ 829
6. Travel	\$ 1,200	\$ 186	\$ 1,386	\$ -	\$ -	\$ -	\$ 1,200	\$ 186	\$ 1,386
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 299	\$ 46	\$ 345	\$ -	\$ -	\$ -	\$ 299	\$ 46	\$ 345
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 10,000	\$ 1,550	\$ 11,550	\$ -	\$ -	\$ -	\$ 10,000	\$ 1,550	\$ 11,550
11. Staff Education and Training	\$ 600	\$ 93	\$ 693	\$ -	\$ -	\$ -	\$ 600	\$ 93	\$ 693
12. Subcontracts/Agreements	\$ 2	\$ -	\$ 2	\$ -	\$ -	\$ -	\$ 2	\$ -	\$ 2
13. Other (specify details in narrative)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 64,936</b>	<b>\$ 10,064</b>	<b>\$ 75,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 64,936</b>	<b>\$ 10,064</b>	<b>\$ 75,000</b>

Indirect As A Percent of Direct 15.5%

Exhibit B-47 Budget, Amendment #8

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

Contractor Name: MHMH Upper Valley

Budget Request for: School Based Flu Upper Valley DGR15151F

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 5,840	\$ 905	\$ 6,745	\$ -	\$ -	\$ -	\$ 5,840	\$ 905	\$ 6,745
2. Employee Benefits	\$ 1,857	\$ 288	\$ 2,145	\$ -	\$ -	\$ -	\$ 1,857	\$ 288	\$ 2,145
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 1,583	\$ 245	\$ 1,828	\$ -	\$ -	\$ -	\$ 1,583	\$ 245	\$ 1,828
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 700	\$ 109	\$ 809	\$ -	\$ -	\$ -	\$ 700	\$ 109	\$ 809
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 3,000	\$ 465	\$ 3,465	\$ -	\$ -	\$ -	\$ 3,000	\$ 465	\$ 3,465
13. Other (specify in table narrative)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 12,988</b>	<b>\$ 2,012</b>	<b>\$ 15,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 12,988</b>	<b>\$ 2,012</b>	<b>\$ 15,000</b>

Indirect As A Percent of Direct

15.5%

Exhibit B-48 Budget, Amendment #8

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

Contractor Name: MHMH Upper Valley

Budget Request for: Medical Reserve Corps DGR15347

Budget Period: 07/1/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 6,489	\$ 1,006	\$ 7,495	\$ -	\$ -	\$ -	\$ 6,489	\$ 1,006	\$ 7,495
2. Employee Benefits	\$ 2,064	\$ 320	\$ 2,384	\$ -	\$ -	\$ -	\$ 2,064	\$ 320	\$ 2,384
3. Consultants	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
4. Equipment:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Rental	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Repair and Maintenance	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Purchase/Depreciation	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
5. Supplies:	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Educational	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Office	\$ 91	\$ 14	\$ 105	\$ -	\$ -	\$ -	\$ 91	\$ 14	\$ 105
6. Travel	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
7. Occupancy	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
8. Current Expenses	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Telephone	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Postage	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
11. Staff Education and Training	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
12. Subcontracts/Agreements	\$ 1	\$ -	\$ 1	\$ -	\$ -	\$ -	\$ 1	\$ -	\$ 1
13. Other (specify if not mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 8,660</b>	<b>\$ 1,340</b>	<b>\$ 10,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 8,660</b>	<b>\$ 1,340</b>	<b>\$ 10,000</b>

Indirect As A Percent of Direct

15.5%

Exhibit B-49 Budget, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: MHMH Upper Valley

Budget Request for: COVID FEMA

Project Title

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 21,410	\$ 3,319	\$ 24,729	\$ -	\$ -	\$ -	\$ 21,410	\$ 3,319	\$ 24,729
2. Employee Benefits	\$ 6,808	\$ 1,055	\$ 7,864	\$ -	\$ -	\$ -	\$ 6,808	\$ 1,055	\$ 7,864
3. Consultants	\$ 10,000	\$ 1,550	\$ 11,550	\$ -	\$ -	\$ -	\$ 10,000	\$ 1,550	\$ 11,550
4. Equipment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 5,000	\$ 775	\$ 5,775	\$ -	\$ -	\$ -	\$ 5,000	\$ 775	\$ 5,775
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 10,000	\$ 1,550	\$ 11,550	\$ -	\$ -	\$ -	\$ 10,000	\$ 1,550	\$ 11,550
13. Other (provide details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	\$ 53,218	\$ 8,249	\$ 61,467	\$ -	\$ -	\$ -	\$ 53,218	\$ 8,249	\$ 61,467

Indirect As A Percent of Direct 15.5%

DS  
  
 Contractor Initials

Date 6/11/2021

Exhibit B-50 Budget, Amendment #8

New Hampshire Department of Health and Human Services

Contractor Name: MHM Greater Sullivan

Budget Request for: COVID FEMA

Project Title

Budget Period: 07/01/2021-06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 18,750	\$ 2,906	\$ 21,656	\$ -	\$ -	\$ -	\$ 18,750	\$ 2,906	\$ 21,656
2. Employee Benefits	\$ 5,963	\$ 924	\$ 6,887	\$ -	\$ -	\$ -	\$ 5,963	\$ 924	\$ 6,887
3. Consultants	\$ 5,000	\$ 775	\$ 5,775	\$ -	\$ -	\$ -	\$ 5,000	\$ 775	\$ 5,775
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses	\$ 3,000	\$ 465	\$ 3,465	\$ -	\$ -	\$ -	\$ 3,000	\$ 465	\$ 3,465
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (see line details mandatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 32,713</b>	<b>\$ 5,070</b>	<b>\$ 37,783</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 32,713</b>	<b>\$ 5,070</b>	<b>\$ 37,783</b>

Indirect As A Percent of Direct

15.5%

DS  
 Contractor Initials *JS*

Date 6/11/2021

# State of New Hampshire

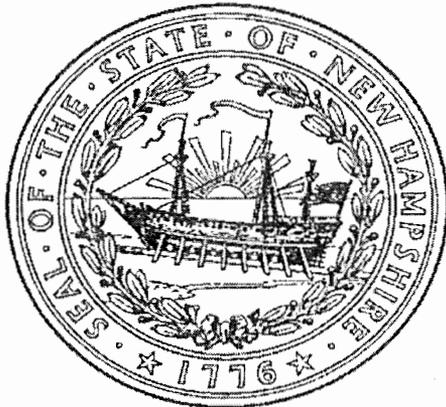
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that DARTMOUTH-HITCHCOCK CLINIC is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on March 01, 1983. 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: **69168**

Certificate Number: **0005357409**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 26th day of April A.D. 2021.

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner  
Secretary of State



Dartmouth-Hitchcock  
Dartmouth-Hitchcock Medical Center  
1 Medical Center Drive  
Lebanon, NH 03756  
Dartmouth-Hitchcock.org

CERTIFICATE OF VOTE/AUTHORITY

I, Edward H. Stansfield, III, of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital, do hereby certify that:

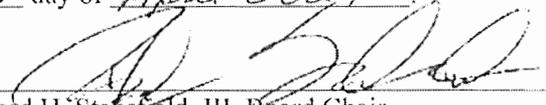
1. I am the duly elected Chair of the Board of Trustees of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital;
2. The following is a true and accurate excerpt from the December 7<sup>th</sup>, 2012 Bylaws of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital:

**ARTICLE I – Section A. Fiduciary Duty. Stewardship over Corporate Assets**

“In exercising this [fiduciary] duty, the Board may, consistent with the Corporation’s Articles of Agreement and these Bylaws, delegate authority to the Board of Governors, Board Committees and various officers the right to give input with respect to issues and strategies, incur indebtedness, make expenditures, enter into contracts and agreements and take such other binding actions on behalf of the Corporation as may be necessary or desirable.”

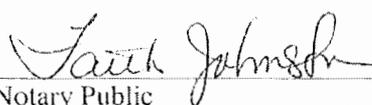
3. Article I – Section A, as referenced above, provides authority for the chief officers, including the Chief Executive Officer, the Chief Clinical Officer, and other officers, of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital to sign and deliver, either individually or collectively, on behalf of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital.
4. Edward J. Merrens, MD is the Chief Clinical Officer of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital and therefore has the authority to enter into contracts and agreements on behalf of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital.

IN WITNESS WHEREOF, I have hereunto set my hand as the Chair of the Board of Trustees of Dartmouth-Hitchcock Clinic and Mary Hitchcock Memorial Hospital this 21<sup>st</sup> day of April 2021.

  
Edward H. Stansfield, III, Board Chair

STATE OF NH  
COUNTY OF GRAFTON

The foregoing instrument was acknowledged before me this 21<sup>st</sup> day of April, 2021 by Edward Stansfield.

  
Notary Public  
My Commission Expires: 9-21-20





Susan Reeves, EdD, RN, CENP

Executive Vice President, Dartmouth-Hitchcock Medical Center  
System Chief Nursing Executive, Dartmouth-Hitchcock Health  
Clinical Professor, Department of Community and Family Medicine

**Dartmouth-Hitchcock Medical Center**

One Medical Center Drive  
Lebanon, NH 03756-0001  
Phone (603) 650-5606  
Dartmouth-Hitchcock.org

April 28, 2021

Attorney General  
State of New Hampshire  
129 Pleasant Street  
Concord, NH 03301

Dear Attorney General:

At the request of the State of New Hampshire, I am writing to notify you that, as noted in the attached Delegation of Signature Authority from August 25, 2020, in her role as Director of Research Operations and Finance, Jennifer J. Lopez, CSSBB, continues to have authority to sign contracts on behalf of Dartmouth-Hitchcock which have a funding amount not to exceed \$1,000,000 and which have a term of less than five (5) years.

Please do not hesitate to reach out should you require further documentation.

Sincerely,

A handwritten signature in black ink that reads "Susan A. Reeves, RN".

Susan A. Reeves, EdD, RN, CENP  
Executive Vice President, Dartmouth-Hitchcock Medical Center  
System Chief Nursing Executive, Dartmouth-Hitchcock Health

DATE: July 1, 2020

**CERTIFICATE OF INSURANCE****COMPANY AFFORDING COVERAGE**

Hamden Assurance Risk Retention Group, Inc.  
P.O. Box 1687  
30 Main Street, Suite 330  
Burlington, VT 05401

**INSURED**

Dartmouth-Hitchcock Clinic  
One Medical Center Drive  
Lebanon, NH 03756  
(603)653-6850

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

**COVERAGES**

The Policy listed below has been issued to the Named Insured above for the Policy Period notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued. The insurance afforded by the policy is subject to all the terms, exclusions and conditions of the policy. Limits shown may have been reduced by paid claims.

TYPE OF INSURANCE		POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIMITS	
GENERAL LIABILITY	X CLAIMS MADE	0002020-A	07/01/2020	07/01/2021	EACH OCCURRENCE	\$1,000,000
					DAMAGE TO RENTED PREMISES	\$100,000
					MEDICAL EXPENSES	N/A
					PERSONAL & ADV INJURY	\$1,000,000
					GENERAL AGGREGATE	
OTHER					PRODUCTS-COMP/OP AGG	\$1,000,000
PROFESSIONAL LIABILITY	CLAIMS MADE				EACH CLAIM	
					ANNUAL AGGREGATE	
					OCCURENCE	
OTHER						

DESCRIPTION OF OPERATIONS/ LOCATIONS/ VEHICLES/ SPECIAL ITEMS (LIMITS MAY BE SUBJECT TO RETENTIONS)

Certificate is issued as evidence of insurance only.

**CERTIFICATE HOLDER**

NH Dept of Health & Human Services  
129 Pleasant Street  
Concord, NH 03301

**CANCELLATION**

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 DAYS written notice to the certificate holder named below, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

**AUTHORIZED REPRESENTATIVES**



DARTHIT-01

ASTOBERT

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
**6/29/2020**

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).

<b>PRODUCER License # 1780862</b> HUB International New England 275 US Route 1 Cumberland Foreside, ME 04110	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <b>(207) 829-3450</b> FAX (A/C, No): <b>(207) 829-6350</b> E-MAIL: ADDRESS:
INSURER(S) AFFORDING COVERAGE	
INSURED	INSURER A : <b>Safety National Casualty Corporation</b> NAIC # <b>15105</b> INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
Dartmouth-Hitchcock Health 1 Medical Center Dr. Lebanon, NH 03756	

**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea.occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea. accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			<b>AG4061049</b>	<b>7/1/2020</b>	<b>7/1/2021</b>	<input checked="" type="checkbox"/> PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  NH Dept. of Health & Human Services 129 Pleasant Street Concord, NH 03301	<b>CANCELLATION</b>  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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## Dartmouth-Hitchcock

Dartmouth-Hitchcock (D-H) is comprised of the Dartmouth-Hitchcock Medical Center and several clinics throughout New Hampshire and Vermont. Our physicians and researchers collaborate with Geisel School of Medicine scientists and faculty as well as other leading health care organizations to develop new treatments at the cutting edge of medical practice bringing the latest medical discoveries to the patient.

Dartmouth-Hitchcock includes:



### **Dartmouth-Hitchcock Medical Center (DHMC)**

DHMC is the state's only academic medical center, and the only Level I Adult and Pediatric Trauma Center in New Hampshire. The Dartmouth-Hitchcock Advanced Response Team (DHART), based in Lebanon and Manchester, provides ground and air medical transportation to communities throughout northern New England. DHMC was named in 2020 as the #1 hospital in New Hampshire by **U.S. News & World Report** (<https://health.usnews.com/best-hospitals/area/nh>), and recognized for high performance in nine clinical specialties, procedures, and conditions.



### **The Dartmouth-Hitchcock Clinic**

The Dartmouth-Hitchcock Clinic is a network of primary and speciality care physicians located throughout New Hampshire and Vermont, with major community group practices in Lebanon, Concord, Manchester, Nashua, and Keene, NH, and Bennington, VT.



### **Mary Hitchcock Memorial Hospital**

Mary Hitchcock Memorial Hospital is New Hampshire's only teaching hospital, with an inpatient capacity of 396 beds.



### **Children's Hospital at Dartmouth-Hitchcock (CHaD)**

CHaD is New Hampshire's only children's hospital and a member of the Children's Hospital Association, providing advanced pediatric inpatient, outpatient and surgical services at DHMC in Lebanon as well as in Bedford, Concord, Manchester, Nashua, and Dover, NH.



## **Norris Cotton Cancer Center (NCCC)**

NCCC is a designated Comprehensive Cancer Center by the National Cancer Institute, and is one of the premier facilities for cancer treatment, research, prevention, and education. Interdisciplinary teams, devoted to the treatment of specific types of cancer, work together to care for patients of all ages in Lebanon, Manchester, Nashua, Keene, NH, and St. Johnsbury, VT.

## **Our mission, vision, and values**

### **Our mission**

We advance health through research, education, clinical practice and community partnerships, providing each person the best care, in the right place, at the right time, every time.

### **Our vision**

Achieve the healthiest population possible, leading the transformation of health care in our region and setting the standard for our nation.

### **Our values**

- Respect
- Integrity
- Commitment
- Transparency
- Trust
- Teamwork
- Stewardship
- Community

## **Learn more about us**

- Facts and Figures
- Community Outreach
- Collaborations
- Population Health
- Awards and Honors
- History

# **Dartmouth-Hitchcock Health and Subsidiaries**

**Report on Federal Awards in Accordance With the  
Uniform Guidance**

**June 30, 2019**

**EIN #02-0222140**

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Index**  
**June 30, 2019**

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**Part I**  
**Financial Statements and**  
**Schedule of Expenditures of Federal Awards**



## Report of Independent Auditors

To the Board of Trustees of  
Dartmouth-Hitchcock Health and subsidiaries

### **Report on the Consolidated Financial Statements**

We have audited the accompanying consolidated financial statements of Dartmouth-Hitchcock Health and its subsidiaries (the "Health System"), which comprise the consolidated balance sheets as of June 30, 2019 and 2018, and the related consolidated statements of operations and changes in net assets and of cash flows for the years then ended, and the related notes to the financial statements.

### ***Management's Responsibility for the Consolidated Financial Statements***

Management is responsible for the preparation and fair presentation of the 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.

### ***Auditors' Responsibility***

Our responsibility is to express an opinion on the consolidated financial statements based on our audits. We conducted our audits 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 from 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 our 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, we consider internal control relevant to the Health System'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 Health System'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 consolidated financial position of Dartmouth-Hitchcock Health and its subsidiaries as of June 30, 2019 and 2018, and the results of their operations, changes in net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Emphasis of Matter***

As discussed in Note 2 to the consolidated financial statements, the Health System changed the manner in which it accounts for revenue recognition from contracts with customers and the manner in which it presents net assets and reports certain aspects of its financial statements as a not-for-profit entity in 2019. Our opinion is not modified with respect to this matter.

***Other Matters***

***Other Information***

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements taken as a whole. The consolidating 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 consolidating 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 consolidating information is fairly stated, in all material respects, in relation to the consolidated financial statements taken as a whole. The consolidating information is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, results of its operations, changes in net assets and cash flows of the individual companies and is not a required part of the consolidated financial statements. Accordingly, we do not express an opinion on the financial position, results of operations, changes in net assets and cash flows of the individual companies.

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 for the year ended June 30, 2019 is presented for purposes of additional analysis as required by Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) and is not a required part of the consolidated financial statements. The 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 schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the consolidated financial statements taken as a whole.

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated November 26, 2019 on our consideration of the Health System's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters for the year ended June 30, 2019. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the effectiveness of 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 the Health System's internal control over financial reporting and compliance.

*Priscilla Cooper LLP*

Boston, Massachusetts  
November 26, 2019

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Balance Sheets

#### June 30, 2019 and 2018

---

<i>(in thousands of dollars)</i>	2019	2018
<b>Assets</b>		
Current assets		
Cash and cash equivalents	\$ 143,587	\$ 200,169
Patient accounts receivable, net of estimated uncollectible of \$132,228 at June 30, 2018 (Note 4)	221,125	219,228
Prepaid expenses and other current assets	95,495	97,502
Total current assets	460,207	516,899
Assets limited as to use (Notes 5 and 7)	876,249	706,124
Other investments for restricted activities (Notes 5 and 7)	134,119	130,896
Property, plant, and equipment, net (Note 6)	621,256	607,321
Other assets	124,471	108,785
Total assets	\$ 2,216,302	\$ 2,070,025
<b>Liabilities and Net Assets</b>		
Current liabilities		
Current portion of long-term debt (Note 10)	\$ 10,914	\$ 3,464
Current portion of liability for pension and other postretirement plan benefits (Note 11)	3,468	3,311
Accounts payable and accrued expenses (Note 13)	113,817	95,753
Accrued compensation and related benefits	128,408	125,576
Estimated third-party settlements (Note 4)	41,570	41,141
Total current liabilities	298,177	269,245
Long-term debt, excluding current portion (Note 10)	752,180	752,975
Insurance deposits and related liabilities (Note 12)	58,407	55,516
Liability for pension and other postretirement plan benefits, excluding current portion (Note 11)	281,009	242,227
Other liabilities	124,136	88,127
Total liabilities	1,513,909	1,408,090
Commitments and contingencies (Notes 4, 6, 7, 10, and 13)		
Net assets		
Net assets without donor restrictions (Note 9)	559,933	524,102
Net assets with donor restrictions (Notes 8 and 9)	142,460	137,833
Total net assets	702,393	661,935
Total liabilities and net assets	\$ 2,216,302	\$ 2,070,025

The accompanying notes are an integral part of these consolidated financial statements.

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Consolidated Statements of Operations and Changes in Net Assets**  
**Years Ended June 30, 2019 and 2018**

<i>(in thousands of dollars)</i>	<b>2019</b>	<b>2018</b>
<b>Operating revenue and other support</b>		
Patient service revenue	\$ 1,999,323	\$ 1,899,095
Provision for bad debts (Notes 2 and 4)	-	47,367
Net patient service revenue	<u>1,999,323</u>	<u>1,851,728</u>
Contracted revenue (Note 2)	75,017	54,969
Other operating revenue (Notes 2 and 5)	210,698	148,946
Net assets released from restrictions	14,105	13,461
Total operating revenue and other support	<u>2,299,143</u>	<u>2,069,104</u>
<b>Operating expenses</b>		
Salaries	1,062,551	989,263
Employee benefits	251,591	229,683
Medical supplies and medications	407,875	340,031
Purchased services and other	323,435	291,372
Medicaid enhancement tax (Note 4)	70,061	67,692
Depreciation and amortization	88,414	84,778
Interest (Note 10)	25,514	18,822
Total operating expenses	<u>2,229,441</u>	<u>2,021,641</u>
Operating income (loss)	<u>69,702</u>	<u>47,463</u>
<b>Nonoperating gains (losses)</b>		
Investment income, net (Note 5)	40,052	40,387
Other losses, net (Note 10)	(3,562)	(2,908)
Loss on early extinguishment of debt	(87)	(14,214)
Loss due to swap termination	-	(14,247)
Total nonoperating gains, net	<u>36,403</u>	<u>9,018</u>
Excess of revenue over expenses	<u>\$ 106,105</u>	<u>\$ 56,481</u>

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Consolidated Statements of Operations and Changes in Net Assets**  
**Years Ended June 30, 2019 and 2018**

<i>(in thousands of dollars)</i>	<b>2019</b>	<b>2018</b>
<b>Net assets without donor restrictions</b>		
Excess of revenue over expenses	\$ 106,105	\$ 56,481
Net assets released from restrictions	1,769	16,313
Change in funded status of pension and other postretirement benefits (Note 11)	(72,043)	8,254
Other changes in net assets	-	(185)
Change in fair value of interest rate swaps (Note 10)	-	4,190
Change in interest rate swap effectiveness	-	14,102
Increase in net assets without donor restrictions	<u>35,831</u>	<u>99,155</u>
<b>Net assets with donor restrictions</b>		
Gifts, bequests, sponsored activities	17,436	14,171
Investment income, net	2,682	4,354
Net assets released from restrictions	(15,874)	(29,774)
Contribution of assets with donor restrictions from acquisition	383	-
Increase (decrease) in net assets with donor restrictions	<u>4,627</u>	<u>(11,249)</u>
Change in net assets	40,458	87,906
<b>Net assets</b>		
Beginning of year	<u>661,935</u>	<u>574,029</u>
End of year	<u>\$ 702,393</u>	<u>\$ 661,935</u>

The accompanying notes are an integral part of these consolidated financial statements.

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidated Statements of Cash Flows

#### Years Ended June 30, 2019 and 2018

<i>(in thousands of dollars)</i>	2019	2018
<b>Cash flows from operating activities</b>		
Change in net assets	\$ 40,458	\$ 87,906
Adjustments to reconcile change in net assets to net cash provided by operating and nonoperating activities		
Change in fair value of interest rate swaps	-	(4,897)
Provision for bad debt	-	47,367
Depreciation and amortization	88,770	84,947
Change in funded status of pension and other postretirement benefits	72,043	(8,254)
(Gain) on disposal of fixed assets	(1,101)	(125)
Net realized gains and change in net unrealized gains on investments	(31,397)	(45,701)
Restricted contributions and investment earnings	(2,292)	(5,460)
Proceeds from sales of securities	1,167	1,531
Loss from debt defeasance	-	14,214
Changes in assets and liabilities		
Patient accounts receivable, net	(1,803)	(29,335)
Prepaid expenses and other current assets	2,149	(8,299)
Other assets, net	(9,052)	(11,665)
Accounts payable and accrued expenses	17,898	19,693
Accrued compensation and related benefits	2,335	10,665
Estimated third-party settlements	429	13,708
Insurance deposits and related liabilities	2,378	4,556
Liability for pension and other postretirement benefits	(33,104)	(32,399)
Other liabilities	12,267	(2,421)
Net cash provided by operating and nonoperating activities	161,145	136,031
<b>Cash flows from investing activities</b>		
Purchase of property, plant, and equipment	(82,279)	(77,598)
Proceeds from sale of property, plant, and equipment	2,188	-
Purchases of investments	(361,407)	(279,407)
Proceeds from maturities and sales of investments	219,996	273,409
Cash received through acquisition	4,863	-
Net cash used in investing activities	(216,639)	(83,596)
<b>Cash flows from financing activities</b>		
Proceeds from line of credit	30,000	50,000
Payments on line of credit	(30,000)	(50,000)
Repayment of long-term debt	(29,490)	(413,104)
Proceeds from issuance of debt	26,338	507,791
Repayment of interest rate swap	-	(16,019)
Payment of debt issuance costs	(228)	(4,892)
Restricted contributions and investment earnings	2,292	5,460
Net cash (used in) provided by financing activities	(1,088)	79,236
(Decrease) increase in cash and cash equivalents	(56,582)	131,671
<b>Cash and cash equivalents</b>		
Beginning of year	200,169	68,498
End of year	\$ 143,587	\$ 200,169
<b>Supplemental cash flow information</b>		
Interest paid	\$ 23,977	\$ 18,029
Net assets acquired as part of acquisition, net of cash acquired	(4,863)	-
Noncash proceeds from issuance of debt	-	137,281
Use of noncash proceeds to refinance debt	-	137,281
Construction in progress included in accounts payable and accrued expenses	1,546	1,569
Equipment acquired through issuance of capital lease obligations	-	17,670
Donated securities	1,167	1,531

The accompanying notes are an integral part of these consolidated financial statements.

# Dartmouth-Hitchcock Health and Subsidiaries

## Notes to Consolidated Financial Statements

### June 30, 2019 and 2018

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#### 1. Organization and Community Benefit Commitments

Dartmouth-Hitchcock Health (D-HH) serves as the sole corporate member of the following entities: Dartmouth-Hitchcock Clinic and Subsidiaries (DHC), Mary Hitchcock Memorial Hospital and Subsidiaries (MHMH), (DHC and MHMH together are referred to as D-H), The New London Hospital Association and Subsidiaries (NLH), Windsor Hospital Corporation (d/b/a Mt. Ascutney Hospital and Health Center) and Subsidiaries (MAHHC), Cheshire Medical Center and Subsidiaries (Cheshire), Alice Peck Day Memorial Hospital and, effective July 1, 2018, Subsidiary (APD), and the Visiting Nurse and Hospice for Vermont and New Hampshire and Subsidiaries (VNH). The "Health System" consists of D-HH, its members and their subsidiaries.

The Health System currently operates one tertiary, one community and three acute care (critical access) hospitals in New Hampshire (NH) and Vermont (VT). One facility provides inpatient and outpatient rehabilitation medicine and long-term care. The Health System also operates multiple physician practices, a nursing home, a continuing care retirement community, and a home health and hospice service. The Health System operates a graduate level program for health professions and is the principal teaching affiliate of the Geisel School of Medicine (Geisel), a component of Dartmouth College.

D-HH, Dartmouth-Hitchcock Clinic, Mary Hitchcock Memorial Hospital, The New London Hospital Association, Cheshire Medical Center, and Alice Peck Day Memorial Hospital are NH not-for-profit corporations exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code (IRC). Windsor Hospital Corporation and the Visiting Nurse and Hospice of VT and NH are VT not-for-profit corporations exempt from federal income taxes under Section 501(c)(3) of the IRC.

#### Community Benefits

The mission of the Health System is to advance health through clinical practice and community partnerships, research and education, providing each person the best care, in the right place, at the right time, every time.

Consistent with this mission, the Health System provides high quality, cost effective, comprehensive, and integrated healthcare to individuals, families, and the communities it serves regardless of a patient's ability to pay. The Health System actively supports community-based healthcare and promotes the coordination of services among healthcare providers and social services organizations. In addition, the Health System also seeks to work collaboratively with other area healthcare providers to improve the health status of the region. As a component of an integrated academic medical center, the Health System provides significant support for academic and research programs.

Certain member hospitals of the Health System file annual Community Benefits Reports with the State of NH which outline the community and charitable benefits each provides. VT hospitals are not required by law to file a state community benefit report. The categories used in the Community Benefit Reports to summarize these benefits are as follows:

- *Community Health Services* include activities carried out to improve community health and could include community health education (such as classes, programs, support groups, and materials that promote wellness and prevent illness), community-based clinical services (such as free clinics and health screenings), and healthcare support services (enrollment assistance in public programs, assistance in obtaining free or reduced costs medications, telephone information services, or transportation programs to enhance access to care, etc.).

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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- *Health Professions Education* includes uncompensated costs of training medical students, Residents, nurses, and other health care professionals.
- *Subsidized health services* are services provided by the Health System, resulting in financial losses that meet the needs of the community and would not otherwise be available unless the responsibility was assumed by the government.
- *Research support and other grants* represent costs in excess of awards for numerous health research and service initiatives awarded to the organizations within the Health System.
- *Financial Contributions* include financial contributions of cash, as well as in-kind contributions such as time, supplies, and expertise to local organizations to address community health needs.
- *Community-Building Activities* include expenses incurred to support the development of programs and partnerships intended to address public health challenges as well as social and economic determinants of health. Examples include physical improvements and housing, economic development, support system enhancements, environmental improvements, leadership development and training for community members, community health improvement advocacy, and workforce enhancement.
- *Community Benefit Operations* includes costs associated with staff dedicated to administering benefit programs, community health needs assessment costs, and other costs associated with community benefit planning and operations.
- *Charity Care and Costs of Government Sponsored Health Care* includes losses, at-cost, incurred by providing health care services to persons qualifying for hospital financial assistance programs, and uncompensated costs of providing health care services to patients who are Medicaid Beneficiaries.
- *The uncompensated cost of care for Medicaid patients* reported in the unaudited Community Benefits Reports for 2018 was approximately \$139,683,000. The 2019 Community Benefits Reports are expected to be filed in February 2020.

The following table summarizes the value of the community benefit initiatives outlined in the Health System's most recently filed Community Benefit Reports for the year ended June 30, 2018:

(in thousands of dollars)

Government-sponsored healthcare services	\$ 246,064
Health professional education	33,067
Charity care	13,243
Subsidized health services	11,993
Community health services	6,570
Research	5,969
Community building activities	2,540
Financial contributions	2,360
Community benefit operations	1,153
Total community benefit value	\$ 322,959

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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## **2. Summary of Significant Accounting Policies**

### **Basis of Presentation**

The consolidated financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America, and have been prepared consistent with the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 954, *Healthcare Entities*, which addresses the accounting for healthcare entities. The net assets, revenue, expenses, and gains and losses of healthcare entities are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets without donor restrictions are amounts not subject to donor-imposed stipulations and are available for operations. Net assets with donor restrictions are those whose use has been limited by donors to a specific time period or purpose, or whose use has been restricted by donors to be maintained in perpetuity. All significant intercompany transactions have been eliminated upon consolidation.

### **Use of Estimates**

The preparation of the 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 the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the dates of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting periods. The most significant areas that are affected by the use of estimates include implicit and explicit pricing concessions, valuation of certain investments, estimated third-party settlements, insurance reserves, and pension obligations. Actual results may differ from those estimates.

### **Excess of Revenue Over Expenses**

The consolidated statements of operations and changes in net assets include the excess of revenue over expenses. Operating revenues consist of those items attributable to the care of patients, including contributions and investment income on investments of net assets without donor restrictions, which are utilized to provide charity and other operational support. Peripheral activities, including contribution of net assets without donor restrictions from acquisitions, loss on early extinguishment of debt, loss due to swap termination, realized gains/losses on sales of investment securities and changes in unrealized gains/losses in investments are reported as nonoperating gains (losses).

Changes in net assets without donor restrictions which are excluded from the excess of revenue over expenses, consistent with industry practice, include contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for the purpose of acquiring such assets), change in funded status of pension and other postretirement benefit plans, and the effective portion of the change in fair value of interest rate swaps.

### **Charity Care**

The Health System provides care to patients who meet certain criteria under their financial assistance policies without charge or at amounts less than their established rates. Because the Health System does not anticipate collection of amounts determined to qualify as charity care, they are not reported as revenue.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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The Health System grants credit without collateral to patients. Most are local residents and are insured under third-party arrangements. The amount of charges for implicit price concessions is based upon management's assessment of historical and expected net collections, business and economic conditions, trends in federal and state governmental healthcare coverage, and other collection indicators (Notes 1 and 4).

#### **Patient Service Revenue**

The Health System applies the accounting provisions of ASC 606, *Revenue from Contracts with Customers* (ASC 606). Patient service revenue is reported at the amount of consideration to which the Health System expects to be entitled from patients, third party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors and implicit pricing concessions. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as estimates change or final settlements are determined (Note 4).

#### **Contracted Revenue**

The Health System has various Professional Service Agreements (PSAs), pursuant to which certain organizations purchase services of personnel employed by the Health System and also lease space and equipment. Revenue pursuant to these PSAs and certain facility and equipment leases and other professional service contracts have been classified as contracted revenue in the accompanying consolidated statements of operations and changes in net assets.

#### **Other Revenue**

The Health System recognizes other revenue which is not related to patient medical care but is central to the day-to-day operations of the Health System. Other revenue primarily consists of revenue from retail pharmacy, which the Health System records as customer revenues in the amounts that reflect the consideration to which it expects to be entitled in exchange for the prescription. Other revenue also includes joint operating agreements, grant revenue, cafeteria sales and other support service revenue.

#### **Cash Equivalents**

Cash equivalents include investments in highly liquid investments with maturities of three months or less when purchased, excluding amounts where use is limited by internal designation or other arrangements under trust agreements or by donors.

#### **Investments and Investment Income**

Investments in equity securities with readily determinable fair values, mutual funds and pooled/commingled funds, and all investments in debt securities are considered to be trading securities reported at fair value with changes in fair value included in the excess of revenues over expenses. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (Note 7).

Investments in pooled/commingled investment funds, private equity funds and hedge funds that represent investments where the Health System owns shares or units of funds rather than the underlying securities in that fund are valued using the equity method of accounting with changes in value recorded in the excess of revenues over expenses. All investments, whether held at fair value or under the equity method of accounting, are reported at what the Health System believes to be the amount they would expect to receive if it liquidated its investments at the balance sheet dates on a nondistressed basis.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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Certain members of the Health System are partners in a NH general partnership established for the purpose of operating a master investment program of pooled investment accounts. Substantially all of the Health System's board-designated and assets with donor restrictions, such as endowment funds, were invested in these pooled funds by purchasing units based on the market value of the pooled funds at the end of the month prior to receipt of any new additions to the funds. Interest, dividends, and realized and unrealized gains and losses earned on pooled funds are allocated monthly based on the weighted average units outstanding at the prior month-end.

Investment income or losses (including change in unrealized and realized gains and losses on investments, change in value of equity method investments, interest, and dividends) are included in the excess of revenue over expenses and classified as nonoperating gains and losses, unless the income or loss is restricted by donor or law (Note 9).

#### **Fair Value Measurement of Financial Instruments**

The Health System estimates fair value based on a valuation framework that uses a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of fair value hierarchy, as defined by ASC 820, *Fair Value Measurements and Disclosures*, are described below:

- Level 1      Unadjusted quoted prices in active markets that are accessible at the measurement date for assets or liabilities.
- Level 2      Prices other than quoted prices in active markets that are either directly or indirectly observable as of the date of measurement.
- Level 3      Prices or valuation techniques that are both significant to the fair value measurement and unobservable.

The Health System applies the accounting provisions of Accounting Standards Update (ASU) 2009-12, *Investments in Certain Entities That Calculate Net Asset Value per Share (or its Equivalent)* (ASU 2009-12). ASU 2009-12 allows for the estimation of fair value of investments for which the investment does not have a readily determinable fair value, to use net asset value (NAV) per share or its equivalent as a practical expedient, subject to the Health System's ability to redeem its investment.

The carrying amount of patient accounts receivable, prepaid and other current assets, accounts payable and accrued expenses approximates fair value due to the short maturity of these instruments.

#### **Property, Plant, and Equipment**

Property, plant, and equipment, and other real estate are stated at cost at the time of purchase or fair value at the time of donation, less accumulated depreciation. The Health System's policy is to capitalize expenditures for major improvements and to charge expense for maintenance and repair expenditures which do not extend the lives of the related assets. The provision for depreciation has been determined using the straight-line method at rates which are intended to amortize the cost of assets over their estimated useful lives which range from 10 to 40 years for buildings and improvements, 2 to 20 years for equipment, and the shorter of the lease term, or 5 to 12 years, for leasehold improvements. Certain software development costs are amortized using the straight-line method over a period of up to 10 years. Net interest cost incurred on borrowed funds during the

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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period of construction of capital assets is capitalized as a component of the cost of acquiring those assets.

The fair value of a liability for legal obligations associated with asset retirements is recognized in the period in which it is incurred, if a reasonable estimate of the fair value of the obligation can be made. When a liability is initially recorded, the cost of the asset retirement obligation is capitalized by increasing the carrying amount of the related long-lived asset. Over time, the liability is accreted to its present value each period and the capitalized cost associated with the retirement is depreciated over the useful life of the related asset. Upon settlement of the obligation, any difference between the actual cost to settle the asset retirement obligation and the liability recorded is recognized as a gain or loss in the consolidated statements of operations and changes in net assets.

Gifts of capital assets such as land, buildings, or equipment are reported as support, and excluded from the excess of revenue over expenses, unless explicit donor stipulations specify how the donated assets must be used. Gifts of capital assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire capital assets are reported as restricted support. Absent explicit donor stipulations about how long those capital assets must be maintained, expirations of donor restrictions are reported when the donated or acquired capital assets are placed in service.

#### **Bond Issuance Costs**

Bond issuance costs, classified on the consolidated balance sheets within long-term debt, are amortized over the term of the related bonds. Amortization is recorded within interest expense in the consolidated statements of operations and changes in net assets using the straight-line method which approximates the effective interest method.

#### **Intangible Assets and Goodwill**

The Health System records within other assets on the consolidated balance sheets goodwill and intangible assets such as trade names and leases-in-place. The Health System considers trade names and goodwill to be indefinite-lived assets, assesses them at least annually for impairment or more frequently if certain events or circumstances warrant and recognizes impairment charges for amounts by which the carrying values exceed their fair values. The Health System has recorded \$10,524,000 and \$2,462,000 as intangible assets associated with its affiliations as of June 30, 2019 and 2018, respectively.

#### **Derivative Instruments and Hedging Activities**

The Health System applies the provisions of ASC 815, *Derivatives and Hedging*, to its derivative instruments, which require that all derivative instruments be recorded at their respective fair values in the consolidated balance sheets.

On the date a derivative contract is entered into, the Health System designates the derivative as a cash-flow hedge of a forecasted transaction or the variability of cash flows to be received or paid related to a recognized asset or liability. For all hedge relationships, the Health System formally documents the hedging relationship and its risk-management objective and strategy for undertaking the hedge, the hedging instrument, the nature of the risk being hedged, how the hedging instrument's effectiveness in offsetting the hedged risk will be assessed, and a description of the method of measuring ineffectiveness. This process includes linking cash-flow hedges to specific assets and liabilities on the consolidated balance sheets, specific firm commitments or forecasted transactions. The Health System also formally assesses, both at the hedge's inception and on an ongoing basis, whether the derivatives that are used in hedging transactions are highly

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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effective in offsetting changes in variability of cash flows of hedged items. Changes in the fair value of a derivative that is highly effective and that is designated and qualifies as a cash-flow hedge are recorded in net assets without donor restrictions until earnings are affected by the variability in cash flows of the designated hedged item. The ineffective portion of the change in fair value of a cash flow hedge is reported in excess of revenue over expenses in the consolidated statements of operations and changes in net assets.

The Health System discontinues hedge accounting prospectively when it is determined: (a) the derivative is no longer effective in offsetting changes in the cash flows of the hedged item; (b) the derivative expires or is sold, terminated, or exercised; (c) the derivative is undesignated as a hedging instrument because it is unlikely that a forecasted transaction will occur; (d) a hedged firm commitment no longer meets the definition of a firm commitment; and (e) management determines that designation of the derivative as a hedging instrument is no longer appropriate.

In all situations in which hedge accounting is discontinued, the Health System continues to carry the derivative at its fair value on the consolidated balance sheets and recognizes any subsequent changes in its fair value in excess of revenue over expenses.

#### **Gifts**

Gifts without donor restrictions are recorded net of related expenses as nonoperating gains. Conditional promises to give and indications of intentions to give to the Health System are reported at fair value at the date the gift is received. Gifts are reported with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified as net assets without donor restrictions and reported in the consolidated statements of operations and changes in net assets as net assets released from restrictions.

#### **Recently Issued Accounting Pronouncements**

In May 2014, the FASB issued ASU 2014-09 - *Revenue from Contracts with Customers (ASC 606)* and in August 2015, the FASB amended the guidance to defer the effective date of this standard by one year. ASU 2014-09 affects any entity that either enters into contracts with customers to transfer goods or services or enters into contracts for the transfer of nonfinancial assets unless those contracts are within the scope of other standards. The core principle of the guidance in ASU 2014-09 is that an entity should recognize revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. The Health System adopted ASU 2014-09 effective July 1, 2018 under the modified retrospective method, and has provided the new disclosures required post implementation. For example, patient accounts receivable are shown net of the allowance for doubtful accounts of approximately \$132,228,000 as of June 30, 2018 on the consolidated balance sheet. If an allowance for doubtful accounts had been presented as of June 30, 2019, it would have been approximately \$121,544,000. While the adoption of ASU 2014-09 has had a material effect on the presentation of revenues in the Health System's consolidated statements of operations and changes in net assets, and has had an impact on certain disclosures, it has not materially impacted the financial position, results of operations or cash flows. Refer to Note 4, Patient Service Revenue and Accounts Receivable, for further details.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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In February 2016, the FASB issued ASU 2016-02 – *Leases (Topic 842)*, which requires a lessee to recognize a right-of-use asset and a lease liability, initially measured at the present value of the lease payments, on its balance sheet. The standard also requires a lessee to recognize a single lease cost, calculated so that the cost of the lease is allocated over the lease term, on a generally straight-line basis. The guidance also expands the required quantitative and qualitative disclosures surrounding leases. The ASU is effective for fiscal years beginning after December 15, 2018, or fiscal year 2020 for the Health System. The Health System is evaluating the impact of the new guidance on the consolidated financial statements.

In January 2016, the FASB issued ASU 2016-01- *Recognition and Measurement of Financial Assets and Financial Liabilities*, which address certain aspects of recognition, measurement, presentation and disclosure of financial instruments. This guidance allows an entity to choose, investment-by-investment, to report an equity investment that neither has a readily determinable fair value, nor qualifies for the practical expedient for fair value estimation using NAV, at its cost minus impairment (if any), plus or minus changes resulting from observable price changes in orderly transactions for the identical or similar investment of the same issue. Impairment of such investments must be assessed qualitatively at each reporting period. Entities must disclose their financial assets and liabilities by measurement category and form of asset either on the face of the balance sheet or in the accompanying notes. The ASU is effective for annual reporting periods beginning after December 15, 2018 or fiscal year 2020 for the Health System. The provision to eliminate the requirement to disclose the fair value of financial instruments measured at cost (such as the fair value of debt) was early adopted during the year ended June 30, 2017.

In August 2016, the FASB issued ASU 2016-14 - *Presentation of Financial Statements for Not-for-Profit Entities*. The new pronouncement amends certain financial reporting requirements for not-for-profit entities. It reduces the number of classes of net assets from three to two: net assets with donor restrictions includes amount previously disclosed as both temporarily and permanently restricted net assets, net assets without donor restrictions includes amounts previously disclosed as unrestricted net assets. It expands the disclosure of expenses by both natural and functional classification. It adds quantitative and qualitative disclosures about liquidity and availability of resources. The ASU is effective for the Health System for the year ending June 30, 2019. The Health System has adopted this ASU on a retrospective basis, except for the presentation of expenses based on natural and functional classification and the discussion of liquidity, as permitted in the ASU. Please refer to Note 14, Functional Expenses, and Note 15, Liquidity.

In June 2018, the FASB issued ASU 2018-08, *Not-for-Profit Entities (Topic 958), Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. The new pronouncement was intended to assist entities in evaluating whether transactions should be accounted for as contributions or exchange transactions and whether a contribution is conditional. This ASU was effective for the Health System on July 1, 2018 on a modified prospective basis and did not have a significant impact on the consolidated financial statements of the Health System.

### **3. Acquisitions**

Effective July 1, 2018, Alice Peck Day Memorial Hospital became the sole corporate member of APD LifeCare Center Inc. (LifeCare). LifeCare owns and operates Harvest Hill, an assisted living facility, the Woodlands, a residential living community and the Elizabeth S. Hughes Care Unit, which provides hospice care.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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In accordance with applicable accounting guidance on not-for-profit mergers and acquisitions, Alice Peck Day Memorial Hospital recorded goodwill related to the acquisition of LifeCare of approximately \$5,131,000. Restricted contribution income of \$383,000 was recorded within net assets with donor restrictions in the accompanying consolidated statement of changes in net assets. Included in the transaction was LifeCare's cash balance of \$4,863,000. No consideration was exchanged for the net assets assumed and acquisition costs were expensed as incurred. LifeCare's financial position, results of operations and changes in net assets are included in the consolidated financial statements as of and for the year ended June 30, 2019.

#### **4. Patient Service Revenue and Accounts Receivable**

The Health System reports patient service revenue at amounts that reflect the consideration to which it expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payers (including managed care payers and government programs), and others; and they include variable consideration for retroactive revenue adjustments due to settlement of audits, reviews, and investigations. Generally, the Health System bills patients and third-party payers several days after the services were performed or shortly after discharge. Revenue is recognized as performance obligations are satisfied under contracts by providing healthcare services to patients.

The Health System determines performance obligations based on the nature of the services provided. Revenues for performance obligations satisfied over time are recognized based on actual charges incurred in relation to total expected charges as this method provides a reasonable estimate of the transfer of services over the term of performance obligations based on inputs needed to satisfy the obligations. Generally, performance obligations satisfied over time relate to patients receiving inpatient acute care services. For inpatient services, performance obligations are measured from admission to the point when there are no further services required for the patient, which is generally the time of discharge. For outpatient services and physician services, performance obligations are recognized at a point in time when the services are provided and no further patient services are deemed necessary.

Generally, the Health System's patient service performance obligations relate to contracts with a duration of less than one year, therefore the Health System has elected to apply the optional exemption provided in ASC 606-10-50-14a and, therefore, we are not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period. This generally refers to inpatient services at the end of the reporting period. The performance obligations for these contracts are generally completed when the patients are discharged, which generally occurs within days or weeks of the end of the reporting period.

Established charges represent gross charges. They are not the same as actual pricing, and they generally do not reflect what a hospital is ultimately entitled to for services it provides. Therefore, they are not displayed in the Health System's consolidated statements of operations and changes in net assets.

Hospitals are paid amounts negotiated with insurance companies or set by government entities, which are typically less than established or standard charges. Gross charges are used to calculate Medicare outlier payments and to determine certain elements of payment under managed care contracts. Gross charges are what hospitals charge all patients prior to the application of contractual adjustments and implicit price concessions.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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#### **Explicit Pricing Concessions**

Revenues for the Health System under the traditional fee-for service Medicare and Medicaid programs are based on prospectively determined rates per discharge or visit, reasonable (allowable) cost, or prospective rates per episodic period, depending on the type of provider.

- Inpatient acute care services provided to Medicare program beneficiaries are paid using the prospective payment system ("PPS") to determine rates-per-discharge. These rates vary according to a patient classification system ("DRG"), based on diagnostic, clinical and other factors. In addition, inpatient capital costs (depreciation and interest) are reimbursed by Medicare on the basis of a prospectively determined rate per discharge. Medicare outpatient services are paid on a prospective payment system, based on a pre-determined amount for each outpatient procedure (APC), subject to various mandated modifications. Retrospectively determined cost-based revenues under these programs, such as indirect medical education, direct graduate medical education, disproportionate share hospital, transplant services, and bad debt reimbursement are based on the hospital's cost reports and are estimated using historical trends and current factors. The Health System's payments for inpatient services rendered to New Hampshire ("NH") and Vermont ("VT") Medicaid beneficiaries are based on PPS, while outpatient services are reimbursed on a retrospective cost basis or fee schedules for NH beneficiaries. VT outpatient beneficiaries are paid on a prospective basis per outpatient procedure.
- Inpatient acute, swing, and outpatient services furnished by critical access hospitals ("CAH") are reimbursed by Medicare at 101% of reasonable costs, subject to 2% sequestration, excluding ambulance services and inpatient hospice care.
- Providers of home health services to patients eligible for Medicare home health benefits are paid on a prospective basis, with no retrospective settlement. The prospective payment is based on the scoring attributed to the acuity level of the patient at a rate determined by federal guidelines.
- Hospice services to patients eligible for Medicare hospice benefits are paid on a per diem basis, with no retrospective settlement, provided the aggregate annual Medicare reimbursement is below a predetermined aggregate capitated rate.
- The Health System's cost based services to Medicare and Medicaid are reimbursed during the year based on varying interim payment methodologies. Final settlement is determined after the submission of an annual cost report and subject to audit of this report by Medicare and Medicaid auditors, as well as administrative and judicial review. Because the laws, regulations, and rule interpretations, governing Medicare and Medicaid reimbursement are complex and change frequently, the estimates recorded could change over time by material amounts.
- Revenues under Managed Care Plans (Plans) consist primarily of payment terms involving mutually agreed upon rates per diagnosis, discounted fee-for service rates, or similar contractual arrangements. These revenues are also subject to review and possible audit. The Plans are billed for patient services on an individual patient basis. An individual patient's bill is subject to adjustments in accordance with contractual terms in place with the Plans following their review and adjudication of each bill.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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The Health System is not aware of any claims, disputes, or unsettled matters with any payer that would materially affect its revenues for which it has not adequately provided in the accompanying Health System's consolidated financial statements.

The Health System provides charity care to patients who are unable to pay for healthcare services they receive as determined by financial conditions. Patients who qualify receive partial or full adjustments to charges for services rendered. The Health System's policy is to treat amounts qualified as charity care as explicit price concessions and as such are not reported in net patient service revenue.

During fiscal year 2016, Vermont state legislation passed changes to the tax base for home health providers from 19.30% of core home health care services (primarily Medicaid services) with a cap of 6% of net patient service revenue to 3.63% of net patient revenue for fiscal year 2017 and fiscal year 2018. Home health provider tax paid, which is included in other operating expenses, was \$628,000 and \$737,000 in 2019 and 2018, respectively.

On June 30, 2014, the NH Governor signed into law a bi-partisan legislation reflecting an agreement between the State of NH and 25 NH hospitals on the Medicaid Enhancement Tax (MET) Senate Bill 369. As part of the agreement, the parties have agreed to resolve all pending litigation related to MET and Medicaid Rates, including the Catholic Medical Center Litigation, the Northeast Rehabilitation Litigation, 2014 DRA Refund Requests, and the State Rate Litigation. As part of the MET Agreement Effective July 1, 2014, a "Trust / Lock Box" dedicated funding mechanism will be established for receipt and distribution of all MET proceeds with all monies used exclusively to support Medicaid services.

On May 22, 2018, the State of New Hampshire and all New Hampshire hospitals (NH Hospitals) signed a new settlement agreement and multi-year plan for Disproportionate Share Hospital (DSH) payments, with provisions to create alternative payments should there be federal changes to the DSH program by the United States Congress. The agreement may change or limit federal matching funds for MET when used to support DSH payments to hospitals and the Medicaid program, or change the definition of Uncompensated Care (UCC) for purposes of calculating DSH or other allowable uncompensated care payments. The term of the agreement is through state fiscal year (SFY) 2024. Under the agreement, the NH Hospitals forgo approximately \$28,000,000 of DSH payment for SFY 2018 and 2019, in consideration of the State agreeing to form a pool of funds to make directed payments or otherwise increase rates to hospitals for SFY 2020 through 2024. The Federal share of payments to NH Hospitals are contingent upon the receipt of matching funds from Centers for Medicare & Medicaid Services (CMS) in the covered years. In the event that, due to changes in federal law, the State is unable to make payments in a way that ensures the federal matching funds are available, the Parties will meet and confer to negotiate in good faith an appropriate amendment to this agreement consistent with the intent of this agreement. The State is required to maintain the UCC Dedicated Fund pursuant to earlier agreements. The agreement prioritizes payments of funds to critical access hospitals at 75% of allowable UCC, the remainder thereafter is distributed to other NH Hospitals in proportion to their allowable uncompensated care amounts. During the term of this agreement, the NH Hospitals are barred from bringing a new claim in federal or state court or at Department of Revenue Administration (DRA) related to the constitutionality of MET.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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During the years ended June 30, 2019 and 2018, the Health System received DSH payments of approximately, \$69,179,000 and \$66,383,000, respectively. DSH payments are subject to audit pursuant to the agreement with the state and therefore, for the years ended June 30, 2019 and 2018, the Health System recognized as revenue DSH receipts of approximately \$64,864,000 and approximately \$54,469,000, respectively.

During the years ended June 30, 2019 and 2018, the Health System recorded State of NH Medicaid Enhancement Tax ("MET") and State of VT Provider tax of \$70,061,000 and \$67,692,000, respectively. The taxes are calculated at 5.5% for NH and 6% for VT of certain net patient service revenues in accordance with instructions received from the States. The Provider taxes are included in operating expenses in the consolidated statements of operations and changes in net assets.

#### **Implicit Price Concessions**

Generally, patients who are covered by third-party payer contracts are responsible for related co-pays, co-insurance and deductibles, which vary depending on the contractual obligations of patients. The Health System also provides services to uninsured patients and offers those patients a discount from standard charges. The Health System estimates the transaction price for patients with co-pays, co-insurance, and deductibles and for those who are uninsured based on historical collection experience and current market conditions. The discount offered to uninsured patients reduces the transaction price at the time of billing. The uninsured and patient responsible accounts, net of discounts recorded, are further reduced through implicit price concessions based on historical collection trends for similar accounts and other known factors that impact the estimation process. Subsequent changes to the estimate of transaction price are generally recorded as adjustments to net patient service revenue in the period of change.

The implicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and the amounts the Health System expects to collect based on collection history with similar patients. Although outcomes vary, the Health System's policy is to attempt to collect amounts due from patients, including co-pays, co-insurance and deductibles due from insurance at the time of service while complying with all federal and state statutes and regulations, including but not limited to, the Emergency Medical Treatment and Active Labor Act (EMTALA). Through various systems and processes the Health System estimates Medicare and Medicaid net patient service revenue and cost report settlements and accrues final expected settlements. For filed cost reports, the accrual is recorded based on those filings, subsequent activity, and on historical trends and other relevant evidence. For periods in which a cost report is yet to be filed, accruals are based on estimates of what is expected to be reported, and any trends and relevant evidence. Cost reports generally must be filed within five months of the closing period.

Settlements with third-party payers for retroactive revenue adjustments due to audits, reviews or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care using the most likely amount. These settlements are estimated based on the terms of the payment agreement with the payer, correspondence from the payer and historical settlement activity, including assessments to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known, or as years are settled or are no longer subject to such audits, reviews or investigations. As of June 30, 2019 and 2018, the Health System had \$52,470,000 and \$52,041,000, respectively, reserved for estimated third-party settlements.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

For the years ended June 30, 2019 and 2018, additional increases (decreases) in revenue of \$1,800,000 and (\$5,604,000), respectively, was recognized due to changes in its prior years related to estimated third-party settlements.

Net operating revenues for the hospital operations of the PPS and CAH, and other business segments consist primarily of patient service revenues, principally for patients covered by Medicare, Medicaid, managed care and other health plans as well as patients covered under the Health System's uninsured discount and charity care programs.

The table below shows the Health System's sources of net operating revenues presented at the net transaction price for the years ended June 30, 2019 and 2018.

<i>(in thousands of dollars)</i>	2019		
	PPS	CAH	Total
<b>Hospital</b>			
Medicare	\$ 456,197	\$ 72,193	\$ 528,390
Medicaid	134,727	12,794	147,521
Commercial	746,647	64,981	811,628
Self pay	8,811	2,313	11,124
	<u>1,346,382</u>	<u>152,281</u>	<u>1,498,663</u>
<b>Professional</b>			
Professional	454,425	23,707	478,132
VNH			22,528
Other revenue			285,715
	<u>1,800,807</u>	<u>175,988</u>	<u>2,285,038</u>
Total operating revenue and other support	<u>\$ 1,800,807</u>	<u>\$ 175,988</u>	<u>\$ 2,285,038</u>

<i>(in thousands of dollars)</i>	2018		
	PPS	CAH	Total
<b>Hospital</b>			
Medicare	\$ 432,251	\$ 76,522	\$ 508,773
Medicaid	117,019	10,017	127,036
Commercial	677,162	65,916	743,078
Self pay	10,687	2,127	12,814
	<u>1,237,119</u>	<u>154,582</u>	<u>1,391,701</u>
<b>Professional</b>			
Professional	412,605	24,703	437,308
VNH			22,719
Other revenue			203,915
	<u>1,649,724</u>	<u>179,285</u>	<u>2,055,643</u>
Total operating revenue and other support	<u>\$ 1,649,724</u>	<u>\$ 179,285</u>	<u>\$ 2,055,643</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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#### Accounts Receivable

The principal components of patient accounts receivable as of June 30, 2019 and 2018 are as follows:

<i>(in thousands of dollars)</i>	<b>2019</b>	<b>2018</b>
Patient accounts receivable	\$ 221,125	\$ 351,456
Less: Allowance for doubtful accounts	<u>-</u>	<u>(132,228)</u>
Patient accounts receivable	<u>\$ 221,125</u>	<u>\$ 219,228</u>

The following table categorizes payors into four groups based on their respective percentages of gross patient accounts receivable as of June 30, 2019 and 2018:

	<b>2019</b>	<b>2018</b>
Medicare	34 %	34 %
Medicaid	12	14
Commercial	41	40
Self pay	<u>13</u>	<u>12</u>
Patient accounts receivable	<u>100 %</u>	<u>100 %</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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#### 5. Investments

The composition of investments at June 30, 2019 and 2018 is set forth in the following table:

*(in thousands of dollars)*

	<b>2019</b>	<b>2018</b>
<b>Assets limited as to use</b>		
Internally designated by board		
Cash and short-term investments	\$ 21,890	\$ 8,558
U.S. government securities	91,492	50,484
Domestic corporate debt securities	196,132	109,240
Global debt securities	83,580	110,944
Domestic equities	167,384	142,796
International equities	128,909	106,668
Emerging markets equities	23,086	23,562
Real estate investment trust	213	816
Private equity funds	64,563	50,415
Hedge funds	32,287	32,831
	<u>809,536</u>	<u>636,314</u>
<b>Investments held by captive insurance companies (Note 12)</b>		
U.S. government securities	23,241	30,581
Domestic corporate debt securities	11,378	16,764
Global debt securities	10,080	4,513
Domestic equities	14,617	8,109
International equities	6,766	7,971
	<u>66,082</u>	<u>67,938</u>
<b>Held by trustee under indenture agreement (Note 10)</b>		
Cash and short-term investments	631	1,872
Total assets limited as to use	<u>876,249</u>	<u>706,124</u>
<b>Other investments for restricted activities</b>		
Cash and short-term investments	6,113	4,952
U.S. government securities	32,479	28,220
Domestic corporate debt securities	29,089	29,031
Global debt securities	11,263	14,641
Domestic equities	20,981	20,509
International equities	15,531	17,521
Emerging markets equities	2,578	2,155
Real estate investment trust	-	954
Private equity funds	7,638	4,878
Hedge funds	8,414	8,004
Other	33	31
Total other investments for restricted activities	<u>134,119</u>	<u>130,896</u>
Total investments	<u>\$ 1,010,368</u>	<u>\$ 837,020</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

Investments are accounted for using either the fair value method or equity method of accounting, as appropriate on a case by case basis. The fair value method is used for all debt securities and equity securities that are traded on active markets and are valued at prices that are readily available in those markets. The equity method is used when investments are made in pooled/commingled investment funds that represent investments where shares or units are owned of pooled funds rather than the underlying securities in that fund. These pooled/commingled funds make underlying investments in securities from the asset classes listed above. All investments, whether the fair value or equity method of accounting is used, are reported at what the Health System believes to be the amount that the Health System would expect to receive if it liquidated its investments at the balance sheets date on a nondistressed basis.

The following tables summarize the investments by the accounting method utilized, as of June 30, 2019 and 2018. Accounting standards require disclosure of additional information for those securities accounted for using the fair value method, as shown in Note 7.

<i>(in thousands of dollars)</i>	<b>2019</b>		
	<b>Fair Value</b>	<b>Equity</b>	<b>Total</b>
Cash and short-term investments	\$ 28,634	\$ -	\$ 28,634
U.S. government securities	147,212	-	147,212
Domestic corporate debt securities	164,996	71,603	236,599
Global debt securities	55,520	49,403	104,923
Domestic equities	178,720	24,262	202,982
International equities	76,328	74,878	151,206
Emerging markets equities	1,295	24,369	25,664
Real estate investment trust	213	-	213
Private equity funds	-	72,201	72,201
Hedge funds	-	40,701	40,701
Other	33	-	33
	<u>\$ 652,951</u>	<u>\$ 357,417</u>	<u>\$ 1,010,368</u>

<i>(in thousands of dollars)</i>	<b>2018</b>		
	<b>Fair Value</b>	<b>Equity</b>	<b>Total</b>
Cash and short-term investments	\$ 15,382	\$ -	\$ 15,382
U.S. government securities	109,285	-	109,285
Domestic corporate debt securities	95,481	59,554	155,035
Global debt securities	49,104	80,994	130,098
Domestic equities	157,011	14,403	171,414
International equities	60,002	72,158	132,160
Emerging markets equities	1,296	24,421	25,717
Real estate investment trust	222	1,548	1,770
Private equity funds	-	55,293	55,293
Hedge funds	-	40,835	40,835
Other	31	-	31
	<u>\$ 487,814</u>	<u>\$ 349,206</u>	<u>\$ 837,020</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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Investment income is comprised of the following for the years ended June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	2019	2018
<b>Net assets without donor restrictions</b>		
Interest and dividend income, net	\$ 11,333	\$ 12,324
Net realized gains on sales of securities	17,419	24,411
Change in net unrealized gains on investments	12,283	4,612
	<u>41,035</u>	<u>41,347</u>
<b>Net assets with donor restrictions</b>		
Interest and dividend income, net	987	1,526
Net realized gains on sales of securities	2,603	1,438
Change in net unrealized gains on investments	(908)	1,390
	<u>2,682</u>	<u>4,354</u>
	<u>\$ 43,717</u>	<u>\$ 45,701</u>

For the years ended June 30, 2019 and 2018 investment income is reflected in the accompanying consolidated statements of operations and changes in net assets as operating revenue of approximately \$983,000 and \$960,000 and as nonoperating gains of approximately \$40,052,000 and \$40,387,000, respectively.

Private equity limited partnership shares are not eligible for redemption from the fund or general partner, but can be sold to third party buyers in private transactions that typically can be completed in approximately 90 days. It is the intent of the Health System to hold these investments until the fund has fully distributed all proceeds to the limited partners and the term of the partnership agreement expires. Under the terms of these agreements, the Health System has committed to contribute a specified level of capital over a defined period of time. Through June 30, 2019 and 2018, the Health System has committed to contribute approximately \$164,319,000 and \$137,219,000 to such funds, of which the Health System has contributed approximately \$109,584,000 and \$91,942,000 and has outstanding commitments of \$54,735,000 and \$45,277,000, respectively.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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#### 6. Property, Plant, and Equipment

Property, plant, and equipment are summarized as follows at June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	2019	2018
Land	\$ 38,232	\$ 38,058
Land improvements	42,607	42,295
Buildings and improvements	898,050	876,537
Equipment	888,138	818,902
Equipment under capital leases	15,809	20,966
	<u>1,882,836</u>	<u>1,796,758</u>
Less: Accumulated depreciation and amortization	<u>1,276,746</u>	<u>1,200,549</u>
Total depreciable assets, net	606,090	596,209
Construction in progress	<u>15,166</u>	<u>11,112</u>
	<u>\$ 621,256</u>	<u>\$ 607,321</u>

As of June 30, 2019, construction in progress primarily consists of an addition to the ambulatory surgical center located in Manchester, NH as well as renovations taking place at the various pharmacy locations to bring their facilities compliant with Regulation USP800. The estimated cost to complete the ambulatory surgical center at June 30, 2019 is approximately \$59,000,000 over the next two fiscal years while the pharmacy renovation is estimated to cost approximately \$6,300,000 over the next fiscal year.

The construction in progress reported as of June 30, 2018 for the building renovations taking place at the birthing pavilion in Lebanon, NH was completed during the first quarter of fiscal year 2019 and the information systems PeopleSoft project for Alice Peck Day Memorial Hospital and Cheshire was completed in the fourth quarter of fiscal year 2019.

Depreciation and amortization expense included in operating and nonoperating activities was approximately \$88,496,000 and \$84,729,000 for 2019 and 2018, respectively.

#### 7. Fair Value Measurements

The following is a description of the valuation methodologies for assets and liabilities measured at fair value on a recurring basis:

##### **Cash and Short-Term Investments**

Consists of money market funds and are valued at net asset value (NAV) reported by the financial institution.

##### **Domestic, Emerging Markets and International Equities**

Consists of actively traded equity securities and mutual funds which are valued at the closing price reported on an active market on which the individual securities are traded (Level 1 measurements).

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

#### U.S. Government Securities, Domestic Corporate and Global Debt Securities

Consists of U.S. government securities, domestic corporate and global debt securities, mutual funds and pooled/commingled funds that invest in U.S. government securities, domestic corporate and global debt securities. Securities are valued based on quoted market prices or dealer quotes where available (Level 1 measurement). If quoted market prices are not available, fair values are based on quoted market prices of comparable instruments or, if necessary, matrix pricing from a third party pricing vendor to determine fair value (Level 2 measurements). Matrix prices are based on quoted prices for securities with similar coupons, ratings and maturities, rather than on specific bids and offers for a designated security. Investments in mutual funds are measured based on the quoted NAV as of the close of business in the respective active market (Level 1 measurements).

The preceding methods may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Health System believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Investments are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The following tables set forth the consolidated financial assets and liabilities that were accounted for at fair value on a recurring basis as of June 30, 2019 and 2018:

(in thousands of dollars)	2019				Redemption or Liquidation	Days' Notice
	Level 1	Level 2	Level 3	Total		
<b>Assets</b>						
<b>Investments</b>						
Cash and short term investments	\$ 28,634	\$ -	\$ -	\$ 28,634	Daily	1
U.S. government securities	147,212	-	-	147,212	Daily	1
Domestic corporate debt securities	34,723	130,273	-	164,996	Daily-Monthly	1-15
Global debt securities	28,412	27,108	-	55,520	Daily-Monthly	1-15
Domestic equities	171,318	7,402	-	178,720	Daily-Monthly	1-10
International equities	76,295	33	-	76,328	Daily-Monthly	1-11
Emerging market equities	1,295	-	-	1,295	Daily-Monthly	1-7
Real estate investment trust	213	-	-	213	Daily-Monthly	1-7
Other	-	33	-	33	Not applicable	Not applicable
<b>Total investments</b>	<b>488,102</b>	<b>164,849</b>	<b>-</b>	<b>652,951</b>		
<b>Deferred compensation plan assets</b>						
Cash and short-term investments	2,952	-	-	2,952		
U.S. government securities	45	-	-	45		
Domestic corporate debt securities	4,932	-	-	4,932		
Global debt securities	1,300	-	-	1,300		
Domestic equities	22,403	-	-	22,403		
International equities	3,576	-	-	3,576		
Emerging market equities	27	-	-	27		
Real estate	11	-	-	11		
Multi strategy fund	48,941	-	-	48,941		
Guaranteed contract	-	-	89	89		
<b>Total deferred compensation plan assets</b>	<b>84,187</b>	<b>-</b>	<b>89</b>	<b>84,276</b>	Not applicable	Not applicable
Beneficial interest in trusts	-	-	9,301	9,301	Not applicable	Not applicable
<b>Total assets</b>	<b>\$ 572,289</b>	<b>\$ 164,849</b>	<b>\$ 9,390</b>	<b>\$ 746,528</b>		

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

<i>(in thousands of dollars)</i>	2018				Redemption or Liquidation	Days' Notice
	Level 1	Level 2	Level 3	Total		
<b>Assets</b>						
<b>Investments</b>						
Cash and short term investments	\$ 15,382	\$ -	\$ -	\$ 15,382	Daily	1
U.S. government securities	109,285	-	-	109,285	Daily	1
Domestic corporate debt securities	41,488	53,993	-	95,481	Daily-Monthly	1-15
Global debt securities	32,874	16,230	-	49,104	Daily-Monthly	1-15
Domestic equities	157,011	-	-	157,011	Daily-Monthly	1-10
International equities	59,924	78	-	60,002	Daily-Monthly	1-11
Emerging market equities	1,296	-	-	1,296	Daily-Monthly	1-7
Real estate investment trust	222	-	-	222	Daily-Monthly	1-7
Other	-	31	-	31	Not applicable	Not applicable
Total investments	<u>417,482</u>	<u>70,332</u>	<u>-</u>	<u>487,814</u>		
<b>Deferred compensation plan assets</b>						
Cash and short-term investments	2,637	-	-	2,637		
U.S. government securities	38	-	-	38		
Domestic corporate debt securities	3,749	-	-	3,749		
Global debt securities	1,089	-	-	1,089		
Domestic equities	18,470	-	-	18,470		
International equities	3,584	-	-	3,584		
Emerging market equities	28	-	-	28		
Real estate	9	-	-	9		
Multi strategy fund	46,680	-	-	46,680		
Guaranteed contract	-	-	86	86		
Total deferred compensation plan assets	<u>76,284</u>	<u>-</u>	<u>86</u>	<u>76,370</u>	Not applicable	Not applicable
Beneficial interest in trusts	-	-	9,374	9,374	Not applicable	Not applicable
Total assets	<u>\$ 493,766</u>	<u>\$ 70,332</u>	<u>\$ 9,460</u>	<u>\$ 573,558</u>		

The following table is a rollforward of financial instruments classified by the Health System within Level 3 of the fair value hierarchy defined above.

<i>(in thousands of dollars)</i>	2019		
	Beneficial Interest in Perpetual Trust	Guaranteed Contract	Total
<b>Balances at beginning of year</b>	\$ 9,374	\$ 86	\$ 9,460
Net unrealized gains (losses)	(73)	3	(70)
<b>Balances at end of year</b>	<u>\$ 9,301</u>	<u>\$ 89</u>	<u>\$ 9,390</u>
	2018		
<i>(in thousands of dollars)</i>	Beneficial Interest in Perpetual Trust	Guaranteed Contract	Total
<b>Balances at beginning of year</b>	\$ 9,244	\$ 83	\$ 9,327
Net unrealized gains	130	3	133
<b>Balances at end of year</b>	<u>\$ 9,374</u>	<u>\$ 86</u>	<u>\$ 9,460</u>

There were no transfers into and out of Level 1 and 2 measurements due to changes in valuation methodologies during the years ended June 30, 2019 and 2018.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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#### 8. Net Assets With Donor Restrictions

Net assets with donor restrictions are available for the following purposes at June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	2019	2018
Healthcare services	\$ 20,140	\$ 19,570
Research	26,496	24,732
Purchase of equipment	3,273	3,068
Charity care	12,494	13,667
Health education	19,833	18,429
Other	3,841	2,973
Investments held in perpetuity	56,383	55,394
	<u>\$ 142,460</u>	<u>\$ 137,833</u>

Income earned on donor restricted net assets held in perpetuity is available for these purposes.

#### 9. Board Designated and Endowment Funds

Net assets include numerous funds established for a variety of purposes including both donor-restricted endowment funds and funds designated by the Board of Trustees to function as endowments. Net assets associated with endowment funds, including funds designated by the Board of Trustees to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

The Board of Trustees has interpreted the NH and VT Uniform Prudent Management of Institutional Funds Acts (UPMIFA or Act) for donor-restricted endowment funds as requiring the preservation of the original value of gifts, as of the gift date, to donor-restricted endowment funds, absent explicit donor stipulations to the contrary. The Health System's net assets with donor restrictions which are to be held in perpetuity consist of (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to be held in perpetuity, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund, if any. Collectively these amounts are referred to as the historic dollar value of the fund.

Net assets without donor restrictions include funds designated by the Board of Trustees to function as endowments and the income from certain donor-restricted endowment funds, and any accumulated investment return thereon, which pursuant to donor intent may be expended based on trustee or management designation. Net assets with donor restrictions that are temporary in nature, either restricted by time or purpose, include funds appropriated for expenditure pursuant to endowment and investment spending policies, certain expendable endowment gifts from donors, and any retained income and appreciation on donor-restricted endowment funds, which are restricted by the donor to a specific purpose or by law. When the restrictions on these funds have been met, the funds are reclassified to net assets without donor restrictions.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

In accordance with the Act, the Health System considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: the duration and preservation of the fund; the purposes of the donor-restricted endowment fund; general economic conditions; the possible effect of inflation and deflation; the expected total return from income and the appreciation of investments; other resources available; and investment policies.

The Health System has endowment investment and spending policies that attempt to provide a predictable stream of funding for programs supported by its endowment while ensuring that the purchasing power does not decline over time. The Health System targets a diversified asset allocation that places emphasis on investments in domestic and international equities, fixed income, private equity, and hedge fund strategies to achieve its long-term return objectives within prudent risk constraints. The Health System's Investment Committee reviews the policy portfolio asset allocations, exposures, and risk profile on an ongoing basis.

The Health System, as a policy, may appropriate for expenditure or accumulate so much of an endowment fund as the institution determines is prudent for the uses, benefits, purposes, and duration for which the endowment is established, subject to donor intent expressed in the gift instrument and the standard of prudence prescribed by the Act.

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below their original contributed value. Such market losses were not material as of June 30, 2019 and 2018.

Endowment net asset composition by type of fund consists of the following at June 30, 2019 and 2018:

	<b>2019</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
<i>(in thousands of dollars)</i>			
Donor-restricted endowment funds	\$ -	\$ 78,268	\$ 78,268
Board-designated endowment funds	31,421	-	31,421
Total endowed net assets	<u>\$ 31,421</u>	<u>\$ 78,268</u>	<u>\$ 109,689</u>

	<b>2018</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
<i>(in thousands of dollars)</i>			
Donor-restricted endowment funds	\$ -	\$ 78,197	\$ 78,197
Board-designated endowment funds	29,506	-	29,506
Total endowed net assets	<u>\$ 29,506</u>	<u>\$ 78,197</u>	<u>\$ 107,703</u>

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Notes to Consolidated Financial Statements**  
**June 30, 2019 and 2018**

Changes in endowment net assets for the years ended June 30, 2019 and 2018 are as follows:

	<b>2019</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
<i>(in thousands of dollars)</i>			
<b>Balances at beginning of year</b>	\$ 29,506	\$ 78,197	\$ 107,703
Net investment return	1,184	2,491	3,675
Contributions	804	1,222	2,026
Transfers	(73)	(1,287)	(1,360)
Release of appropriated funds	-	(2,355)	(2,355)
<b>Balances at end of year</b>	<b>\$ 31,421</b>	<b>\$ 78,268</b>	<b>\$ 109,689</b>
	<b>2018</b>		
	<b>Without Donor Restrictions</b>	<b>With Donor Restrictions</b>	<b>Total</b>
<i>(in thousands of dollars)</i>			
<b>Balances at beginning of year</b>	\$ 26,389	\$ 75,457	\$ 101,846
Net investment return	3,112	4,246	7,358
Contributions	-	1,121	1,121
Transfers	5	(35)	(30)
Release of appropriated funds	-	(2,592)	(2,592)
<b>Balances at end of year</b>	<b>\$ 29,506</b>	<b>\$ 78,197</b>	<b>\$ 107,703</b>

**Dartmouth-Hitchcock Health and Subsidiaries**  
**Notes to Consolidated Financial Statements**  
**June 30, 2019 and 2018**

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**10. Long-Term Debt**

A summary of long-term debt at June 30, 2019 and 2018 is as follows:

<i>(in thousands of dollars)</i>	<b>2019</b>	<b>2018</b>
<b>Variable rate issues</b>		
New Hampshire Health and Education facilities		
Authority (NHHEFA) revenue bonds		
Series 2018A, principal maturing in varying annual amounts, through August 2037 (1)	\$ 83,355	\$ 83,355
<b>Fixed rate issues</b>		
New Hampshire Health and Education facilities		
Authority revenue bonds		
Series 2018B, principal maturing in varying annual amounts, through August 2048 (1)	303,102	303,102
Series 2017A, principal maturing in varying annual amounts, through August 2040 (2)	122,435	122,435
Series 2017B, principal maturing in varying annual amounts, through August 2031 (2)	109,800	109,800
Series 2014A, principal maturing in varying annual amounts, through August 2022 (3)	26,960	26,960
Series 2018C, principal maturing in varying annual amounts, through August 2030 (4)	25,865	-
Series 2012, principal maturing in varying annual amounts, through July 2039 (5)	25,145	25,955
Series 2014B, principal maturing in varying annual amounts, through August 2033 (3)	14,530	14,530
Series 2016B, principal maturing in varying annual amounts, through August 2045 (6)	10,970	10,970
	<u>10,970</u>	<u>10,970</u>
Total variable and fixed rate debt	<u>\$ 722,162</u>	<u>\$ 697,107</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

A summary of long-term debt at June 30, 2019 and 2018 is as follows:

<i>(in thousands of dollars)</i>	2019	2018
<b>Other</b>		
Series 2010, principal maturing in varying annual amounts, through August 2040 (7)*	\$ -	\$ 15,498
Note payable to a financial institution payable in interest free monthly installments through July 2015; collateralized by associated equipment*	445	646
Note payable to a financial institution with entire principal due June 2029 that is collateralized by land and building. The note payable is interest free*	323	380
Mortgage note payable to the US Dept of Agriculture; monthly payments of \$10,892 include interest of 2.375% through November 2046*	2,629	2,697
Obligations under capital leases	17,526	18,965
Total other debt	20,923	38,186
Total variable and fixed rate debt	722,162	697,107
Total long-term debt	743,085	735,293
Less: Original issue discounts and premiums, net	(25,542)	(26,862)
Bond issuance costs, net	5,533	5,716
Current portion	10,914	3,464
	<u>\$ 752,180</u>	<u>\$ 752,975</u>

\* Represents nonobligated group bonds

Aggregate annual principal payments required under revenue bond agreements and capital lease obligations for the next five years ending June 30 and thereafter are as follows:

<i>(in thousands of dollars)</i>	
2020	\$ 10,914
2021	10,693
2022	10,843
2023	7,980
2024	3,016
Thereafter	699,639
	<u>\$ 743,085</u>

#### **Dartmouth-Hitchcock Obligated Group (DHOG) Bonds**

MHMH established the DHOG in 1993 for the original purpose of issuing bonds financed through NHHEFA or the "Authority". The members of the obligated group consist of D-HH, MHMH, DHC, Cheshire, NLH, MAHHC, and, effective August 15, 2018, APD. D-HH is designated as the obligated group agent.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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Revenue Bonds issued by members of the DHOG are administered through notes registered in the name of the Bond Trustee and in accordance with the terms of a Master Trust Indenture. The Master Trust Indenture contains provisions permitting the addition, withdrawal, or consolidation of members of the DHOG under certain conditions. The notes constitute a joint and several obligation of the members of the DHOG (and any other future members of the DHOG) and are equally and ratably collateralized by a pledge of the members' gross receipts. The DHOG is also subject to certain annual covenants under the Master Trust Indenture, the most restrictive is the Annual Debt Service Coverage Ratio (1.10x).

#### **(1) Series 2018A and Series 2018B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2018A and Series 2018B in February 2018. The Series 2018A Revenue Bonds were primarily used to refund a portion of Series 2015A and Series 2016A. The Series 2018B were primarily used to refund a portion of Series 2015A and Series 2016A, Revolving Line of Credit, Series 2012 Bank Loan and the Series 2015A and Series 2016A Swap terminations. A loss on the extinguishment of debt of approximately \$578,000 was recognized in nonoperating gains (losses) on the statement of operations and changes in net assets, as a result of the refinancing. The interest on the Series 2018A Revenue Bonds is variable with a current interest rate of 5.00% and matures in variable amounts through 2037. The interest on the Series 2018B Revenue Bonds is fixed with an interest rate of 4.18% and matures in variable amounts through 2048.

#### **(2) Series 2017A and Series 2017B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2017A and Series 2017B in December, 2017. The Series 2017A Revenue Bonds were primarily used to refund Series 2009 and Series 2010 and the Series 2017B Revenue Bonds were used to refund Series 2012A and Series 2012B. The interest on the Series 2017A Revenue Bonds is fixed with an interest rate of 5.00% and matures in variable amounts through 2040. The interest on the Series 2017B Revenue Bonds is fixed with an interest rate of 2.54% and matures in variable amounts through 2031.

#### **(3) Series 2014A and Series 2014B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2014A and Series 2014B in August 2014. The proceeds from the Series 2014A and 2014B Revenue Bonds were used to partially refund the Series 2009 Revenue Bonds and to cover cost of issuance. Interest on the 2014A Revenue Bonds is fixed with an interest rate of 2.63% and matures at various dates through 2022. Interest on the Series 2014B Revenue Bonds is fixed with an interest rate of 4.00% and matures at various dates through 2033.

#### **(4) Series 2018C Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2018C in August, 2018. The Series 2018C Revenue Bonds were used primarily to refinance the Series 2010 Revenue Bonds. The interest on the series 2018C Revenue Bonds is fixed with an interest rate of 3.22% and matures in variable amounts through 2030.

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

#### **June 30, 2019 and 2018**

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##### **(5) Series 2012 Revenue Bonds**

The NHHEFA issued \$29,650,000 of tax-exempt Revenue Bonds, Series 2012. The proceeds of these bonds were used to refund 1998 and 2009 Series Bonds, to finance the settlement cost of the interest rate swap, and to finance the purchase of certain equipment and renovations. The bonds have fixed interest coupon rates ranging from 2.0% to 5.0% (a net interest cost of 3.96%), and matures in variable amounts through 2039.

##### **(6) Series 2016B Revenue Bonds**

The DHOG issued NHHEFA Revenue Bonds, Series 2016B in July 2016 through a private placement with a financial institution. The Series 2016B Revenue Bonds were used to finance 2016 projects. The Series 2016B is fixed with an interest rate of 1.78% and matures at various dates through 2045.

Outstanding joint and several indebtedness of the DHOG at June 30, 2019 and 2018 approximates \$722,162,000 and \$697,107,000, respectively.

##### **Non Obligated Group Bonds**

##### **(1) Series 2010 Revenue Bonds**

The Business Finance Authority (BFA) of the State of NH issued Revenue Bonds, Series 2010. Interest is based on an annual percentage rate equal to the sum of (a) 69% of the 1-Month LIBOR rate plus (b) 1.8975/5. The Health System redeemed these bonds in August 2018.

The Health System Indenture agreements require establishment and maintenance of debt service reserves and other trustee held funds. Trustee held funds of approximately \$631,000 and \$1,872,000 at June 30, 2019 and 2018, respectively, are classified as assets limited as to use in the accompanying consolidated balance sheets (Note 5). The debt service reserves are mainly comprised of escrowed funds held for future principal and interest payments.

For the years ended June 30, 2019 and 2018 interest expense on the Health System's long term debt is reflected in the accompanying consolidated statements of operations and changes in net assets as operating expense of approximately \$25,514,000 and \$18,822,000 and other nonoperating losses of \$3,784,000 and \$2,793,000, respectively.

##### **Swap Agreements**

The Health System is subject to market risks such as changes in interest rates that arise from normal business operation. The Health System regularly assesses these risks and has established business strategies to provide natural offsets, supplemented by the use of derivative financial instruments to protect against the adverse effect of these and other market risks. The Health System has established clear policies, procedures, and internal controls governing the use of derivatives and does not use them for trading, investment, or other speculative purposes.

As of June 30, 2019 and 2018, there was no liability for interest rate swaps as all remaining swaps were terminated in February 2018. For the year ended June 30, 2018, the Health System recognized a nonoperating loss due to swap termination of \$14,247,000 relating to the swap termination. The change in fair value during the year ended June 30, 2018 was a decrease of \$4,897,000. For the year ended June 30, 2018 the Health System recognized a nonoperating gain of \$145,000 resulting from hedge ineffectiveness and amortization of frozen swaps.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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#### 11. Employee Benefits

All eligible employees of the Health System are covered under various defined benefit and/or define contribution plans. In addition, certain members provide postretirement medical and life benefit plans to certain of its active and former employees who meet eligibility requirements. The postretirement medical and life plans are not funded.

All of the defined benefit plans within the Health System have been frozen and therefore there are no remaining participants earning benefits in any of the Health System's defined benefit plans.

The Health System continued to execute the settlement of obligations due to retirees in the defined benefit plans through bulk lump sum offerings or purchases of annuity contracts. The annuity purchases follow guidelines established by the Department of Labor (DOL). The Health System anticipates continued consideration and/or implementation of additional settlements over the next several years.

#### Defined Benefit Plans

Net periodic pension expense included in employee benefits in the consolidated statements of operations and changes in net assets is comprised of the components listed below for the years ended June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	<b>2019</b>	<b>2018</b>
Service cost for benefits earned during the year	\$ 150	\$ 150
Interest cost on projected benefit obligation	47,814	47,190
Expected return on plan assets	(65,270)	(64,561)
Net loss amortization	10,357	10,593
Total net periodic pension expense	<u>\$ (6,949)</u>	<u>\$ (6,628)</u>

The following assumptions were used to determine net periodic pension expense as of June 30, 2019 and 2018:

	<b>2019</b>	<b>2018</b>
Discount rate	3.90 % – 4.60%	4.00 % – 4.30 %
Rate of increase in compensation	N/A	N/A
Expected long-term rate of return on plan assets	7.50%	7.50 % – 7.75 %

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

The following table sets forth the funded status and amounts recognized in the Health System's consolidated financial statements for the defined benefit pension plans at June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	<b>2019</b>	<b>2018</b>
<b>Change in benefit obligation</b>		
Benefit obligation at beginning of year	\$ 1,087,940	\$ 1,122,615
Service cost	150	150
Interest cost	47,814	47,190
Benefits paid	(51,263)	(47,550)
Expenses paid	(170)	(172)
Actuarial (gain) loss	93,358	(34,293)
Settlements	(42,306)	-
Benefit obligation at end of year	<u>1,135,523</u>	<u>1,087,940</u>
<b>Change in plan assets</b>		
Fair value of plan assets at beginning of year	884,983	878,701
Actual return on plan assets	85,842	33,291
Benefits paid	(51,263)	(47,550)
Expenses paid	(170)	(172)
Employer contributions	20,631	20,713
Settlements	(42,306)	-
Fair value of plan assets at end of year	<u>897,717</u>	<u>884,983</u>
Funded status of the plans	<u>(237,806)</u>	<u>(202,957)</u>
Less: Current portion of liability for pension	<u>(46)</u>	<u>(45)</u>
Long term portion of liability for pension	<u>(237,760)</u>	<u>(202,912)</u>
Liability for pension	<u>\$ (237,760)</u>	<u>\$ (202,912)</u>

As of June 30, 2019 and 2018 the liability, for pension is included in the liability for pension and other postretirement plan benefits in the accompanying consolidated balance sheets.

Amounts not yet reflected in net periodic pension expense and included in the change in net assets without donor restrictions include approximately \$478,394,000 and \$418,971,000 of net actuarial loss as of June 30, 2019 and 2018, respectively.

The estimated amounts to be amortized from net assets without donor restrictions into net periodic pension expense in fiscal year 2020 for net actuarial losses is \$12,032,000.

The accumulated benefit obligation for the defined benefit pension plans was approximately \$1,135,770,000 and \$1,087,991,000 at June 30, 2019 and 2018, respectively.

The following table sets forth the assumptions used to determine the benefit obligation at June 30, 2019 and 2018:

	<b>2019</b>	<b>2018</b>
Discount rate	4.20% - 4.50%	4.20 % – 4.50 %
Rate of increase in compensation	N/A	N/A

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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The primary investment objective for the Plan's assets is to support the Pension liabilities of the Pension Plans for Employees of the Health System, by providing long-term capital appreciation and by also using a Liability Driven Investing ("LDI") strategy to partially hedge the impact fluctuating interest rates have on the value of the Plan's liabilities. As of both June 30, 2019 and 2018, it is expected that the LDI strategy will hedge approximately 60% of the interest rate risk associated with pension liabilities. To achieve the appreciation and hedging objectives, the Plans utilize a diversified structure of asset classes designed to achieve stated performance objectives measured on a total return basis, which includes income plus realized and unrealized gains and losses.

The range of target allocation percentages and the target allocations for the various investments are as follows:

	<b>Range of Target Allocations</b>	<b>Target Allocations</b>
Cash and short-term investments	0–5%	3 %
U.S. government securities	0–10	5
Domestic debt securities	20–58	38
Global debt securities	6–26	8
Domestic equities	5–35	19
International equities	5–15	11
Emerging market equities	3–13	5
Real estate investment trust funds	0–5	0
Private equity funds	0–5	0
Hedge funds	5–18	11

To the extent an asset class falls outside of its target range on a quarterly basis, the Health System shall determine appropriate steps, as it deems necessary, to rebalance the asset class.

The Boards of Trustees of the Health System, as Plan Sponsors, oversee the design, structure, and prudent professional management of the Health System's Plans' assets, in accordance with Board approved investment policies, roles, responsibilities and authorities and more specifically the following:

- Establishing and modifying asset class targets with Board approved policy ranges,
- Approving the asset class rebalancing procedures,
- Hiring and terminating investment managers, and
- Monitoring performance of the investment managers, custodians and investment consultants.

The hierarchy and inputs to valuation techniques to measure fair value of the Plans' assets are the same as outlined in Note 7. In addition, the estimation of fair value of investments in private equity and hedge funds for which the underlying securities do not have a readily determinable value is made using the NAV per share or its equivalent as a practical expedient. The Health System's Plans own interests in these funds rather than in securities underlying each fund and, therefore, are generally required to consider such investments as Level 2 or 3, even though the underlying securities may not be difficult to value or may be readily marketable.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

The following table sets forth the Health System's Plans' investments and deferred compensation plan assets that were accounted for at fair value as of June 30, 2019 and 2018:

		2019					
<i>(in thousands of dollars)</i>	Level 1	Level 2	Level 3	Total	Redemption or Liquidation	Days' Notice	
<b>Investments</b>							
Cash and short-term investments	\$ 166	\$ 18,232	\$ -	\$ 18,398	Daily	1	
U.S. government securities	48,580	-	-	48,580	Daily-Monthly	1-15	
Domestic debt securities	122,178	273,424	-	395,602	Daily-Monthly	1-15	
Global debt securities	428	75,146	-	75,574	Daily-Monthly	1-15	
Domestic equities	159,259	18,316	-	177,575	Daily-Monthly	1-10	
International equities	17,232	77,146	-	94,378	Daily-Monthly	1-11	
Emerging market equities	321	39,902	-	40,223	Daily-Monthly	1-17	
REIT funds	357	2,883	-	3,240	Daily-Monthly	1-17	
Private equity funds	-	-	21	21	See Note 7	See Note 7	
Hedge funds	-	-	44,126	44,126	Quarterly-Annual	60-96	
<b>Total investments</b>	<b>\$ 348,521</b>	<b>\$ 505,049</b>	<b>\$ 44,147</b>	<b>\$ 897,717</b>			

		2018					
<i>(in thousands of dollars)</i>	Level 1	Level 2	Level 3	Total	Redemption or Liquidation	Days' Notice	
<b>Investments</b>							
Cash and short-term investments	\$ 142	\$ 35,817	\$ -	\$ 35,959	Daily	1	
U.S. government securities	46,265	-	-	46,265	Daily-Monthly	1-15	
Domestic debt securities	144,131	220,202	-	364,333	Daily-Monthly	1-15	
Global debt securities	470	74,676	-	75,146	Daily-Monthly	1-15	
Domestic equities	158,634	17,594	-	176,228	Daily-Monthly	1-10	
International equities	18,656	80,803	-	99,459	Daily-Monthly	1-11	
Emerging market equities	382	39,881	-	40,263	Daily-Monthly	1-17	
REIT funds	371	2,686	-	3,057	Daily-Monthly	1-17	
Private equity funds	-	-	23	23	See Note 7	See Note 7	
Hedge funds	-	-	44,250	44,250	Quarterly-Annual	60-96	
<b>Total investments</b>	<b>\$ 369,051</b>	<b>\$ 471,659</b>	<b>\$ 44,273</b>	<b>\$ 884,983</b>			

The following table presents additional information about the changes in Level 3 assets measured at fair value for the years ended June 30, 2019 and 2018:

		2019		
		Private		
<i>(in thousands of dollars)</i>	Hedge Funds	Equity Funds	Total	
<b>Balances at beginning of year</b>	\$ 44,250	\$ 23	\$ 44,273	
Net unrealized losses	(124)	(2)	(126)	
<b>Balances at end of year</b>	<b>\$ 44,126</b>	<b>\$ 21</b>	<b>\$ 44,147</b>	

		2018		
		Private		
<i>(in thousands of dollars)</i>	Hedge Funds	Equity Funds	Total	
<b>Balances at beginning of year</b>	\$ 40,507	\$ 96	\$ 40,603	
Sales	-	(51)	(51)	
Net realized losses	-	(51)	(51)	
Net unrealized gains	3,743	29	3,772	
<b>Balances at end of year</b>	<b>\$ 44,250</b>	<b>\$ 23</b>	<b>\$ 44,273</b>	

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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The total aggregate net unrealized gains (losses) included in the fair value of the Level 3 investments as of June 30, 2019 and 2018 were approximately \$14,617,000 and \$14,743,000, respectively. There were no transfers into and out of Level 3 measurements during the years ended June 30, 2019 and 2018.

There were no transfers into and out of Level 1 and 2 measurements due to changes in valuation methodologies during the years ended June 30, 2019 and 2018.

The weighted average asset allocation for the Health System's Plans at June 30, 2019 and 2018 by asset category is as follows:

	2019	2018
Cash and short-term investments	2 %	4 %
U.S. government securities	5	5
Domestic debt securities	44	41
Global debt securities	9	9
Domestic equities	20	20
International equities	11	11
Emerging market equities	4	5
Hedge funds	5	5
	<u>100 %</u>	<u>100 %</u>

The expected long-term rate of return on plan assets is reviewed annually, taking into consideration the asset allocation, historical returns on the types of assets held, and the current economic environment. Based on these factors, it is expected that the pension assets will earn an average of 7.50% per annum.

The Health System is expected to contribute approximately \$20,426,000 to the Plans in 2020 however actual contributions may vary from expected amounts.

The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid for the years ending June 30 and thereafter:

*(in thousands of dollars)*

2020	\$ 50,743
2021	52,938
2022	55,199
2023	57,562
2024	59,843
2025 – 2028	326,737

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

#### Defined Contribution Plans

The Health System has an employer-sponsored 401(a) plan for certain of its members, under which the employer makes base, transition and discretionary match contributions based on specified percentages of compensation and employee deferral amounts. Total employer contributions to the plan of approximately \$40,537,000 and \$38,563,000 in 2019 and 2018, respectively, are included in employee benefits in the accompanying consolidated statements of operations and changes in net assets.

Various 403(b) and tax-sheltered annuity plans are available to employees of the Health System. Plan specifications vary by member and plan. No employer contributions were made to any of these plans in 2019 and 2018, respectively.

#### Postretirement Medical and Life Benefits

The Health System has postretirement medical and life benefit plans covering certain of its active and former employees. The plans generally provide medical or medical and life insurance benefits to certain retired employees who meet eligibility requirements. The plans are not funded.

Net periodic postretirement medical and life benefit (income) cost is comprised of the components listed below for the years ended June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	2019	2018
Service cost	\$ 384	\$ 533
Interest cost	1,842	1,712
Net prior service income	(5,974)	(5,974)
Net loss amortization	10	10
	<u>\$ (3,738)</u>	<u>\$ (3,719)</u>

The following table sets forth the accumulated postretirement medical and life benefit obligation and amounts recognized in the Health System's consolidated financial statements at June 30, 2019 and 2018:

<i>(in thousands of dollars)</i>	2019	2018
<b>Change in benefit obligation</b>		
Benefit obligation at beginning of year	\$ 42,581	\$ 42,277
Service cost	384	533
Interest cost	1,842	1,712
Benefits paid	(3,149)	(3,174)
Actuarial loss	5,013	1,233
Employer contributions	-	-
Benefit obligation at end of year	<u>46,671</u>	<u>42,581</u>
Funded status of the plans	<u>\$ (46,671)</u>	<u>\$ (42,581)</u>
Current portion of liability for postretirement medical and life benefits	\$ (3,422)	\$ (3,266)
Long term portion of liability for postretirement medical and life benefits	<u>(43,249)</u>	<u>(39,315)</u>
Liability for postretirement medical and life benefits	<u>\$ (46,671)</u>	<u>\$ (42,581)</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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As of June 30, 2019 and 2018, the liability for postretirement medical and life benefits is included in the liability for pension and other postretirement plan benefits in the accompanying consolidated balance sheets.

Amounts not yet reflected in net periodic postretirement medical and life benefit income and included in the change in net assets without donor restrictions are as follows:

<i>(in thousands of dollars)</i>	2019	2018
Net prior service income	\$ (9,556)	\$ (15,530)
Net actuarial loss	<u>8,386</u>	<u>3,336</u>
	<u>\$ (1,170)</u>	<u>\$ (12,194)</u>

The estimated amounts that will be amortized from net assets without donor restrictions into net periodic postretirement income in fiscal year 2020 for net prior service cost is \$5,974,000.

The following future benefit payments, which reflect expected future service, as appropriate, are expected to be paid for the year ending June 30, 2020 and thereafter:

<i>(in thousands of dollars)</i>	
2020	\$ 3,468
2021	3,436
2022	3,394
2023	3,802
2024	3,811
2025-2028	17,253

In determining the accumulated postretirement medical and life benefit obligation, the Health System used a discount rate of 3.70% in 2019 and an assumed healthcare cost trend rate of 6.50%, trending down to 5.00% in 2024 and thereafter. Increasing the assumed healthcare cost trend rates by one percentage point in each year would increase the accumulated postretirement medical benefit obligation as of June 30, 2019 and 2018 by \$1,601,000 and \$1,088,000 and the net periodic postretirement medical benefit cost for the years then ended by \$77,000 and \$81,000, respectively. Decreasing the assumed healthcare cost trend rates by one percentage point in each year would decrease the accumulated postretirement medical benefit obligation as of June 30, 2019 and 2018 by \$1,452,000 and \$996,000 and the net periodic postretirement medical benefit cost for the years then ended by \$71,000 and \$72,000, respectively.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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#### 12. Professional and General Liability Insurance Coverage

Mary Hitchcock Memorial Hospital and Dartmouth-Hitchcock Clinic, along with Dartmouth College, Cheshire Medical Center, The New London Hospital Association, Mt. Ascutney Hospital and Health Center, and the Visiting Nurse and Hospice for VT and NH are provided professional and general liability insurance on a claims-made basis through Hamden Assurance Risk Retention Group, Inc. (RRG), a VT captive insurance company. Effective November 1, 2018 Alice Peck Day Memorial Hospital is provided professional and general liability insurance coverage through RRG. RRG reinsures the majority of this risk to Hamden Assurance Company Limited (HAC), a captive insurance company domiciled in Bermuda and to a variety of commercial reinsurers. Mary Hitchcock Memorial Hospital, Dartmouth-Hitchcock Clinic, and Dartmouth College have ownership interests in both HAC and RRG. The insurance program provides coverage to the covered institutions and named insureds on a modified claims-made basis which means coverage is triggered when claims are made. Premiums and related insurance deposits are actuarially determined based on asserted liability claims adjusted for future development. The reserves for outstanding losses are recorded on an undiscounted basis.

Selected financial data of HAC and RRG, taken from the latest available financial statements at June 30, 2019 and 2018, are summarized as follows:

<i>(in thousands of dollars)</i>	2019		
	HAC	RRG	Total
Assets	\$ 75,867	\$ 2,201	\$ 78,068
Shareholders' equity	13,620	50	13,670

<i>(in thousands of dollars)</i>	2018		
	HAC	RRG	Total
Assets	\$ 72,753	\$ 2,068	\$ 74,821
Shareholders' equity	13,620	50	13,670

#### 13. Commitments and Contingencies

##### Litigation

The Health System is involved in various malpractice claims and legal proceedings of a nature considered normal to its business. The claims are in various stages and some may ultimately be brought to trial. While it is not feasible to predict or determine the outcome of any of these claims, it is the opinion of management that the final outcome of these claims will not have a material effect on the consolidated financial position of the Health System.

##### Operating Leases and Other Commitments

The Health System leases certain facilities and equipment under operating leases with varying expiration dates. The Health System's rental expense totaled approximately \$12,707,000 and \$14,096,000 for the years ended June 30, 2019 and 2018, respectively.

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

Minimum future lease payments under noncancelable operating leases at June 30, 2019 were as follows:

*(in thousands of dollars)*

2020	\$	11,342
2021		10,469
2022		7,488
2023		6,303
2024		4,127
Thereafter		5,752
	<u>\$</u>	<u>45,481</u>

#### Lines of Credit

The Health System has entered into Loan Agreements with financial institutions establishing access to revolving loans ranging from \$2,000,000 up to \$30,000,000. Interest is variable and determined using LIBOR or the Wall Street Journal Prime Rate. The Loan Agreements are due to expire March 27, 2020. There was no outstanding balance under the lines of credit as of June 30, 2019 and 2018. Interest expense was approximately \$95,000 and \$232,000, respectively, and is included in the consolidated statements of operations and changes in net assets.

#### 14. Functional Expenses

Operating expenses are presented by functional classification in accordance with the overall service missions of the Health System. Each functional classification displays all expenses related to the underlying operations by natural classification. Salaries, employee benefits, medical supplies and medications, and purchased services and other expenses are generally considered variable and are allocated to the mission that best aligns to the type of service provided. Medicaid enhancement tax is allocated to program services. Interest expense is allocated based on usage of debt-financed space. Depreciation and amortization is allocated based on square footage and specific identification of equipment used by department.

Operating expenses of the Health System by functional and natural basis are as follows for the year ended June 30, 2019:

<i>(in thousands of dollars)</i>	2019			
	Program Services	Management and General	Fundraising	Total
<b>Operating expenses</b>				
Salaries	\$ 922,902	\$ 138,123	\$ 1,526	\$ 1,062,551
Employee benefits	178,983	72,289	319	251,591
Medical supplies and medications	406,782	1,093	-	407,875
Purchased services and other	212,209	108,783	2,443	323,435
Medicaid enhancement tax	70,061	-	-	70,061
Depreciation and amortization	37,528	50,785	101	88,414
Interest	3,360	22,135	19	25,514
Total operating expenses	<u>\$ 1,831,825</u>	<u>\$ 393,208</u>	<u>\$ 4,408</u>	<u>\$ 2,229,441</u>

Operating expenses of the Health System by functional classification are as follows for the year ended June 30, 2018:

## Dartmouth-Hitchcock Health and Subsidiaries

### Notes to Consolidated Financial Statements

#### June 30, 2019 and 2018

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*(in thousands of dollars)*

Program services	\$ 1,715,760
Management and general	303,527
Fundraising	<u>2,354</u>
	<u>\$ 2,021,641</u>

#### 15. Liquidity

The Health System is substantially supported by cash generated from operations. In addition, the Health System holds financial assets for specific purposes which are limited as to use. Thus, certain financial assets reported on the accompanying consolidated balance sheet may not be available for general expenditure within one year of the balance sheet date.

The Health System's financial assets available at June 30, 2019 to meet cash needs for general expenditures within one year of June 30, 2019 are as follows:

*(in thousands of dollars)*

Cash and cash equivalents	\$ 143,587
Patient accounts receivable	221,125
Assets limited as to use	876,249
Other investments for restricted activities	<u>134,119</u>
Total financial assets	1,375,080
Less: Those unavailable for general expenditure within one year:	
Investments held by captive insurance companies	66,082
Investments for restricted activities	134,119
Other investments with liquidity horizons greater than one year	<u>97,063</u>
Total financial assets available within one year	<u>\$ 1,077,816</u>

For the years ending June 30, 2019 and June 30, 2018, the Health System generated positive cash flow from operations of approximately \$161,853,000 and \$136,031,000, respectively. In addition, the Health System's liquidity management plan includes investing excess daily cash in intermediate or long term investments based on anticipated liquidity needs. The Health System has an available line of credit of up to \$30,000,000 which it can draw upon as needed to meet its liquidity needs. See Note 13 for further details on the line of credit.

#### 16. Subsequent Events

The Health System has assessed the impact of subsequent events through November 26, 2019, the date the audited consolidated financial statements were issued, and has concluded that there were no such events that require adjustment to the audited consolidated financial statements or disclosure in the notes to the audited consolidated financial statements other than as noted below.

Effective September 30, 2019, the Boards of Trustees of D-HH, GraniteOne Health, Catholic Medical Center Health Services, and their respective member organizations approved a Combination Agreement to combine their healthcare systems. If regulatory approval of the

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Consolidated Financial Statements**

### **June 30, 2019 and 2018**

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transaction is obtained, the name of the new system will be Dartmouth-Hitchcock Health GraniteOne.

The GraniteOne Health system is comprised of Catholic Medical Center (CMC), a community hospital located in Manchester NH, Huggins Hospital located in Wolfeboro NH, and Monadnock Community Hospital located in Peterborough NH. Both Huggins Hospital and Monadnock Community Hospital are designated as Critical Access Hospitals. GraniteOne is a non-profit, community based health care system.

On September 13, 2019, the Board of Trustees of D-HH approved the issuance of up to \$100,000,000 par of new debt. On October 17, 2019, D-HH closed on the direct placement tax-exempt borrowing of \$99,165,000 on behalf of the DHOG acting through the New Hampshire Health and Education Facilities Authority and issued its DHOG Issue, Series 2019A Bonds.

On January 29, 2020, D-HH closed on a tax-exempt borrowing of \$125,000,000 on behalf of the DHOG acting through the New Hampshire Health and Education Facilities Authority and issued its DHOG Issue, Series 2020A Bonds.

#### **17. Subsequent Events - Unaudited**

Subsequent to the issuance of the audited financial statements on November 26, 2019, the novel strain of coronavirus emerged and in January 2020 the World Health Organization has declared the novel coronavirus a Public Health Emergency of International Concern. Beginning in March 2020, the State of New Hampshire and Vermont have adopted various measures to address the spread of this pandemic, including supporting social distancing, requests to stay home unless necessary (i.e., groceries or medications) and work from home recommendations. Such restrictions and the perception that such orders or restrictions could occur, have resulted in business closures, work stoppages, slowdowns and delays, work-from-home policies, travel restrictions and cancellation of events, including the rescheduling of elective or non-critical procedures (which management believes is temporary and such procedures will be performed at a later date) and redeployment of resources to address the novel coronavirus needs, among other effects. The outbreak has also negatively impacted the financial markets and has and may continue to materially affect the returns on and value of our investments. While we expect that the novel coronavirus may negatively impact our 2020 results, we believe we have sufficient liquidity to meet our operating and financing needs; however, given the difficulty in predicting the ultimate duration and severity of the impact of the novel coronavirus on our organization, the economy and the financial markets, the ultimate impact may be material.

**Consolidating Supplemental Information – Unaudited**

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2019

<i>(in thousands of dollars)</i>	Dartmouth- Hitchcock Health	Dartmouth- Hitchcock	Cheshire Medical Center	Alice Peck Day Memorial	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non- Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Assets</b>											
<b>Current assets</b>											
Cash and cash equivalents	\$ 42,456	\$ 47,465	\$ 9,411	\$ 7,065	\$ 10,462	\$ 8,372	\$ -	\$ 125,232	\$ 18,355	\$ -	\$ 143,587
Patient accounts receivable, net	-	180,938	15,880	7,279	8,960	5,010	-	218,067	3,058	-	221,125
Prepaid expenses and other current assets	14,178	139,034	8,563	2,401	5,567	1,423	(74,083)	97,083	1,421	(3,009)	95,495
Total current assets	56,634	367,437	33,854	16,745	24,989	14,805	(74,083)	440,382	22,834	(3,009)	460,207
Assets limited as to use	92,602	688,485	18,759	12,684	12,427	11,619	-	836,576	39,673	-	876,249
Notes receivable, related party	553,484	752	-	1,406	-	-	(554,236)	1,406	(1,406)	-	-
Other investments for restricted activities	-	91,882	6,970	31	2,973	6,323	-	108,179	25,940	-	134,119
Property, plant, and equipment, net	22	432,277	67,147	30,945	41,946	17,797	-	590,134	31,122	-	621,256
Other assets	24,864	108,208	1,279	15,019	6,042	4,388	(10,970)	148,830	(3,013)	(21,346)	124,471
Total assets	\$ 727,606	\$ 1,689,041	\$ 128,009	\$ 76,831	\$ 88,377	\$ 54,932	\$ (639,289)	\$ 2,125,507	\$ 115,150	\$ (24,355)	\$ 2,216,302
<b>Liabilities and Net Assets</b>											
<b>Current liabilities</b>											
Current portion of long-term debt	\$ -	\$ 8,226	\$ 830	\$ 954	\$ 547	\$ 262	\$ -	\$ 10,819	\$ 95	\$ -	\$ 10,914
Current portion of liability for pension and other postretirement plan benefits	-	3,468	-	-	-	-	-	3,468	-	-	3,468
Accounts payable and accrued expenses	55,499	99,884	15,620	6,299	3,878	2,776	(74,083)	109,873	6,953	(3,009)	113,817
Accrued compensation and related benefits	-	110,639	5,851	3,694	2,313	4,270	-	126,767	1,641	-	128,408
Estimated third-party settlements	-	26,405	103	1,290	10,851	2,921	-	41,570	-	-	41,570
Total current liabilities	55,499	248,522	22,404	12,237	17,589	10,229	(74,083)	292,497	8,689	(3,009)	298,177
Notes payable, related party	-	526,202	-	-	28,034	-	(554,236)	-	-	-	-
Long-term debt, excluding current portion	643,257	44,820	24,503	35,604	643	11,465	(10,970)	749,322	2,858	-	752,180
Insurance deposits and related liabilities	-	56,786	440	513	388	240	-	58,367	40	-	58,407
Liability for pension and other postretirement plan benefits, excluding current portion	-	266,427	10,262	-	-	4,320	-	281,009	-	-	281,009
Other liabilities	-	98,201	1,104	28	1,585	-	-	100,918	23,218	-	124,136
Total liabilities	698,756	1,241,058	58,713	48,382	48,239	26,254	(639,289)	1,482,113	34,805	(3,009)	1,513,909
<b>Commitments and contingencies</b>											
<b>Net assets</b>											
Net assets without donor restrictions	28,832	356,880	63,051	27,653	35,518	21,242	-	533,176	48,063	(21,306)	559,933
Net assets with donor restrictions	18	91,103	6,245	796	4,620	7,436	-	110,218	32,282	(40)	142,460
Total net assets	28,850	447,983	69,296	28,449	40,138	28,678	-	643,394	80,345	(21,346)	702,393
Total liabilities and net assets	\$ 727,606	\$ 1,689,041	\$ 128,009	\$ 76,831	\$ 88,377	\$ 54,932	\$ (639,289)	\$ 2,125,507	\$ 115,150	\$ (24,355)	\$ 2,216,302

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2019

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD and Subsidiaries	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Assets</b>									
<b>Current assets</b>									
Cash and cash equivalents	\$ 42,456	\$ 48,052	\$ 11,952	\$ 11,120	\$ 8,549	\$ 15,772	\$ 5,686	\$ -	\$ 143,587
Patient accounts receivable, net	-	180,938	15,880	8,960	5,060	7,280	3,007	-	221,125
Prepaid expenses and other current assets	14,178	139,832	9,460	5,567	1,401	1,678	471	(77,092)	95,495
Total current assets	56,634	368,822	37,292	25,647	15,010	24,730	9,164	(77,092)	460,207
Assets limited as to use	92,602	707,597	17,383	12,427	12,738	12,685	20,817	-	876,249
Notes receivable, related party	553,484	752	-	-	-	-	-	(554,236)	-
Other investments for restricted activities	-	99,807	24,985	2,973	6,323	31	-	-	134,119
Property, plant, and equipment, net	22	434,953	70,846	42,423	19,435	50,338	3,239	-	621,256
Other assets	24,864	108,366	7,388	5,476	1,931	8,688	74	(32,316)	124,471
Total assets	<u>\$ 727,606</u>	<u>\$ 1,720,297</u>	<u>\$ 157,894</u>	<u>\$ 88,946</u>	<u>\$ 55,437</u>	<u>\$ 96,472</u>	<u>\$ 33,294</u>	<u>\$ (663,644)</u>	<u>\$ 2,216,302</u>
<b>Liabilities and Net Assets</b>									
<b>Current liabilities</b>									
Current portion of long-term debt	\$ -	\$ 8,226	\$ 830	\$ 547	\$ 288	\$ 954	\$ 69	\$ -	\$ 10,914
Current portion of liability for pension and other postretirement plan benefits	-	3,468	-	-	-	-	-	-	3,468
Accounts payable and accrued expenses	55,499	100,441	19,356	3,879	2,856	6,704	2,174	(77,092)	113,817
Accrued compensation and related benefits	-	110,639	5,851	2,313	4,314	4,192	1,099	-	128,408
Estimated third-party settlements	-	26,405	103	10,851	2,921	1,290	-	-	41,570
Total current liabilities	55,499	249,179	26,140	17,590	10,379	13,140	3,342	(77,092)	298,177
Notes payable, related party	-	526,202	-	28,034	-	-	-	(554,236)	-
Long-term debt, excluding current portion	643,257	44,820	24,503	643	11,763	35,604	2,560	(10,970)	752,180
Insurance deposits and related liabilities	-	56,786	440	388	240	513	40	-	58,407
Liability for pension and other postretirement plan benefits, excluding current portion	-	266,427	10,262	-	4,320	-	-	-	281,009
Other liabilities	-	98,201	1,115	1,585	-	23,235	-	-	124,136
Total liabilities	698,756	1,241,615	62,460	48,240	26,702	72,492	5,942	(642,298)	1,513,909
<b>Commitments and contingencies</b>									
<b>Net assets</b>									
Net assets without donor restrictions	28,832	379,498	65,873	36,087	21,300	22,327	27,322	(21,306)	559,933
Net assets with donor restrictions	18	99,184	29,561	4,619	7,435	1,653	30	(40)	142,460
Total net assets	28,850	478,682	95,434	40,706	28,735	23,980	27,352	(21,346)	702,393
Total liabilities and net assets	<u>\$ 727,606</u>	<u>\$ 1,720,297</u>	<u>\$ 157,894</u>	<u>\$ 88,946</u>	<u>\$ 55,437</u>	<u>\$ 96,472</u>	<u>\$ 33,294</u>	<u>\$ (663,644)</u>	<u>\$ 2,216,302</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2018

<i>(in thousands of dollars)</i>	Dartmouth- Hitchcock Health	Dartmouth- Hitchcock	Cheshire Medical Center	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non- Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Assets</b>										
<b>Current assets</b>										
Cash and cash equivalents	\$ 134,634	\$ 22,544	\$ 6,688	\$ 9,419	\$ 6,604	\$ -	\$ 179,889	\$ 20,280	\$ -	\$ 200,169
Patient accounts receivable, net	-	176,981	17,183	8,302	5,055	-	207,521	11,707	-	219,228
Prepaid expenses and other current assets	11,964	143,893	6,551	5,253	2,313	(72,361)	97,613	4,766	(4,877)	97,502
Total current assets	146,598	343,418	30,422	22,974	13,972	(72,361)	485,023	36,753	(4,877)	516,899
Assets limited as to use	8	616,929	17,438	12,821	10,829	-	658,025	48,099	-	706,124
Notes receivable, related party	554,771	-	-	-	-	(554,771)	-	-	-	-
Other investments for restricted activities	-	87,613	8,591	2,981	6,238	-	105,423	25,473	-	130,896
Property, plant, and equipment, net	36	443,154	66,759	42,438	17,356	-	569,743	37,578	-	607,321
Other assets	24,863	101,078	1,370	5,906	4,280	(10,970)	126,527	3,604	(21,346)	108,785
Total assets	\$ 726,276	\$ 1,592,192	\$ 124,580	\$ 87,120	\$ 52,675	\$ (638,102)	\$ 1,944,741	\$ 151,507	\$ (26,223)	\$ 2,070,025
<b>Liabilities and Net Assets</b>										
<b>Current liabilities</b>										
Current portion of long-term debt	\$ -	\$ 1,031	\$ 810	\$ 572	\$ 187	\$ -	\$ 2,600	\$ 864	\$ -	\$ 3,464
Current portion of liability for pension and other postretirement plan benefits	-	3,311	-	-	-	-	3,311	-	-	3,311
Accounts payable and accrued expenses	54,995	82,061	20,107	6,705	3,029	(72,361)	94,536	6,094	(4,877)	95,753
Accrued compensation and related benefits	-	106,485	5,730	2,487	3,796	-	118,498	7,078	-	125,576
Estimated third-party settlements	3,002	24,411	-	9,655	1,625	-	38,693	2,448	-	41,141
Total current liabilities	57,997	217,299	26,647	19,419	8,637	(72,361)	257,638	16,484	(4,877)	269,245
Notes payable, related party	-	527,346	-	27,425	-	(554,771)	-	-	-	-
Long-term debt, excluding current portion	644,520	52,878	25,354	1,179	11,270	(10,970)	724,231	28,744	-	752,975
Insurance deposits and related liabilities	-	54,616	465	155	240	-	55,476	40	-	55,516
Liability for pension and other postretirement plan benefits, excluding current portion	-	232,696	4,215	-	5,316	-	242,227	-	-	242,227
Other liabilities	-	85,577	1,107	1,405	-	-	88,089	38	-	88,127
Total liabilities	702,517	1,170,412	57,788	49,583	25,463	(638,102)	1,367,661	45,306	(4,877)	1,408,090
<b>Commitments and contingencies</b>										
<b>Net assets</b>										
Net assets without donor restrictions	23,759	334,882	61,828	32,897	19,812	-	473,178	72,230	(21,306)	524,102
Net assets with donor restrictions	-	86,898	4,964	4,640	7,400	-	103,902	33,971	(40)	137,833
Total net assets	23,759	421,780	66,792	37,537	27,212	-	577,080	106,201	(21,346)	661,935
Total liabilities and net assets	\$ 726,276	\$ 1,592,192	\$ 124,580	\$ 87,120	\$ 52,675	\$ (638,102)	\$ 1,944,741	\$ 151,507	\$ (26,223)	\$ 2,070,025

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Balance Sheets

#### June 30, 2018

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Assets</b>									
<b>Current assets</b>									
Cash and cash equivalents	\$ 134,634	\$ 23,094	\$ 8,621	\$ 9,982	\$ 6,654	\$ 12,144	\$ 5,040	\$ -	\$ 200,169
Patient accounts receivable, net	-	176,981	17,183	8,302	5,109	7,996	3,657	-	219,228
Prepaid expenses and other current assets	11,964	144,755	5,520	5,276	2,294	4,443	488	(77,238)	97,502
Total current assets	146,598	344,830	31,324	23,560	14,057	24,583	9,185	(77,238)	516,899
Assets limited as to use	8	635,028	17,438	12,821	11,862	9,612	19,355	-	706,124
Notes receivable, related party	554,771	-	-	-	-	-	-	(554,771)	-
Other investments for restricted activities	-	95,772	25,873	2,981	6,238	32	-	-	130,896
Property, plant, and equipment, net	36	445,829	70,607	42,920	19,065	25,725	3,139	-	607,321
Other assets	24,863	101,235	7,526	5,333	1,886	130	128	(32,316)	108,785
Total assets	<u>\$ 726,276</u>	<u>\$ 1,622,694</u>	<u>\$ 152,768</u>	<u>\$ 87,615</u>	<u>\$ 53,108</u>	<u>\$ 60,082</u>	<u>\$ 31,807</u>	<u>\$ (664,325)</u>	<u>\$ 2,070,025</u>
<b>Liabilities and Net Assets</b>									
<b>Current liabilities</b>									
Current portion of long-term debt	\$ -	\$ 1,031	\$ 810	\$ 572	\$ 245	\$ 739	\$ 67	\$ -	\$ 3,464
Current portion of liability for pension and other postretirement plan benefits	-	3,311	-	-	-	-	-	-	3,311
Accounts payable and accrued expenses	54,995	82,613	20,052	6,714	3,092	3,596	1,929	(77,238)	95,753
Accrued compensation and related benefits	-	106,485	5,730	2,487	3,831	5,814	1,229	-	125,576
Estimated third-party settlements	3,002	24,411	-	9,655	1,625	2,448	-	-	41,141
Total current liabilities	57,997	217,851	26,592	19,428	8,793	12,597	3,225	(77,238)	269,245
Notes payable, related party	-	527,346	-	27,425	-	-	-	(554,771)	-
Long-term debt, excluding current portion	644,520	52,878	25,354	1,179	11,593	25,792	2,629	(10,970)	752,975
Insurance deposits and related liabilities	-	54,616	465	155	241	-	39	-	55,516
Liability for pension and other postretirement plan benefits, excluding current portion	-	232,696	4,215	-	5,316	-	-	-	242,227
Other liabilities	-	85,577	1,117	1,405	-	28	-	-	88,127
Total liabilities	<u>702,517</u>	<u>1,170,964</u>	<u>57,743</u>	<u>49,592</u>	<u>25,943</u>	<u>38,417</u>	<u>5,893</u>	<u>(642,979)</u>	<u>1,408,090</u>
<b>Commitments and contingencies</b>									
<b>Net assets</b>									
Net assets without donor restrictions	23,759	356,518	65,069	33,383	19,764	21,031	25,884	(21,306)	524,102
Net assets with donor restrictions	-	95,212	29,956	4,640	7,401	634	30	(40)	137,833
Total net assets	<u>23,759</u>	<u>451,730</u>	<u>95,025</u>	<u>38,023</u>	<u>27,165</u>	<u>21,665</u>	<u>25,914</u>	<u>(21,346)</u>	<u>661,935</u>
Total liabilities and net assets	<u>\$ 726,276</u>	<u>\$ 1,622,694</u>	<u>\$ 152,768</u>	<u>\$ 87,615</u>	<u>\$ 53,108</u>	<u>\$ 60,082</u>	<u>\$ 31,807</u>	<u>\$ (664,325)</u>	<u>\$ 2,070,025</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets without Donor Restrictions

#### Year Ended June 30, 2019

<i>(in thousands of dollars)</i>	Dartmouth- Hitchcock Health	Dartmouth- Hitchcock	Cheshire Medical Center	Alice Peck Day Memorial	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non- Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>											
Patient service revenue	\$ -	\$ 1,580,552	\$ 220,255	\$ 69,794	\$ 60,166	\$ 46,029	\$ -	\$ 1,976,796	\$ 22,527	\$ -	\$ 1,999,323
Contracted revenue	5,011	109,051	355	-	-	5,902	(46,100)	74,219	790	8	75,017
Other operating revenue	21,128	186,852	3,407	1,748	4,261	2,289	(22,076)	197,609	13,386	(297)	210,698
Net assets released from restrictions	369	11,556	732	137	177	24	-	12,995	1,110	-	14,105
Total operating revenue and other support	<u>26,508</u>	<u>1,888,011</u>	<u>224,749</u>	<u>71,679</u>	<u>64,604</u>	<u>54,244</u>	<u>(68,176)</u>	<u>2,261,619</u>	<u>37,813</u>	<u>(289)</u>	<u>2,299,143</u>
<b>Operating expenses</b>											
Salaries	-	868,311	107,671	37,297	30,549	26,514	(24,682)	1,045,660	15,785	1,106	1,062,551
Employee benefits	-	208,346	24,225	6,454	5,434	6,966	(3,763)	247,662	3,642	287	251,591
Medical supplies and medications	-	354,201	34,331	8,634	6,298	3,032	-	406,496	1,379	-	407,875
Purchased services and other	11,366	242,106	35,088	15,308	13,528	13,950	(21,176)	310,170	14,887	(1,622)	323,435
Medicaid enhancement tax	-	54,954	8,005	3,062	2,264	1,776	-	70,061	-	-	70,061
Depreciation and amortization	14	69,343	7,977	2,305	3,915	2,360	-	85,914	2,500	-	88,414
Interest	20,677	21,585	1,053	1,169	1,119	228	(20,850)	24,981	533	-	25,514
Total operating expenses	<u>32,057</u>	<u>1,818,846</u>	<u>218,350</u>	<u>74,229</u>	<u>63,107</u>	<u>54,826</u>	<u>(70,471)</u>	<u>2,190,944</u>	<u>38,726</u>	<u>(229)</u>	<u>2,229,441</u>
Operating (loss) margin	<u>(5,549)</u>	<u>69,165</u>	<u>6,399</u>	<u>(2,550)</u>	<u>1,497</u>	<u>(582)</u>	<u>2,295</u>	<u>70,675</u>	<u>(913)</u>	<u>(60)</u>	<u>69,702</u>
<b>Nonoperating gains (losses)</b>											
Investment income (losses), net	3,929	32,193	227	469	834	623	(198)	38,077	1,975	-	40,052
Other (losses) income, net	(3,784)	1,586	(187)	30	(240)	279	(2,097)	(4,413)	791	60	(3,552)
Loss on early extinguishment of debt	-	-	-	(87)	-	-	-	(87)	-	-	(87)
Loss on swap termination	-	-	-	-	-	-	-	-	-	-	-
Total non-operating gains (losses), net	<u>145</u>	<u>33,779</u>	<u>40</u>	<u>412</u>	<u>594</u>	<u>902</u>	<u>(2,295)</u>	<u>33,577</u>	<u>2,766</u>	<u>60</u>	<u>36,403</u>
(Deficiency) excess of revenue over expenses	<u>(5,404)</u>	<u>102,944</u>	<u>6,439</u>	<u>(2,138)</u>	<u>2,091</u>	<u>320</u>	<u>-</u>	<u>104,252</u>	<u>1,853</u>	<u>-</u>	<u>106,105</u>
<b>Net assets without donor restrictions</b>											
Net assets released from restrictions	-	419	565	-	402	318	-	1,704	65	-	1,769
Change in funded status of pension and other postretirement benefits	-	(65,005)	(7,720)	-	-	682	-	(72,043)	-	-	(72,043)
Net assets transferred to (from) affiliates	10,477	(16,360)	1,939	8,760	128	110	-	5,054	(5,054)	-	-
Additional paid in capital	-	-	-	-	-	-	-	-	-	-	-
Other changes in net assets	-	-	-	-	-	-	-	-	-	-	-
Change in fair value on interest rate swaps	-	-	-	-	-	-	-	-	-	-	-
Change in funded status of interest rate swaps	-	-	-	-	-	-	-	-	-	-	-
Increase in net assets without donor restrictions	<u>\$ 5,073</u>	<u>\$ 21,998</u>	<u>\$ 1,223</u>	<u>\$ 6,522</u>	<u>\$ 2,621</u>	<u>\$ 1,430</u>	<u>\$ -</u>	<u>\$ 38,967</u>	<u>\$ (3,136)</u>	<u>\$ -</u>	<u>\$ 35,831</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets without Donor Restrictions

#### Year Ended June 30, 2019

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD and Subsidiaries	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>									
Patient service revenue	\$ -	\$ 1,580,552	\$ 220,254	\$ 60,166	\$ 46,029	\$ 69,794	\$ 22,528	\$ -	\$ 1,999,323
Contracted revenue	5,010	109,842	355	-	5,902	-	-	(46,092)	75,017
Other operating revenue	21,128	188,775	3,549	4,260	3,868	10,951	540	(22,373)	210,698
Net assets released from restrictions	371	12,637	732	177	26	162	-	-	14,105
<b>Total operating revenue and other support</b>	<b>26,509</b>	<b>1,891,806</b>	<b>224,890</b>	<b>64,603</b>	<b>55,825</b>	<b>80,907</b>	<b>23,068</b>	<b>(68,465)</b>	<b>2,299,143</b>
<b>Operating expenses</b>									
Salaries	-	868,311	107,706	30,549	27,319	40,731	11,511	(23,576)	1,062,551
Employee benefits	-	208,346	24,235	5,434	7,133	7,218	2,701	(3,476)	251,591
Medical supplies and medications	-	354,201	34,331	6,298	3,035	8,639	1,371	-	407,875
Purchased services and other	11,366	246,101	35,396	13,390	14,371	18,172	7,437	(22,798)	323,435
Medicaid enhancement tax	-	54,954	8,005	2,264	1,776	3,062	-	-	70,061
Depreciation and amortization	14	69,343	8,125	3,920	2,478	4,194	340	-	88,414
Interest	20,678	21,585	1,054	1,119	228	1,637	63	(20,850)	25,514
<b>Total operating expenses</b>	<b>32,058</b>	<b>1,822,841</b>	<b>218,852</b>	<b>62,974</b>	<b>56,340</b>	<b>83,653</b>	<b>23,423</b>	<b>(70,700)</b>	<b>2,229,441</b>
<b>Operating (loss) margin</b>	<b>(5,549)</b>	<b>68,965</b>	<b>6,038</b>	<b>1,629</b>	<b>(515)</b>	<b>(2,746)</b>	<b>(355)</b>	<b>2,235</b>	<b>69,702</b>
<b>Non-operating gains (losses)</b>									
Investment income (losses), net	3,929	33,310	129	785	645	469	983	(198)	40,052
Other (losses) income, net	(3,784)	1,586	(171)	(240)	288	31	765	(2,037)	(3,562)
Loss on early extinguishment of debt	-	-	-	-	-	(87)	-	-	(87)
Loss on swap termination	-	-	-	-	-	-	-	-	-
<b>Total nonoperating gains (losses), net</b>	<b>145</b>	<b>34,896</b>	<b>(42)</b>	<b>545</b>	<b>933</b>	<b>413</b>	<b>1,748</b>	<b>(2,235)</b>	<b>36,403</b>
<b>(Deficiency) excess of revenue over expenses</b>	<b>(5,404)</b>	<b>103,861</b>	<b>5,996</b>	<b>2,174</b>	<b>418</b>	<b>(2,333)</b>	<b>1,393</b>	<b>-</b>	<b>106,105</b>
<b>Net assets without donor restrictions</b>									
Net assets released from restrictions	-	484	565	402	318	-	-	-	1,769
Change in funded status of pension and other postretirement benefits	-	(65,005)	(7,720)	-	682	-	-	-	(72,043)
Net assets transferred to (from) affiliates	10,477	(10,360)	1,963	128	118	3,629	45	-	-
Additional paid in capital	-	-	-	-	-	-	-	-	-
Other changes in net assets	-	-	-	-	-	-	-	-	-
Change in fair value on interest rate swaps	-	-	-	-	-	-	-	-	-
Change in funded status of interest rate swaps	-	-	-	-	-	-	-	-	-
<b>Increase in net assets without donor restrictions</b>	<b>\$ 5,073</b>	<b>\$ 22,980</b>	<b>\$ 804</b>	<b>\$ 2,704</b>	<b>\$ 1,536</b>	<b>\$ 1,296</b>	<b>\$ 1,438</b>	<b>\$ -</b>	<b>\$ 35,831</b>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets Without Donor Restrictions

#### Year Ended June 30, 2018

<i>(in thousands of dollars)</i>	Dartmouth- Hitchcock Health	Dartmouth- Hitchcock	Cheshire Medical Center	New London Hospital Association	Mt. Ascutney Hospital and Health Center	Eliminations	DH Obligated Group Subtotal	All Other Non Oblig Group Affiliates	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>										
Patient service revenue	\$ -	\$ 1,475,314	\$ 216,736	\$ 60,486	\$ 52,014	\$ -	\$ 1,804,550	\$ 94,545	\$ -	\$ 1,899,095
Provision for bad debts	-	31,358	10,967	1,554	1,440	-	45,319	2,048	-	47,367
Net patient service revenue	-	1,443,956	205,769	58,932	50,574	-	1,759,231	92,497	-	1,851,728
Contracted revenue	(2,305)	97,291	-	-	2,169	(42,870)	54,285	716	(32)	54,969
Other operating revenue	9,799	134,461	3,365	4,169	1,814	(10,554)	143,054	6,978	(1,086)	148,946
Net assets released from restrictions	658	11,605	620	52	44	-	12,979	482	-	13,461
Total operating revenue and other support	<u>8,152</u>	<u>1,687,313</u>	<u>209,754</u>	<u>63,153</u>	<u>54,601</u>	<u>(53,424)</u>	<u>1,969,549</u>	<u>100,673</u>	<u>(1,118)</u>	<u>2,069,104</u>
<b>Operating expenses</b>										
Salaries	-	806,344	105,607	30,360	24,854	(21,542)	945,623	42,035	1,605	989,263
Employee benefits	-	181,833	28,343	7,252	7,000	(5,385)	219,043	10,221	419	229,683
Medical supplies and medications	-	289,327	31,293	6,161	3,055	-	329,836	10,195	-	340,031
Purchased services and other	8,509	215,073	33,065	13,587	13,960	(19,394)	264,800	29,390	(2,818)	291,372
Medicaid enhancement tax	-	53,044	8,070	2,659	1,744	-	65,517	2,175	-	67,692
Depreciation and amortization	23	66,073	10,217	3,934	2,030	-	82,277	2,501	-	84,778
Interest	8,684	15,772	1,004	981	224	(8,882)	17,783	1,039	-	18,822
Total operating expenses	<u>17,216</u>	<u>1,627,466</u>	<u>217,599</u>	<u>64,934</u>	<u>52,867</u>	<u>(55,203)</u>	<u>1,924,879</u>	<u>97,556</u>	<u>(794)</u>	<u>2,021,641</u>
Operating margin (loss)	<u>(9,064)</u>	<u>59,847</u>	<u>(7,845)</u>	<u>(1,781)</u>	<u>1,734</u>	<u>1,779</u>	<u>44,670</u>	<u>3,117</u>	<u>(324)</u>	<u>47,463</u>
<b>Non-operating gains (losses)</b>										
Investment income (losses), net	(26)	33,628	1,408	1,151	858	(198)	36,821	3,566	-	40,367
Other (losses) income, net	(1,364)	(2,599)	-	1,276	266	(1,581)	(4,002)	733	361	(2,908)
Loss on early extinguishment of debt	-	(13,909)	-	(305)	-	-	(14,214)	-	-	(14,214)
Loss on swap termination	-	(14,247)	-	-	-	-	(14,247)	-	-	(14,247)
Total non-operating gains (losses), net	<u>(1,390)</u>	<u>2,873</u>	<u>1,408</u>	<u>2,122</u>	<u>1,124</u>	<u>(1,779)</u>	<u>4,358</u>	<u>4,299</u>	<u>361</u>	<u>9,018</u>
(Deficiency) excess of revenue over expenses	<u>(10,454)</u>	<u>62,720</u>	<u>(6,437)</u>	<u>341</u>	<u>2,858</u>	<u>-</u>	<u>49,028</u>	<u>7,416</u>	<u>37</u>	<u>56,481</u>
<b>Net assets without donor restrictions</b>										
Net assets released from restrictions	-	16,038	-	4	252	-	16,294	19	-	16,313
Change in funded status of pension and other postretirement benefits	-	4,300	2,827	-	1,127	-	8,254	-	-	8,254
Net assets transferred to (from) affiliates	17,791	(25,355)	7,188	48	328	-	-	-	-	-
Additional paid in capital	-	-	-	-	-	-	-	58	(58)	-
Other changes in net assets	-	-	-	-	-	-	-	(185)	-	(185)
Change in fair value on interest rate swaps	-	4,190	-	-	-	-	4,190	-	-	4,190
Change in funded status of interest rate swaps	-	14,102	-	-	-	-	14,102	-	-	14,102
Increase in net assets without donor restrictions	<u>\$ 7,337</u>	<u>\$ 75,995</u>	<u>\$ 3,578</u>	<u>\$ 393</u>	<u>\$ 4,565</u>	<u>\$ -</u>	<u>\$ 91,868</u>	<u>\$ 7,308</u>	<u>\$ (21)</u>	<u>\$ 99,155</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Consolidating Statements of Operations and Changes in Net Assets Without Donor Restrictions

#### Year Ended June 30, 2018

<i>(in thousands of dollars)</i>	D-HH and Other Subsidiaries	D-H and Subsidiaries	Cheshire and Subsidiaries	NLH and Subsidiaries	MAHHC and Subsidiaries	APD	VNH and Subsidiaries	Eliminations	Health System Consolidated
<b>Operating revenue and other support</b>									
Patient service revenue	\$ -	\$ 1,475,314	\$ 216,736	\$ 60,486	\$ 52,014	\$ 71,458	\$ 23,087	\$ -	\$ 1,899,095
Provision for bad debts	-	31,358	10,967	1,554	1,440	1,680	368	-	47,367
Net patient service revenue	-	1,443,956	205,769	58,932	50,574	69,778	22,719	-	1,851,728
Contracted revenue	(2,305)	98,007	-	-	2,169	-	-	(42,902)	54,969
Other operating revenue	9,799	137,242	4,061	4,166	3,168	1,697	453	(11,640)	148,946
Net assets released from restrictions	658	11,984	620	52	44	103	-	-	13,461
Total operating revenue and other support	8,152	1,691,189	210,450	63,150	55,955	71,578	23,172	(54,542)	2,069,104
<b>Operating expenses</b>									
Salaries	-	806,344	105,607	30,360	25,592	29,215	12,082	(19,937)	989,263
Employee benefits	-	181,833	28,343	7,252	7,162	7,406	2,653	(4,966)	229,683
Medical supplies and medications	-	289,327	31,293	6,161	3,057	8,484	1,709	-	340,031
Purchased services and other	8,512	218,690	33,431	13,432	14,354	19,220	5,945	(22,212)	291,372
Medicaid enhancement tax	-	53,044	8,070	2,659	1,743	2,176	-	-	67,692
Depreciation and amortization	23	66,073	10,357	3,939	2,145	1,831	410	-	84,778
Interest	8,684	15,772	1,004	981	223	975	65	(8,882)	18,822
Total operating expenses	17,219	1,631,083	218,105	64,784	54,276	69,307	22,864	(55,997)	2,021,641
Operating (loss) margin	(9,067)	60,106	(7,655)	(1,634)	1,679	2,271	308	1,455	47,463
<b>Nonoperating gains (losses)</b>									
Investment income (losses), net	(26)	35,177	1,954	1,097	787	203	1,393	(198)	40,387
Other (losses) income, net	(1,364)	(2,599)	(3)	1,276	273	(223)	952	(1,220)	(2,908)
Loss on early extinguishment of debt	-	(13,909)	-	(305)	-	-	-	-	(14,214)
Loss on swap termination	-	(14,247)	-	-	-	-	-	-	(14,247)
Total non-operating gains (losses), net	(1,390)	4,422	1,951	2,068	1,060	(20)	2,345	(1,418)	9,018
(Deficiency) excess of revenue over expenses	(10,457)	64,528	(5,704)	434	2,739	2,251	2,653	37	56,481
<b>Net assets without donor restrictions</b>									
Net assets released from restrictions	-	16,058	-	4	251	-	-	-	16,313
Change in funded status of pension and other postretirement benefits	-	4,300	2,827	-	1,127	-	-	-	8,254
Net assets transferred to (from) affiliates	17,791	(25,355)	7,188	48	328	-	-	-	-
Additional paid in capital	58	-	-	-	-	-	-	(58)	-
Other changes in net assets	-	-	-	-	-	(185)	-	-	(185)
Change in fair value on interest rate swaps	-	4,190	-	-	-	-	-	-	4,190
Change in funded status of interest rate swaps	-	14,102	-	-	-	-	-	-	14,102
Increase (decrease) in net assets without donor restrictions	\$ 7,392	\$ 77,823	\$ 4,311	\$ 486	\$ 4,445	\$ 2,066	\$ 2,653	\$ (21)	\$ 99,155

## **Dartmouth-Hitchcock Health and Subsidiaries**

### **Notes to Supplemental Consolidating Information**

#### **June 30, 2019 and 2018**

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#### **1. Basis of Presentation**

The accompanying supplemental consolidating information includes the consolidating balance sheet and the consolidating statement of operations and changes in net assets without donor restrictions of D-HH and its subsidiaries. All intercompany accounts and transactions between D-HH and its subsidiaries have been eliminated. The consolidating information presented is prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America consistent with the consolidated financial statements. The consolidating information is presented for purposes of additional analysis of the consolidated financial statements and is not required as part of the basic financial statements.

**Schedule of Expenditures of Federal Awards**

## Dartmouth-Hitchcock Health and Subsidiaries

### Schedule of Expenditures of Federal Awards

#### Year Ended June 30, 2019

	CFDA	Award Number/pass-through Identification Number	Funding Source	Pass-Through Entity	Total Expenditures	Amount Passed Through to Subrecipients
<b>Federal Program</b>						
Research and Development Cluster						
<b>Department of Defense</b>						
National Guard Military Operations and Maintenance (O&M) Projects	12.401	W81XWH1820076	Direct		\$ 234,630	\$ -
Military Medical Research and Development	12.420	W81XWH1810712	Direct		131,525	-
Military Medical Research and Development	12.420	R1143	Pass-Through	Trustees of Dartmouth College	2,055	-
					133,580	-
Department of Defense	12.RD	80232	Pass-Through	Creare, Inc.	46,275	-
					414,485	-
<b>Environmental Protection Agency</b>						
Science To Achieve Results (STAR) Research Program	66.509	31220SUB52965	Pass-Through	University of Vermont	1,031	-
					1,031	-
<b>Department of Health and Human Services</b>						
Innovations in Applied Public Health Research	93.061	1 R01 TS000288	Direct		84,957	8,367
Environmental Health	93.113	6K23ES025781-06	Direct		111,125	-
Environmental Health	93.113	R1118	Pass-Through	Trustees of Dartmouth College	5,087	-
					116,212	-
NIEHS Superfund Hazardous Substances	93.143	R1099	Pass-Through	Trustees of Dartmouth College	6,457	-
Health Program for Toxic Substances and Disease Registry	93.161	AWD00010523	Direct		61,180	-
Research Related to Deafness and Communication Disorders	93.173	6R21DC015133-03	Direct		119,896	61,908
National Research Service Award in Primary Care Medicine	93.186	T32HP32520	Direct		309,112	-
Research and Training in Complementary and Integrative Health	93.213	R1112	Pass-Through	Trustees of Dartmouth College	21,197	-
Research and Training in Complementary and Integrative Health	93.213	R1187	Pass-Through	Trustees of Dartmouth College	446	-
Research and Training in Complementary and Integrative Health	93.213	12272	Pass-Through	Palmer College of Chiropractic	30,748	-
Research and Training in Complementary and Integrative Health	93.213	Not Provided	Pass-Through	Southern California University of Health	12,030	-
					64,421	-
Research on Healthcare Costs, Quality and Outcomes	93.226	5P30HS024403	Direct		641,114	-
Research on Healthcare Costs, Quality and Outcomes	93.226	R1128	Pass-Through	Trustees of Dartmouth College	6,003	-
Research on Healthcare Costs, Quality and Outcomes	93.226	R1146	Pass-Through	Trustees of Dartmouth College	4,696	-
					651,813	-
Mental Health Research Grants	93.242	1K08MH117347-01A1	Direct		54,211	-
Mental Health Research Grants	93.242	6K23MH116367-02	Direct		109,228	-
Mental Health Research Grants	93.242	6R01MH110965	Direct		220,076	84,823
Mental Health Research Grants	93.242	6T32MH073553-15	Direct		130,340	-
Mental Health Research Grants	93.242	6R25MH068502-17	Direct		157,599	-
Mental Health Research Grants	93.242	6R01MH107625-05	Direct		200,805	27,964
Mental Health Research Grants	93.242	R1082	Pass-Through	Trustees of Dartmouth College	11,740	-
Mental Health Research Grants	93.242	R1144	Pass-Through	Trustees of Dartmouth College	5,897	-
Mental Health Research Grants	93.242	R1156	Pass-Through	Trustees of Dartmouth College	4,721	-
					894,617	112,787

## Dartmouth-Hitchcock Health and Subsidiaries Schedule of Expenditures of Federal Awards Year Ended June 30, 2019

	CFDA	Award Number/pass-through Identification Number	Funding Source	Pass-Through Entity	Total Expenditures	Amount Passed Through to Subrecipients
Drug Abuse and Addiction Research Programs	93.279	6R01DA034699-05	Direct		390,647	90,985
Drug Abuse and Addiction Research Programs	93.279	6R21DA044501-03	Direct		118,741	-
Drug Abuse and Addiction Research Programs	93.279	6R01DA041416-04	Direct		135,687	62,277
Drug Abuse and Addiction Research Programs	93.279	R1105	Pass-Through	Trustees of Dartmouth College	11,957	-
Drug Abuse and Addiction Research Programs	93.279	R1104	Pass-Through	Trustees of Dartmouth College	4,109	-
Drug Abuse and Addiction Research Programs	93.279	R1192	Pass-Through	Trustees of Dartmouth College	5,059	-
					<u>666,200</u>	<u>153,262</u>
Discovery and Applied Research for Technological Innovations to Improve Human Health	93.286	6K23EB026507-02	Direct		98,499	9,582
Discovery and Applied Research for Technological Innovations to Improve Human Health	93.286	6R21EB021456-03	Direct		23,293	-
Discovery and Applied Research for Technological Innovations to Improve Human Health	93.286	R1103	Pass-Through	Trustees of Dartmouth College	16,635	-
Discovery and Applied Research for Technological Innovations to Improve Human Health	93.286	5R21EB024771-02	Pass-Through	Trustees of Dartmouth College	5,938	-
					<u>144,365</u>	<u>9,582</u>
National Center for Advancing Translational Sciences 21st Century Cures Act - Beau Biden Cancer Moonshot	93.350 93.353	R1113 1204501	Pass-Through Pass-Through	Trustees of Dartmouth College Dana Farber Cancer Institute	342,790 166,421	- -
Cancer Cause and Prevention Research	93.393	1R01CA225792	Direct		54,351	-
Cancer Cause and Prevention Research	93.393	R21CA22776A	Direct		28,640	-
Cancer Cause and Prevention Research	93.393	R01CA229197	Direct		65,701	-
Cancer Cause and Prevention Research	93.393	R1127	Pass-Through	Trustees of Dartmouth College	6,035	-
Cancer Cause and Prevention Research	93.393	R1097	Pass-Through	Trustees of Dartmouth College	5,870	-
Cancer Cause and Prevention Research	93.393	R1109	Pass-Through	Trustees of Dartmouth College	1,984	-
Cancer Cause and Prevention Research	93.393	DHMCCA222648	Pass-Through	The Pennsylvania State University	3,173	-
Cancer Cause and Prevention Research	93.393	R44CA210810	Pass-Through	Cairn Surgical, LLC	38,241	-
					<u>203,995</u>	<u>-</u>
Cancer Detection and Diagnosis Research	93.394	4R00CA190890-03	Direct		1,717	-
Cancer Detection and Diagnosis Research	93.394	6R37CA212187-03	Direct		106,110	2,907
Cancer Detection and Diagnosis Research	93.394	6R03CA219445-03	Direct		18,880	-
Cancer Detection and Diagnosis Research	93.394	R1079	Pass-Through	Trustees of Dartmouth College	23,031	-
Cancer Detection and Diagnosis Research	93.394	R1080	Pass-Through	Trustees of Dartmouth College	23,031	-
Cancer Detection and Diagnosis Research	93.394	R1086	Pass-Through	Trustees of Dartmouth College	6,772	-
Cancer Detection and Diagnosis Research	93.394	R1096	Pass-Through	Trustees of Dartmouth College	1,174	-
Cancer Detection and Diagnosis Research	93.394	R1124	Pass-Through	Trustees of Dartmouth College	83,174	-
					<u>263,889</u>	<u>2,907</u>
Cancer Treatment Research	93.395	1UG1CA233323-01	Direct		14,675	-
Cancer Treatment Research	93.395	6U10CA180054-06	Direct		27,790	-
Cancer Treatment Research	93.395	DAC-194321	Pass-Through	Mayo Clinic	36,708	-

## Dartmouth-Hitchcock Health and Subsidiaries Schedule of Expenditures of Federal Awards Year Ended June 30, 2019

	CFDA	Award Number/pass-through Identification Number	Funding Source	Pass-Through Entity	Total Expenditures	Amount Passed Through to Subrecipients
Cancer Treatment Research	93.395	R1087	Pass-Through	Trustees of Dartmouth College	2,630	-
Cancer Treatment Research	93.395	110408	Pass-Through	Brigham and Women's Hospital	20,430	-
					<u>102,233</u>	<u>-</u>
Cancer Centers Support Grants	93.397	R1126	Pass-Through	Trustees of Dartmouth College	95,624	-
Cardiovascular Diseases Research	93.837	1UM1HL147371-01	Direct		11,774	-
Cardiovascular Diseases Research	93.837	7K23HL142835-02	Direct		65,544	-
					<u>77,318</u>	<u>-</u>
Lung Diseases Research	93.838	6R01HL122372-05	Direct		205,920	8,664
Arthritis, Musculoskeletal and Skin Diseases Research	93.846	6T32AR049710-16	Direct		73,049	-
Diabetes, Digestive, and Kidney Diseases Extramural Research	93.847	R1098	Pass-Through	Trustees of Dartmouth College	70,736	704
Extramural Research Programs in the Neurosciences and Neurological Disorders	93.853	6R01NS052274-11	Direct		50,412	-
Extramural Research Programs in the Neurosciences and Neurological Disorders	93.853	16-210950-04	Direct		18,016	-
					<u>68,428</u>	<u>-</u>
Allergy and Infectious Diseases Research	93.855	R1081	Pass-Through	Trustees of Dartmouth College	3,787	-
Allergy and Infectious Diseases Research	93.855	RES513934	Pass-Through	Case Western Reserve University	4,170	-
Allergy and Infectious Diseases Research	93.855	R1155	Pass-Through	Trustees of Dartmouth College	14,582	-
					<u>22,539</u>	<u>-</u>
Biomedical Research and Research Training	93.859	R1100	Pass-Through	Trustees of Dartmouth College	14,901	-
Biomedical Research and Research Training	93.859	R1141	Pass-Through	Trustees of Dartmouth College	587	-
Biomedical Research and Research Training	93.859	R1145	Pass-Through	Trustees of Dartmouth College	241	-
					<u>15,729</u>	<u>-</u>
Child Health and Human Development Extramural Research	93.865	5P2CHD086641-04	Direct		127,400	10,132
Child Health and Human Development Extramural Research	93.865	6JUG1OD024946-03	Direct		260,914	-
Child Health and Human Development Extramural Research	93.865	6R01HD067270	Direct		314,058	223,885
Child Health and Human Development Extramural Research	93.865	R1119	Pass-Through	Trustees of Dartmouth College	13,264	-
Child Health and Human Development Extramural Research	93.865	51460	Pass-Through	Univ of Arkansas for Medical Sciences	4,696	-
					<u>720,332</u>	<u>234,017</u>
Aging Research	93.866	6K23AG051681-04	Direct		76,377	2,883
Aging Research	93.866	R1102	Pass-Through	Trustees of Dartmouth College	8,285	-
					<u>84,662</u>	<u>2,883</u>
Vision Research	93.867	6R21EY028677-02	Direct		28,751	3,149
Medical Library Assistance	93.879	R1107	Pass-Through	Trustees of Dartmouth College	4,273	-
Medical Library Assistance	93.879	R1190	Pass-Through	Trustees of Dartmouth College	1,244	-
					<u>5,517</u>	<u>-</u>
International Research and Research Training	93.989	R1123	Pass-Through	Trustees of Dartmouth College	5,936	-
International Research and Research Training	93.989	6R25TW007693-09	Pass-Through	Fogarty International Center	96,327	65,097
					<u>102,263</u>	<u>65,097</u>

## Dartmouth-Hitchcock Health and Subsidiaries

### Schedule of Expenditures of Federal Awards

#### Year Ended June 30, 2019

	CFDA	Award Number/pass-through Identification Number	Funding Source	Pass-Through Entity	Total Expenditures	Amount Passed Through to Subrecipients
Department of Health and Human Services	93.RD		Pass-Through	Leidos Biomedical Research, Inc.	201,551	-
Total Department of Health and Human Services					<u>5,970,977</u>	<u>663,327</u>
<b>Total Research and Development Cluster</b>					<u>6,386,493</u>	<u>663,327</u>
<b>Medicaid Cluster</b>						
Medical Assistance Program	93.778	SNHH 2-18-19	Pass-Through	Southern New Hampshire Health	131,775	-
Medical Assistance Program	93.778	Not Provided	Pass-Through	NH Dept of Health and Human Services	1,453,796	-
Medical Assistance Program	93.778	RFP-2017-0COM-01-PHYSI-01	Pass-Through	NH Dept of Health and Human Services	3,106,149	-
Medical Assistance Program	93.778	03420-7235S	Pass-Through	Vermont Department of Health	59,391	-
Medical Assistance Program	93.778	03410-2020-19	Pass-Through	Vermont Department of Health	118,786	-
<b>Total Medicaid Cluster</b>					<u>4,869,897</u>	<u>-</u>
<b>Highway Safety Cluster</b>						
State and Community Highway Safety	20.600	19-266 Youth Operator	Pass-Through	NH Highway Safety Agency	66,660	-
State and Community Highway Safety	20.600	19-266 BUNH	Pass-Through	NH Highway Safety Agency	76,915	-
State and Community Highway Safety	20.600	19-266 Statewide CPS	Pass-Through	NH Highway Safety Agency	82,202	-
<b>Total Highway Safety Cluster</b>					<u>225,777</u>	<u>-</u>
<b>Other Sponsored Programs</b>						
<b>Department of Justice</b>						
Crime Victim Assistance	16.575	2015-VA-GX0007	Pass-Through	New Hampshire Department of Justice	237,692	-
Improving the Investigation and Prosecution of Child Abuse and the Regional and Local Children's Advocacy Centers	16.758	1-CLAR-NH-SA17	Pass-Through	National Children's Alliance	1,448	-
					<u>239,140</u>	<u>-</u>
<b>Department of Education</b>						
Race to the Top	84.412	03440-34119-18-ELCG24	Pass-Through	Vermont Dept for Children and Families	115,094	-
					<u>115,094</u>	<u>-</u>
<b>Department of Health and Human Services</b>						
Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements	93.074	Not Provided	Pass-Through	NH Dept of Health and Human Services	69,945	-
Blood Disorder Program: Prevention, Surveillance, and Research	93.080	GENFD0001568485	Pass-Through	Boston Children's Hospital	18,283	-
Maternal and Child Health Federal Consolidated Programs	93.110	6 T73MC23020101	Direct		652,997	591,411
Maternal and Child Health Federal Consolidated Programs	93.110	0253-6545-4609	Pass-Through	Icahn School of Medicine at Mount Sinai	19,548	-
					<u>672,545</u>	<u>591,411</u>
Emergency Medical Services for Children	93.127	7 H33MC323950100	Direct		137,067	-
Centers for Research and Demonstration for Health Promotion and Disease Prevention	93.135	R1140	Pass-Through	Trustees of Dartmouth College	449,757	-
HIV-Related Training and Technical Assistance	93.145	Not Provided	Pass-Through	University of Massachusetts Med School	3,242	-
Coordinated Services and Access to Research for Women, Infants, Children	93.153	H12HA31112	Direct		391,829	-
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	7H79SM063564-01	Direct		24,313	-
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	RFP-2018-DPHS-01-REGION-1	Pass-Through	NH Dept of Health and Human Services	55,361	-
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	Not Provided	Pass-Through	Vermont Department of Health	227,437	-
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	03420-A19006S	Pass-Through	Vermont Department of Health	126,764	-
					<u>433,875</u>	<u>-</u>
Drug Free Communities Support Program Grants	93.276	5H79SP020382	Direct		126,464	-
Department of Health and Human Services	93.628	RFP-2018-DPHS-01-REGION-1	Pass-Through	NH Dept of Health and Human Services	29,838	-

## Dartmouth-Hitchcock Health and Subsidiaries Schedule of Expenditures of Federal Awards Year Ended June 30, 2019

	CFDA	Award Number/pass-through Identification Number	Funding Source	Pass-Through Entity	Total Expenditures	Amount Passed Through to Subrecipients
University Centers for Excellence in Developmental Disabilities Education, Research, and Service	93.632	19-029	Pass-Through	University of New Hampshire	2,811	-
Adoption Opportunities	93.652	AWD00009303	Direct		32,384	-
Adoption Opportunities	93.652	RFP-2018-DPHS-01-REGION-1	Pass-Through	NH Dept of Health and Human Services	110,524	-
					<u>142,908</u>	<u>-</u>
Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	93.758	RFP-2018-DPHS-01-REGION-1	Pass-Through	NH Dept of Health and Human Services	343,297	-
University Centers for Excellence in Developmental Disabilities Education, Research, and Service	93.761	90FPSG0019	Direct		134,524	-
Opioid STR	93.788	RFP-2018-BDAS-05-INTEG	Pass-Through	NH Dept of Health and Human Services	954,356	61,208
Opioid STR	93.788	2019-BDAS-05-ACCES-04	Pass-Through	NH Dept of Health and Human Services	161,164	-
Opioid STR	93.788	SS-2019-BDAS-05-ACCES-02	Pass-Through	NH Dept of Health and Human Services	243,747	-
					<u>1,359,267</u>	<u>61,208</u>
Organized Approaches to Increase Colorectal Cancer Screening	93.800	5 NU58DP006086	Direct		912,937	-
Hospital Preparedness Program (HPP) Ebola Preparedness	93.817	03420-6755S	Pass-Through	Vermont Department of Health	2,347	-
Maternal, Infant and Early Childhood Home Visiting Grant	93.870	03420-6951S	Pass-Through	Vermont Department of Health	99,841	-
Maternal, Infant and Early Childhood Home Visiting Grant	93.870	03420-07623	Pass-Through	Vermont Department of Health	178,907	-
					<u>278,748</u>	<u>-</u>
National Bioterrorism Hospital Preparedness Program	93.889	03420-7272S	Pass-Through	Vermont Department of Health	2,786	-
Rural Health Care Services Outreach, Rural Health Network Develop and Small Health Care Provider Quality Improvement	93.912	6 D06RH31057-02-03	Direct		138,959	-
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease	93.918	1 H76HA31654-01-00	Direct		273,666	-
Block Grants for Community Mental Health Services	93.958	9224120	Pass-Through	NH Dept of Health and Human Services	2,498	-
Block Grants for Community Mental Health Services	93.958	RFP-2017-DBH-05-FIRSTE	Pass-Through	NH Dept of Health and Human Services	32,625	-
					<u>35,123</u>	<u>-</u>
Block Grants for Prevention and Treatment of Substance Abuse	93.959	05-95-49-491510-2990	Pass-Through	NH Dept of Health and Human Services	69,276	-
Block Grants for Prevention and Treatment of Substance Abuse	93.959	Not Provided	Pass-Through	Foundation for Healthy Communities	54,356	-
Block Grants for Prevention and Treatment of Substance Abuse	93.959	05-95-49-491510-2990	Pass-Through	Foundation for Healthy Communities	1,695	-
Block Grants for Prevention and Treatment of Substance Abuse	93.959	03420-A18033S	Pass-Through	Vermont Department of Health	59,204	-
					<u>184,531</u>	<u>-</u>
PPHF Geriatric Education Centers	93.969	U1QHP32519	Direct		728,055	-
Department of Health and Human Services	93.U01	RFP-2018-DPHS-05-INJUR	Pass-Through	NH Highway Safety Agency	80,107	-
Department of Health and Human Services	93.U02	Not Provided	Pass-Through	NH Dept of Health and Human Services	48,489	-
Department of Health and Human Services	93.U03	Not Provided	Pass-Through	NH Dept of Health and Human Services	56,419	-
Department of Health and Human Services	93.U04	Not Provided	Pass-Through	NH Dept of Health and Human Services	37,009	-
Department of Health and Human Services	93.U05	Not Provided	Pass-Through	NH Dept of Health and Human Services	39,653	-
Department of Health and Human Services	93.U06	Not Provided	Pass-Through	County of Cheshire	213,301	-
					<u>474,978</u>	<u>-</u>
Corporation for National and Community Service AmeriCorps	94.006	17ACHNH0010001	Pass-Through	Volunteer NH	72,297	-
					<u>72,297</u>	<u>-</u>
<b>Total Other Programs</b>					<u>7,774,313</u>	<u>652,619</u>
<b>Total Federal Awards and Expenditures</b>					<u>\$ 19,256,480</u>	<u>\$ 1,315,946</u>

## **Dartmouth-Hitchcock Health and Subsidiaries Notes to Schedule of Expenditures of Federal Awards June 30, 2019**

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### **1. Basis of Presentation**

The accompanying schedule of expenditures of federal awards (the "Schedule") presents the activity of federal award programs administered by Dartmouth-Hitchcock Health and Subsidiaries (the "Health System") as defined in the notes to the consolidated financial statements and is presented on an accrual basis. The purpose of this Schedule is to present a summary of those activities of the Health System for the year ended June 30, 2019 which have been financed by the United States government ("federal awards"). For purposes of this Schedule, federal awards include all federal assistance entered into directly between the Health System and the federal government and subawards from nonfederal organizations made under federally sponsored agreements. The information in this Schedule is presented in accordance with the requirements of the Uniform Guidance. Pass-through entity identification numbers and CFDA numbers have been provided where available.

Visiting Nurse and Hospice of NH and VT ("VNH") received a Community Facilities Loan, CFDA #10.766, of which the proceeds were expended in the prior fiscal year. The VNH had an outstanding balance of \$2,696,512 as of June 30, 2019. As this loan was related to a project that was completed in the prior audit period and the terms and conditions do not impose continued compliance requirements other than to repay the loan, we have properly excluded the outstanding loan balance from the Schedule.

### **2. Indirect Expenses**

Indirect costs are charged to certain federal grants and contracts at a federally approved predetermined indirect rate, negotiated with the Division of Cost Allocation and therefore we do not use the de minimus 10% rate. The predetermined rate provided for the year ended June 30, 2019 was 29.3%. Indirect costs are included in the reported federal expenditures.

### **3. Related Party Transactions**

The Health System has an affiliation agreement with Dartmouth College dated June 4, 1996 in which the Health System and the Geisel School of Medicine at Dartmouth College affirm their mutual commitment to providing high quality medical care, medical education and medical research at both organizations. Pursuant to this affiliation agreement, certain clinical faculty of the Health System participate in federal research programs administered by Dartmouth College. During the fiscal year ended June 30, 2019, Health System expenditures, which Dartmouth College reimbursed, totaled \$3,979,033. Based on the nature of these transactions, the Health System and Dartmouth College do not view these arrangements to be subrecipient transactions but rather view them as Dartmouth College activity. Accordingly, this activity does not appear in the Health System's schedule of expenditures of federal awards for the year ended June 30, 2019.

**Part II**  
**Reports on Internal Control and Compliance**



**Report of Independent Auditors 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 Trustees of  
Dartmouth-Hitchcock Health and subsidiaries

We have audited, 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, the consolidated financial statements of Dartmouth-Hitchcock Health and its subsidiaries (the "Health System"), which comprise the consolidated balance sheet as of June 30, 2019, and the related consolidated statements of operations and changes in net assets and of cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 26, 2019, which included an emphasis of a matter paragraph related to the Health System changing the manner in which it accounts for revenue recognition from contracts with customers and the manner in which it presents net assets and reports certain aspects of its financial statements as a not-for-profit entity in 2019 as discussed in note 2 of the consolidated financial statements.

**Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered the Health System'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 financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Health System's internal control. Accordingly, we do not express an opinion on the effectiveness of the Health System'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 entity'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 the Health System's 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**

The 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 entity'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 entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Priscilla Cooper LLP*

Boston, Massachusetts  
November 26, 2019



**Report of Independent Auditors on Compliance with Requirements  
That Could Have a Direct and Material Effect on Each Major Program and on Internal  
Control Over Compliance in Accordance with the Uniform Guidance**

To the Board of Trustees of  
Dartmouth-Hitchcock Health and subsidiaries

**Report on Compliance for Each Major Federal Program**

We have audited Dartmouth-Hitchcock Health and its subsidiaries' (the "Health System") compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the Health System's major federal programs for the year ended June 30, 2019. The Health System's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

***Management's Responsibility***

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

***Auditors' Responsibility***

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



***Opinion on Each Major Federal Program***

In our opinion, Dartmouth-Hitchcock Health and its subsidiaries complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2019.

**Report on Internal Control Over Compliance**

Management of the Health System are 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 the Health System's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Health System's internal control over compliance.

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

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

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

*Priscilla A. Cooper LLP*

Boston, Massachusetts  
March 31, 2020

**Part III**  
**Findings and Questioned Costs**

**Dartmouth-Hitchcock and Subsidiaries  
Schedule of Findings and Questioned Costs  
Year Ended June 30, 2019**

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**I. Summary of Auditor's Results**

**Financial Statements**

Type of auditor's report issued	Unmodified opinion
Internal control over financial reporting	
Material weakness (es) identified?	No
Significant deficiency (ies) identified that are not considered to be material weakness (es)?	None reported
Noncompliance material to financial statements	No

**Federal Awards**

Internal control over major programs	
Material weakness (es) identified?	No
Significant deficiency (ies) identified that are not considered to be material weakness (es)?	None reported
Type of auditor's report issued on compliance for major programs	Unmodified opinion
Audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	No

**Identification of major programs**

<b>CFDA Number</b>	<b>Name of Federal Program or Cluster</b>
Various CFDA Numbers	Research and Development
93.800	Organized Approaches to Increase Colorectal Cancer Screening
93.788	Opioid STR
93.110	Maternal and Child Health Federal Consolidated Programs
Dollar threshold used to distinguish between Type A and Type B programs	\$750,000
Auditee qualified as low-risk auditee?	Yes

**Dartmouth-Hitchcock and Subsidiaries**  
**Schedule of Findings and Questioned Costs**  
**Year Ended June 30, 2019**

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**II. Financial Statement Findings**

None Noted

**III. Federal Award Findings and Questioned Costs**

None Noted

**Dartmouth-Hitchcock and Subsidiaries**  
**Summary Schedule of Prior Audit Findings and Status**  
**Year Ended June 30, 2019**

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There are no findings from prior years that require an update in this report.

**DARTMOUTH-HITCHCOCK (D-H) | DARTMOUTH-HITCHCOCK HEALTH (D-HH)  
BOARDS OF TRUSTEES AND OFFICERS**

**Effective: January 1, 2021**

<p><b>Geraldine "Polly" Bednash, PhD, RN, FAAN</b> MHMH/DHC Trustee <i>Adjunct Professor, University of Vermont</i></p>	<p><b>Jonathan T. Huntington, MD, PhD, MPH</b> MHMH/DHC (Lebanon Physician) Trustee <i>Acting Chief Medical Officer, DHMC</i></p>
<p><b>Mark W. Begor, MBA</b> MHMH/DHC Trustee <i>Chief Executive Officer, Equifax</i></p>	<p><b>Laura K. Landy, MBA</b> MHMH/DHC/D-HH Trustee <i>President and CEO of the Fannie E. Rippel Foundation</i></p>
<p><b>Jocelyn D. Chertoff, MD, MS, FACR</b> MHMH/DHC (Clinical Chair/Center Director) Trustee <i>Chair, Dept. of Radiology</i></p>	<p><b>Jennifer L. Moyer, MBA</b> MHMH/DHC Trustee <i>Managing Director &amp; CAO, White Mountains Insurance Group, Ltd</i></p>
<p><b>Duane A. Compton, PhD</b> MHMH/DHC/D-HH Trustee <i>Ex-Officio: Dean, Geisel School of Medicine at Dartmouth</i></p>	<p><b>David P. Paul, MBA</b> MHMH/DHC Trustee <i>President &amp; COO, JBG SMITH</i></p>
<p><b>Joanne M. Conroy, MD</b> MHMH/DHC/D-HH Trustee <i>Ex-Officio: CEO &amp; President, D-H/D-HH</i></p>	<p><b>Charles G. Plimpton, MBA</b> MHMH/DHC/D-HH Boards' Treasurer &amp; Secretary <i>Retired Investment Banker</i></p>
<p><b>Paul P. Danos, PhD</b> MHMH/DHC/D-HH Trustee <i>Dean Emeritus; Laurence F. Whittemore Professor of Business Administration, Tuck School of Business at Dartmouth</i></p>	<p><b>Richard J. Powell, MD</b> D-HH Trustee <i>Section Chief, Vascular Surgery; Professor of Surgery and Radiology</i></p>
<p><b>Carl "Trey" Dobson, MD</b> MHMH/DHC Trustee <i>Chief Medical Officer, Southwestern Vermont Medical Center</i></p>	<p><b>Thomas Raffio, MBA, FLMI</b> MHMH/DHC Trustee <i>President &amp; CEO, Northeast Delta Dental</i></p>
<p><b>Elof Eriksson, MD, PhD</b> MHMH/DHC Trustee <i>Professor Emeritus, Harvard Medical School and Chief Medical Officer, Applied Tissues Technologies, LLC</i></p>	<p><b>Kurt K. Rhyhart, MD, FACS</b> MHMH/DHC (D-H Lebanon Physician Trustee Representative) Trustee <i>DHMC Trauma Medical Director and Divisional Chief of Trauma and Acute Care Surgery</i></p>
<p><b>Gary L. Freed, Jr., MD, PharmD</b> MHMH/DHC Trustee <i>Plastic Surgeon, DHMC and Assistant Professor of Surgery for Geisel School of Medicine at Dartmouth</i></p>	<p><b>Edward Howe Stansfield, III, MA</b> MHMH/DHC/D-HH Boards' Chair <i>Senior VP, Resident Director for the Hanover, NH Bank of America/Merrill Lynch Office</i></p>
<p><b>Thomas P. Glynn, PhD</b> MHMH/DHC Trustee <i>Chief Executive Officer, Massachusetts Port Authority</i></p>	<p><b>Pamela Austin Thompson, MS, RN, CENP, FAAN</b> MHMH/DHC/D-HH Trustee <i>Chief executive officer emeritus of the American Organization of Nurse Executives (AONE)</i></p>
<p><b>Robert S.D. Higgins, MD, MSHA</b> MHMH/DHC Trustee <i>Nicholas M. Greene Professor and Chair, Dept. of Anesthesiology, Yale School of Medicine</i></p>	<p><b>Marc B. Wolpow, JD, MBA</b> MHMH/DHC/D-HH Trustee <i>Co-Chief Executive Officer of Audax Group</i></p>
<p><b>Roberta L. Hines, MD</b> MHMH/DHC Trustee <i>Surgeon-in-Chief, The John Hopkins Hospital</i></p>	

# STEPHEN BELMONT

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My career objectives include providing the highest quality customer service for those I serve, managing and leading in the field and improving protocols, processes and quality standards with regards to public health. My personal interests include leadership in both operational and nonoperational tasks. My passion is to help those in need, in whatever way I can. I am highly energetic and motivated to succeed.

## EXPERIENCE

DECEMBER 2020- PRESENT

PUBLIC HEALTH EMERGENCY PREPAREDNESS COORDINATOR- GREATER SULLIVAN COUNTY, DARTMOUTH HITCHCOCK MEDICAL CENTER  
COORDINATE, STAFF AND OVERSEE COVID-19 VACCINATION AND FLU VACCINATION CLINICS IN THE COMMUNITY. UPDATE COMMUNITY PARTNERS ON VARIOUS HEALTH RELATED ISSUES IN THE REGION AND STATE. PROVIDE WRITTEN AS WELL AS VERBAL REPORTS TO MANAGER. CREATE AND EXECUTE YEARLY WORK PLAN.

JULY 2018- DECEMBER 2020

PARAMEDIC-ADMINISTRATOR, SOUTH ROYALTON RESCUE SQUAD  
RESPOND TO 911 MEDICAL EMERGENCIES. REVIEW APPLICANTS, SCHEDULE AND CONDUCT INTERVIEWS, HIRE STAFF TO FILL AGENCY STAFFING NEEDS. OVERSEE DAILY AGENCY OPERATIONS. MANAGE AGENCY OF TWENTY PARAMEDICS, ADVANCED EMTS AND EMTS. FORMULATE AND OPERATE WITHIN YEARLY BUDGET. EDIT OR ADD TO AGENCY HAND BOOK AND SUGGESTED OPERATING PROCEDURES. CREATE AND DELIVER MONTHLY TRAININGS. PERFORM CQI/CQA OF ALL REPORTS. RESPOND TO INQUIRIES FROM GENERAL PUBLIC. OPERATE AS SCENE COMMAND WHILE ON MEDICAL SCENES. ENSURE THAT AMBULANCE IS PROPERLY STAFFED AT ALL TIMES. PERFORM DAILY AMBULANCE CHECKS AND STATION DUTIES. SCHEDULE AMBULANCE MAINTENCE. ATTEND AND GIVE REPORT DURING MONTHLY BOARD MEETINGS. ATTEND QUARTLY DISTRICT MEETINGS. PARTICIPATE IN FUNDRAISING ACTIVITIES.

APRIL 2015 – DECEMBER 2018

PARAMEDIC - CAPTAIN, TOWN OF LANCASTER, FIRE DEPT.  
RESPOND TO 911 MEDICAL EMERGENCIES. PROVIDE ALS CARE DURING PARAMEDIC INTERFACILITY TRANSPORTS. PERFORM AND OVERSEE DAILY AMBULANCE CHECKS AND STATION DUTIES. STAFF SUPERVISORS PHONE, RESPONDING TO HOSPITAL REQUESTS FOR TRANSFERS. STAFF TRANSFERS WITH APPROPRIATE LEVEL CARE PROVIDERS.

APRIL 2015 – JULY 2018

PARAMEDIC – INFECTION CONTROL OFFICER, 45<sup>TH</sup> PARALLEL EMS  
RESPOND TO 911 MEDICAL EMERGENCIES. PROVIDE ALS CARE DURING PARAMEDIC INTERFACILITY TRANSPORTS. PERFORM DAILY AMBULANCE CHECKS AND STATION DUTIES.

INFECTION CONTROL OFFICER. EDUCATOR/EDUCATION COMMITTEE MEMBER. SAFETY COMMITTEE MEMBER. PIFT REVIEW BOARD.

JANUARY 2015 – APRIL 2015

**PARAMEDIC – SHIFT SUPERVISOR, AMERIACN AMBULANCE**

RESPOND TO 911 MEDICAL EMERGENCIES. PROVIDE PARAMEDIC INTERFACILITY TRANSPORTS. PERFORM AND OVERSEE DAILY AMBULANCE CHECKS AND STATION DUTIES. HELP ESTABLISH AND MAINTAIN CAAS STANDARDS. PERFORM REGULAR RADIO CHECKS AND MAINTENCE.

JUNE 2013 – JANUARY 2015

**EMT BASIC – SHIFT SUPERVISOR, AMERICAN AMBULANCE**

RESPOND TO 911 MEDICAL EMERGENCIES. PROVIDE BLS INTERFACILITY TRANSPORTS. PREFORM AND OVERSEE DAILY AMBULANCE CHECKS AND STATION DUTIES. HELP ESTABLISH AND MAINTAIN CAAS STANDARDS. PREFORM REGULAR RADIO CHECKS AND MAINTENCE.

## **EDUCATION**

01/2018

**CRITICAL CARE TRANSPORT REVIEW, DISTANCE CME**

LIVE ONLINE COURSE PREPARING STUDENTS TO SIT FOR CRITICAL CARE TRANSPORT EXAMS. COURSE CONSISTED OF THIRTY CLASSES DIVIDED INTO TWO HOUR BLOCKS WITH TESTING.

01/2015

**CERTIFICATE IN PARAMEDICINE, NEW ENGLAND EMS INSTITUTE**

18 MONTH COURSE CONSISTING OF BOTH THEORY AND CLINICAL HOURS AND CONCLUDING WITH NATIONAL TESTING AND CERTIFICATION. MAINTAINED GREATER THAN 94 AVERAGE.

05/2011

**BACHELOR OF ARTS IN CRIMINAL JUSTICE, SAINT ANSELM COLLEGE**

FOUR YEAR LIBERAL ARTS DEGREE INCLUDING A SIX-MONTH INTERNSHIP WITH THE MASSACHUSETTS STATE POLICE – ARSON INVESTIGATION UNIT.

## **SKILLS**

- Well-spoken and well written
- Attention to detail and follow through
- Interpersonal and relationship-building skills
- Technology/ Basic Computer skills
- Problem solving
- Communication

## **ACTIVITIES**

I am passionate about providing, training and modeling exceptional public service to all coworkers, employees and the local communities. I provide leadership as the Administrator of South Royalton Rescue Squad and enjoy working closely with administration for oversight of recruitment, orientation, training and supervision of all employees. I enjoy participating in and overseeing day to day operations and being involved with strategic planning. As co-training officer and direct educator, I demonstrate a good grasp of knowledge and principles in my field. I am able to provide informative and accurate

feedback and updates to ensure organizational growth and cohesiveness. I am known for my excellent communication and people skills, as well as my warm and friendly professional attitude.

# Taralyn Bielaski

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## EDUCATION

### Daemen College

Amherst, NY

Master of Public Health, May 2017

### Daemen College

Amherst, NY

Health Care Studies/Complementary and Alternative Health Care Practices

Bachelor of Science, January 2010

### Roswell Park Cancer Institute

Buffalo, NY

Tobacco Treatment Specialist, January 2020

## WORK EXPERIENCE

**Lead Greater Sullivan Strong/Greater Sullivan County Public Health Advisory Council**, New London Hospital: Greater Sullivan County Public Health Region, New London, NH

January 2021- Present

- Greater Sullivan Strong Emergency Response Community Coalition
  - Facilitate bi-weekly, monthly meetings
  - Maintain the Greater Sullivan Strong website: [www.GreaterSullivanStrong.org](http://www.GreaterSullivanStrong.org)
  - Maintain a bi-weekly newsletter/bulletin
  - Collaborate with local partners to ensure sharing of local resources related to the COVID-19 pandemic
  - Lead the Funding Steering Committee
    - Facilitate a weekly meeting
    - Weekly email updates
    - Communicate with community partners of approval/denial of funding requests
    - Maintain the running balance of the COVID Relief Fund
- Greater Sullivan County Public Health Advisory Council,
  - Facilitate quarterly meetings
    - Collaborate with Senior Leadership to create the agenda for the quarterly meeting
  - Collaborate with statewide and local partners to ensure sharing of local resources and success of local and statewide strategies
- COVID-19 Vaccination Clinics
  - Logistics for clinics, including registration of participants, site visits, manage inventory
  - Assist in the facilitation of COVID-19 Vaccination clinics

**Wellness & Population Health Coordinator**, New London Hospital

October 2019- Present

- Assist in the development, implementation and coordination of internal and external Wellness and Population Health initiatives.
- Responsible for the administration of the Employee beBetter Wellness Portal
- Responsible for the High Health Station marketing, utilization reporting and event planning
- Responsible for tracking and reporting on Advance Care Planning
- Develops, distributes and posts internal marketing materials for employee wellness programming
- Works in collaboration with the marketing and community relations department to develop marketing materials and advertise for external events and programming
- Coordinates and manages community-based wellness and health programming in conjunction with both internal and external presenters and community partners
- Assists with community event planning and coordination such as expos, conferences and fundraisers
- Assists individuals in connecting with the appropriate resources and health programming
- Assists in monitoring and reporting on metrics related to the Community Health Implementation Plan
- Assists in data collection for the annual Community Benefits report and Community Health Needs Assessment
- Liaison between the hospital and the Lake Sunapee Region communities; representing NLH at community meetings, public forums and events as needed

**Smoking Cessation Health Educator**, Concord Hospital

October 2018- March 2019

- Serves as a member of the team with the overall intent to stay current with community tobacco cessation needs.

- Supports members of the community with smoking cessation efforts using current evidence-based methods: American Lung Association Freedom From Smoking Program.
- Facilitates smoking cessation classes in the Concord, NH region.

**Staff Assistant**, Concord Hospital, Center for Health Promotion

October 2018- October 2019

- Responsible for all aspects of Center for Health Promotion front desk activities and basic office maintenance to include: greeting clients and visitors both in person and on the phone, class scheduling, registrations, fee collections, room set-up, supply inventory and ordering, data maintenance and educator contracts.
- Serve as the department expert in programs and registration.
- Provide support for the educators: prepare materials, prepare classrooms, develop marketing materials for the classes

**Patient Care Coordinator**, The Family Health Center, Concord Hospital

April 2018- October 2018

- The primary access point for patients.
- Responsible for a variety of clerical and data management functions in support of: patient registration, referral coordination, phone management.
- Served as the PCC representative for the FHC Communication Committee.

**Esthetics Educator**, The Salon Professional Academy

May 2011- May 2017

- Educate adult students on the theory portion of esthetics to pass the New York State board examination
- Educate adult students on the practical portion of esthetics to pass the New York State board examination
- Make-up Designory Certified Advanced Educator, Beauty Essentials, Airbrush and Bridal Makeup Courses
- E'Lan Eyelash Extension Educator
- Reception: Schedule appointments, check guests in/out
- Manage inventory: Makeup Designory, Keyano Aromatics, and Dermalogica

**Massage Therapist/Esthetician/Spa Coordinator**, Excuria Salon and Spa

August 2005- September 2017

- Proficient in the following Massage Techniques: Swedish, deep tissue, aromatherapy, reiki, massage cupping
- Proficient in the following Esthetic Services: facials, waxing, Brazilian waxing, Borboleta eyelash extensions, microdermabrasion and chemical peels
- Retail sales: met and maintained retail goals
- Maintain a strong client base, as a result of providing superior customer service to clients in order to meet their individual body, skin and wellness needs
- Ensure that the Spa is in exceptional condition in order to provide a superior experience for each guest
- Assist co-workers with the preparation of their clients for their services in order to maintain the expected customer service standards of the Spa
- Promote the services of the Spa in order to identify new potential clients

## **ACADEMIC WORK EXPERIENCE**

**Assistant Program Coordinator**, The DREAMS Project, Rakai Health Science Program

Rakai, Uganda

May 2016- August 2016, Graduate Student Practicum

- Assess and evaluate the implementation of DREAMS project
- HIV prevention/sexual health education
- Youth and adolescent health/empowerment
- Domestic violence prevention with SASA!
- Program development & logistics coordination

**HIV/AIDS Clinic**, Rakai Health Science Program

Rakai, Uganda

May 2016- August 2016, Graduate Student Practicum

- Created and administered a survey to mothers and staff members
- Analyzed responses and provided data to program director

**Assistant Project Coordinator**, Community Service Alliance

Dominican Republic

September 2007- January 2008, Undergraduate academic service learning

- Assisted in the development and implementation of HIV prevention and sexual health program for youth facilitators
- Train and supervise youth facilitators on program implementation

# LAUREN CHAMBERS

## EDUCATION

**Boston University School of Public Health**  
Masters in Public Health

**January 2013**

**University of New Hampshire**  
Bachelor of Science in Nutrition & Wellness, Minor in Public Health

**May 2011**

## EXPERIENCE

**Certified Prevention Specialist**

**Expected 2021**

**Community Health Partnership Coordinator**  
***Dartmouth-Hitchcock, Community Health Improvement***

**July 2020 - Present**

- Coordinates multi-stakeholder community partnerships to plan and implement community health initiatives specific to the continuum of care for substance use disorder (SUD) for two large Regional Public Health Networks.
- Convenes community partners to assess assets & gaps in regional care systems, improve coordination of care between providers, plan and develop new or enhanced approaches supporting SUD prevention, intervention, harm reduction, treatment, and recovery.
- Develops strategic plans and lead capacity building strategies across 28 towns and all 12 community sectors.
- Provides technical and administrative support to community partners to achieve their SUD related goals and objectives.

**Regional Opioid Abuse Prevention Coordinator**  
***City of Medford, Mystic Valley Public Health Coalition***

**Oct 2016 - June 2020**

- Responsible for daily operation of regional coalition consisting of seven cities and towns, and representing those communities on task forces, committees, and in meetings.
- Serve as a resource and support for evidence-based substance use prevention and harm reduction practices.
- Apply the Strategic Prevention Framework to assess community needs, build capacity, create and implement strategic plans, and conduct process and outcome evaluations.
- Engage and collaborate with diverse stakeholders to make impactful policy and practice change to reduce negative health outcomes.
- Create, design, and disseminate materials, guides, and toolkits.
- Develop and manage annual grant budget, including internal financial processes.
- Collect, analyze, and maintain datasets, and prepare presentations and reports as needed.
- Plan and facilitate meetings, trainings, and regional events.
- Complete quarterly reports to Dept. of Public Health on grant deliverables.
- Maintain coalition website and social media.
- Contribute to grant writing and editing.
- Supervise volunteers and interns.

**Coalition Coordinator**

**Feb 2013—Oct 2016**

# LAUREN CHAMBERS

## ***Melrose Substance Abuse Prevention Coalition***

- Managed and implemented strategies for multiple federal and state awarded grants.
- Facilitated school faculty/staff trainings on youth substance use trends, evidence-based prevention strategies, and resources available.
- Oversaw coalition's annual grant budget.
- Facilitated monthly coalition meetings of 15-20 members.
- Represented the coalition in local and regional substance use prevention efforts.
- Analyzed and disseminated local youth risk behavior survey data to schools and community.
- Assisted in design and implementation of various school and community-wide initiatives.
- Researched and wrote for state and federal grant opportunities.
- Completed quarterly online grant progress reporting.
- Attended local and national trainings to stay current on trends, policies, and best practices in substance abuse prevention.

## **Administrative Assistant (*interim*)**

**Oct 2012—Jan 2013**

### ***Women's Health Unit, Boston University/Boston Medical Center***

- Coordinated schedule and travel logistics for Director of high volume women's health research center.
- Supervised reimbursement process in accordance with multiple protocols.
- Prioritized time to support grant and collaborator projects while responding to phone and email inquiries.
- Created and updated Biosketch's, CV's, other documents and forms.

## **Volunteer**

**Sept 2012—Jan 2013**

### ***bWell Center, Boston Medical Center Department of Pediatrics***

- Engaged parents from underserved populations to provide wellness and health promotion materials and answer questions that help improve their child's health.
- Acted as liaison between parents and several hospital and community-based support services to coordinate resources and provide referrals.
- Improved morale by conducting hourly educational and physical activities with children to help them remain positive during long clinic visits.

## **Masters in Public Health Internship**

**May—Aug 2012**

### ***Start Strong Initiative, Boston Public Health Commission***

- Collaborated as part of a team to plan, organize, and facilitate summer enrichment programming for twenty high school Start Strong peer leaders.
- Developed outreach materials and events targeting Boston youth on healthy relationships and dating violence prevention.
- Developed and facilitated curriculum module used nationally at Youth Virtual Conference.
- Co-planned, organized, and facilitated third annual "Break Up Summit" attended by over 150 teens from 15 community organizations.

## **OTHER SKILLS**

- Substance Abuse Prevention Skills Training
- Microsoft Office, WordPress, SurveyMonkey, Piktochart, social networks
- Experience working for local government and non-profit organizations
- Experience in multiple customer service oriented roles
- Grant writing & editing

# LAUREN CHAMBERS

## EDUCATION

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**January 2013**

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- Maintain coalition website and social media.
- Contribute to grant writing and editing.
- Supervise volunteers and interns.

**Coalition Coordinator**

**Feb 2013—Oct 2016**

# LAUREN CHAMBERS

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- Co-planned, organized, and facilitated third annual "Break Up Summit" attended by over 150 teens from 15 community organizations.

## **OTHER SKILLS**

- Substance Abuse Prevention Skills Training
- Microsoft Office, WordPress, SurveyMonkey, Piktochart, social networks
- Experience working for local government and non-profit organizations
- Experience in multiple customer service oriented roles
- Grant writing & editing

# Anna Hullinger

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## Objective

Highly motivated professional with a diverse background in the armed forces, private/govt sector, higher education, and volunteer organizations. Looking to expand more in the areas of emergency management, public health, and homeland security.

## Education

### **MASTERS IN PUBLIC HEALTH | 2021 | SOUTHERN NEW HAMPSHIRE UNIVERSITY**

Major: Masters in Public Health (MPH)

Related coursework: Public Health Biology, Population Based Epidemiology, Biostatistics, Healthcare Informatics, Health Policy and Management.

### **AIR COMMAND AND STAFF COLLEGE: CORRESPONDENCE | 2019 | AIR UNIVERSITY**

Related coursework: Leadership and Command, National Security, Warfare Studies, Joint Forces, Joint Planning, Joint Air Operations.

### **MASTERS OF SCIENCE | 2015 | SOUTHERN NEW HAMPSHIRE UNIVERSITY**

Major: Justice Studies with a concentration in Terrorism and Homeland Security

Related coursework: Terrorism/Strategic Response, Emergency Management, Strategic Management in Public Service, Planning/Tactics: Homeland Security/WMD, Information Security.

### **BACHELORS OF SCIENCE | 2013 | GRANITE STATE COLLEGE**

Major: Criminal Justice

Related coursework: Critical Thinking, Managing Conflict, Law, Research Methods, Communications.

### **DOCTOR OF PHILOSOPHY | N/A | WALDEN UNIVERSITY**

Major: Homeland Security Policy & Coordination

Related coursework: Public Policy, Historic Contemporary Issues, Policy Analysis.

## Training & Courses

### **FEDERAL EMERGENCY MANAGEMENT AGENCY**

- IS 100, IS 200, IS 700, IS 800, ICS 300, ICS 400, IS-5A An Introduction to Hazardous Material, IS-3 Radiological Emergency Management, Community Emergency Response Team.

### **SOUTH CENTRAL PUBLIC HEALTH PARTNERSHIP**

- Environmental Public Health Online Course Certificate (EPHOC) – 48 Hours Total

## Security Clearance

- Top Secret SCI w/Full Scope Polygraph (Awarded 2017 NSA)

## Experience

### **COMMANDER SUPPORT STAFF | NATIONAL GUARD | 09/2019 – PRESENT (40HRS PER WEEK)**

- Supports the 260<sup>th</sup> Air Combat Command (ACC) Air Traffic Control Squadron (ATCS) at Pease ANGB.
- Assists in areas such as human resources, pay, onboarding, electronic records management, order writing, defense travel, and government travel card management.

### **FACILITY SECURITY OFFICER/INSIDER THREAT SENIOR OFFICIAL | OCEANIT | 01/2018 – 10/2018 (40 HRS PER WEEK)**

- FSO/ITSP0 for an engineering, aerospace and technology company in Honolulu, Hawaii. Responsible for physical, personnel and industrial security oversight. Implemented company policy and procedures relating to Defense Security Service (DSS), National Industrial Security Program (NISP).
- Implemented and updated the emergency preparedness policy and advised in the business continuity area.
- Oversight in security clearances and vetting of employees and guests.
- Created and maintained working relationships with counterintelligence, and federal agencies across the state to include the FBI cybersecurity team.
- Provided threat briefs and travel warnings for cleared/non-cleared personnel travelling outside of the country.
- Completed the DoD Security Specialist Course, FSO Program Mgmt. for Possessing Facilities, Basic Industrial Security for Government Security Specialist Curriculum, Risk Mgmt. Framework Curriculum, Counterintelligence Awareness Curriculum.

### **CONTRACTOR | OMNIPLEX | 10/2017 – 08/2018 (8-34HRS PER WEEK)**

- Contractor supporting the National Security Agency (NSA) in Oahu, Hawaii.
- Worked in physical security and vetting.

### **ADJUNCT PROFESSOR | UNIVERSITY OF NEW HAMPSHIRE | 01/2016 – 05/2016 (CONTRACT) (8HRS PER WEEK)**

- Contract adjunct professor teaching social issues at the Thompson School of Applied Sciences. Topics covered throughout the semester were human/civil rights, politics, ethics, religion, violence, and social responsibility.
- Challenged students with team building projects, current events, and public speaking.

### **SECURITY FORCES | AIR NATIONAL GUARD | 08/2007 – 08/2015 (VARIED IN HOURS)**

- Duties and responsibilities included protecting personnel and property, internal/external patrols, static posts, quick response, base wide exercises, and searches.
- In addition, provided support in the Honor Guard, community service, Enlisted Counsel, and training/mentoring new airman.

## Volunteerism

### **DIRECTOR OF CADET PROGRAMS – 2020 TO PRESENT**

Help local squadrons deliver high-quality squadron programs by training and mentoring local leaders. Visit and interact with national, region and local leadership in helping sponsor cadet programs

throughout the year. In addition to supporting squadron cadet programs officer development, additional support is given to financial management including flight budgets, training, and encampment.

#### **WING DIVERSITY OFFICER – 2019 TO PRESENT**

Advise the Wing Commander and staff on the impact on mission effectiveness and recruiting/retention, organizational progress, and actions to promote diversity. Provide strategic planning and oversight for institutional diversity and inclusion in all areas, including but not limited to programs, personnel, and resources. Work with other members of the Wing Staff to provide strategic communications and public outreach, and to guide recruiting and retention efforts to promote a diverse membership. Assist with developing local partnerships and activities with organizations that share similar missions and attract membership from historically underrepresented populations.

#### **DIRECTOR OF PROFESSIONAL DEVELOPMENT – 2012 TO 2017**

Facilitate and instruct regularly scheduled senior member professional development courses throughout the wing. Conduct training in professional development of new members and advise squadrons of onboarding procedures. Coordinate with instructors and subject matter experts in facilitating 12-hour+ courses. Use a mix of classroom, online and hybrid teaching platforms while coordinating with subject matter experts. Mentor and instruct in the areas of professionalism, critical thinking, communication, and organizational skills.

#### **EMERGENCY SERVICES/INCIDENT MANAGEMENT TEAM**

Currently I hold an active Finance/Administration Section Chief qualification, Liaison Officer, and Mission Staff Assistant as a member of the Incident Command Team for CAP. In addition to current qualifications, I am actively pursuing my FAA 107 Airman's Certificate for commercial sUAS, to help in Aerial Photography missions and as Planning Section Chief. As a wing, we actively participate in monthly exercises or training missions.

### **Accomplishments & Awards**

#### **AIR FORCE 2007 - 2015**

- Air Force Achievement Medal – Awarded in 2013 for accomplishment for 100% compliance in a mobilization inspection for the unit training department.
- New Hampshire State Activation Ribbon – Awarded in 2008 in supporting the ice storm operations over an eight-day span.
- Air Force Expeditionary Medal – Awarded in 2010 following a deployment in the middle east in support of Operation Enduring Freedom.

#### **CIVIL AIR PATROL 2000 - PRESENT**

- Amelia Earhart Award – Awarded 2007 #13952
- Gill Robb Wilson Award – Awarded 2020 #3718 – Highest CAP professional development awarded.
- Meritorious Service Award – Awarded 2009 for outstanding achievement or meritorious service rendered specifically on behalf of CAP.
- Search "Find" Ribbon – Awarded 2019 & Disaster Relief Ribbon – Awarded 2020 for support during COVID-19 response for service in PPE distribution and other support related Air Force assigned missions.

# ANDREA E. SMITH

[REDACTED]

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## SUMMARY OF QUALIFICATIONS

A proven leader and academic with over 8 years of experience in the nonprofit/healthcare field seeking the position of Community Health Partnership Coordinator with Dartmouth-Hitchcock Medical Center.

## SKILLS AND PROFICIENCIES

### Computer Skills:

Microsoft Suite, CiviCRM, Google Apps

### Relevant Coursework:

Research Methods, Performance Measurement, Foundations in Public Service, 21st Century Governance, Budgeting and Financial Management, Organizational Theory, Social Welfare Policy and Programs, Human Behavior in the Social Environment

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## PROFESSIONAL EXPERIENCE

**Community Health Partnership Coordinator**  
Dartmouth-Hitchcock Medical Center

March 2020-Present  
Lebanon, NH

- Drives the development of one or more community partnerships comprised of an array of health care, municipal, education, community service, business, and law enforcement members.
- Ensures project related assessment of community needs and assets as assigned.
- Coordinates with guidance from senior staff, assessment, capacity development, action planning, implementation, and evaluation of projects by community stakeholders and organizations.
- Supports the implementation of indicators to track progress of regional strategic wellness plans toward goals.
- Provides support and technical assistance to community partners to achieve the goals and objectives for which their organizations are responsible.
- Assists with and independently conducts evaluation to track progress and improve the quality of future work.

**Navigator/Corporate Services Liaison**  
United Helpers

November 2018-Present  
Canton, NY

- Serves as initial point of contact for community members for a healthcare nonprofit that serves more than 2,000 people per day and assists with navigating the more than 20 services the agency provides.
- Provides customer relations in dealing with patients, families, physicians, fellow department employees, other departments, referral resources, service agencies and others.
- Plans, coordinates, and executes day-to-day activities specific to marketing, advertising, outreach, and education of the United Helpers continuum of services.
- Represents and coordinates representation for the United Helpers Organization at various health fairs, expositions, functions and other community events.
- Actively manages an extensive database of referral sources via CiviCRM with United Helpers and in the community.

**Quality Assurance Assistant**

September 2016-November 2018

United Helpers

Ogdensburg, NY

- Assisted Quality Assurance Coordinator in implementing the agency's overall quality improvement program through auditing and staff trainings.
- Assisted agency with obtaining national Council on Quality and Leadership accreditation.
- Functioned as the agency's primary investigator for internal investigations, reportable incidents, and notable occurrences for incidents involving people with Intellectual Disabilities.
- Trained all new staff on the New York State Office for People with Developmental Disabilities regulations regarding reporting and preventing abuse.

**Staff Development Specialist**

January 2016-September 2016

United Helpers.

Ogdensburg, NY

- Planned, directed, monitored, and implemented all staff development programs for the agency in accordance with federal and state regulations as well as agency goals and mission.
- Provided education and support for direct support and other professionals to safely provide support services to program members.

**Temporary Social Worker**

June-August 2015

Canton-Potsdam Hospital

Potsdam, NY

- Assisted patients and families with navigating the various services available upon discharge throughout the county.
- Collaborated with local skilled nursing facilities to facilitate transitions for patients from the hospital to short-term rehabilitation centers or long-term skilled nursing facilities.
- Provided crisis intervention for families and patients when necessary, working inter-professionally with Hospitalist Providers to ensure complete care was provided to patients.

**Public Administration/Social Work Intern**

2014-2015

Rise, Domestic Violence Agency

Endicott, NY

- Completed small grant applications and assisted with fund allocation.
- Assisted with data collection projects.
- Co-facilitated a court-mandated domestic violence group, a 16-week evening group for domestic violence survivors and a weekly group at the local domestic violence shelter. Prepared group curriculum.
- Met with clients one-on-one for strengths-based therapy.

**Graduate Assistant for the Department of Public Administration**

2014-2015

Binghamton University

Vestal, NY

- Co-created a Board Development Protocol for the Broome County Arts Council Board of Directors.
- Developed case studies related to "hot topics" in Public Administration and compiled research.
- Created/administered surveys through Survey Monkey.

**Graduate Assistant of Interpersonal Violence Prevention Program**

2013-2014

Binghamton University

Vestal, NY

- Supervised undergraduate interns
- Created and presented educational programming related to interpersonal violence to college students.
- Attended University meetings with varying departments/leadership.

**Hartford Partnership Program for Aging Education Fellow Social Work Intern**

2012-2013

Rural Health Network of South Central New York

Whitney Point, NY

- MSW intern with the Renew Health Program providing case management and home visits to uninsured adults living with a chronic health condition in rural Broome, Tioga, and Delaware counties.

**Prevention Educator**

2010- 2012

Steuben Council on Addictions

Bath, NY

- Provided the public with relevant substance abuse information through community events, advertising,

and publicity.

- Visited schools and adult community groups to help participants build knowledge and skills for substance abuse prevention.
- Presented evidence-based and custom workshops on topics including: Life Skills, Bullying Prevention, Self-esteem, etc.
- Actively participated in community task forces interacting with various stakeholders.

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## VOLUNTEER WORK

Canton-Potsdam Hospital Guild, Board Member (September 2017-January 2020)  
LIFE: Literary is for Everyone, Tutor (July 2017-January 2020)  
MPA Graduate Student Organization, Vice President (2 terms)  
MPA Graduate Student Organization, Ethics Chair (1 term)  
Philanthropy Committee, 2013-2015

## CERTIFICATIONS/TRAININGS

American Heart Association BLS Instructor (2016-present)  
Department of Health Certified Rape Crisis Counselor/Advocate (2011-2012)  
Master Trainer of the Chronic Disease Self-Management Program (2010-2012)  
Motivational Interviewing for Healthy Behavior Change

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## EDUCATION

**St. Lawrence Leadership Institute**  
*SUNY Potsdam*

June 2018  
Potsdam, NY

**Master of Public Administration**  
*Binghamton University*

May 2015  
Binghamton, NY

**Master of Social Work**  
*Binghamton University*

May 2015  
Binghamton, NY

**Bachelor of Science in Psychology**  
*Mansfield University*

December 2010  
Mansfield, PA

**Mary Hitchcock Memorial Hospital  
Upper Valley**

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Andrea Smith	Substance Misuse Prevention Coordinator	55,638	99%	55,081
Anna Hullinger	Public Health Emergency Preparedness Coordinator	64,890	100%	64,890
Lauren Chambers	Continuum of Care Coordinator	56,666	50%	28,333
Vacant	YAS Coordinator	51,500	50%	25,750

**Mary Hitchcock Memorial Hospital  
Greater Sullivan County**

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Steven Belmont	Public Health Emergency Preparedness Coordinator	61,808	100%	61,808
Vacant	Substance Misuse Prevention Coordinator	55,367	100%	55,637
Taralyn Bielaski	Public Health Advisory Council Lead	51,417	24%	12,340
Lauren Chambers	Continuum of Care Coordinator	56,666	50%	28,333
Vacant	YAS Coordinator	51,500	50%	25,750

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and Mid-State Health Center ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), as amended with Governor approval on December 17, 2020 and to be presented to the Executive Council as an Informational Item, as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,345,529.
3. Modify Exhibit A Scope of Work by replacing it in its entirety with Exhibit A Scope of Work, Amendment #8, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services COVID-19 Response.
    - 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized

expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.

6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
  7. The Contractor shall bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
    - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
    - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
9. Modify Exhibit B-1, Program Funding, Amendment #7 by replacing it in its entirety with Exhibit B-1 Amendment #8, Program Funding, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-12, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-13, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-14, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-15, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-16, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-17, Amendment #8, which is attached hereto and incorporated by reference herein.
16. Add Exhibit B-18, Amendment #8, which is attached hereto and incorporated by reference herein.
17. Add Exhibit B-19, Amendment #8, which is attached hereto and incorporated by reference herein.

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

5/28/2021  
Date

DocuSigned by:  
*Patricia M. Tilley*  
845FB38F5BED4C8  
Name: Patricia M. Tilley  
Title: Interim Director

Mid-State Health Center

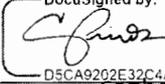
5/28/2021  
Date

DocuSigned by:  
*Robert MacLeod*  
0C466BE89254490  
Name: Robert MacLeod  
Title: CEO

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

OFFICE OF THE ATTORNEY GENERAL

6/1/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
  
D5CA9202E32C4AE  
\_\_\_\_\_  
Name: Catherine Pinos  
Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



New Hampshire Department of Health and Human Services  
Regional Public Health Network Services

Exhibit A – Amendment # 8

Scope of Services

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient), in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Networks for the Central NH region, as defined by the Department, to provide a broad range of public health services within one or more of the state’s thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to assure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing young adult substance misuse prevention strategies.
    - 2.1.2.6. Ensuring contract administration and leadership.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**

2.2. Public Health Advisory Council

2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team and direction to public health activities within the assigned region. The Contractor shall:

2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;

2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:

2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.

2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issue.

2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.

2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.

2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.

2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:

2.2.1.3.1. Ensure meeting minutes are available to the public upon request.

2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
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- 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.
- 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
- 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC’s activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to the public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC\_), YA and PHEP programs.
- 2.2.1.12. Advance the work of RPHNs by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected officials, on the PHAC.

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**New Hampshire Department of Health and Human Services  
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Exhibit A – Amendment # 8**

2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.

2.3. Public Health Emergency Preparedness

2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:

2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention’s (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.

2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) and/or coordinating and/or planning committee and/or workgroup to:

2.3.1.2.1. Improve regional emergency response plans; and

2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.

2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.

2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.

2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.

2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative including the workgroup.

2.3.1.7. Submit an annual work plan based on a template provided by the Department.

2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.

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**New Hampshire Department of Health and Human Services  
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- 2.3.1.9. Collaborate with the Department's, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:
  - 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
  - 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.
- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to



New Hampshire Department of Health and Human Services  
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strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.

2.3.1.13. Regularly communicate with the Department’s Area Agency contractor that provides developmental and acquired brain disorder services in the region.

2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.

2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.

2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.

2.3.1.17. Maintain the capacity to utilize WebEOC, the State’s emergency management platform, during incidents or emergencies.

2.3.1.18. Provide training as needed to individuals to participate in emergency management using WebEOC.

2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.

2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.

2.3.1.21. Implement activities that support the CDC’s Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department’s SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:

2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.

2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.

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- 2.3.1.21.3. ORR site visit as scheduled by the CDC and the Department.
- 2.3.1.21.4. Completion of relevant drills/exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate these supplies. prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
- 2.3.1.24. Participate, as requested by the Department, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.
- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health

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and Human Services Assistant Secretary for Preparedness and Response.

2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

2.4. Substance Misuse Prevention

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.

2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.

2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes: assessment, capacity development, planning, implementation and evaluation.

2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department's guidance on what is evidenced informed.

2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.

2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic



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models that demonstrates short-, intermediate- and long-term measures in alignment the Three-Year Strategic Plan.

- 2.4.1.7. Advance, promote and implement substance misuse primary prevention of strategies that incorporate the Institute of Medicine (IOM) categories of prevention: universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, as directed by the Department’s Bureau of drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

**2.5. Continuum of Care**

2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

- 2.5.1.1. Engage regional partners in ongoing update of regional assets and gaps, and regional CoC plan development

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and implementation. The Contractor shall ensure regional partners include, but are not limited to:

- 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Services providers.
- 2.5.1.1.2. Primary health care providers.
- 2.5.1.1.3. Behavioral health care providers.
- 2.5.1.1.4. Other interested and/or affected parties.
- 2.5.1.2. Work toward, and adapt as necessary and indicated, the priorities and actions identified in the regional CoC development plan.
- 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
  - 2.5.1.3.1. Increased awareness of and access to services;
  - 2.5.1.3.2. Increased communication and collaboration among providers; and
  - 2.5.1.3.3. Increases in capacity and delivery of services.
- 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
- 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to, the Integrated Delivery Networks.
- 2.5.1.6. Work with statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.
- 2.5.1.7. Engage regional stakeholders to assist with information dissemination.

**2.6. Young Adult Substance Misuse Prevention Strategies**

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- 2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within the regions.
- 2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:
  - 2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:
    - 2.6.2.1.1. Reducing risk factors.
    - 2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and
    - 2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.
  - 2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.
- 2.7. School Based Vaccination Clinics
  - 2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:
    - 2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.
    - 2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.
    - 2.7.1.3. Distribute state-supplied promotional vaccination materials.
    - 2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardians prior to administration of vaccines in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.
    - 2.7.1.5. Request the NH Immunization Program (NHIP) to store consent forms once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination consent forms within HIPAA guidelines.

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- 2.7.1.6. Document, verify and store written or electronic record of vaccine administration in compliance with HIPAA and other state and federal regulations.
- 2.7.1.7. Request the NHIP to store written or electronic records of vaccine administration once the Contractor completes data collection and reporting only if the Contractor lacks the ability to store vaccination records within HIPAA guidelines.
- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to the parent and/or legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient’s primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care providers. The Contractor shall ensure information includes:
  - 2.7.1.9.1. Patient full name and one other unique patient identifier;
  - 2.7.1.9.2. Vaccine name;
  - 2.7.1.9.3. Vaccine manufacturer;
  - 2.7.1.9.4. Lot number;
  - 2.7.1.9.5. Date of vaccine expiration
  - 2.7.1.9.6. Date of vaccine administration;
  - 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
  - 2.7.1.9.8. Edition date of the VIS given;
  - 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor’s name); and
  - 2.7.1.9.10. Full name and title of the individual who administered the vaccine.
- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian, and/or

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parent is provided access to the information on the day of vaccination.

- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in session school days.
- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise through providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director is able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.
    - 2.7.2.6.5. Non-latex bandages.
- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
  - 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP, annually, ensuring all listed requirements are met.

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- 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
- 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
- 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.
- 2.7.3.5. Utilize NHIP training materials or other educational materials, as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
- 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
- 2.7.3.7. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
- 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
- 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
- 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
- 2.7.3.11. Account for every dose of vaccine.
- 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
- 2.7.3.13. Notify NHIP by contacting the NHIP Nursing helpline and faxing incident forms of any adverse event within 24 hours of event occurring.
- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturers recommended temperatures, the Contractor shall:

2.7.3.14.1. Immediately quarantine the vaccine in an appropriate temperature setting,

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- 2.7.4.5.4. Discussions relative to future strategies and plans for increasing students vaccinated, including suggestions on how state-level resources may aid in the effort.
- 2.7.5. The Contractor shall be funded through a combination of base funding and incentivized funding, in order to encourage the Contractor to offer vaccination at schools that have a greater economic disparity, as identified through reports generated by the NHIP in collaboration with the Department of Education (DOE).
- 2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:
  - 2.7.6.1. If the Contractor is unable to provide vaccine to at least 50% of the schools listed, the Contractor may show evidence of providing vaccine to additional schools listed but not previously served the year before in order to receive full funding.
  - 2.7.6.2. If NHIP and the Contractor agree that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.
  - 2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 2.7, funding will be awarded on a sliding scale based on the percentage of schools listed, calculated as follows:
    - 2.7.6.3.1. The percentage of listed school covered divided by 50%.
    - 2.7.6.3.2. The percentage determined by the equation above will be multiplied by the total amount of dollars available for funding, beyond the base portion of funding, for a total of dollars awarded for that year.
- 2.8. Contract Administration and Leadership
  - 2.8.1. The Contactor shall introduce and orient all funded staff to the work of activities conducted through the contract agreement. The Contractor shall:
    - 2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

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- 2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.
- 2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
- 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
- 2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

**2.9. I-CARE Program:**

- 2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
- 2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.
- 2.9.3. The Contractor shall ensure activities in the work plan support:
  - 2.9.3.1. The I-CARE NH mental health and wellness initiative;
  - 2.9.3.2. 9-8-8 National Suicide Prevention lifeline expansion project; and/or
  - 2.9.3.3. NH's Suicide Prevention Council's strategic plan.
- 2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.
- 2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of the contract effective date.

**3. Training and Technical Assistance Requirements**

- 3.1. The Contractor shall participate in training and technical assistance as follows:
  - 3.1.1. Public Health Advisory Council
    - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by Department's DPHS and/or BDAS.
    - 3.1.1.2. Complete a technical assistance needs assessment.
  - 3.1.2. Public Health Emergency Preparedness

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- 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department’s DPHS and/or Emergency Services Unit (ESU).
- 3.1.2.2. Complete a technical assistance needs assessment.
- 3.1.2.3. Attend a maximum of two trainings per year offered by Department’s DPHS and/or ESU or the agency contracted by the Department’s DPHS to provide training programs.
- 3.1.3. Substance Misuse Prevention
  - 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
  - 3.1.3.2. At the Department’s request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including, but not limited to:
    - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
    - 3.1.3.2.2. Using appropriate measures and tools.
  - 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
  - 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
  - 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
  - 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and
    - 3.1.4.1.5. Development.

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- 3.1.4.2. Be familiar with RROSC and NH DHHS CoC systems development and the “No Wrong Door” approach to systems integration.
- 3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.
- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics

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- 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with a current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
- 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and status, and current BLS certificate shall be retained in the training file.

**4. Staffing**

- 4.1. The Contractor’s staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN’s efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

**5. Reporting**

Mid-State Health Center

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Contractor Initials

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- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department's DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide Reports for the PHAC that include, but are not limited to, submitting quarterly PHAC progress reports using an online system administered by the Department's DPHS.
- 5.3. The Contractor shall provide Reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.3.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.3.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to plans are approved by the Department's BDAS.
  - 5.3.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.3.4. Inputting data on a monthly basis by the 20th business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes but is not limited to:
    - 5.3.4.1. Number of individuals served or reached.
    - 5.3.4.2. Demographics.
    - 5.3.4.3. Strategies and activities per IOM by the six (6) activity types.
    - 5.3.4.4. Dollar Amount and type of funds used in the implementation of strategies and/or interventions.
    - 5.3.4.5. Percentage evidence based strategies.
  - 5.3.5. Submitting annual reports.
  - 5.3.6. Providing additional reports or data as required by the Department.

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- 5.3.7. Participating and administering the Regional SMP Stakeholder Survey in alternate years.
- 5.4. The Contractor shall provide Reports for Continuum of Care that include, but are not limited to:
  - 5.4.1. Submitting update on regional assets and gaps assessments, as required.
  - 5.4.2. Submitting updates on regional CoC development plans, as indicated.
  - 5.4.3. Submitting quarterly reports ,as indicated.
  - 5.4.4. Submitting year-end reports, as indicated.
- 5.5. The Contractor shall provide reports for Young Adult Strategies that include but are not limited to:
  - 5.5.1. Inputting data on a monthly basis to an online database as required by the Department.
  - 5.5.2. Ensuring the data includes but is not limited to:
    - 5.5.2.1. Number of individuals served.
    - 5.5.2.2. Demographics of individuals served.
    - 5.5.2.3. Types of strategies or interventions implemented.
    - 5.5.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
  - 5.5.3. Meeting with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.
- 5.6. The Contractor shall provide reports for School-Based Vaccination Clinics that include but are not limited to:
  - 5.6.1. Attending annual debriefing and planning meetings with NHIP staff.
  - 5.6.2. Completing a year-end summary of:
    - 5.6.2.1. The total numbers of children vaccinated; and
    - 5.6.2.2. Accomplishments and improvements to future school-based clinics.
  - 5.6.3. Providing aggregated data, by school for each school, to the NHIP no later than 3 months after SBCs are concluded, that include:
    - 5.6.3.1. Number of students at that school;
    - 5.6.3.2. Number of students vaccinated out of the total number at that school; and
    - 5.6.3.3. Number of vaccinated students on Medicaid out of the total number at that school.
  - 5.6.4. Provide other reports and updates as requested by NHIP.

**6. Performance Measures**

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- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the DHHS, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision or mission statements/
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
    - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
    - 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
    - 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
  - 6.1.3. Substance Misuse Prevention
    - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
      - 6.1.3.1.1. 30-day alcohol use;
      - 6.1.3.1.2. 30-day marijuana use;
      - 6.1.3.1.3. 30-day illegal drug use;
      - 6.1.3.1.4. Illicit drug use other than marijuana;

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- 6.1.3.1.5. 30-day nonmedical use of pain relievers;
- 6.1.3.1.6. Life time heroin use;
- 6.1.3.1.7. Binge Drinking; and
- 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
- 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
  - 6.1.3.2.1. Perception of risk from alcohol use;
  - 6.1.3.2.2. Perception of risk from marijuana use;
  - 6.1.3.2.3. Perception of risk from illegal drug use;
  - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
  - 6.1.3.2.5. Perception of risk from binge drinking;
  - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
  - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.
- 6.1.4. Continuum of Care
  - 6.1.4.1. Evidence of ongoing update of regional substance use services assets and gaps assessment.
  - 6.1.4.2. Evidence of ongoing update of regional CoC development plan.
  - 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
  - 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:
    - 6.1.4.4.1. Health;
    - 6.1.4.4.2. Safety;
    - 6.1.4.4.3. Education;
    - 6.1.4.4.4. Government; and
    - 6.1.4.4.5. Business.

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- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or are affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to
- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.
- 6.1.6. School-Based Vaccination Clinics
  - 6.1.6.1. Annual increase in the percentage of students receiving seasonal influenza vaccination in school-based clinics.
  - 6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.
  - 6.1.6.3. Maintain vaccine wastage below 5%.

DS  
PM

Vendor Name: Mid-State Health Center  
 Contract Name: Regional Public Health Network Services  
 Region: Central NH

Program Name and Funding Amounts

State Fiscal Year	COVID-19 Vaccination	FEMA Vaccination	I-Care	Flu Vaccination	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps	Substance Misuse Prevention	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment	Hepatitis A Vaccination Clinics
2019					\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200	\$ 10,000
2020					\$ 30,000	\$ 83,600	\$ 50,000	\$ 900	\$ 78,453	\$ 40,098	\$ 90,000	\$ 15,000	\$ 11,953	\$ 10,000
2021	\$ 25,000	\$ 200,000		\$ 10,000	\$ 30,000	\$ 83,600		\$ 900	\$ 78,453	\$ 40,098	\$ 90,000	\$ 13,087	\$ 8,018	\$ -
2022			\$ 8,000		\$ 30,000	\$ 83,600		\$ 10,000	\$ 78,453	\$ 40,098	\$ 80,000	\$ 15,000		\$ -
													<b>Total</b>	<b>\$ 1,345,529</b>

DS  
 PM  
 Contractor Initials: \_\_\_\_\_

Exhibit B-12, Amendment 8

New Hampshire Department of Health and Human Services

Contractor Name: Mid-State Health Center

Budget Request for: Medical Reserve Corps (MRC)

Project Title

Budget Period: SFY 22 (7/1/2021 - 6/30/2022)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 4,203.52		\$ 4,203.52	\$ -	\$ -	\$ -	\$ 4,203.52		\$ 4,203.52
2. Employee Benefits	\$ 966.81		\$ 966.81	\$ -	\$ -	\$ -	\$ 966.81		\$ 966.81
3. Consultants			\$ -	\$ -	\$ -	\$ -			\$ -
4. Equipment:	\$ 800.00		\$ 800.00	\$ -	\$ -	\$ -	\$ 800.00		\$ 800.00
Rental	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Repair and Maintenance	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Purchase/Depreciation	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
5. Supplies:	\$ 100.00		\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00		\$ 100.00
Educational	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Lab	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Pharmacy	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Medical	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Office	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
6. Travel	\$ 1,817.67		\$ 1,817.67	\$ -	\$ -	\$ -	\$ 1,817.67		\$ 1,817.67
7. Occupancy	\$ 1,000.00		\$ 1,000.00	\$ -	\$ -	\$ -	\$ 1,000.00		\$ 1,000.00
8. Current Expenses	\$ 200.00		\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00		\$ 200.00
Telephone	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Postage	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Subscriptions	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Audit and Legal	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Insurance	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Board Expenses	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
9. Software	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
10. Marketing/Communications	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
11. Staff Education and Training	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00		\$ 1.00
12. Subcontracts/Agreements	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00		\$ 1.00
13. indirect		\$ 909.00	\$ 909.00					\$ 909.00	\$ 909.00
14. Other (meetings)	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00		\$ 1.00
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
<b>TOTAL</b>	<b>\$ 9,091.00</b>	<b>\$ 909.00</b>	<b>\$ 10,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 9,091.00</b>	<b>\$ 909.00</b>	<b>\$ 10,000.00</b>

Indirect As A Percent of Direct

10.0%

10.0%

DS  
 PM

Contractor Initials

Date 5/28/2021

Exhibit B-13, Amendment 8

New Hampshire Department of Health and Human Services

Contractor Name: Mid-State Health Center

Budget Request for: Immunization (SBC)

Project Title

Budget Period: SFY 22 (7/1/2021 - 6/30/2022)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 9,195.20		\$ 9,195.20	\$ -	\$ -	\$ 9,195.20	\$ -	\$ 9,195.20	\$ 9,195.20
2. Employee Benefits	\$ 1,510.64		\$ 1,510.64	\$ -	\$ -	\$ 1,510.64	\$ -	\$ 1,510.64	\$ 1,510.64
3. Consultants			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ 1.00	\$ -	\$ 1.00	\$ 1.00
Rental	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ 289.16		\$ 289.16	\$ -	\$ -	\$ 289.16	\$ -	\$ 289.16	\$ 289.16
Educational	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ 650.00		\$ 650.00	\$ -	\$ -	\$ 650.00	\$ -	\$ 650.00	\$ 650.00
7. Occupancy	\$ 200.00		\$ 200.00	\$ -	\$ -	\$ 200.00	\$ -	\$ 200.00	\$ 200.00
8. Current Expenses	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ 1.00	\$ -	\$ 1.00	\$ 1.00
Telephone	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ 159.00		\$ 159.00	\$ -	\$ -	\$ 159.00	\$ -	\$ 159.00	\$ 159.00
12. Subcontracts/Agreements	\$ 1,630.00		\$ 1,630.00	\$ -	\$ -	\$ 1,630.00	\$ -	\$ 1,630.00	\$ 1,630.00
13. Indirect		\$ 1,363.00	\$ 1,363.00				\$ 1,363.00	\$ 1,363.00	
14. Other (meetings)	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ 1.00	\$ -	\$ 1.00	\$ 1.00
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 13,637.00</b>	<b>\$ 1,363.00</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 13,637.00</b>	<b>\$ 1,363.00</b>	<b>\$ 15,000.00</b>	<b>\$ -</b>

Indirect As A Percent of Direct

10.0%

10.0%

Exhibit B-14, Amendment 8

New Hampshire Department of Health and Human Services

Contractor Name: Mid-State Health Center

Budget Request for: PHN

Project Title

Budget Period: SFY 22 (7/1/2021 - 6/30/2022)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 54,908.48		\$ 54,908.48	\$ -	\$ -	\$ -	\$ 54,908.48		\$ 54,908.48
2. Employee Benefits	\$ 12,628.95		\$ 12,628.95	\$ -	\$ -	\$ -	\$ 12,628.95		\$ 12,628.95
3. Consultants			\$ -	\$ -	\$ -	\$ -			\$ -
4. Equipment:	\$ 3,125.00		\$ 3,125.00	\$ -	\$ -	\$ -	\$ 3,125.00		\$ 3,125.00
Rental	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Repair and Maintenance			\$ -	\$ -	\$ -	\$ -			\$ -
Purchase/Depreciation	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
5. Supplies:	\$ 200.00		\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00		\$ 200.00
Educational	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Lab	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Pharmacy	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Medical	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Office	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
6. Travel	\$ 2,254.57		\$ 2,254.57	\$ -	\$ -	\$ -	\$ 2,254.57		\$ 2,254.57
7. Occupancy	\$ 1,800.00		\$ 1,800.00	\$ -	\$ -	\$ -	\$ 1,800.00		\$ 1,800.00
8. Current Expenses	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Telephone	\$ 1,080.00		\$ 1,080.00	\$ -	\$ -	\$ -	\$ 1,080.00		\$ 1,080.00
Postage	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Subscriptions	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Audit and Legal	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
10. Marketing/Communications	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
11. Staff Education and Training	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00		\$ 1.00
12. Subcontracts/Agreements	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00		\$ 1.00
13. Indirect		\$ 7,600.00	\$ 7,600.00					\$ 7,600.00	\$ 7,600.00
14. Other (meetings)	\$ 1.00		\$ 1.00	\$ -	\$ -	\$ -	\$ 1.00		\$ 1.00
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
<b>TOTAL</b>	<b>\$ 76,000.00</b>	<b>\$ 7,600.00</b>	<b>\$ 83,600.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 76,000.00</b>	<b>\$ 7,600.00</b>	<b>\$ 83,600.00</b>

Indirect As A Percent of Direct

10.0%

10.0%

Exhibit B-15, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Mid-State Health Center

Budget Request for: Substance Misuse Prevention

Budget Period: 07/01/2021 - 06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -			\$ -			\$ -
2. Employee Benefits			\$ -			\$ -			\$ -
3. Consultants			\$ -			\$ -			\$ -
4. Equipment			\$ -			\$ -			\$ -
Rental			\$ -			\$ -			\$ -
Repair and Maintenance			\$ -			\$ -			\$ -
Purchase/Depreciation			\$ -			\$ -			\$ -
5. Supplies			\$ -			\$ -			\$ -
Educational			\$ -			\$ -			\$ -
Lab			\$ -			\$ -			\$ -
Pharmacy			\$ -			\$ -			\$ -
Medical			\$ -			\$ -			\$ -
Office			\$ -			\$ -			\$ -
6. Travel			\$ -			\$ -			\$ -
7. Occupancy			\$ -			\$ -			\$ -
8. Current Expenses			\$ -			\$ -			\$ -
Telephone			\$ -			\$ -			\$ -
Postage			\$ -			\$ -			\$ -
Subscriptions			\$ -			\$ -			\$ -
Audit and Legal			\$ -			\$ -			\$ -
Insurance			\$ -			\$ -			\$ -
Board Expenses			\$ -			\$ -			\$ -
9. Software			\$ -			\$ -			\$ -
10. Marketing/Communications			\$ -			\$ -			\$ -
11. Staff Education and Training			\$ -			\$ -			\$ -
12. Subcontracts/Agreements	\$ 261,220.00		\$ 261,220.00		\$ 186,502.00	\$ 186,502.00	\$ 74,718.00		\$ 74,718.00
13. Other (specific details mandatory)			\$ -			\$ -			\$ -
translator			\$ -			\$ -			\$ -
indirect - de minimis	\$ -	\$ 12,086.00	\$ 12,086.00	\$ -	\$ 8,351.00	\$ 8,351.00	\$ -	\$ 3,735.00	\$ 3,735.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 261,220.00</b>	<b>\$ 12,086.00</b>	<b>\$ 273,306.00</b>	<b>\$ -</b>	<b>\$ 194,853.00</b>	<b>\$ 194,853.00</b>	<b>\$ 74,718.00</b>	<b>\$ 3,735.00</b>	<b>\$ 78,453.00</b>

Indirect As A Percent of Direct 4.6%

Vendor Initials DS  
PM

Date 5/28/2021

Exhibit B-16, Amendment 8

New Hampshire Department of Health and Human Services

Bidder/Program Name: Mid-State Health Center

Budget Request for: Young Adult Strategies

Budget Period: 07/01/2021 - 06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -			\$ -			\$ -
2. Employee Benefits			\$ -			\$ -			\$ -
3. Consultants			\$ -			\$ -			\$ -
4. Equipment			\$ -			\$ -			\$ -
Rental			\$ -			\$ -			\$ -
Repair and Maintenance			\$ -			\$ -			\$ -
Purchase/Depreciation			\$ -			\$ -			\$ -
5. Supplies:			\$ -			\$ -			\$ -
Educational			\$ -			\$ -			\$ -
Lab			\$ -			\$ -			\$ -
Pharmacy			\$ -			\$ -			\$ -
Medical			\$ -			\$ -			\$ -
Office			\$ -			\$ -			\$ -
6. Travel			\$ -			\$ -			\$ -
7. Occupancy			\$ -			\$ -			\$ -
8. Current Expenses			\$ -			\$ -			\$ -
Telephone			\$ -			\$ -			\$ -
Postage			\$ -			\$ -			\$ -
Subscriptions			\$ -			\$ -			\$ -
Audit and Legal			\$ -			\$ -			\$ -
Insurance			\$ -			\$ -			\$ -
Board Expenses			\$ -			\$ -			\$ -
9. Software			\$ -			\$ -			\$ -
10. Marketing/Communications			\$ -			\$ -			\$ -
11. Staff Education and Training			\$ -			\$ -			\$ -
12. Subcontracts/Agreements	\$ 115,900.00		\$ 115,900.00	\$ 35,900.00		\$ 35,900.00	\$ 80,000.00		\$ 80,000.00
13. Other (specify details mandatorily)			\$ -			\$ -			\$ -
translator			\$ -			\$ -			\$ -
indirect	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 115,900.00</b>	<b>\$ -</b>	<b>\$ 115,900.00</b>	<b>\$ 35,900.00</b>	<b>\$ -</b>	<b>\$ 35,900.00</b>	<b>\$ 80,000.00</b>	<b>\$ -</b>	<b>\$ 80,000.00</b>

Indirect As A Percent of Direct

0.0%

DS  
 PM  
 Vendor Initials

Date 5/28/2021

New Hampshire Department of Health and Human Services

Bidder/Program Name: Mid-State Health Center

Budget Request for: Continuum of Care

Budget Period: 07/01/2021 - 06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -			\$ -			\$ -
2. Employee Benefits			\$ -			\$ -			\$ -
3. Consultants			\$ -			\$ -			\$ -
4. Equipment:			\$ -			\$ -			\$ -
Rental			\$ -			\$ -			\$ -
Repair and Maintenance			\$ -			\$ -			\$ -
Purchase/Depreciation			\$ -			\$ -			\$ -
5. Supplies			\$ -			\$ -			\$ -
Educational			\$ -			\$ -			\$ -
Lab			\$ -			\$ -			\$ -
Pharmacy			\$ -			\$ -			\$ -
Medical			\$ -			\$ -			\$ -
Office			\$ -			\$ -			\$ -
6. Travel			\$ -			\$ -			\$ -
7. Occupancy			\$ -			\$ -			\$ -
8. Current Expenses			\$ -			\$ -			\$ -
Telephone			\$ -			\$ -			\$ -
Postage			\$ -			\$ -			\$ -
Subscriptions			\$ -			\$ -			\$ -
Audit and Legal			\$ -			\$ -			\$ -
Insurance			\$ -			\$ -			\$ -
Board Expenses			\$ -			\$ -			\$ -
9. Software			\$ -			\$ -			\$ -
10. Marketing/Communications			\$ -			\$ -			\$ -
11. Staff Education and Training			\$ -			\$ -			\$ -
12. Subcontracts/Agreements	\$ 115,900.00		\$ 115,900.00	\$ 77,711.00		\$ 77,711.00	\$ 38,189.00		\$ 38,189.00
13. Other (specify details mandatorily)			\$ -			\$ -			\$ -
translator			\$ -			\$ -			\$ -
indirect	\$ -	\$ 12,086.00	\$ 12,086.00	\$ -	\$ 10,177.00	\$ 10,177.00	\$ -	\$ 1,909.00	\$ 1,909.00
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 115,900.00</b>	<b>\$ 12,086.00</b>	<b>\$ 127,986.00</b>	<b>\$ 77,711.00</b>	<b>\$ 10,177.00</b>	<b>\$ 87,888.00</b>	<b>\$ 38,189.00</b>	<b>\$ 1,909.00</b>	<b>\$ 40,098.00</b>

Indirect As A Percent of Direct 10.4%

Exhibit B-18, Amendment 8

**New Hampshire Department of Health and Human Services**

Bidder/Program Name: Mid-State Health Center

Budget Request for: PHAC

Budget Period: 07/01/2021 - 06/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages			\$ -			\$ -			\$ -
2. Employee Benefits			\$ -			\$ -			\$ -
3. Consultants			\$ -			\$ -			\$ -
4. Equipment:			\$ -			\$ -			\$ -
Rental			\$ -			\$ -			\$ -
Repair and Maintenance			\$ -			\$ -			\$ -
Purchase/Depreciation			\$ -			\$ -			\$ -
5. Supplies:			\$ -			\$ -			\$ -
Educational			\$ -			\$ -			\$ -
Lab			\$ -			\$ -			\$ -
Pharmacy			\$ -			\$ -			\$ -
Medical			\$ -			\$ -			\$ -
Office			\$ -			\$ -			\$ -
6. Travel			\$ -			\$ -			\$ -
7. Occupancy			\$ -			\$ -			\$ -
8. Current Expenses			\$ -			\$ -			\$ -
Telephone			\$ -			\$ -			\$ -
Postage			\$ -			\$ -			\$ -
Subscriptions			\$ -			\$ -			\$ -
Audit and Legal			\$ -			\$ -			\$ -
Insurance			\$ -			\$ -			\$ -
Board Expenses			\$ -			\$ -			\$ -
9. Software			\$ -			\$ -			\$ -
10. Marketing/Communications			\$ -			\$ -			\$ -
11. Staff Education and Training			\$ -			\$ -			\$ -
12. Subcontracts/Agreements	\$ 192,160.00		\$ 192,160.00	\$ 178,523.64		\$ 178,523.64	\$ 13,636.36		\$ 13,636.36
13. Other (specific details mandatory)			\$ -			\$ -			\$ -
translator indirect	\$ -	\$ 19,216.00	\$ 19,216.00	\$ -	\$ 17,852.36	\$ 17,852.36	\$ -	\$ 1,363.64	\$ 1,363.64
<b>TOTAL</b>	<b>\$ 192,160.00</b>	<b>\$ 19,216.00</b>	<b>\$ 211,376.00</b>	<b>\$ 178,523.64</b>	<b>\$ 17,852.36</b>	<b>\$ 196,376.00</b>	<b>\$ 13,636.36</b>	<b>\$ 1,363.64</b>	<b>\$ 15,000.00</b>

Indirect As A Percent of Direct

10.0%

DS  
 PM  
 Vendor Initials

Date 5/28/2021

Exhibit B-19, Amendment 8

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

Contractor Name: Mid-State Health Center

Budget Request for: Central NH PHN - COVID: Homebound & 12 & older

Project Title

Budget Period: FY2021 (through June 30, 2021)

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Employee Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Consultants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
7. Occupancy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
8. Current Expenses:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 181,818.00	\$ -	\$ 181,818.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
13. Other (specify details in explanatory)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
de minimis indirect rate	\$ -	\$ 18,182.00	\$ 18,182.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 181,818.00</b>	<b>\$ 18,182.00</b>	<b>\$ 200,000.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

Indirect As A Percent of Direct

10.0%

# State of New Hampshire

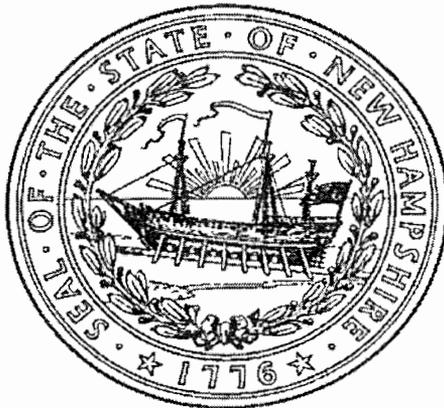
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that MID-STATE HEALTH CENTER is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on January 09, 1998. 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: **285492**

Certificate Number: **0005053392**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 9th day of December A.D. 2020.

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

William M. Gardner  
Secretary of State

## Filing History

 [Back to Home \(/online\)](#)

<b>Business Name</b>	<b>Business ID</b>
Mid-State Health Center	285492

Filing#	Filing Date	Effective Date	Filing Type	Annual Report Year
0005053391	12/09/2020	12/09/2020	Nonprofit Report	2020
0004768788	01/16/2020	01/16/2020	Annual Report Reminder	N/A
0004195415	10/09/2018	10/09/2018	Change of Officer/Director	N/A
0004192166	10/02/2018	10/02/2018	Change of Officer/Director	N/A
0003290780	02/29/2016	02/29/2016	Reinstatement	N/A
0003199268	01/01/2016	01/01/2016	Admin Dissolution/Suspension	N/A
0001059277	11/11/2010	11/11/2010	Annual Report	2010
0001059276	10/08/2010	10/08/2010	Reminder Letter	N/A
0001059275	11/28/2005	11/28/2005	Annual Report	2005
0001059274	09/02/2005	09/02/2005	Amendment	N/A
0001059273	11/15/2004	11/15/2004	Amendment	N/A
0001059272	04/06/2000	04/06/2000	Annual Report	2000
0001059271	01/09/1998	01/09/1998	Business Formation	N/A

Page 1 of 1, records 1 to 13 of 13

[Back](#)

311 Department of State, 107 North Main St., Room 205, Concord, NH 03301 - [Contact Us \(/online/Home/ContactUS\)](#)

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**CERTIFICATE OF AUTHORITY**

I, Carina Park, hereby certify that:

(Name of the elected Officer of the Corporation/LLC; cannot be contract signatory)

1. I am a duly elected Clerk/Secretary/Officer of Mid-State Health Center.  
(Corporation/LLC Name)

2. The following is a true copy of a vote taken at a meeting of the Board of Directors/shareholders, duly called and held on May 25 2021, at which a quorum of the Directors/shareholders were present and voting.  
(Date)

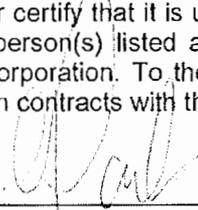
**VOTED:** That Robert MacLeod, (may list more than one person)  
(Name and Title of Contract Signatory)

is duly authorized on behalf of Mid-State Health Center to enter into contracts or agreements with the State  
(Name of Corporation/ LLC)

of New Hampshire and any of its agencies or departments and further is authorized to execute any and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

3. I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract/contract amendment to which this certificate is attached. This authority **remains valid for thirty (30) days** from the date of this Certificate of Authority. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

Dated: 5/26/21

  
\_\_\_\_\_  
Signature of Elected Officer  
Name: Carina Park  
Title: Board of Directors Secretary

# CERTIFICATE OF LIABILITY INSURANCE

**Date:**

10/01/20

**Administrator:**  
 New England Special Risks, Inc.  
 60 Prospect St.  
 Sherborn, Ma. 01770  
 Phone: (508) 561-6111

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.

### INSURERS AFFORDING COVERAGE

**Insured:**  
 Mid-State Health Center  
 101 Boulder Point Dr.- Suite 1  
 Plymouth, NH. 03264

Insurer A:	Medical Protective Insurance Co.
Insurer B:	AIM Mutual Insurance Co.
Insurer C:	
Insurer D:	
Insurer E:	

### Coverages

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 the 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, aggregate limits shown may have been reduced by paid claims.

INS. LTR.	TYPE OF INSURANCE	POLICY NUMBER	Policy Effective Date	Policy Expiration Date	LIMITS
A	<b>General Liability</b>	HN 030313	10/1/2020	10/1/2021	Each Occurrence \$ 1,000,000
	<input checked="" type="checkbox"/> Commercial General Liability				Fire Damage (Any one fire) \$ 50,000
	<input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occurrence				Med Exp (Any one person) \$ 5,000
	<input type="checkbox"/>				Personal & Adv Injury \$ 1,000,000
	<input type="checkbox"/>				General Aggregate \$ 3,000,000
	General Aggregate Limit Applies Per:				Products - Comp/Op Agg \$ 1,000,000
	<input checked="" type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> Loc				
	<b>Automobile Liability</b>				Combined Single Limit (Each accident) \$
	<input type="checkbox"/> Any Auto				Bodily Injury (Per person) \$
	<input type="checkbox"/> All Owned Autos				Bodily Injury (Per accident) \$
	<input type="checkbox"/> Scheduled Autos				Property Damage (Per accident) \$
	<input type="checkbox"/> Hired Autos				
	<b>Garage Liability</b>				Auto Only - Ea. Accident \$
	<input type="checkbox"/> Any Auto				Other Than Ea. Acc \$
	<input type="checkbox"/>				Auto Only: Agg \$
	<b>Excess Liability</b>				Each Occurrence \$
	<input type="checkbox"/> Occurrence <input type="checkbox"/> Claims Made				Aggregate \$
	<input type="checkbox"/> Deductible				\$
	<input type="checkbox"/> Retention \$				\$
					\$
B	<b>Workers Compensation and Employers' Liability</b>	ECC-4000079	10/1/2020	10/1/2021	<input checked="" type="checkbox"/> Statutory Limits <input type="checkbox"/> Other
	E.L. Each Accident \$ 500,000				
	E.L. Disease-Ea. Employee \$ 500,000				
	E.L. Disease - Policy Limit \$ 500,000				
A	<b>Medical Professional Liability</b>	HN 030313	10/1/2020	10/1/2021	\$1,000,000 Per Claim \$3,000,000 Aggregate

### Description of operations/vehicles/exclusions added by endorsement/special provision

Evidence of Current Liability and Worker Compensation Coverage for the Insured and its Employees Kelley Watkins APRN, Kelly Perry APRN and Amy McCormack APRN.

### Certificate Holder

State of New Hampshire  
 Dept. of Health and Human Services  
 129 Pleasant St.  
 Concord, NH. 03301

Should any of the above policies be canceled before the expiration date thereof, the issuing insurer will endeavor to mail 10 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

Authorized Representative





*Where your care comes together.*

Family, Internal and Pediatric Medicine • Behavioral Health • Dental Care

[midstatehealth.org](http://midstatehealth.org)

**Mission Statement:** Mid-State Health Center provides sound primary medical care to the community, accessible to all regardless of the ability to pay.

---

**Plymouth Office:** 101 Boulder Point Drive • PH (603) 536-4000 • FAX (603) 536-4001  
**Bristol Office:** 100 Robie Road • PH (603) 744-6200 • FAX (603) 744-9024  
**Mailing Address:** 101 Boulder Point Drive • Suite 1 • Plymouth, NH 03264

**MID-STATE HEALTH CENTER  
AND SUBSIDIARY**

**Consolidated Financial Statements**

As of and for the Years Ended  
June 30, 2020 and 2019

**Supplemental Schedule of Expenditures of Federal Awards**

For the Year Ended June 30, 2020

**and**

**Independent Auditors' Report**



# MID-STATE HEALTH CENTER AND SUBSIDIARY

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As of and for the Years Ended June 30, 2020 and 2019

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TYLER, SIMMS & ST. SAUVEUR, CPAs, P.C.  
Certified Public Accountants & Business Consultants

## Independent Auditors' Report

To the Board of Trustees of  
Mid-State Health Center and Subsidiary:

### *Report on the Consolidated Financial Statements*

We have audited the accompanying consolidated financial statements of Mid-State Health Center and Subsidiary, which comprise the consolidated statements of financial position as of June 30, 2020 and 2019, and the related consolidated statements of operations and changes in net assets, functional expenses and cash flows for the years 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 audits. We conducted our audits 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 from 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 Organization'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 Organization'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 Mid-State Health Center and Subsidiary as of June 30, 2020 and 2019, and the results of their operations, changes in net assets and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Emphasis of Matter***

Change in Accounting Principle

As discussed in Note 1 to the consolidated financial statements, in 2020 the Organization adopted Accounting Standards (ASU) 2018-08, *Clarifying the Scope and Accounting Guidance for Contributions Received and Contributions Made*. Our opinion is not modified with respect to this matter.

***Other Matters***

*Supplementary Information*

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying Schedule of Expenditures of Federal Awards, as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. The consolidating information is also presented on pages 29-32 for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of the Organization's 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 as a whole.

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated November 5, 2020, on our consideration of the Organization's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control over financial reporting and compliance.

*Tyler, Lemus and St. Laurent, CPAs, P.C.*

Lebanon, New Hampshire  
November 5, 2020

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statements of Financial Position**  
As of June 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<b>Assets</b>		
Current assets		
Cash and cash equivalents	\$ 3,823,909	\$ 1,764,253
Restricted cash	78,578	69,659
Patient accounts receivable, net	646,271	570,448
Estimated third-party settlements	23,973	88,708
Contracts and grants receivable	497,965	475,746
Prepaid expenses and other receivables	507,837	379,974
Total current assets	<u>5,578,533</u>	<u>3,348,788</u>
Long-term assets		
Property and equipment, net	5,978,859	5,832,126
Other assets	42,182	18,263
Total long-term assets	<u>6,021,041</u>	<u>5,850,389</u>
Total assets	<u>\$ 11,599,574</u>	<u>\$ 9,199,177</u>
<b>Liabilities and net assets</b>		
Current liabilities		
Accounts payable	\$ 329,626	\$ 204,907
Accrued expenses and other current liabilities	67,962	66,462
Accrued payroll and related expenses	532,848	374,802
Accrued earned time	429,059	308,765
Refundable advance	578,105	-
Short-term note payable	484,000	-
Current portion of long-term debt	176,509	160,374
Current portion of capital lease obligations	-	591
Total current liabilities	<u>2,598,109</u>	<u>1,115,901</u>
Long-term liabilities		
Long-term debt, less current portion	<u>5,376,892</u>	<u>4,195,066</u>
Total long-term liabilities	<u>5,376,892</u>	<u>4,195,066</u>
Total liabilities	<u>7,975,001</u>	<u>5,310,967</u>
Commitments and contingencies (See Notes)		
Net assets without donor restrictions	<u>3,624,573</u>	<u>3,888,210</u>
Total liabilities and net assets	<u>\$ 11,599,574</u>	<u>\$ 9,199,177</u>

The accompanying notes to financial statements are an integral part of these statements.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statements of Operations and Changes in Net Assets**  
For the Years Ended June 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<b>Changes in net assets without donor restrictions</b>		
Revenue, gains and other support		
Patient service revenue (net of contractual allowances and discounts)	\$ 7,320,685	\$ 6,721,349
Provision for uncollectible accounts	275,111	241,053
Net patient service revenue	<u>7,045,574</u>	<u>6,480,296</u>
Contracts and grants	2,707,753	2,464,156
Contributions	17,788	13,987
Other operating revenue	2,201,021	1,834,609
Total revenue, gains and other support	<u>11,972,136</u>	<u>10,793,048</u>
Expenses		
Salaries and wages	7,270,657	6,115,133
Employee benefits	1,568,194	1,378,376
Insurance	54,511	33,090
Professional fees	1,153,554	939,846
Supplies and expenses	1,694,199	1,472,424
Depreciation and amortization	301,808	306,383
Interest expense	192,850	203,408
Total expenses	<u>12,235,773</u>	<u>10,448,660</u>
Change in net assets without donor restrictions	(263,637)	344,388
<b>Net assets without donor restrictions, beginning of year</b>	<u>3,888,210</u>	<u>3,543,822</u>
<b>Net assets without donor restrictions, end of year</b>	<u>\$ 3,624,573</u>	<u>\$ 3,888,210</u>

The accompanying notes to financial statements are an integral part of these statements.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statement of Functional Expenses**  
For the Year Ended June 30, 2020

	Program Services					Supporting Services			Total Expenses
	Medical	Dental	Behavioral Health	Emergency Prep.	Montessori Center	Total Program Service	Admin and General	Fundraising	
Salaries and wages	\$ 4,190,371	\$ 694,205	\$ 815,564	\$ 94,716	\$ 185,738	\$ 5,980,594	\$ 1,268,455	\$ 21,608	\$ 7,270,657
Employee benefits	961,559	158,116	235,976	16,056	48,148	1,419,855	143,928	4,412	1,568,194
Insurance	30,240	876	3,691	-	1,297	36,104	18,407	-	54,511
Professional fees	749,364	9,594	111,113	199,114	-	1,069,185	84,369	-	1,153,554
Supplies and expenses	1,143,430	126,020	143,073	22,981	53,693	1,489,197	205,002	-	1,694,199
Depreciation and amortization	205,100	41,749	43,997	-	1,466	292,312	9,496	-	301,808
Interest expense	142,764	18,878	23,316	-	-	184,958	7,892	-	192,850
Total expenses	<u>\$ 7,422,828</u>	<u>\$ 1,049,438</u>	<u>\$ 1,376,730</u>	<u>\$ 332,867</u>	<u>\$ 290,342</u>	<u>\$ 10,472,205</u>	<u>\$ 1,737,549</u>	<u>\$ 26,020</u>	<u>\$ 12,235,773</u>

The accompanying notes to financial statements are an integral part of these statements

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidated Statement of Functional Expenses**  
For the Year Ended June 30, 2019

	Program Services					Supporting Services			Total Expenses
	Medical	Dental	Behavioral Health	Emergency Prep.	Montessori Center	Total Program Service	Admin and General	Fundraising	
Salaries and wages	\$ 3,573,331	\$ 396,792	\$ 756,610	\$ 60,951	\$ 169,102	\$ 4,956,786	\$ 1,138,041	\$ 20,307	\$ 6,115,134
Employee benefits	822,119	113,606	210,897	14,304	46,585	1,207,511	166,662	4,202	1,378,375
Insurance	14,794	288	1,909	4,000	977	21,968	11,123	-	33,091
Professional fees	525,174	48,356	68,799	216,416	-	858,745	81,101	-	939,846
Supplies and expenses	1,099,113	120,679	93,303	9,755	12,712	1,335,562	136,861	-	1,472,423
Depreciation and amortization	233,417	42,663	19,599	-	1,758	297,437	8,946	-	306,383
Interest expense	164,255	17,982	12,787	-	-	195,024	8,384	-	203,408
Total expenses	<u>\$ 6,432,203</u>	<u>\$ 740,366</u>	<u>\$ 1,163,904</u>	<u>\$ 305,426</u>	<u>\$ 231,134</u>	<u>\$ 8,873,033</u>	<u>\$ 1,551,118</u>	<u>\$ 24,509</u>	<u>\$ 10,448,660</u>

The accompanying notes to financial statements are an integral part of these statements

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Consolidated Statements of Cash Flows**

For the Years Ended June 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<b>Cash flows from operating activities</b>		
Change in net assets	\$ (263,637)	\$ 344,388
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation and amortization	301,808	306,383
Amortization reflected as interest	(2,668)	2,668
Provision for uncollectible accounts	275,111	241,053
(Increase) decrease in the following assets:		
Patient accounts receivable	(350,934)	(128,302)
Estimated third-party settlements	64,735	9,640
Contracts and grants receivable	(22,219)	(183,814)
Prepaid expenses and other receivables	(127,863)	(22,441)
Other assets	(23,919)	(18,263)
Increase (decrease) in the following liabilities:		
Accounts payable	124,719	82,254
Accrued payroll and related expenses	158,046	24,166
Accrued earned time	120,294	(45,679)
Refundable advance	578,105	-
Accrued other expenses	1,500	(5,000)
Net cash provided by operating activities	<u>833,078</u>	<u>607,053</u>
<b>Cash flows from investing activities</b>		
Purchases of property and equipment	(353,541)	(116,041)
Net cash used in investing activities	<u>(353,541)</u>	<u>(116,041)</u>
<b>Cash flows from financing activities</b>		
Proceeds on short-term note payable	484,000	-
Proceeds on long-term debt	1,268,000	-
Payments on long-term debt	(162,371)	(156,402)
Payments on capital leases	(591)	(7,660)
Net cash provided by (used in) financing activities	<u>1,589,038</u>	<u>(164,062)</u>
Net increase in cash, cash equivalents and restricted cash	2,068,575	326,950
<b>Cash, cash equivalents and restricted cash, beginning of year</b>	<u>1,833,912</u>	<u>1,506,962</u>
<b>Cash, cash equivalents and restricted cash, end of year</b>	<u>\$ 3,902,487</u>	<u>\$ 1,833,912</u>

Cash, cash equivalents and restricted cash consisted of the following as of June 30:

	<u>2020</u>	<u>2019</u>
Cash and cash equivalents	\$ 3,823,909	\$ 1,764,253
Restricted cash	<u>78,578</u>	<u>69,659</u>
	<u>\$ 3,902,487</u>	<u>\$ 1,833,912</u>

The accompanying notes to financial statements are an integral part of these statements.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**

**Consolidated Statements of Cash Flows (continued)**

For the Years Ended June 30, 2020 and 2019

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**Supplemental Disclosures of Cash Flow Information**

	<u>2020</u>	<u>2019</u>
Cash payments for:		
Interest	\$ <u>195,518</u>	\$ <u>200,740</u>

**Supplemental Disclosures of Non-Cash Transactions**

During 2020, the Organization acquired land through the issuance of a long-term note payable in the amount of \$95,000.

The accompanying notes to financial statements are an integral part of these statements.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2020 and 2019

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#### 1. Summary of Significant Accounting Policies:

##### Organization

Mid-State Health Center (“MSHC”) is a Federally Qualified Health Center (FQHC) which provides health care to a large number of Medicare, Medicaid and charity care patients on an outpatient basis. MSHC maintains facilities in Plymouth and Bristol, New Hampshire.

The consolidated financial statements include the accounts of Mid-State Community Development Corporation (MSCDC), collectively, “the Organization”.

Effective September 23, 2010, the Organization was transferred a sole member interest in MSCDC, which owns the 19,500 square foot operating facility that was developed to house the Organization, providing medical services to the underserved community in the Plymouth, New Hampshire region.

During the year ended June 30, 2012, after having participated in a pilot program with the New Hampshire Citizens Health Initiative (NHCHI), the Organization was officially recognized as a medical home.

##### Basis of Statement Presentation

The consolidated financial statements are presented on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. The consolidated financial statements have been prepared consistent with the American Institute of Certified Public Accountants *Audit and Accounting Guide, Health Care Organizations* (Audit Guide). All significant intercompany transactions between MSHC and MSCDC have been eliminated in consolidation.

##### Accounting Pronouncements Adopted in the Current Year

Effective July 1, 2019, the Organization adopted ASU No. 2018-08, *Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. The ASU provides guidance on whether a receipt from a third-party resource provider should be accounted for as a contribution (nonreciprocal transaction) within the scope of Topic 958, *Not-for-Profit Entities*, or as an exchange (reciprocal) transaction. The Organization’s adoption of ASU 2018-08 has been applied on a modified prospective basis only to agreements that were not completed as of July 1, 2019.

##### Accounting Pronouncements Issued and Not Yet Adopted

In May 2014, the FASB issued ASU 2014-09, *Revenue from Contracts with Customers* (ASC 606). ASU 2014-09 affects any entity that either enters into contracts with customers to transfer goods or services or enters into contracts for the transfer of nonfinancial assets unless those contracts are within the scope of other standards. The core principle of the guidance in ASU 2014-09 is that an entity should recognize revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. The ASU is effective for the Organization’s consolidated financial statements as of and for the year ending June 30, 2021.

The FASB issued ASU No. 2016-02, *Leases*. The ASU, which becomes effective for the Organization’s consolidated financial statements as of and for the year ending June 30, 2022, requires the full obligation of long-term leases to be recorded as a liability with a corresponding right of use asset on the statement of financial position.

The Organization is evaluating the impact of these standards on its future financial statements.

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

As of and for the Years Ended June 30, 2020 and 2019

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#### **1. Summary of Significant Accounting Policies (continued):**

##### Classes of Net Assets

The Organization reports information regarding its consolidated financial position and activities to two classes of net assets; net assets without donor restrictions and net assets with donor restrictions.

- (1) Net Assets without Donor Restrictions – represent those resources for which there are no restrictions by donors as to their use. They are reflected on the financial statements as without donor restrictions.
- (2) Net Assets with Donor Restrictions – represent those resources, the uses of which have been restricted by donors to specific purposes or the passage of time and/or must remain intact, in perpetuity. The release from restrictions results from the satisfaction of the restricted purposes specified by the donor.

##### Estimates

The Organization uses estimates and assumptions in preparing financial statements in accordance with accounting principles generally accepted in the United States of America. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities and the reported revenues and expenses. Actual results could differ from those estimates.

##### Cash and Cash Equivalents

Cash and cash equivalents include demand deposits, petty cash funds and investments with a maturity of three months or less, and exclude amounts whose use is limited by Board designation or other arrangements under trust agreements or with third-party payors.

##### Cash in Excess of FDIC-Insured Limits

The Organization maintains its cash in bank deposit accounts which, at times, may exceed federally insured limits. Accounts are generally guaranteed by the Federal Deposit Insurance Corporation (FDIC) up to certain limits. The Organization has not experienced any losses in such accounts.

##### Receivables

Patient receivables are carried at their estimated collectible amounts. Patient credit is generally extended on a short-term basis; thus, patient receivables do not bear interest.

Patient receivables are periodically evaluated for collectability based on credit history and current financial condition. The Organization uses the allowance method to account for uncollectible accounts receivable.

##### Property and Equipment

Property and equipment acquisitions are recorded at cost. Property and equipment donated for Organization operations are recorded at fair value at the date of receipt. Expenditures for repairs and maintenance are expensed when incurred and betterments are capitalized.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2020 and 2019

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#### 1. Summary of Significant Accounting Policies (continued):

Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed on the straight-line method. Equipment under capital leases is amortized on the straight-line method over the life of the capital lease. Such amortization is included in depreciation and amortization in the financial statements.

Estimated useful lives are as follows:

	<u>YEARS</u>
Buildings	5 - 40
Leasehold improvements	5
Equipment	3 - 7
Furniture and fixtures	5 - 15
Capital leases	3 - 15

The Organization reviews the carrying value of property and equipment for impairment whenever events and circumstances indicate that the carrying value of an asset may not be recoverable from the estimated future cash flows expected to result from its use and eventual disposition. In cases where undiscounted expected future cash flows are less than carrying value, an impairment loss is recognized equal to an amount by which the carrying value exceeds the fair value of assets. The factors considered by management in performing this assessment include current operating results, trends and prospects, as well as the effects of obsolescence, demand, competition and other economic factors.

#### Contractual Arrangements with Third-Party Payors

The Medicare and Medicaid programs pay the Organization for services at predetermined rates by treatment. The Organization is reimbursed for Medicare cost reimbursable items at a tentative rate with final settlement determined after the submission of annual cost reports and audits thereof by the Medicare fiscal intermediary. Changes in Medicare and Medicaid programs or reduction of funding levels for programs could have an adverse effect on future amounts recognized as net patient service revenue.

The laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

The Organization also enters into preferred provider agreements with certain commercial insurance carriers. Payment arrangements to the Organization under these agreements include discounted charges and fee schedule payments.

#### Net Patient Service Revenue

Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors.

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

As of and for the Years Ended June 30, 2020 and 2019

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#### **1. Summary of Significant Accounting Policies (continued):**

##### Grant Revenue

The Organization recognizes support funded by grants determined to be exchange transactions as the Organization performs the contracted services or incurs outlays eligible for reimbursement under the grant agreements. Grant activities and outlays are subject to audit and acceptance by the granting agency and, as a result of such audit, adjustments could be required.

##### Contributions

Contributions are recognized at the earlier of when cash is received or at the time a pledge becomes unconditional in nature. Contributions are recorded in the net asset classes described earlier depending on the existence and/or nature of any donor restriction. When a restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets releases from restriction. Restricted contributions that are satisfied in the same reporting period are classified as net assets without donor restriction.

##### Charity Care

The Organization provides care to patients who meet certain criteria under its charity care policy with minimal charge or at amounts less than its established rates. Because the Organization does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

##### Income Taxes

MSHC and MSCDC are not-for-profit corporations as described in Section 501(c)(3) of the Internal Revenue Code (Code) and are exempt from Federal income taxes on related income pursuant to Section 501(a) of the Code.

The Organization accounts for its uncertain tax positions in accordance with the accounting methods under ASC Subtopic 740-10. The UTP rules prescribe a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken in an organization's tax return. The Organization believes that it has appropriate support for the tax positions taken and, as such, does not have any uncertain tax positions that might result in a material impact on the Organization's statements of financial position, activities and changes in net assets and cash flows. The Organization's management believes it is no longer subject to examinations for the years prior to 2016.

##### Advertising

Advertising costs are charged to operations when incurred. Total advertising expense for the years ended June 30, 2020 and 2019 was \$35,871 and \$22,105, respectively.

##### Functional Allocation of Expenses

Expenses that can be identified with specific program or supporting services are charged directly to the related program or supporting service. Expenses that are associated with more than one program or supporting service are allocated based on an evaluation by management utilizing measurements for time and effort, square footage and/or encounter based statistics.

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

As of and for the Years Ended June 30, 2020 and 2019

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#### **1. Summary of Significant Accounting Policies (continued):**

##### Excess (Deficit) of Revenues over Expenses

The consolidated statements of operations include excess (deficit) of revenues over expenses. Changes in net assets without restrictions which are excluded from excess (deficit) of revenues over expenses, consistent with industry practice, include contributions and grants of long-lived assets.

##### Fair Value of Financial Instruments

The carrying amount of cash, patient accounts receivable, accounts and notes payable and accrued expenses approximates fair value.

##### Reclassifications

Certain reclassifications have been made to the prior year's financial statements to conform to the current year presentation. These reclassifications have no effect on the previously reported change in net assets.

##### Liquidity

Assets are presented in the accompanying consolidated statements of financial position according to their nearness of conversion to cash and liabilities according to the nearness of their maturity and resulting use of cash.

#### **2. Charity Care:**

The Organization maintains records to identify and monitor the level of charity care they provide. These records include the amount of charges foregone for services and supplies furnished under their charity care policies. The total cost estimate is based on an overall cost-to-charge ratio applied against gross charity care charges. The net cost of charity care provided was approximately \$370,000 and \$280,000 for the years ended June 30, 2020 and 2019, respectively.

In 2020 and 2019, 502 and 564 patients received charity care out of a total of 12,236 and 11,539 patients, respectively. The Organization provides health care services to residents of Plymouth, New Hampshire as well as Bristol, New Hampshire and their surrounding areas, without regard to the individual's ability to pay for their services.

Determination of eligibility for charity care is granted on a sliding fee basis:

For dental services, patients with family income less than 100% of the Community Services Administration Income Poverty Guidelines shall only be responsible for a nominal fee assessed by the Organization and not the balance of their account for services received. Those with family income at least equal to 101%, but not exceeding 125% of the Federal Poverty Guidelines, receive a 65% discount. Those with family income at least equal to 126%, but not exceeding 150% of the guidelines, receive a 55% discount. Those with family income at least equal to 151%, but not exceeding 200% of the guidelines, receive a 45% discount.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Notes to Consolidated Financial Statements**  
As of and for the Years Ended June 30, 2020 and 2019

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**2. Charity Care (continued):**

For all other services, patients with family income less than 100% of the Community Services Administration Income Poverty Guidelines shall only be responsible for a nominal fee assessed by the Organization and not the balance of their account for services received. Those with family income at least equal to 101%, but not exceeding 138% of the Federal Poverty Guidelines, shall be responsible for a \$20 fee for each encounter. Those with family income at least equal to 139%, but not exceeding 160% of the guidelines, will be responsible for a \$30 fee for each encounter. Those with family income at least equal to 161%, but not exceeding 180% of the guidelines, will be responsible for a \$40 fee for each encounter. Those with family income at least equal to 181%, but not exceeding 200% of the guidelines, will be responsible for a \$50 fee for each encounter.

**3. Patient Service Revenue and Patient Accounts Receivable:**

Patient service revenue is reported net of contractual allowances and other discounts (but before the provision for bad debts), recognized was as follows for the years ended June 30:

	<u>2020</u>	<u>2019</u>
Gross patient service revenue	\$ 10,356,365	\$ 9,727,370
Less: contractual deductions and discounts	<u>3,035,680</u>	<u>3,006,021</u>
Net patient service revenue	<u>\$ 7,320,685</u>	<u>\$ 6,721,349</u>

Patient accounts receivable is reported net of estimated contractual allowances and allowance for doubtful accounts, as follows, as of June 30:

	<u>2020</u>	<u>2019</u>
Patient accounts receivable	\$ 1,234,960	\$ 1,247,726
Less: Estimated contractual allowances and discounts	342,689	360,278
Less: Estimated allowance for uncollectible accounts	<u>246,000</u>	<u>317,000</u>
Patient accounts receivable, net	<u>\$ 646,271</u>	<u>\$ 570,448</u>

Patient accounts receivable are reduced by an allowance for doubtful accounts. In evaluating the collectability of accounts receivable, the Organization analyzes its past history and identifies trends for each of its major payor sources of revenue to estimate the appropriate allowance for doubtful accounts and provision for bad debts. Management regularly reviews data about these major payor sources of revenue in evaluating the sufficiency of the allowance for doubtful accounts. For receivables associated with service provided to patients who have third-party coverage, the Organization analyzes contractually due amounts and provides an allowance for doubtful accounts and a provision for bad debts, if necessary.

For receivables associated with self-pay patients, including both patients without insurance and patients with deductible and copayment balances due for which third-party coverage exists for only part of the bill, the Organization records a significant provision for bad debts in the period of service on the basis of its past experience, which indicates that many patients are unable or unwilling to pay the portion of their bill for which they are financially responsible. The difference between the standard rates and the amounts actually collected after all reasonable collection efforts have been exhausted is charged off against the allowance for doubtful accounts.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2020 and 2019

#### 4. Estimated Third-Party Settlements:

Provision has been made for estimated adjustments that may result from final settlement of reimbursable amounts as may be required upon completion and audit of related cost finding reports under terms of contracts with the Center for Medicare and Medicaid Services and the New Hampshire Division of Welfare (Medicaid). Differences between estimated adjustments and amounts determined to be recoverable or payable are accounted for as income or expense in the year that such amounts become known.

#### 5. Grants and State Contracts:

The Organization receives various reimbursement grants from the federal government, State of New Hampshire and other public and private agencies. The following is a summary of the grant activity for the years ended June 30:

	Grant and State Contract		Outstanding Receivable	
	2020	2019	2020	2019
HRSA 330 Grant - 2018-2022	\$ 1,901,141	\$ 1,585,879	\$ 349,500	\$ 284,968
Bi-State PCA Grant	-	154,332	-	105,528
NH Primary Care Contracts	150,794	153,293	26,675	25,550
Emergency Preparedness Grants	323,192	322,620	91,585	39,837
HRSA-IGNITE Grants	299	80,641	-	-
Other Grant and Contract Awards	332,327	167,391	30,205	19,863
	<u>\$ 2,707,753</u>	<u>\$ 2,464,156</u>	<u>\$ 497,965</u>	<u>\$ 475,746</u>

#### 6. Refundable Advance:

The Organization received certain provider relief grant funding through the Department of Health and Human Services as a result of COVID-19 intended to cover the costs of personal protective equipment, other COVID related expenses and lost revenues attributable to COVID-19. These funds have been considered conditional, in accordance with ASU No. 2018-08, *Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*, with a refunding requirement. As a result, the remaining balance of \$578,105, for which the conditions had not yet been overcome as of June 30, 2020, have been reported as a refundable advance on the Organization's consolidated statement of financial position.

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Notes to Consolidated Financial Statements**  
As of and for the Years Ended June 30, 2020 and 2019

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**7. Property and Equipment:**

Property and equipment consisted of the following as of June 30:

	<u>2020</u>	<u>2019</u>
Land	\$ 620,773	\$ 525,773
Buildings	6,445,703	6,346,118
Leasehold improvements	194,332	170,174
Furniture, fixtures and equipment	<u>1,630,249</u>	<u>1,400,452</u>
	8,891,057	8,442,517
Less: Accumulated depreciation	<u>2,912,198</u>	<u>2,610,391</u>
	<u>\$ 5,978,859</u>	<u>\$ 5,832,126</u>

Depreciation and amortization expense, including amortization expense on capital lease obligations, for the years ended June 30, 2020 and 2019 amounted to \$301,808 and \$306,383, respectively.

**8. Line of Credit:**

The Organization had an available line of credit with a maximum borrowing amount of \$100,000 as of June 30, 2020 and 2019, maturing December 2021. The line carries an interest rate equal prime plus 2% (prime was 3.25% as of June 30, 2020). The line is secured by all business assets. The line was not drawn upon as of June 30, 2020 and 2019.

**9. Short-Term Debt:**

The Organization entered into a COVID-19 Emergency Healthcare System Relief Fund Loan through the State of New Hampshire in the amount of \$484,000. The loan is interest free with a repayment term of 180 days after the expiration of the COVID-19 state of emergency.

**10. Long-Term Debt:**

Long-term debt consisted of the following as of June 30:

	<u>2020</u>	<u>2019</u>
Woodsville Guarantee Savings Bank note payable, maturing August 2033, principal and interest payable in 240-monthly installments of \$18,194 through August 2033. Interest is charged at a rate of 5.25%.	\$ 2,072,199	\$ 2,178,682
United States of America Department of Agriculture note payable, maturing April 2045, principal and interest payable in 360-monthly payments of \$10,904. Interest is charged at a rate of 3.5% (see Note 9a).	2,162,952	2,216,849
Meredith Village Savings Bank note payable, maturing February 2030, principal and interest payable in 120-monthly installments of \$1,008. Interest is charged at a rate of 5%. Secured by certain parcels of land.	92,528	-

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Notes to Consolidated Financial Statements**

As of and for the Years Ended June 30, 2020 and 2019

**10. Long-Term Debt (continued):**

	<u>2020</u>	<u>2019</u>
U.S. Small Business Administration Economic Disaster Injury Loan, maturing May 2051, principal and interest payable in 360-monthly payments of \$641 commencing June 2021. Interest is charged at a rate of 2.75%.	150,000	-
U.S. Small Business Administration Paycheck Protection Program ("PPP") Loan, administered by Northway Bank. Available for loan forgiveness under the PPP program if applied for within 10-months following the end of the Organization's covered period. The portion of the PPP loan, that is not forgiven, if any, is expected to be repaid over an 18-month period commencing with the date that the SBA funds the loan forgiveness to Northway Bank, carrying an interest rate of 1.00%.	<u>1,118,000</u>	<u>-</u>
Total long-term debt	5,595,679	4,395,531
Less: unamortized deferred financing costs	<u>42,278</u>	<u>40,091</u>
Total long-term debt, net of unamortized deferred financing costs	5,553,401	4,355,440
Less: current portion	<u>176,509</u>	<u>160,374</u>
Long-term debt, less current portion	\$ <u>5,376,892</u>	\$ <u>4,195,066</u>

9a In September 2013, the Organization refinanced its then outstanding Woodsville Guarantee Savings Bank interim note payable with a construction loan. The new loan had an advancement amount of up to \$2,700,000 and called for interest only payments at a rate of 5% beginning October 2013, for 23 consecutive months, and 1 balloon payment of principal and accrued unpaid interest due September 2015. In April 2015, the Organization entered into a long-term debt arrangement with the United States of America Department of Agriculture ("USDA") totaling \$2,423,000. The proceeds from the loan were used to refinance the construction loan balance and unpaid accrued interest and to satisfy outstanding invoices related to the construction of the Bristol property. The loan is secured by the Organization's property located in Bristol, New Hampshire. The loan agreement requires the Organization to establish a reserve account which is to be funded in monthly installments of \$1,090 until the accumulated sum of reserve funding reaches \$130,848, after which no further funding is required except to replace withdrawals. As of June 30, 2020, the reserve account totaled \$78,578, reflected on the consolidated statement of financial position as restricted cash.

Future maturities of long-term debt are as follows as of June 30, 2020:

2021	\$ 176,509
2022	1,305,806
2023	196,739
2024	205,911
2025	215,934
Thereafter	<u>3,494,780</u>
	\$ <u>5,595,679</u>

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2020 and 2019

#### 11. Liquidity:

Financial assets available for general expenditures within one year of the balance sheet date consist of the following as of June 30:

	<u>2020</u>	<u>2019</u>
Cash and cash equivalents	\$ 3,823,909	\$ 1,764,253
Patient accounts receivable, net	646,271	570,448
Estimated third-party settlements	23,973	88,708
Current contracts and grant receivable	497,965	475,746
Other receivables	434,541	263,318
	<u>\$ 5,426,659</u>	<u>\$ 3,162,473</u>

As part of its liquidity management strategy, the Organization structures its financial assets to be available as its general expenditures, liabilities and other obligations come due. The Organization has certain restricted cash balances totaling \$78,578 and \$69,659 as of June 30, 2020 and 2019, respectively, representing funds required to be set aside as a building maintenance reserve for the Organization's Bristol, New Hampshire location. These balances have not been included in the Organization's financial assets available for general expenditure within one year.

#### 12. Malpractice Insurance Coverage:

The U.S. Department of Health and Human Services deemed the Organization covered under the Federal Tort Claims Act (FTCA) for damage for personal injury, including death, resulting from the performance of medical, surgical, dental and related functions. FTCA coverage is comparable to an occurrence policy without a monetary cap. Prior to being deemed for coverage under the FTCA, the Organization purchased medical malpractice insurance under a claims-made policy on a fixed premium basis. The Organization purchases primary and excess liability malpractice insurance under occurrence policies for certain services and other portions of the Organization not covered under FTCA. Claim liabilities are determined without consideration of insurance recoveries. Expected recoveries are presented separately. Management analyzes the need for an accrual of estimated losses of medical malpractice claims, including an estimate of the ultimate costs of both reported claims and claims incurred but not reported. In such cases, the expected recovery from the Organization's insurance provider is recorded within prepaid expenses and other receivables. As of June 30, 2020 and 2019, subsequent to management's assessment of potential reported and not yet reported claims, management determined that its exposure for potential unreported claims was immaterial and consequently did not provide for an accrual. It is possible that an event has occurred which will be the basis of a future material claim.

#### 13. Commitments and Contingencies:

Real Estate Taxes – The Organization and the Town of Plymouth, NH agreed to a payment in lieu of real estate taxes for a period of 10 years. The agreement identified real estate taxes previously paid by the Organization to the Town that the Organization was not required to pay as a result of its tax-exempt status. The sum of the overpayments will be applied evenly on an installment basis over the 10-year period, totaling \$50,000. The Organization remains subject to its requirement to timely file its application for tax exemption with the Town on an annual basis.

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2020 and 2019

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#### 13. Commitments and Contingencies (continued):

340B Revenue – The Organization participates in the 340B Drug Discount Program (the 340B Program) which enables qualifying health care providers to purchase drugs from pharmaceutical suppliers at a substantial discount as a Covered Entity. The 340B Program is managed by the Health Resources and Services Administration (HRSA) Office of Pharmacy Affairs. The Organization is required to undergo a self-audit process to determine compliance with 340B Program guidelines. The 340B statutes also explicitly authorize HRSA to audit Covered Entities to ensure they are compliant with the 340B Program. All Covered Entities are also required to recertify compliance with the 340B Program on an annual basis, including an attestation to full compliance with the 340B Program. The Organization earns revenue under the 340B Program by purchasing pharmaceuticals at a reduced cost to fill prescriptions to qualified patients. The Organization contracts with certain third-party pharmacies that dispense the pharmaceuticals to its patients. 340B revenue is included in other operating revenue within the consolidated statements of operations and totaled \$1,400,403 and \$1,476,030 for the years ended June 30, 2020 and 2019, respectively. The cost of pharmaceuticals, dispensing fees to the pharmacies, consulting fees and other costs associated with the 340B Program are included in operating expenses in the consolidated statements of operations and totaled \$532,362 and \$535,365 for the years ended June 30, 2020 and 2019, respectively.

Operating Leases – The Organization is obligated as a lessee under various operating leases. The total rent expense for operating leases related to equipment was \$42,671 and \$30,958 for the years ended June 30, 2020 and 2019, respectively.

The following schedule details future minimum lease payments annually as of June 30, 2020, for operating leases with initial or remaining lease terms in excess of one year:

2021	\$	22,037
2022		22,037
2023		18,364
	\$	<u>62,438</u>

#### 14. Concentration of Credit Risk:

The Organization grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors was as follows at June 30:

	<u>2020</u>	<u>2019</u>
Medicare	13.1%	11.7%
Medicaid	20.0%	22.2%
Blue Cross	15.6%	15.7%
Patients	22.3%	22.7%
Other third-party payors	<u>29.0%</u>	<u>27.7%</u>
	<u>100.0%</u>	<u>100.0%</u>

## MID-STATE HEALTH CENTER AND SUBSIDIARY

### Notes to Consolidated Financial Statements

As of and for the Years Ended June 30, 2020 and 2019

#### 15. Other Operating Revenue:

The following summarizes components of other operating revenue for the years ended June 30:

	<u>2020</u>	<u>2019</u>
Other operating revenue:		
Pharmacy income - 340B	\$ 1,400,403	\$ 1,476,030
Anthem shared savings	-	83,807
Montessori Center	160,182	155,676
Managed Care Organization	122,436	-
Medicaid claims settlement	120,494	-
Infusion income	117,686	16,552
Other operating revenue	<u>279,820</u>	<u>102,544</u>
	<u>\$ 2,201,021</u>	<u>\$ 1,834,609</u>

#### 16. Retirement Program:

During 2007, the Organization adopted a tax-sheltered annuity plan under 403(b) of the Code for eligible employees. Eligible employees are specified as those who normally work more than 20 hours per week and are not classified as independent contractors. The Organization provides for matching of employee contributions, 50% of the first 6% contributed. Contributions to the plan for the years ended June 30, 2020 and 2019 were \$159,439 and \$154,961, respectively.

#### 17. Health Insurance:

Prior to the fiscal year ended June 30, 2019, the Organization offered health insurance benefits to all employees under available Health Maintenance Organization (HMO) and Preferred Provider Organization (PPO) plans.

During the year ended June 30, 2019, the Organization began participation in a captive health insurance plan (Captive Plan). The Organization is subject to a stop-loss limit of \$50,000 per participant in the Plan before additional coverage through the captive arrangement will commence coverage of claims. Claims submitted to the Captive Plan for reimbursement after the end of the fiscal year with service dates on or prior to June 30 are required to be recognized as a loss in the period in which they occurred. As such, the Organization has provided for a liability for unpaid claims with service dates as of or before June 30 which had not yet been reported totaling \$66,517 and \$28,500 as of June 30, 2020 and 2019, respectively, included under the caption "accrued expenses and other current liabilities". Deductible requirements under the Captive Plan ranged from \$2,000 to \$4,000 through December 2019, depending on the coverage selected, before the Organization, under its' health reimbursement arrangement, was obligated to pay up to \$500 per participant. Effective January 2020, deductible requirements under the Captive Plan were reduced, ranging from \$1,500 to \$3,500, and the Organization's requirement to cover \$500 per participant was removed. As of June 30, 2019, the health reimbursement arrangement was still in effect, the Organization provided for an accrual based on the aggregate amount of the liability for reported claims and an estimated liability for claims incurred but not yet reported. At June 30, 2019, "accrued expenses and other current liabilities" include an accrued liability related to the plan of \$20,000.

## **MID-STATE HEALTH CENTER AND SUBSIDIARY**

### **Notes to Consolidated Financial Statements**

As of and for the Years Ended June 30, 2020 and 2019

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#### **18. Subsequent Events:**

The Organization has reviewed events occurring after June 30, 2020 through November 5, 2020, the date the board of trustees accepted the final draft of the consolidated financial statements and made them available to be issued.

In September 2020, the Organization executed a settlement agreement with Granite State Health Plan d/b/a NH Healthy Families (“NHHF”) in the amount of \$120,494, representing NHHF’s required settlement payment to the Organization for previously unreimbursed medical and behavioral health claims that arose during the service period of December 2013 through March 2020. As the claims pertain to service periods arising on or before the statement of financial position date, June 30, 2020, the Organization has reflected a receivable as of June 30, 2020 in the amount of the settlement, as a component of “prepaid expenses and other receivables” on the Organization’s statement of financial position.

In March 2020, the World Health Organization made the assessment that the outbreak of a novel coronavirus, referred to throughout the consolidated financial statements as COVID-19, can be characterized as a pandemic. The effect of COVID-19 extended beyond June 30, 2020 and its expected duration is currently unknown. As a result, uncertainties have arisen that may have a significant negative impact on the operating activities and result of the Organization. The impact of COVID-19 is largely dependent upon the duration and spread of COVID-19 and required quarantine measures implemented by federal, state or local government authorities. In the interim, the Organization has been monitoring the impact of COVID-19 and has been seeking financial resources meant to combat the financial effects of COVID-19 including the receipt of a \$1,118,000 Paycheck Protection Loan and an \$150,000 Economic Disaster Injury Loan (Note 10), the receipt of a \$484,000 COVID-19 Emergency Healthcare System Relief Fund Loan through the State of New Hampshire (Note 9), provider relief grant funding through the Department of Health and Human Services (Note 6) and additional HRSA 330 grant funding (Note 5). The Organization’s management will continue to monitor the financial effects of COVID-19 and adjust as necessary. As of the date of these financial statements, the financial effects of COVID-19 largely remain uncertain.

**MID-STATE HEALTH CENTER**  
**Schedule of Expenditures of Federal Awards**  
For the Year Ended June 30, 2020

Federal Grantor/Pass-Through Grantor/Program Title	Federal CFDA Number	Pass-through Entity or Award Identifying Number	Federal Expenditures	Passed through to Subrecipients
U.S. Department of Health and Human Services:				
Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless and Public Housing Primary Care)	93.224		\$ <u>1,901,141</u>	\$ <u>-</u>
Rural Health Care Services Outreach, Rural Health Network Development and Small Health Care Provider Quality Improvement Program	93.912		<u>299</u>	<u>-</u>
Passed through N.H. Department of Health and Human Services:				
Block Grants for Prevention and Treatment of Substance Abuse	93.959	FAIN TI010035	122,731	-
Immunization Cooperative Agreements	93.268	FAIN H23IP000757	10,733	-
Preventive Health and Health Services Block Grant Funded Solely with Prevention and Public Health Funds (PPHF)	93.991	NB01OT009285	7,239	-
Hospital Preparedness Program (HIPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements	93.074 Comprised of 93.889 & 93.069			
	93.069	FAIN U90TP000535	57,877	-
Maternal and Child Health Services Block Grant to the States	93.994	Unknown	39,206	-
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243	FAIN SP020796	<u>85,236</u>	<u>-</u>
Total passed through N.H. Department of Health and Human Services			<u>323,022</u>	<u>-</u>
Total U.S. Department of Health and Human Services			<u>2,224,462</u>	<u>-</u>
U.S. Small Business Administration				
Disaster Assistance Loans	59.008		<u>150,000</u>	<u>-</u>
Total U.S. Small Business Administration			<u>150,000</u>	<u>-</u>
<b>TOTAL EXPENDITURES OF FEDERAL AWARDS</b>			<u>\$ 2,374,462</u>	<u>\$ -</u>

The accompanying notes to financial statements are an integral part of this schedule.

**MID-STATE HEALTH CENTER**  
**Notes to Schedule of Expenditures of Federal Awards**  
**For the Year Ended June 30, 2020**

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**1. Basis of Presentation:**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of MSHC under programs of the federal government for the year ended June 30, 2020. The information in the schedule is presented in accordance with the requirements of Title 2 US. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Since the schedule presents only a selected portion of the operations of MSHC, it is not intended to and does not present the statement of financial position, statement of operations and changes in net assets or cash flows of MSHC.

**2. Significant Accounting Policies:**

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

**3. Indirect Cost Rate:**

MSHC elected to use the 10% de minimis indirect cost rate.



TYLER, SIMMS & ST. SAUVEUR, CPAs, P.C.  
Certified Public Accountants & Business Consultants

Report 1

**Independent Auditors' 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 Trustees of  
Mid-State Health Center:

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 financial statements of Mid-State Health Center ("MSHC") (a nonprofit organization), which comprise the statement of financial position as of June 30, 2020, and the related statements of operations and changes in net assets and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 5, 2020.

***Internal Control Over Financial Reporting***

In planning and performing our audit of the financial statements, we considered MSHC'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 financial statements, but not for the purpose of expressing an opinion on the effectiveness of MSHC's internal control. Accordingly, we do not express an opinion on the effectiveness of MSHC'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 entity'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.

**Independent Auditors' 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* (continued)**

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 MSHC's 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***

The 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.

*Tyler, Lemons and St. Laurent, CPAs, P.C.*

Lebanon, New Hampshire  
November 5, 2020



TYLER, SIMMS & ST. SAUVEUR, CPAs, P.C.  
Certified Public Accountants & Business Consultants

Report 2

## **Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance**

To the Board of Trustees of  
Mid-State Health Center:

### ***Report on Compliance for Each Major Federal Program***

We have audited Mid-State Health Center's ("MSHC") compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of MSHC's major federal programs for the year ended June 30, 2020. MSHC's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

### ***Management's Responsibility***

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

### ***Auditors' Responsibility***

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

## **Independent Auditors' Report on Compliance for Each Major Program and on Internal Control Over Compliance Required by the Uniform Guidance (continued)**

### ***Opinion on Each Major Federal Program***

In our opinion, MSHC complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2020.

### ***Report on Internal Control Over Compliance***

Management of MSHC 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 MSHC's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of MSHC's internal control over compliance.

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

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

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

*Tyler, Dennis and St. Severeur, CPAs, P.C.*

Lebanon, New Hampshire  
November 5, 2020

**MID-STATE HEALTH CENTER**  
**Schedule of Findings and Questioned Costs**  
 As of and For the Year Ended June 30, 2020

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**SECTION I - SUMMARY OF AUDITORS' RESULTS**

**Financial Statements**

Type of auditors' report issued *Unmodified*

Internal control over financial reporting:

Material weakness identified \_\_\_ Yes X No

Significant deficiencies identified that are not considered to be material weaknesses \_\_\_ Yes X None reported

Non-compliance material to financial statements noted \_\_\_ Yes X No

**Federal Awards**

Internal control over major programs:

Material weakness identified \_\_\_ Yes X No

Significant deficiencies identified that are not considered to be material weaknesses \_\_\_ Yes X None reported

Type of auditors' report issued on compliance for major programs *Unmodified*

Any audit findings disclosed that are required to be reported in accordance with Section 200.516(a) of the Uniform Guidance \_\_\_ Yes X No

Identification of major programs:

<u>Federal CFDA Number</u>	<u>Name of Federal/Local Program</u>
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93.224	Health Center Program
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Dollar threshold used to distinguish between Type A and Type B programs \$750,000

Auditee qualified as low-risk auditee? X Yes \_\_\_ No

**SECTION II - FINANCIAL STATEMENT FINDINGS**

There were no findings related to the financial statements which are required to be reported in accordance with generally accepted Government Auditing Standards (GAGAS).

**SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS**

There were no findings or questioned costs for Federal awards (as defined in Section 200.516(a) of the Uniform Guidance) that are required to be reported.

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Consolidating Statement of Financial Position – Schedule 1**

As of June 30, 2020

	<u>MSHC</u>	<u>MSCDC</u>	<u>ELIMINATIONS</u>	<u>TOTAL</u>
<b>Assets</b>				
Current assets				
Cash and cash equivalents	\$ 3,335,442	\$ 488,467	\$ -	\$ 3,823,909
Restricted cash	78,578	-	-	78,578
Patient accounts receivable, net	646,271	-	-	646,271
Estimated third-party settlements	23,973	-	-	23,973
Contracts and grants receivable	497,965	-	-	497,965
Prepaid expenses and other receivables	552,448	-	(44,611)	507,837
Total current assets	<u>5,134,677</u>	<u>488,467</u>	<u>(44,611)</u>	<u>5,578,533</u>
Long-term assets				
Property and equipment, net	2,623,056	3,355,803	-	5,978,859
Other assets	163,760	-	(121,578)	42,182
Total long-term assets	<u>2,786,816</u>	<u>3,355,803</u>	<u>(121,578)</u>	<u>6,021,041</u>
Total assets	<u>\$ 7,921,493</u>	<u>\$ 3,844,270</u>	<u>\$ (166,189)</u>	<u>\$ 11,599,574</u>
<b>Liabilities and net assets</b>				
Current liabilities				
Accounts payable	\$ 329,626	\$ 44,611	\$ (44,611)	\$ 329,626
Accrued expenses and other current liabilities	52,501	15,461	-	67,962
Accrued payroll and related expenses	532,848	-	-	532,848
Accrued earned time	429,059	-	-	429,059
Refundable advance	578,105	-	-	578,105
Short-term note payable	484,000	-	-	484,000
Current portion of long-term debt	56,660	119,849	-	176,509
Total current liabilities	<u>2,462,799</u>	<u>179,921</u>	<u>(44,611)</u>	<u>2,598,109</u>
Long-term liabilities				
Lease deposits	-	121,578	(121,578)	-
Long-term debt, less current portion	3,368,933	2,007,959	-	5,376,892
Total long-term liabilities	<u>3,368,933</u>	<u>2,129,537</u>	<u>(121,578)</u>	<u>5,376,892</u>
Total liabilities	<u>5,831,732</u>	<u>2,309,458</u>	<u>(166,189)</u>	<u>7,975,001</u>
Net assets without donor restrictions	<u>2,089,761</u>	<u>1,534,812</u>	<u>-</u>	<u>3,624,573</u>
Total liabilities and net assets	<u>\$ 7,921,493</u>	<u>\$ 3,844,270</u>	<u>\$ (166,189)</u>	<u>\$ 11,599,574</u>

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidating Statement of Operations and Changes in Net Assets – Schedule 2**  
For the Year Ended June 30, 2020

	<u>MSHC</u>	<u>MSCDC</u>	<u>ELIMINATIONS</u>	<u>TOTAL</u>
<b>Changes in net assets without donor restrictions</b>				
Revenue, gains and other support				
Patient service revenue (net of contractual allowances and discounts)	\$ 7,320,685	\$ -	\$ -	\$ 7,320,685
Provision for uncollectible accounts	275,111	-	-	275,111
Net patient service revenue	<u>7,045,574</u>	<u>-</u>	<u>-</u>	<u>7,045,574</u>
Contracts and grants	2,707,753	-	-	2,707,753
Contributions	17,788	-	-	17,788
Other operating revenue	2,185,552	323,680	(308,211)	2,201,021
Net assets released from restrictions	-	-	-	-
Total revenue, gains and other support	<u>11,956,667</u>	<u>323,680</u>	<u>(308,211)</u>	<u>11,972,136</u>
Expenses				
Salaries and wages	7,270,657	-	-	7,270,657
Employee benefits	1,568,194	-	-	1,568,194
Insurance	54,511	-	-	54,511
Professional fees	1,146,554	7,000	-	1,153,554
Supplies and expenses	1,999,983	2,427	(308,211)	1,694,199
Depreciation and amortization	181,189	120,619	-	301,808
Interest expense	76,997	115,853	-	192,850
Total expenses	<u>12,298,085</u>	<u>245,899</u>	<u>(308,211)</u>	<u>12,235,773</u>
Change in net assets without donor restrictions	(341,418)	77,781	-	(263,637)
<b>Net assets without donor restrictions, beginning of year</b>	<u>2,431,179</u>	<u>1,457,031</u>	<u>-</u>	<u>3,888,210</u>
<b>Net assets without donor restrictions, end of year</b>	<u>\$ 2,089,761</u>	<u>\$ 1,534,812</u>	<u>\$ -</u>	<u>\$ 3,624,573</u>

**MID-STATE HEALTH CENTER AND SUBSIDIARY****Consolidating Statement of Financial Position – Schedule 3**

As of June 30, 2019

	<u>MSHC</u>	<u>MSCDC</u>	<u>ELIMINATION</u>	<u>TOTAL</u>
<b>Assets</b>				
Current assets				
Cash and cash equivalents	\$ 1,273,179	\$ 491,074	\$ -	\$ 1,764,253
Restricted cash	69,659	-	-	69,659
Patient accounts receivable, net	570,448	-	-	570,448
Estimated third-party settlements	88,708	-	-	88,708
Contracts and grants receivable	475,746	-	-	475,746
Prepaid expenses and other receivables	417,584	-	(37,610)	379,974
Total current assets	<u>2,895,324</u>	<u>491,074</u>	<u>(37,610)</u>	<u>3,348,788</u>
Long-term assets				
Property and equipment, net	2,547,312	3,284,814	-	5,832,126
Deposits and other assets	139,882	-	(121,619)	18,263
Total long-term assets	<u>2,687,194</u>	<u>3,284,814</u>	<u>(121,619)</u>	<u>5,850,389</u>
Total assets	<u>\$ 5,582,518</u>	<u>\$ 3,775,888</u>	<u>\$ (159,229)</u>	<u>\$ 9,199,177</u>
<b>Liabilities and net assets</b>				
Current liabilities				
Accounts payable	\$ 204,907	\$ 37,610	\$ (37,610)	\$ 204,907
Accrued expenses and other current liabilities	51,001	15,461	-	66,462
Accrued payroll and related expenses	374,802	-	-	374,802
Accrued earned time	308,765	-	-	308,765
Current portion of long-term debt	53,891	106,483	-	160,374
Current portion of capital lease obligations	591	-	-	591
Total current liabilities	<u>993,957</u>	<u>159,554</u>	<u>(37,610)</u>	<u>1,115,901</u>
Long-term liabilities				
Lease deposits	-	121,619	(121,619)	-
Long-term debt, less current portion	2,157,382	2,037,684	-	4,195,066
Total long-term liabilities	<u>2,157,382</u>	<u>2,159,303</u>	<u>(121,619)</u>	<u>4,195,066</u>
Total liabilities	<u>3,151,339</u>	<u>2,318,857</u>	<u>(159,229)</u>	<u>5,310,967</u>
Net assets without donor restrictions	<u>2,431,179</u>	<u>1,457,031</u>	<u>-</u>	<u>3,888,210</u>
Total liabilities and net assets	<u>\$ 5,582,518</u>	<u>\$ 3,775,888</u>	<u>\$ (159,229)</u>	<u>\$ 9,199,177</u>

**MID-STATE HEALTH CENTER AND SUBSIDIARY**  
**Consolidating Statement of Operations and Changes in Net Assets – Schedule 2**  
For the Year Ended June 30, 2019

	<u>MSHC</u>	<u>MSCDC</u>	<u>ELIMINATIONS</u>	<u>TOTAL</u>
<b>Changes in net assets without donor restrictions</b>				
Revenue, gains and other support				
Patient service revenue (net of contractual allowances and discounts)	\$ 6,721,349	\$ -	\$ -	\$ 6,721,349
Provision for uncollectible accounts	241,053	-	-	241,053
Net patient service revenue	<u>6,480,296</u>	<u>-</u>	<u>-</u>	<u>6,480,296</u>
Contracts and grants	2,464,156	-	-	2,464,156
Contributions	13,987	-	-	13,987
Other operating revenue	1,913,520	310,149	(389,060)	1,834,609
Net assets released from restrictions	-	-	-	-
Total revenue, gains and other support	<u>10,871,959</u>	<u>310,149</u>	<u>(389,060)</u>	<u>10,793,048</u>
Expenses				
Salaries and wages	6,115,133	-	-	6,115,133
Employee benefits	1,378,376	-	-	1,378,376
Insurance	33,090	-	-	33,090
Professional fees	901,493	119,202	(80,849)	939,846
Supplies and expenses	1,779,867	768	(308,211)	1,472,424
Depreciation and amortization	187,743	118,640	-	306,383
Interest expense	83,642	119,766	-	203,408
Total expenses	<u>10,479,344</u>	<u>358,376</u>	<u>(389,060)</u>	<u>10,448,660</u>
Change in net assets without donor restrictions	392,615	(48,227)	-	344,388
<b>Net assets without donor restrictions, beginning of year</b>	<u>2,038,564</u>	<u>1,505,258</u>	<u>-</u>	<u>3,543,822</u>
<b>Net assets without donor restrictions, end of year</b>	<u>\$ 2,431,179</u>	<u>\$ 1,457,031</u>	<u>\$ -</u>	<u>\$ 3,888,210</u>



*Where your care comes together.*

**— BOARD OF DIRECTORS AND MANAGEMENT CONTACT LIST —**

**BOARD OFFICERS (4)**

---

**Timothy Naro, President-Banking**

**Peter Laufenberg, Vice President-Municipal government, finance**

**Carina Park, Secretary-Municipal government, HR,RP**

**Todd Bickford, Treasurer-Longterm Care, Administration**

**BOARD MEMBERS, ACTIVE (8)**

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**Carol Bears, Director-Finance**

**Lee Freeman, Director-management**

**Chelsea Salomon, Director-Clinical**

**Nicholas Coates, Director-Municipal and legislative government**

**Mike Long, Director-finance**

**Cynthia Standing, Director-Clinical, Operations**

**Isaac Davis, Director-Banking**

**Joseph Monti, Director-Federal government, defense**

**Jarrett Stern, Director-medical practice operations**

**BOARD MEMBERS, HONORARY (2)**

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**Ann Blair, Director-administration**

**James Dalley, Director-management**

## Angel Ekstrom, EdD

101 Boulder Point Dr. Ste. 1, Plymouth, NH 03264  
(603)238-3582 • aekstrom@midstatehealth.org

### EDUCATION

Doctor of Education - Curriculum and Instruction, Argosy University, Sarasota, Florida, 2008

Certificate of Advanced Graduate Studies - Educational Leadership Plymouth State University, Plymouth, New Hampshire, 2004

Master of Science - Recreation Administration, University of Nebraska at Omaha, Omaha, Nebraska, 1998

Bachelor of Science - Interdisciplinary, Physical Education and Health, Southwest State University, Marshall, Minnesota, 1996

Associate of Arts - Anoka Ramsey Community College, Anoka, Minnesota, 1993

### SELECTED PROFESSIONAL EXPERIENCE

2002- June 2014 Skills Application Teacher - 90% time split position between Academic Affairs and Student Affairs  
Plymouth State University, Plymouth, NH  
Manage the challenge course. 2002-2008  
Health and Human Performance Department - Adventure Education (2002-2009)  
Outdoor Center Coordinator

1998- 1999 Lead Wilderness Counselor, Lathrop Park Experiential Program, Walsenburg, CO

1991 - 1996 Activities Coordinator / Counselor, Robert E. Miller (REM), Inc. - Minneapolis and Bloomington, MN and Marshall, MN

### UNIVERSITY SERVICE

#### PAT Committees:

Athletic Council, 2004-2008, 2011, 2012

PAT Observer to Student Senate, 2005-2006

#### Health & Human Performance (HHP) Department Committees:

Adventure Education Risk Management committee member, 2006-present  
Faculty search committee, 2012

Center for Active Living & Wellness Case Statement subcommittee member, 2006-2008

New Majors Orientation committee member, 2004-

2006 Open House Committee member, 2003-2006

#### Student Scholarship Committees,

Brennan Hart Scholarship committee member, 2003-2014

Outdoor Center Student Scholarships committee chair, 2007-2011

Leadership Effectiveness and Development Series (L.E.A.D.S.) Presenter

PE Center Planning committee member, 2006-2008

Center for Rural Partnerships; Rural Health and Wellness Working Group member, 2006

## PROFESSIONAL SERVICE

Association of Outdoor Recreation and Education (AORE)

Board of Directors (BOD) member, 2004-2007

Executive Council of AORE (treasurer), 2005-2007

Environmental Stewardship Committee BOD Liaison of AORE, 2006-2007

Northeast Regional Representative, 2005-2006

## COMMUNITY OUTREACH, SERVICE, and CONSULTION

Center for Young Children and Families (Plymouth, NH) guest presenter: Bear Hang with Pulley System: How to Keep Food from Bears and Other Wildlife, December 2013

20<sup>th</sup> Anniversary for Rivers Management and Protection Programs (Plymouth, NH) August 2013

FAST Squad volunteer (Rumney, NH) 2005-2007

Fire Department volunteer (Rumney, NH) 2005-2007

Plymouth-Area Renewable Energy Initiative (PAREI) member & volunteer for local energy raisers, 2005-present • Search and Rescue Lake County volunteer (Leadville, CO) 1999-2001 • Lake County Parks & Recreation (Leadville, CO) o board member 1998-2000 o Vice President 1998-2000

Leadership Leadville participant (Leadville, CO) 2000-2001

Challenge Course Facilitator Training & Local Operating Procedure Consulting o

University of Wisconsin, Stout o Mississippi Gulf Coast Community College

### SELECTED TRAININGS

Suicide, Postvention Suicide, and Suicide Postvention Train the Trainer (April 2015)

Voices Against Violence 30 hour Training (Feb./March 2015)

Leave No Trace Master Educator (Leave No Trace Center for Outdoor Ethics and National Outdoor Leadership School), 2009

Trip Leader Training (American Canoe Association), 2008

High 5 Adventure Learning Center Adventure Practitioners Symposium (Brattleboro, VT), 2007

Instructor Course (National Outdoor Leadership School 35 day training), 2000

Advanced Skills and Standards Workshop (Project Adventure 4 day training), 2002

Horse Packing Seminar (National Outdoor Leadership School), 2000

Women's Rock Seminar (National Outdoor Leadership School), 2000

Juvenile Detention Services training program (MN Department of Corrections), 1996

Time, Stress, and management training (Southwest Technical College, MN), 1996

## RECOGNITIONS

Patricia A. Storer Award nominee (Plymouth State University) 2012

Distinguished Adjunct Teaching Award nominee (Plymouth State University, Office of the Provost and Vice President for Academic Affairs) 2007

Leave No Trace Master Educator Course Scholarship recipient (Association of Outdoor Education and Recreation) 2008

Instructor Course Scholarship recipient (National Outdoor Leadership School) 2000

Certificate of Appreciation 1998 (U.S. Department of the Interior National Park Service, Great Sand Dunes National Monument) 1998

Recognition for Research (NWBA/PVA National Basketball Camp) 1997

Most Valuable Player (University of NE at Omaha Wheelchair Basketball Team) 1997

# DR. ROBERT J. MACLEOD, DHA

**Acute General Medical Rural Health Care, Long Term Care, and Behavioral Health Care Executive** with documented success developing managed care strategies, integrating delivery systems, program and policy development, and improving quality and utilization management programs

## SUMMARY OF QUALIFICATIONS

- Healthcare Executive with strengths in policy setting, project management, budget control, vendor negotiations, HR, process improvements, program development, community outreach, and facility expansion.
- Expert in staff training, development, and performance management to meet operating and financial goals with extensive experience in workforce diversity, team building, and group leadership.
- Process designer with extensive experience creating strategy and policy with stakeholders contributing through a collaborative approach, cutting through departmental, industry and cultural differences.
- Health Services Strategist using LEAN Framework steering any business challenge into a process, strategy and resource capabilities decision process with measurable objectives outcome.

1

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## PROFESSIONAL EXPERIENCE

MID-STATE HEALTH CENTER, PLYMOUTH, NH      JUNE 2018 –  
PRESENT

### CHIEF EXECUTIVE OFFICER

OCT 1 -

- Oversees the recruitment, development, performance evaluation of employees
- Oversees the business and financial affairs of the clinic and fiscal management.
- Enhances operational effectiveness, emphasizing cost containment without jeopardizing important innovation or quality of care.
- Ensures clinic compliance with all regulatory agencies governing health care delivery and the rules of accrediting bodies.
- Encourages clinic integration within the community through effective communication. Represents the clinic in its relationships with other health organizations, government agencies, and third party payers.
- Provides leadership in developing, planning, and implementing the clinic's business plans.
- Serves as a non-voting member of the governing board and responsible for developing and implementing the clinic's mission and strategic plan, assists the board in developing and implementing strategic plans to support the clinic's philosophy & goals, informs board about trends, problems and medical activities to facilitate policy making.

### CHIEF PROJECTS OFFICER

JUNE - OCT 1

Oversees a wide variety of projects within the organization and identifies issues, provides solutions, delegate tasks and monitor progress to stay on schedule and on budget.

STATE OF NEW HAMPSHIRE, Concord, NH October 2002 - 2018

**ADMINISTRATOR, GLENCLIFF HOME (LTCF- DEPARTMENT OF HEALTH AND SERVICES)** JUNE 2017 – 2018

Advisory responsibilities to the Administrator of the Glencliff Home including policy review, regulatory requirements, and CMS and USDOJ compliance.

- Established various policies and procedures necessary to meet CMS and OCR compliance
- Liaison for the State and USDOJ regarding Olmstead settlement to discharge residents to a less restrictive venue.
- Collaborate with clinical staff improve the delivery of services to residents by using LEAN methodology.
- Collaborate with senior management identifying strategies to maintain productive employee and union relations.
- Assisting the Nursing Director to establish a LPN program partnering with an existing accredited NH educational institution.
- Meet with residents to identify their needs and develop a plan for discharge to a community setting.
- Collaborate with activities staff identifying programs that are skill based.

**2 CEO, NEW HAMPSHIRE HOSPITAL (DEPARTMENT OF HEALTH AND HUMAN SERVICES)** JANUARY 2011- JUNE 2017

Responsible for overall operations including policy administration, regulatory compliance, and legislative interaction for behavioral health serving patients in all geographical regions of the state. New Hampshire Hospital is a Joint Commission accredited 168-bed inpatient psychiatric facility with 2500 admissions and discharges per year, a \$70M operating budget, and 630 employees and a 35 member medical staff.

- Reduced operating budget by \$8.5M in one year by consolidating support services and outsourcing the management of transitional services.
- Increased third-party reimbursement by facilitating timely authorizations and appeals, and using an IPPS coding methodology.
- Created a research infrastructure in collaboration with the Geisel School of Medicine at Dartmouth.
- Initiated study to determine the percentage of patients admitted with substance use issues
- Oversight of a project to facilitate the use of tele-psychiatry for underserved areas of the state with a focus on child psychiatry- (Implementation ongoing).
- Implemented a re-engineered post discharge program (Project Red). The first public-sector behavioral hospital to do so in the country.
- Implemented a patient-centered approach for the treatment of children and adolescents. Programming addresses mental health and behavioral issues.
- Enhanced co-occurring services for adolescent adult patients
- Implemented Peer Support services
- Collaborative agreement with Systemic-Therapeutic-Assessment-Respite-Treatment Program (START)
- Negotiated managed care contracts
- Electronic Health Record (EHR),and Computerized Physician Order Entry (CPOE)-(Implementation ongoing)

- Participating in NHDHHS Health Information Exchange Implementation Project
- Established 10-bed inpatient stabilization unit

**DIRECTOR OF MEDICAL & FORENSIC SERVICES (NH DEPARTMENT OF CORRECTIONS)**

OCTOBER 2002-2011

Direct the overall policy administration, regulatory compliance, and legislative lobbying for health and behavioral services for 4 state correctional facilities and 1 secured psychiatric facility (forensic hospital) with administrative oversight of 175 employees and \$20M

**SPEARE MEMORIAL HOSPITAL, *Plymouth, NH (CAH)*** January 1982 – October 2002

**EXECUTIVE VICE PRESIDENT & CHIEF OPERATING OFFICER**

February 2000 – October 2002

Senior Operating Executive with full strategic planning and P&L management responsibility of \$20M in operating expenses accountable for all clinical, philanthropy, administrative, and support functions reporting to the CEO.

- Delivered unprecedented revenue for the Physician-Hospital Organization through building relationships and leading negotiations with managed care organizations driving \$7.5M managed care operating revenues and \$600K net revenues.
- Chaired Organizational-wide Strategic Planning Committee strategically mapping and implementing tactical action plans addressing financial, operational, and community program goals.
- Authored and achieved a \$34K School Dental Program Health Care Grant enabling prophylaxis and reconstructive dental care for children in pre-school to high school.
- Spearheaded a \$147K vocational grant process partnering with Plymouth Regional High School achieving a vocational program to introduce and prepare students for careers in the health profession.
- Initiated and established Infirmiry services with the local university directly increasing Emergency, Radiology, and Laboratory services revenues by 5%.
- Directed the full-scale design and development of 2 new physician office buildings on time and under budget.
- Chaired and Member of hospital committees including Pharmacy and Therapeutic, Infection Control, Board of Trustees, Safety, Quality Improvement, and Leadership.

**ASSOCIATE ADMINISTRATOR**

September 1995 – February 2000

Directed the daily operations and strategic planning of programs for the Nursing Department, Social Services, Pharmacy, Materials Management, Facility Services, Food and Nutritional Services, Public Relations, and Community Wellness.

**DIRECTOR, SUPPORT SERVICES**

January 1982 – September 1995

**ADDITIONAL EXPERIENCE**

**PLYMOUTH STATE UNIVERSITY, PLYMOUTH, NH**  
**ADJUNCT PROFESSOR**

**1999 -**

**GEISEL (DARTMOUTH) SCHOOL OF MEDICINE**  
**ADJUNCT PROFESSOR**

**2014 -**

## ACADEMIC EXPERIENCE

### **DHA, DOCTOR OF HEALTH ADMINISTRATION & POLICY (2003)**

MEDICAL UNIVERSITY OF SOUTH CAROLINA

Charleston, SC

*Doctoral Project: Perspective of Hospital Chief Executive or Chief Operating Officers Regarding the Hospital Accreditation and Certification Process*

*Honors Society*

### **MASTERS – BUSINESS ADMINISTRATION (1996)**

PLYMOUTH STATE COLLEGE

Plymouth, NH

### **BS, INTERDISCIPLINARY DEGREE – POLITICAL SCIENCE & BUSINESS MANAGEMENT (1994)**

PLYMOUTH STATE COLLEGE

Plymouth, NH

*Summa Cum Laude*

### **ASSOCIATES IN ARTS – ACCOUNTING (1986)**

NORTH SHORE COMMUNITY COLLEGE

Beverly, MA

## ASSOCIATIONS

4

- President, Board of Directors, Mid-State Health Clinic (FQHC)
- Fellow, American College of Health Care Executives
- Former Member, Governor's Task Force on Certificate of Need Reform
- Past Chair and Member, Town of Thornton School Board
- Past Vice-Chair and Member, Pemi-Baker Regional High School Board
- Member, Waterville Valley Chamber of Commerce and Plymouth Chamber of Commerce
- Member, New Hampshire Charitable Foundation.
- Member, New Hampshire Mental Health Commission and New Hampshire Suicide Council.

Colleen E Schoenbrun

101 Boulder Point Rd Suite 1

Plymouth, NH 03264

Education

*Johnson and Wales University, Providence, RI*                      Graduation Date; May 19, 2012  
University Honor's Scholar **Bachelor of Science Degree in Business Management**  
Concentration in the Equine Industry  
Minors in Applied Mathematics, Psychology, and Entrepreneurship  
Member of Collegiate Honor Society for 3 years                      **GPA; 3.77** (magna cum laude)

\*Work Experience

**Administrative Assistant:** Mid-State Health Center, Plymouth  
*From: April 2021 to present*

- Assists the CEO and other members of the management team in clerical duties such as coordinating meetings inside and outside of the organization, preparing meeting agendas, taking meeting minutes, facilitating and filing contracts.
- Acts as PHAC (Public Health Advisory Council) Coordinator as well as the Board Clerk for the Board of Directors and Developmental Corp. committees
- Publishes the monthly employee newsletter and generates employees' birthday and anniversary cards
- Member of the Employee Experience Committee dedicated to making a supportive and enjoyable working environment for all employees

**Patient Services Representative:** Mid-State Health Center, Plymouth  
*From: February 2020 to April 2021*

- Primarily responsible for secretarial duties that include: Answering phones calls, scheduling appointments, generating orders and referrals, processing insurance and taking co-pays, assisting patients in getting the help that they need both medically and financially, and triaging calls to the appropriate provider/nurse
- Cross-trained for the radiology department; generating orders, processing images, sending images out for interpretation, and notifying providers of results.
- Assisted in the COVID rapid testing process when it initially started; triaging, recording information required for state forms, scheduling appropriately, etc. Also assigned to a telehealth task group to assist in getting telemed appoints scheduled accurately.

**Head Receptionist/Veterinary Assistant:** Meadow Pond Animal Hospital, Moultonboro  
*From: March 2016 to February 2020*

- Oversaw/managed the front office of the animal hospital
- Interviewed, hired, and trained employees for receptionist positions
- Managed and stocked all medicated food orders from numerous vendors
- Assisted Drs in preparing for examinations and animal restraint during exams
- Performed any additional tasks necessary to keep the hospital running efficiently:  
Answering phones, filling pharmaceutical orders, processing medical histories, running

bloodwork/UAs, taking radiographs, addressing client concerns, managing Drs schedules, processing monthly reports, etc.

***Barn Manager of Private Hunter Stable:*** Wayland, MA *From: April 2013 to March 2016*

- Managed every aspect of running the facility including; vet/farrier appointments, inventory, medicating/giving IM injections, daily chores, keeping medical records, and organizing/packing for shows.
- Traveled to AA rated shows as show groom, requiring organizational skills, being on call 24 hours a day, and able to quickly adapt to different situations
- Job required both excellent time management skills as well as being highly detail oriented and self-motivated

#### Relevant Skills and Accomplishments

*Small Business Management Skills-* Immediate family has owned a motel in Thornton for the past 20 years. This has given me vast insight into what it truly takes to make a business run smoothly. Also, it has allowed me to learn how to interact with all sorts of people from different backgrounds and cultures and how handle unique situations professionally.

*Published:* I have had two works published; a portion of my honors thesis on the ethics of the equine industry published on the online Equine Journal and an essay in the Johnson and Wales Literary Magazine. These publications help reflect on my well-developed written communication skills.

**\*References available upon request**

101 Boulder Point Drive, Suite 1  
Plymouth, NH 03264  
(603) 536-4000

# William Sweeney

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- Objective** Seeking a challenging and rewarding job in finance and accounting within a medical office context.
- Education** 5/1997 Plymouth State College Plymouth, NH  
**Bachelor's of Science in Accounting**
- Graduated Cum Laude with a 3.33 GPA on a 4.0 scale.
  - Minor in Mathematics
- 8/2013 Plymouth State University Plymouth, NH  
**Master's Degree in Business Administration**
- Graduate Certificate in Health Care Administration
- Professional experience** 1/1997-Present Mid-State Health Center Plymouth, NH  
**Chief Financial Officer**
- Prepare financial statements, budgets, grant management, reconcile bank account and compile clinician productivity which is used to calculate their salary. Experience with billing office and hospital charges for PCP office, management of employees, use of MS Office and MSSQL
- Chief Information Officer**
- Supervise IT staff and work with contracted IT Company to make sure system is up-to-date, performing as needed and current hardware and software are working. Collaborate on future goals and needs as well as IT/IS projects.
- References** Available upon request.

# WENDY LASCH-WILLIAMS

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## Executive Profile

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Dynamic advancement professional with extensive project management experience from concept to implementation in the health care and non-profit environments. A highly-committed project leader with an energetic personality, collaborative nature, the proven ability to positively inspire others. Talents include identifying opportunities for growth; fund development; and implementing strategies to attain organization goals.

## Skills Highlight

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- ◆ Fund Development
- ◆ Change Management
- ◆ Community Engagement
- ◆ Marketing & Brand Development
- ◆ Team-oriented Leadership
- ◆ Skilled Facilitator

## Professional Experience

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### **DIRECTOR OF ADVANCEMENT & COMMUNICATIONS**

**10/2010 to Current**  
**Plymouth, NH**

#### **Mid-State Health Center**

- ◆ Established goals, objectives, and plans for advancement initiatives resulting in funding awards from private foundations, the State of New Hampshire, and Health Resources Services Administration and other funders.
- ◆ Lead and implement key initiatives at the local, state and national level which result in new revenue streams.
- ◆ Initiate and implement key communication strategies to improve public image and patient relations.
- ◆ Executed successful branding and marketing strategies.
- ◆ Resolved internal and external organizational communication challenges
- ◆ Facilitated the Patient Expert Advisory Team to ensure the patient perspective is considered as part of the organization's decision-making process
- ◆ Cultivated relationships with Board of Directors, funders, legislative representatives and community partners to further the mission of the organization.
- ◆ Managed annual fund reporting for private foundations and state and federal grants totaling over a \$1 million dollars each year.
- ◆ Created a tool to analyze and assess the alignment of potential funding opportunities with the mission of the organization.
- ◆ Prepared submissions for major grant funding opportunities with a high rate of funding success.
- ◆ Established several strategies to improve organizational culture.
- ◆ Played a key role in the opening of a new facility including planning, proposal for funding, purchasing and launch.

### **ADVANCEMENT & OUTREACH COORDINATOR**

**10/2010 to 07/2011**  
**Plymouth, NH**

#### **Communities for Alcohol and Drug-free Youth, Inc.**

- ◆ Provided contracted advancement and outreach support to CADY, Inc.
- ◆ Conducted community-based outreach efforts as well as marketing and promotion of programs and activities.
- ◆ Launched a highly-successful fundraising event which is now an annual event for the organization.
- ◆ Conducted development activities including grant research and writing resulting in new funding opportunities.

### **ASSISTANT COORDINATOR**

**10/2008 to 08/2010**  
**Plymouth, NH**

#### **Greater Plymouth Public Health Network**

- ◆ Developed and supported implementation of a community outreach strategy for the regional public health emergency activities related to H1N1 which laid the foundation for future public health initiatives.
- ◆ Coordinated, promoted and implemented vaccination clinics in the Region.
- ◆ Engaged regional municipalities, health organizations, and other stakeholders to ensure successful implementation of the project.
- ◆ This public health outreach project required a high level of stakeholder engagement in a short amount of time. The region's efforts were identified as one of the most successful in the State.

**ASSISTANT DIRECTOR**

**10/2007 to 03/2009**

**Belknap County Core Coalition**

**Meredith, NH**

- ◆ Successfully developed and implemented a variety of public relations and multi-media marketing initiatives
- ◆ to expand Coalition membership and increase member collaboration and participation.
- ◆ Facilitated, coordinated and led youth activities related to Coalition initiatives.

**PRINCIPAL/OWNER**

**06/2006 to 10/2010**

**All That Matters, LLC**

**Bristol, NH**

- ◆ Provided fundraising and administrative support for area non-profit organization.
- ◆ Guided local municipality in the development of their Local Emergency Operations Plan.
- ◆ Conducted contracted family and marital mediation and court-appointed Guardian ad Litem services.

**PROGRAM YOUTH SPECIALIST**

**10/2004 to 06/2007**

**Franklin High School**

**Franklin, NH**

- ◆ Implemented the School-to-Work curriculum, teaching employment skills, practical math and reading skills, self-awareness skills, and life skills to high school students.
- ◆ Coordinated support services, leadership events, community service projects, job shadowing, and work-based learning opportunities.

**TUTOR/PROGRAM ASSISTANT**

**08/2003 to 09/2004**

**Laconia Out of School Youth Program**

**Laconia, NH**

- ◆ Implemented the national Jobs for America's Graduates curriculum, teaching employment skills, self-awareness skills, and life skills to out of school youth.
- ◆ Assisted in the planning and implementation of leadership activities, community service projects, and field trips.

**ASSISTANT TO THE SUPERINTENDENT - Finance**

**03/2000 to 06/2001**

**Newfound Area School District**

**Bristol, NH**

- ◆ Acted as liaison to the Superintendent in special projects such as capital improvement projects, equipment purchasing, annual maintenance contracts and building maintenance projects.
- ◆ Monitored and managed general ledger entries for \$14 million budget to ensure fiscal responsibility across the organization.
- ◆ Managed and implemented a successful conversion to new accounting software.
- ◆ Processed bi-weekly payroll for 300+ employees and accounts payable for 150+ vendors.
- ◆ Started with the organization in 1997 as administrative support and was promoted to Assistant to the Superintendent.

**Education**

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**MBA: Healthcare Administration, 2014**

Plymouth State University, Plymouth, NH

**Bachelor of Science: Human Services Administration, 2010**

Granite State College, Concord, NH

**Certificate Program: Mediation and Conflict Management, 2002**

Woodbury College, Montpelier, VT

**Associate of Science: Business Management, 1990**

Champlain College, Burlington, VT

**Interests**

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Stand-up paddle boarding, running and reading.

**Professional Affiliations**

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Member & President (2015-16), Bristol Rotary Club (2011 - present)

Member, Medical Group Management Association of NH (2011 - present)

Member, Medical Group Management Association (2011 - present)

**Additional Information**

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Active member of the Tapply-Thompson Community Center Board and NH Marathon committee. Instrumental in the addition of a children's race as part of the NH Marathon. Co-hosted a regionally popular public access television production to highlight interesting activities in the Newfound community for two seasons (12 +/- episodes).

**KEY ADMINISTRATIVE PERSONNEL****NH Department of Health and Human Services****Contractor Name:** Mid-State Health Center**Name of Program:** Regional Public Health Network Services

<b>BUDGET PERIOD: SFY 22</b>				
<b>NAME</b>	<b>JOB TITLE</b>	<b>SALARY</b>	<b>PERCENT PAID FROM THIS CONTRACT</b>	<b>AMOUNT PAID FROM THIS CONTRACT</b>
Angel Ekstrom	PHN Coordinator	\$65,693	100.00%	\$65,693.00
Robert MacLeod	CEO	\$200,000	0.45%	\$900.00
Bill Sweeney	CFO	\$155,000	1.54%	\$2,392.93
Wendy Lasch-Williams	Grants & Programming Director	\$115,000	0.77%	\$884.00
Colleen Schoenbrun	PHAC Coordinator	\$39,728	62.93%	\$25,000.00
		\$0	0.00%	\$0.00
<b>TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)</b>				<b>\$94,869.93</b>

<b>BUDGET PERIOD: SFY 23</b>				
<b>NAME</b>	<b>JOB TITLE</b>	<b>SALARY</b>	<b>PERCENT PAID FROM THIS CONTRACT</b>	<b>AMOUNT PAID FROM THIS CONTRACT</b>
Angel Ekstrom	PHN Coordinator	\$67,992	100.00%	\$67,992.00
Robert MacLeod	CEO	\$206,000	0.44%	\$900.00
Bill Sweeney	CFO	\$159,650	1.50%	\$2,392.93
Wendy Lasch-Williams	Grants & Programming Director	\$118,450	0.75%	\$884.00
Colleen Schoenbrun	PHAC Coordinator	\$40,920	61.09%	\$25,000.00
		\$0	0.00%	\$0.00
<b>TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)</b>				<b>\$97,168.93</b>

**State of New Hampshire  
Department of Health and Human Services  
Amendment #8**

This Amendment to the Regional Public Health Network Services contract is by and between the State of New Hampshire, Department of Health and Human Services ("State" or "Department") and North Country Health Consortium ("the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Informational Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Informational Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), as amended with Governor approval on December 17, 2020 and presented to the Executive Council as an Informational Item on April 7, 2021 (Informational Item # M), as amended with Governor approval on January 29, 2021 and to be presented to the Executive Council as an Informational Item on May 19, 2021, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. General Provisions, Block 1.7, Completion Date, to read:  
June 30, 2022
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,339,705
3. Modify Exhibit A Scope of Work by replacing it in its entirety with Exhibit A Scope of Work, Amendment #8, which is attached hereto and incorporated by reference herein.
4. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 1.2, to read:
  - 1.2. The Contractor shall provide the services in Exhibit A, Scope of Services in compliance with funding requirements. The Department has identified:
    - 1.2.1. The Contractor as a Subrecipient, in accordance with 2 CFR 200.331.
    - 1.2.2. The Department has identified this Agreement as NON-R&D, in accordance with 2 CFR §200.332.
5. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 2, Program Funding, to read:
  2. Program Funding
    - 2.1. The Contractor shall be paid up to the amounts specified for each program/scope of work identified in Exhibit B-1 Amendment #8, Program Funding.
    - 2.2. The Contractor may be reimbursed for allowable costs dating back to January 20, 2020 for the provision of services specified in Exhibit A-1 Additional Scope of Services

North Country Health Consortium

Contractor Initials BM

COVID-19 Response.

- 2.3. Payment for the I-CARE program shall be on a lump sum basis for authorized expenditures incurred in the fulfillment of the Department approved I-CARE NH work plan and budget. Authorized expenditures shall include printing, mailing, and media related expenses.
6. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 3, Subsection 3.1, to read:
  - 3.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this agreement, and shall be in accordance with the approved budget line items in Section 2, Program Funding, above.
7. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, Section 4, to read:
  4. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A – Amendment #8, Scope of Services and this Exhibit B Amendment #1.
8. Modify Exhibit B Amendment #1, Method and Conditions Precedent to Payment, by adding Section 7, to read:
  7. The Contractor shall bill the federal determined vaccine administration rate for each vaccination administered on any individual that qualifies for the federally supplied vaccine. The Contractor shall:
    - 7.1 Bill the vaccine administration fee to private health insurance for individuals who have private health insurance at the rate allowed by the insurance companies.
    - 7.2 Not bill any patient directly for administration fees either prior to or after billing insurance companies.
9. Modify Exhibit B-1, Program Funding, Amendment #7 by replacing it in its entirety with Exhibit B-1 Amendment #8, Program Funding, which is attached hereto and incorporated by reference herein.
10. Add Exhibit B-14 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
11. Add Exhibit B-15 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
12. Add Exhibit B-16 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
13. Add Exhibit B-17 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
14. Add Exhibit B-18 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
15. Add Exhibit B-19 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
16. Add Exhibit B-20 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.
17. Add Exhibit B-21 Budget, Amendment #8, which is attached hereto and incorporated by reference herein.

North Country Health Consortium

Contractor Initials 

All terms and conditions of the Contract and prior amendments not modified by this Amendment #8 remain in full force and effect. This Amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

5/18/2021  
\_\_\_\_\_  
Date

DocuSigned by:  
*Patricia M. Tilley*  
\_\_\_\_\_  
Name: Patricia M. Tilley  
Title: Interim Director

5/17/2021  
\_\_\_\_\_  
Date

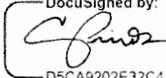
North Country Health Consortium  
DocuSigned by:  
*Becky McEnany*  
\_\_\_\_\_  
Name: Becky McEnany  
Title: Executive Director

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

OFFICE OF THE ATTORNEY GENERAL

5/19/2021

Date

DocuSigned by:  
  
D5CA8202E32C4AF

Name: Catherine Pinos

Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**

**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. For the purposes of this Agreement, the Department has identified the Contractor as a Subrecipient), in accordance with 2 CFR 200.300.

**2. Scope of Services**

- 2.1. Lead Organization to Host a Regional Public Health Network (RPHN)
  - 2.1.1. The Contractor shall serve as a lead organization to host a Regional Public Health Networks for the North Country region, as defined by the Department, to provide a broad range of public health services within one or more of the state's thirteen designated public health regions. The purpose of the RPHNs statewide are to coordinate a range of public health and substance misuse-related services, as described below to assure that all communities statewide are covered by initiatives to protect and improve the health of the public.
  - 2.1.2. The Contractor shall provide services that include, but are not limited to:
    - 2.1.2.1. Sustaining a regional Public Health Advisory Council (PHAC).
    - 2.1.2.2. Planning for and responding to public health incidents and emergencies.
    - 2.1.2.3. Preventing the misuse of substances.
    - 2.1.2.4. Facilitating and sustaining a continuum of care to address substance use disorders.
    - 2.1.2.5. Implementing young adult substance misuse prevention strategies.
    - 2.1.2.6. Ensuring contract administration and leadership.

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2.2. Public Health Advisory Council

2.2.1. The Contractor shall coordinate and facilitate the regional Public Health Advisory Council (PHAC) to provide a PHAC leadership team and direction to public health activities within the assigned region. The Contractor shall:

2.2.1.1. Maintain a set of operating guidelines or by-laws for the PHAC;

2.2.1.2. Recruit, train, and retain diverse regional PHAC representatives to serve on a PHAC leadership team with the authority to:

2.2.1.2.1. Approve regional health priorities and implement high-level goals and strategies.

2.2.1.2.2. Address emergent public health issues as identified by regional partners and the Department and mobilize key regional stakeholders to address the issue.

2.2.1.2.3. Form committees and workgroups to address specific strategies and public health topics.

2.2.1.2.4. Participate in and inform hospital needs assessments and data collection activities within the public health region.

2.2.1.2.5. Make recommendations within the public health region and to the Department regarding funding and priorities for service delivery based on needs assessments and data collection.

2.2.1.3. Ensure the PHAC leadership team meets at least quarterly in order to:

2.2.1.3.1. Ensure meeting minutes are available to the public upon request.

2.2.1.3.2. Develop a conflict of interest statement and ensure all leadership team members sign a statement.

2.2.1.4. Ensure a currently licensed health care professional serves as a medical director for the RPHN who is responsible for functions that include, but are not limited to:

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- 2.2.1.4.1. Writing and issuing standing orders, as needed, to ensure delivery of programs and services funded through this agreement.
- 2.2.1.4.2. Working with medical providers and the Department on behalf of the PHAC on any emergent public health issues.
- 2.2.1.4.3. Participating in the Multi-Agency Coordinating Entity (MACE) during responses to public health emergencies as appropriate and available.
- 2.2.1.5. Conduct, at minimum, biannual meetings of the PHAC.
- 2.2.1.6. Develop annual action plans for the services in this Agreement, as advised by the PHAC.
- 2.2.1.7. Collect, analyze and disseminate data relative to the health status of the region; educate network partners about on-line and other sources of data; and participate in community health assessments.
- 2.2.1.8. Maintain a current Community Health Improvement Plan (CHIP) that is aligned with the State Health Improvement Plan (SHIP) and informed by other health improvement plans developed by community partners.
- 2.2.1.9. Provide leadership through guidance, technical assistance and training to community partners to implement and ensure CHIP priorities and monitor CHIP implementation.
- 2.2.1.10. Publish an annual report disseminated to the community capturing the PHAC's activities and outcomes and progress towards addressing CHIP priorities.
- 2.2.1.11. Maintain a website that provides information to the public and agency partners, which includes but is not limited to, information on the PHAC, CHIP, Substance Misuse Program (SMP), Continuum of Care (CoC), YA and PHEP programs.
- 2.2.1.12. Advance the work of RPHNs by conducting a minimum of two educational and training programs annually to RPHN partners and others.
- 2.2.1.13. Educate partners and stakeholder groups, including elected officials, on the PHAC.

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2.2.1.14. Use reasonable efforts to obtain other sources of funding to support the activities and priorities of the PHAC and implementation of the CHIP, for the purposes of sustaining public health improvement efforts.

**2.3. Public Health Emergency Preparedness**

2.3.1. The Contractor shall provide leadership and coordination to improve regional public health emergency response plans and the capacity of partnering organizations to mitigate, prepare for, respond to, and recover from public health incidents and emergencies. The Contractor shall:

2.3.1.1. Ensure all activities are directed toward meeting the national standards described in the U.S. Centers for Disease Control and Prevention’s (CDC) Public Health Preparedness Capabilities (October 2018) and subsequent editions.

2.3.1.2. Convene and coordinate a regional Public Health Emergency Preparedness (PHEP) and/or coordinating and/or planning committee and/or workgroup to:

2.3.1.2.1. Improve regional emergency response plans; and

2.3.1.2.2. Improve the capacity of partnering entities to mitigate, prepare for, respond to and recover from public health emergencies.

2.3.1.3. Convene, at minimum, quarterly meetings of the regional PHEP committee and/or workgroup.

2.3.1.4. Ensure and document committee and/or workgroup review and concurrence with revision to the Regional Public Health Emergency Annex (RPHEA), annually.

2.3.1.5. Maintain a three-year Training and Exercise Program that, at a minimum, includes all drill and exercises required under the Strategic National Stockpile (SNS) and other requirements issued by CDC.

2.3.1.6. Develop statements of the mission and goals for the regional PHEP initiative including the workgroup.

2.3.1.7. Submit an annual work plan based on a template provided by the Department.

2.3.1.8. Sponsor, and organize the logistics for, a minimum of two trainings annually for regional partners.

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- 2.3.1.9. Collaborate with the Department's, Division of Public Health Services (DPHS); the Community Health Institute (CHI); NH Fire Academy; Granite State Health Care Coalition (GSHCC); and other training providers to implement training programs.
- 2.3.1.10. Revise the Regional Public Health Emergency Annex (RPHEA) based on guidance from the Department. The Contractor shall:
  - 2.3.1.10.1. Upload the RPHEA with all appendices, attachments, and other supporting materials to a web-based document-sharing site identified by the Department.
  - 2.3.1.10.2. Develop new appendices based on priorities identified by the Department using templates provided by the Department.
  - 2.3.1.10.3. Disseminate, educate, and train partners on the RPHEA to ensure a coordinated response to emergencies.
  - 2.3.1.10.4. Participate in workgroups to develop or revise components of the RPHEA that are convened by the Department or the agency contracted to provide training and technical assistance to RPHNs.
- 2.3.1.11. Understand the hazards and social conditions that increase vulnerability within the public health region including but not limited to cultural, socioeconomic, and demographic factors. The Contractor shall:
  - 2.3.1.11.1. Implement strategies and activities in response to priorities established during the jurisdictional risk assessment conducted during SFY 2019.
  - 2.3.1.11.2. Participate, as requested, in risk and/or vulnerability assessments conducted by hospital-based health care systems; municipalities; entities serving individuals with functional needs; and other public health, health care, behavioral health and environmental health entities.
- 2.3.1.12. Strengthen community partnerships to support public health preparedness and implement strategies to

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- strengthen community resilience with governmental, public health, and health care entities that describe the respective roles and responsibilities of the parties in the planning for and response to a public health incident or emergency.
- 2.3.1.13. Regularly communicate with the Department's Area Agency contractor that provides developmental and acquired brain disorder services in the region.
- 2.3.1.14. Ensure capacity to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management personnel.
- 2.3.1.15. Identify and, as needed, train individuals to coordinate and disseminate information to the public during an incident or emergency.
- 2.3.1.16. Disseminate Health Alert Network messages and other warnings issued by State or local authorities on a routine basis and during an incident or emergency.
- 2.3.1.17. Maintain the capacity to utilize WebEOC, the State's emergency management platform, during incidents or emergencies.
- 2.3.1.18. Provide training as needed to individuals to participate in emergency management using WebEOC.
- 2.3.1.19. Maintain the capacity to support mass fatality management activities implemented by State officials during emergencies.
- 2.3.1.20. Maintain the capacity to coordinate public health and supportive health care services in emergency shelters through collaboration with municipal officials.
- 2.3.1.21. Implement activities that support the CDC's Operational Readiness Review (ORR) program in accordance with current requirements and guidance. Coordinate with the Department's SNS Coordinator to identify appropriate actions and priorities, that include, but are not limited to:
- 2.3.1.21.1. Semi-annual submission of Medical Countermeasures Technical Assistance Action Plans.
- 2.3.1.21.2. Annual submission of either ORR or self-assessment documentation.



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- 2.3.1.21.3. ORR site visit as scheduled by the CDC and the Department.
- 2.3.1.21.4. Completion of relevant drills/exercises and supporting documents to meet annual CDC exercise requirements.
- 2.3.1.22. As funding allows, maintain an inventory of supplies and equipment for use during incidents and emergencies by:
  - 2.3.1.22.1. Executing MOUs with agencies to store, inventory, and rotate these supplies. prior to purchasing new supplies or equipment.
  - 2.3.1.22.2. Uploading, at least annually, a complete inventory to a Health Information Management System (HIMS) identified by the Department.
- 2.3.1.23. Recruit, train, and retain volunteers to assist during incidents or emergencies, with a priority on individuals from the health care sector. The Contractor shall:
  - 2.3.1.23.1. Maintain proficiency in the volunteer management system supported by the Department.
  - 2.3.1.23.2. Enroll and manage local volunteers to ensure the capacity to activate and deploy volunteers during an incident or emergency.
  - 2.3.1.23.3. Provide training to individuals as needed to ensure the capacity to utilize the system during incidents or emergencies.
  - 2.3.1.23.4. Conduct quarterly notification drills of volunteers.
- 2.3.1.24. Participate, as requested by the Department, in drills and exercises conducted by other regional entities as appropriate; and participate in statewide drills and exercises as appropriate and as funding allows.
- 2.3.1.25. Participate, as requested by the Department, in a statewide healthcare coalition directed toward meeting the national standards described in the 2017-2022 Health Care Preparedness and Response Capabilities guidance published by the U.S. Department of Health

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and Human Services Assistant Secretary for Preparedness and Response.

2.3.1.26. Plan and implement targeted Hepatitis A vaccination clinics, as requested by the Department, ensuring clinics take place at locations where individuals at-risk for Hepatitis A can be accessed, according to guidance issued by the Department.

**2.4. Substance Misuse Prevention**

2.4.1. The Contractor shall provide leadership and coordination to impact substance misuse prevention and related health promotion activities by implementing, promoting and advancing evidence-based primary prevention approaches, programs, policies, and services. The Contractor shall:

2.4.1.1. Prevent and reduce substance use disorder (SUD) risk factors and strengthen protective factors known to influence behaviors.

2.4.1.2. Maintain a substance misuse prevention SMP leadership team consisting of regional representatives with a special expertise in substance misuse prevention that can help guide and assist with awareness and advance substance misuse prevention efforts in the region.

2.4.1.3. Implement the strategic prevention model in accordance with the SAMHSA Strategic Prevention Framework that includes: assessment, capacity development, planning, implementation and evaluation.

2.4.1.4. Support and advance the implementation of evidenced-informed approaches, programs, policies and services within the RPHN region that adhere to evidence-based guidelines, in accordance with the Department's guidance on what is evidenced informed.

2.4.1.5. Maintain, revise, and publicly promote a data driven regional substance misuse prevention Three Year - Strategic Plan that aligns with the Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment, and Recovery Plan, and the State Health Improvement Plan.

2.4.1.6. Develop an annual work plan for Department approval that guides actions and includes outcome-based logic

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models that demonstrates short-, intermediate- and long-term measures in alignment the Three-Year Strategic Plan.

- 2.4.1.7. Advance, promote and implement substance misuse primary prevention of strategies that incorporate the Institute of Medicine (IOM) categories of prevention: universal, selective and indicated by addressing risk factors and protective factors known to impact behaviors that target substance misuse and reduce the progression of substance use disorders and related consequences for individuals, families and communities.
- 2.4.1.8. Produce and disseminate an annual report that demonstrates successes, challenges, outcomes from the previous year and projected goals for the following year.
- 2.4.1.9. Comply with the Federal Substance Abuse Block Grant requirements for substance misuse primary prevention strategies and collection and reporting of data as outlined in the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures.
- 2.4.1.10. Ensure substance misuse prevention is represented at PHAC meetings and with a bi-directional exchange of information to advance efforts of substance misuse prevention initiatives.
- 2.4.1.11. Assist, as directed by the Department's Bureau of drug and Alcohol Services (BDAS), SMP staff with the Federal Block Grant Comprehensive Synar activities that include, but are not limited to, merchant and community education efforts; youth involvement; and policy and advocacy efforts.

**2.5. Continuum of Care**

2.5.1. The Contractor shall provide leadership and/or support for activities that assist in the development of a robust continuum of care (CoC) utilizing the principles of Resiliency and Recovery Oriented Systems of Care (RROSC). The Contractor shall:

- 2.5.1.1. Engage regional partners in ongoing update of regional assets and gaps, and regional CoC plan development

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and implementation. The Contractor shall ensure regional partners include, but are not limited to:

- 2.5.1.1.1. Prevention, Intervention, Treatment, Recovery Support Services providers.
- 2.5.1.1.2. Primary health care providers.
- 2.5.1.1.3. Behavioral health care providers.
- 2.5.1.1.4. Other interested and/or affected parties.
- 2.5.1.2. Work toward, and adapt as necessary and indicated, the priorities and actions identified in the regional CoC development plan.
- 2.5.1.3. Facilitate and/or provide support for initiatives that result in:
  - 2.5.1.3.1. Increased awareness of and access to services;
  - 2.5.1.3.2. Increased communication and collaboration among providers; and
  - 2.5.1.3.3. Increases in capacity and delivery of services.
- 2.5.1.4. Demonstrate progress toward priorities and actions identified in the regional CoC development plan and service capacity increase activities.
- 2.5.1.5. Coordinate activities with other RPHN projects and existing and emerging initiatives that relate to CoC work including, but not limited to, the Integrated Delivery Networks.
- 2.5.1.6. Work with statewide and other initiatives to disseminate resource guides and other service access information to places where people are likely to seek assistance including but not limited to health service providers; public and charter schools and institutes of higher education; police and fire stations; municipal government buildings; and businesses in every community of the region.
- 2.5.1.7. Engage regional stakeholders to assist with information dissemination.

2.6. Young Adult Substance Misuse Prevention Strategies

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- 2.6.1. The Contractor shall provide evidence-informed services and/or programs for young adults, ages 18 to 25 years old in high-risk and/or high-need communities within the regions.
- 2.6.2. The Contractor shall ensure services and programs are both appropriate and culturally relevant to the targeted population. The Contractor shall:
  - 2.6.2.1. Ensure evidenced-informed substance misuse prevention strategies are designed for targeted populations with the goals of:
    - 2.6.2.1.1. Reducing risk factors.
    - 2.6.2.1.2. Enhancing protective factors to positively impact healthy decisions around the use of substances; and
    - 2.6.2.1.3. Increasing knowledge of the consequences of substance misuse.
  - 2.6.2.2. Develop an annual work plan, for Department approval, that guides actions and includes outcomes to be achieved.
- 2.7. School Based Vaccination Clinics
  - 2.7.1. The Contractor shall provide organizational structure to administer school-based flu clinics (SBC). The Contractor shall:
    - 2.7.1.1. Conduct outreach to schools to enroll or continue in the SBC initiative.
    - 2.7.1.2. Coordinate information campaigns with school officials targeted to parents and/or guardians to maximize student participation rates.
    - 2.7.1.3. Distribute state-supplied promotional vaccination materials.
    - 2.7.1.4. Distribute, obtain, verify and store written consent forms from legal guardians prior to administration of vaccines in compliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and other state and federal regulations.
    - 2.7.1.5. Request the NH Immunization Program (NHIP) to store consent forms once the Contractor has completed data collection and reporting only if the Contractor lacks the ability to store vaccination consent forms within HIPAA guidelines.

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- 2.7.1.6. Document, verify and store written or electronic record of vaccine administration in compliance with HIPAA and other state and federal regulations.
- 2.7.1.7. Request the NHIP to store written or electronic records of vaccine administration once the Contractor completes data collection and reporting only if the Contractor lacks the ability to store vaccination records within HIPAA guidelines.
- 2.7.1.8. Provide written communication of vaccination status, indicating either completed or not completed, to the parent and/or legal guardian upon the day of vaccination.
- 2.7.1.9. Provide vaccination information to the patient's primary care provider following HIPAA, federal and state guidelines, unless the parent and/or legal guardian requests that the information not be shared, in which case the information may be given to the parent and/or guardian to distribute to the primary care providers. The Contractor shall ensure information includes:
  - 2.7.1.9.1. Patient full name and one other unique patient identifier;
  - 2.7.1.9.2. Vaccine name;
  - 2.7.1.9.3. Vaccine manufacturer;
  - 2.7.1.9.4. Lot number;
  - 2.7.1.9.5. Date of vaccine expiration
  - 2.7.1.9.6. Date of vaccine administration;
  - 2.7.1.9.7. Date Vaccine Information Sheet (VIS) was given;
  - 2.7.1.9.8. Edition date of the VIS given;
  - 2.7.1.9.9. Name and address of entity that administered the vaccine (Contractor's name); and
  - 2.7.1.9.10. Full name and title of the individual who administered the vaccine.
- 2.7.1.10. Adhere to current federal guidelines for vaccine administration, including but not limited to disseminating a Vaccine Information Statement, in order that the legal authority, legal guardian, and/or

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parent is provided access to the information on the day of vaccination.

- 2.7.1.11. Develop and maintain written policies and procedures to ensure the safety of employees, volunteers and patients.
- 2.7.1.12. Encourage schools participating in the SBC program to submit a daily report of the total number of students absent and total number of students absent with influenza-like illness for in session school days.
- 2.7.1.13. Submit a list of SBC clinics planned for the upcoming season to NHIP, providing updates as applicable.
- 2.7.2. The Contractor shall safely administer vaccine supplied by NHIP. The Contractor shall:
  - 2.7.2.1. Obtain medical oversight, standing orders, emergency interventions and/or protocols and clinical expertise through providing a medical and/or clinical director.
  - 2.7.2.2. Ensure the medical and/or clinical director is able to prescribe medication in the State of New Hampshire.
  - 2.7.2.3. Ensure the medical and/or clinical director is a Medical Doctor (MD), Doctor of Osteopathic Medicine (DO), or Advanced Practice Registered Nurse (APRN).
  - 2.7.2.4. Ensure copies of standing orders, emergency interventions and/or protocols are available at all clinics.
  - 2.7.2.5. Recruit, train, and retain qualified medical and non-medical volunteers to assist with operating the clinics.
  - 2.7.2.6. Procure necessary supplies to conduct school vaccine clinics, including but not limited to:
    - 2.7.2.6.1. Emergency management medications and equipment.
    - 2.7.2.6.2. Needles.
    - 2.7.2.6.3. Personal protective equipment.
    - 2.7.2.6.4. Antiseptic wipes.
    - 2.7.2.6.5. Non-latex bandages.
- 2.7.3. The Contractor shall ensure proper vaccine storage, handling and management. The Contractor shall:
  - 2.7.3.1. Submit a signed Vaccine Management Agreement to NHIP, annually, ensuring all listed requirements are met.

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- 2.7.3.2. Ensure the SBC coordinator completes the NHIP vaccination training, annually.
- 2.7.3.3. Ensure the SBC coordinator completes vaccine ordering and vaccine storage and handling training, annually.
- 2.7.3.4. Retain a copy of SBC coordinator training certificates on file.
- 2.7.3.5. Utilize NHIP training materials or other educational materials, as approved by the Department prior to use, for annual training of SBC staff on vaccine administration, ordering, storage and handling.
- 2.7.3.6. Retain a copy of all training materials on site for reference during SBCs.
- 2.7.3.7. Ensure vaccine is stored at the manufacturer's recommended temperatures the entire time the vaccine is in the Contractor's custody.
- 2.7.3.8. Record temperatures twice daily, AM and PM, during normal business hours, for the primary refrigerator and hourly when the vaccine is stored outside of the primary refrigerator.
- 2.7.3.9. Ensure that an emergency backup plan is in place in case of primary refrigerator failure.
- 2.7.3.10. Utilize temperature data logger for all vaccine monitoring including primary refrigerator storage as well as the entire duration vaccine is outside of the primary refrigeration unit.
- 2.7.3.11. Account for every dose of vaccine.
- 2.7.3.12. Submit a monthly temperature log for the vaccine storage refrigerator.
- 2.7.3.13. Notify NHIP by contacting the NHIP Nursing helpline and faxing incident forms of any adverse event within 24 hours of event occurring.
- 2.7.3.14. In the event of a vaccine temperature excursion where the stored vaccine experiences temperatures outside of the manufacturers recommended temperatures, the Contractor shall:
  - 2.7.3.14.1. Immediately quarantine the vaccine in an appropriate temperature setting,

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- 2.7.4.5.4. Discussions relative to future strategies and plans for increasing students vaccinated, including suggestions on how state-level resources may aid in the effort.
- 2.7.5. The Contractor shall be funded through a combination of base funding and incentivized funding, in order to encourage the Contractor to offer vaccination at schools that have a greater economic disparity, as identified through reports generated by the NHIP in collaboration with the Department of Education (DOE).
- 2.7.6. To receive full funding, contractors will need to serve at least 50% of schools listed, however:
  - 2.7.6.1. If the Contractor is unable to provide vaccine to at least 50% of the schools listed, the Contractor may show evidence of providing vaccine to additional schools listed but not previously served the year before in order to receive full funding.
  - 2.7.6.2. If NHIP and the Contractor agree that all options for trying to offer vaccination services at a school have been exhausted, NHIP will replace that school with the next school listed.
  - 2.7.6.3. If a Contractor is unable to demonstrate the growth listed in 2.7, funding will be awarded on a sliding scale based on the percentage of schools listed, calculated as follows:
    - 2.7.6.3.1. The percentage of listed school covered divided by 50%.
    - 2.7.6.3.2. The percentage determined by the equation above will be multiplied by the total amount of dollars available for funding, beyond the base portion of funding, for a total of dollars awarded for that year.
- 2.8. Contract Administration and Leadership
  - 2.8.1. The Contactor shall introduce and orient all funded staff to the work of activities conducted through the contract agreement. The Contractor shall:
    - 2.8.1.1. Ensure detailed work plans are submitted annually for each of the funded services based on templates provided by the Department.

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- 2.8.1.2. Ensure all staff have the appropriate training, education, experience, skills, and ability to fulfill the requirements of the positions they hold and provide training, technical assistance or education as needed to support staff in areas of deficit in knowledge and/or skills.
- 2.8.1.3. Ensure communication and coordination when appropriate among all staff funded under this contract.
- 2.8.1.4. Ensure ongoing progress is made to successfully complete annual work plans and achieve outcomes.
- 2.8.1.5. Ensure financial management systems are in place with the capacity to manage and report on multiple sources of state and federal funds, including work completed by subcontractors.

**2.9. I-CARE Program:**

- 2.9.1. The Contractor shall support the suicide prevention goals of the Department and NH's Suicide Prevention Council.
- 2.9.2. The Contractor shall develop a work plan, subject to Department approval, to publicize and distribute information and resource in the region.
- 2.9.3. The Contractor shall ensure activities in the work plan support:
  - 2.9.3.1. The I-CARE NH mental health and wellness initiative;
  - 2.9.3.2. 9-8-8 National Suicide Prevention lifeline expansion project; and/or
  - 2.9.3.3. NH's Suicide Prevention Council's strategic plan.
- 2.9.4. The Contractor shall participate in a planning call with the Department within fifteen (15) days of the contract effective date.
- 2.9.5. The Contractor shall submit an I-CARE NH work plan and budget for Department approval within thirty (30) days of the contract effective date.

**3. Training and Technical Assistance Requirements**

- 3.1. The Contractor shall participate in training and technical assistance as follows:
  - 3.1.1. Public Health Advisory Council
    - 3.1.1.1. Attend semi-annual meetings of PHAC leadership convened by Department's DPHS and/or BDAS.
    - 3.1.1.2. Complete a technical assistance needs assessment.
  - 3.1.2. Public Health Emergency Preparedness

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- 3.1.2.1. Attend bi-monthly meetings of PHEP coordinators and MCM ORR project meetings convened by the Department’s DPHS and/or Emergency Services Unit (ESU).
- 3.1.2.2. Complete a technical assistance needs assessment.
- 3.1.2.3. Attend a maximum of two trainings per year offered by Department’s DPHS and/or ESU or the agency contracted by the Department’s DPHS to provide training programs.
- 3.1.3. Substance Misuse Prevention
  - 3.1.3.1. SMP coordinator shall attend community of practice meetings and/or activities.
  - 3.1.3.2. At the Department’s request, engage with ongoing technical assistance to ensure the RPHN workforce is knowledgeable, skilled and able to provide all scopes of work, including, but not limited to:
    - 3.1.3.2.1. Using data to inform plans and evaluate outcomes.
    - 3.1.3.2.2. Using appropriate measures and tools.
  - 3.1.3.3. Attend all bi-monthly meetings of SMP coordinators.
  - 3.1.3.4. Attend additional meetings, conference calls and webinars as required by the Department.
  - 3.1.3.5. SMP lead staff shall be credentialed within one year of hire as Certified Prevention Specialist to meet competency standards established by the International Certification and Reciprocity Consortium (IC&RC), and the New Hampshire Prevention Certification Board.
  - 3.1.3.6. SMP staff lead must attend required training, Substance Abuse Prevention Skills Training (SAPST) and Prevention Ethics.
- 3.1.4. Continuum of Care
  - 3.1.4.1. Be familiar with the evidence-based Strategic Planning Model, which includes five steps:
    - 3.1.4.1.1. Assessment;
    - 3.1.4.1.2. Capacity;
    - 3.1.4.1.3. Planning;
    - 3.1.4.1.4. Implementation; and
    - 3.1.4.1.5. Development.

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- 3.1.4.2. Be familiar with RROSC and NH DHHS CoC systems development and the “No Wrong Door” approach to systems integration.
- 3.1.4.3. Attend CoC Facilitator meetings as directed by the Department.
- 3.1.4.4. Participate in the CoC learning opportunities as they become available to:
  - 3.1.4.4.1. Receive information on emerging initiatives and opportunities;
  - 3.1.4.4.2. Discuss best ways to integrate new information and initiatives;
  - 3.1.4.4.3. Exchange information on CoC development work and techniques;
  - 3.1.4.4.4. Assist in the refinement of measures for regional CoC development; and
  - 3.1.4.4.5. Obtain other information as indicated by BDAS or requested by CoC Facilitators.
- 3.1.4.5. Work with designated BDAS technical assistance and data and/or evaluation vendors to develop metrics and measures that demonstrate the value of regional CoC development work.
- 3.1.5. Young Adult Strategies
  - 3.1.5.1. Ensure all young adult prevention program staff receive appropriate training in their selected evidenced-informed program by an individual authorized by the program developer.
  - 3.1.5.2. Participate in ongoing technical assistance, consultation, and targeted trainings from the Department and the entity contracted by the Department to provide training and technical assistance.
  - 3.1.5.3. Attend monthly meetings for Young Adult Strategy Coordinators and other meetings as directed by the Department
  - 3.1.5.4. Attend Prevention Community of Practice quarterly meetings.
- 3.1.6. School-Based Clinics



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**

- 3.1.6.1. Staffing of clinics requires a currently licensed clinical staff person with a current Basic Life Support (BLS) Certification at each clinic to provide oversight and direction of clinical operations.
- 3.1.6.2. Clinical license, or copy from the NH online license verification showing the license type, expiration and status, and current BLS certificate shall be retained in the training file.

**4. Staffing**

- 4.1. The Contractor’s staffing structure must include a contract administrator and a finance administrator to administer all scopes of work relative to this agreement. In addition, while there is staffing relative to each scope of work presented below, the administrator must 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 to effectively lead regional efforts related to public health planning and service delivery. The funded staff must function as a team, with complementary skills and abilities across these foundational areas of expertise to function as an organization to lead the RPHN’s efforts.
- 4.2. The Contractor shall hire or subcontract and provide support for a designated project lead for each of the following four (4) scopes of work: PHEP, SMP, CoC Facilitator, and Young Adult Strategies. The Department recognizes that this agreement provides funding for multiple positions across the multiple program areas, which may result in some individual staff positions having responsibilities across several program areas, including, but not limited to, supervising other staff. A portion of the funds assigned to each program area may be used for technical and/or administrative support personnel. See Table 1 – Minimum Staffing Requirements.
- 4.3. Table 1 – Minimum Staffing Requirements

Position Name	Minimum Required Staff Positions
Public Health Advisory Council	No minimum FTE requirement
Substance Misuse Prevention Coordinator	Designated Lead
Continuum of Care Facilitator	Designated Lead
Public Health Emergency Preparedness Coordinator	Designated Lead
Young Adult Strategies (optional)	Designated Lead

**5. Reporting**

North Country Health Consortium

Exhibit A – Amendment # 8

Contractor Initials

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**

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- 5.1. The Contractor shall participate in Site Visits, which includes but is not limited to:
  - 5.1.1. Participating in an annual site visit conducted by the Department’s DPHS and/or BDAS that includes all funded staff, the contract administrator and financial manager.
  - 5.1.2. Participating in site visits and technical assistance specific to a single scope of work.
  - 5.1.3. Submitting other information that may be required by federal and state funders during the contract period.
- 5.2. The Contractor shall provide Reports for the PHAC that include, but are not limited to, submitting quarterly PHAC progress reports using an online system administered by the Department’s DPHS.
- 5.3. The Contractor shall provide Reports for Substance Misuse Prevention that include, but are not limited to:
  - 5.3.1. Submitting quarterly SMP Leadership Team meeting agendas and minutes.
  - 5.3.2. Ensuring Three-Year Plans are current and posted to RPHN website, and that any revisions to plans are approved by the Department’s BDAS.
  - 5.3.3. Submitting annual work plans and annual logic models with short-, intermediate- and long-term measures.
  - 5.3.4. Inputting data on a monthly basis by the 20th business day of the month to an online database PWITS per Department guidelines and in compliance with the Federal Regulatory Requirements for Substance Abuse and Mental Health Service Administration 20% Set-Aside Primary Prevention Block Grant Funds National Outcome Measures Federal Block Grant. The Contractor shall ensure data includes but is not limited to:
    - 5.3.4.1. Number of individuals served or reached.
    - 5.3.4.2. Demographics.
    - 5.3.4.3. Strategies and activities per IOM by the six (6) activity types.
    - 5.3.4.4. Dollar Amount and type of funds used in the implementation of strategies and/or interventions.
    - 5.3.4.5. Percentage evidence based strategies.
  - 5.3.5. Submitting annual reports.
  - 5.3.6. Providing additional reports or data as required by the Department.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

**Exhibit A – Amendment # 8**

- 5.3.7. Participating and administering the Regional SMP Stakeholder Survey in alternate years.
- 5.4. The Contractor shall provide Reports for Continuum of Care that include, but are not limited to:
- 5.4.1. Submitting update on regional assets and gaps assessments, as required.
- 5.4.2. Submitting updates on regional CoC development plans, as indicated.
- 5.4.3. Submitting quarterly reports ,as indicated.
- 5.4.4. Submitting year-end reports, as indicated.
- 5.5. The Contractor shall provide reports for Young Adult Strategies that include but are not limited to:
- 5.5.1. Inputting data on a monthly basis to an online database as required by the Department.
- 5.5.2. Ensuring the data includes but is not limited to:
- 5.5.2.1. Number of individuals served.
- 5.5.2.2. Demographics of individuals served.
- 5.5.2.3. Types of strategies or interventions implemented.
- 5.5.2.4. Dollar amount and type of funds used in the implementation of strategies and/or interventions.
- 5.5.3. Meeting with a team authorized by the Department on a semiannual basis or as needed to conduct a site visit.
- 5.6. The Contractor shall provide reports for School-Based Vaccination Clinics that include but are not limited to:
- 5.6.1. Attending annual debriefing and planning meetings with NHIP staff.
- 5.6.2. Completing a year-end summary of:
- 5.6.2.1. The total numbers of children vaccinated; and
- 5.6.2.2. Accomplishments and improvements to future school-based clinics.
- 5.6.3. Providing aggregated data, by school for each school, to the NHIP no later than 3 months after SBCs are concluded, that include:
- 5.6.3.1. Number of students at that school;
- 5.6.3.2. Number of students vaccinated out of the total number at that school; and
- 5.6.3.3. Number of vaccinated students on Medicaid out of the total number at that school.
- 5.6.4. Provide other reports and updates as requested by NHIP.

**6. Performance Measures**



**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**

- 6.1. The Contractor shall ensure the following performance indicators are annually achieved and monitored monthly, or at intervals specified by the DHHS, to measure the effectiveness of the agreement as follows:
  - 6.1.1. Public Health Advisory Council
    - 6.1.1.1. Documented organizational structure for the PHAC, including but not limited to:
      - 6.1.1.1.1. Vision or mission statements/
      - 6.1.1.1.2. Organizational charts.
      - 6.1.1.1.3. MOUs.
      - 6.1.1.1.4. Meeting minutes.
    - 6.1.1.2. Documentation that the PHAC membership represents public health stakeholders and the covered populations.
    - 6.1.1.3. CHIP evaluation plan that demonstrates positive outcomes each year.
    - 6.1.1.4. Publication of an annual report to the community.
  - 6.1.2. Public Health Emergency Preparedness
    - 6.1.2.1. Annual improvement in planning and operational levels of implementation as documented through the MCM ORR review based on prioritized recommendations from the Department.
    - 6.1.2.2. Response rate and percent of staff responding during staff notification, acknowledgement and assembly drills.
    - 6.1.2.3. Percentage of requests for activation met by the Multi-Agency Coordinating Entity.
    - 6.1.2.4. Percentage of requests for deployment during emergencies met by partnering agencies and volunteers.
  - 6.1.3. Substance Misuse Prevention
    - 6.1.3.1. As measured by the Youth Risk Behavioral Survey (YRBS) and National Survey on Drug Use and Health (NSDUH), reductions in prevalence rates for:
      - 6.1.3.1.1. 30-day alcohol use;
      - 6.1.3.1.2. 30-day marijuana use;
      - 6.1.3.1.3. 30-day illegal drug use;
      - 6.1.3.1.4. Illicit drug use other than marijuana;

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New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8

- 6.1.3.1.5. 30-day nonmedical use of pain relievers;
- 6.1.3.1.6. Life time heroin use;
- 6.1.3.1.7. Binge Drinking; and
- 6.1.3.1.8. Youth smoking prevalence rate, currently smoke cigarettes.
- 6.1.3.2. As measured by the YRBS and NSDUH increases in the perception of risk for:
  - 6.1.3.2.1. Perception of risk from alcohol use;
  - 6.1.3.2.2. Perception of risk from marijuana use;
  - 6.1.3.2.3. Perception of risk from illegal drug use;
  - 6.1.3.2.4. Perception of risk from nonmedical use of prescription drugs without a prescription;
  - 6.1.3.2.5. Perception of risk from binge drinking;
  - 6.1.3.2.6. Perception of risk in harming themselves physically and in other ways when they smoke one or more packs of cigarettes per day; and
  - 6.1.3.2.7. Demonstrated outcomes related to Risk and Protective Factors that align with prevalence data and strategic plans.
- 6.1.4. Continuum of Care
  - 6.1.4.1. Evidence of ongoing update of regional substance use services assets and gaps assessment.
  - 6.1.4.2. Evidence of ongoing update of regional CoC development plan.
  - 6.1.4.3. Each State Fiscal Year increase the number of partners assisting in regional information dissemination efforts.
  - 6.1.4.4. Each State Fiscal Year increase the number of community sector representatives engaged through CoC development work, including:
    - 6.1.4.4.1. Health;
    - 6.1.4.4.2. Safety;
    - 6.1.4.4.3. Education;
    - 6.1.4.4.4. Government; and
    - 6.1.4.4.5. Business.

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**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services  
Exhibit A – Amendment # 8**

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- 6.1.4.5. Each State Fiscal Year increase the number of community, regional, or state initiatives participated in that relate to, or are affected by, substance misuse that the CoC Facilitator leads, participates in, or materially contributes to
- 6.1.4.6. Other measures to be developed through work with the designated BDAS technical assistance and data/evaluation vendors.
- 6.1.5. Young Adult Strategies
  - 6.1.5.1. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.1.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.1.2. Participants report a decrease in past 30-day non-medical prescription drug use.
    - 6.1.5.1.3. Participants report a decrease in past 30-day illicit drug use including illicit opioids.
  - 6.1.5.2. Based on a survey of individuals participating in targeted young adult strategies the following outcomes will be measured:
    - 6.1.5.2.1. Participants report a decrease in past 30-day alcohol use.
    - 6.1.5.2.2. Participants report a decrease in negative consequences from substance misuse.
- 6.1.6. School-Based Vaccination Clinics
  - 6.1.6.1. Annual increase in the percentage of students receiving seasonal influenza vaccination in school-based clinics.
  - 6.1.6.2. Annual increase in the percentage of schools identified by NHIP that participate in the Free/Reduced School Lunch Program; or completion of at least 50% of schools listed.
  - 6.1.6.3. Maintain vaccine wastage below 5%.

Vendor Name: North Country Health Consortium  
 Contract Name: Regional Public Health Network Services  
 Region: North Country

Fiscal Y	Program Name and Funding Amounts										Total			
	COVID-19 Vaccination	FEMA Vaccination	I-Care	Flu Vaccination	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Medical Reserve Corps	Substance Misuse Prevention	Continuum of Care		Young Adult Substance Misuse Prevention Strategies*	School-Based Vaccination Clinics	Childhood Lead Poisoning Prevention Community Assessment
2019					\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00	\$ 10,000.00
2020					\$ 30,000.00	\$ 88,550.00	\$ 50,000.00	\$ 10,000.00	\$ 77,488.00	\$ 40,581.00	\$ 90,000.00	\$ 15,000.00	\$ 14,852.00	\$ 10,000.00
2021	\$25,000.00	\$155,449.00		\$10,000.00	\$ 30,000.00	\$ 88,550.00	\$ 10,000.00	\$ 77,488.00	\$ 40,580.00	\$ 90,000.00	\$ 15,000.00	\$10,308	\$ -	
2022			\$8,000.00		\$ 30,000.00	\$ 88,550.00	\$ 10,000.00	\$ 77,488.00	\$ 40,581.00	\$ 90,000.00	\$ 15,000.00			
														\$ 1,339,705.00

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: PHAC

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 19,360	\$ 3,388	\$ 22,748				\$ 19,360	\$ 3,388	\$ 22,748
2. Employee Benefits	\$ 4,356	\$ 762	\$ 5,118				\$ 4,356	\$ 762	\$ 5,118
3. Consultants									
4. Equipment:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 500	\$ 88	\$ 588				\$ 500	\$ 88	\$ 588
6. Travel	\$ 100	\$ 18	\$ 118				\$ 100	\$ 18	\$ 118
7. Occupancy									
8. Current Expenses									
Telephone	\$ 182	\$ 32	\$ 214				\$ 182	\$ 32	\$ 214
Postage/Printing	\$ 124	\$ 22	\$ 145				\$ 124	\$ 22	\$ 145
Subscriptions									
Audit and Legal	\$ 255	\$ 45	\$ 300				\$ 255	\$ 45	\$ 300
Insurance	\$ 175	\$ 31	\$ 205				\$ 175	\$ 31	\$ 205
Allocated Office Expenses	\$ 182	\$ 32	\$ 214				\$ 182	\$ 32	\$ 214
9. Software (includes Internet access)	\$ 298	\$ 52	\$ 350				\$ 298	\$ 52	\$ 350
10. Marketing/Communications									
11. Staff Education and Training									
12. Subcontracts/Agreements									
13. Other-									
translator									
indirect									
<b>TOTAL</b>	<b>\$ 25,532</b>	<b>\$ 4,468</b>	<b>\$ 30,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 25,532</b>	<b>\$ 4,468</b>	<b>\$ 30,000</b>
Indirect As A Percent of Direct	17.5%								
									Vendor Initials

Contractor Initials 

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: PHEP

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 56,060	\$ 9,810	\$ 65,870				\$ 56,060	\$ 9,810	\$ 65,870
2. Employee Benefits	\$ 12,613	\$ 2,207	\$ 14,821				\$ 12,613	\$ 2,207	\$ 14,821
3. Consultants	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 1,000	\$ 175	\$ 1,175				\$ 1,000	\$ 175	\$ 1,175
6. Travel	\$ 2,000	\$ 350	\$ 2,350				\$ 2,000	\$ 350	\$ 2,350
7. Occupancy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
8. Current Expenses:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ 527	\$ 92	\$ 619				\$ 527	\$ 92	\$ 619
Postage/Printing	\$ 358	\$ 63	\$ 421				\$ 358	\$ 63	\$ 421
Subscriptions	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ 738	\$ 129	\$ 867				\$ 738	\$ 129	\$ 867
Insurance	\$ 506	\$ 89	\$ 595				\$ 506	\$ 89	\$ 595
Allocated Office Expenses	\$ 610	\$ 107	\$ 716				\$ 610	\$ 107	\$ 716
9. Software (includes Internet access)	\$ 949	\$ 166	\$ 1,115				\$ 949	\$ 166	\$ 1,115
10. Marketing/Communications	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
13. Other:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 75,362</b>	<b>\$ 13,188</b>	<b>\$ 88,550</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 75,362</b>	<b>\$ 13,188</b>	<b>\$ 88,550</b>
Indirect As A Percent of Direct	17.5%								

\$88,550

Contractor Initials 

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: SMP

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 49,926	\$ 8,737	\$ 58,663				\$ 49,926	\$ 8,737	\$ 58,663
2. Employee Benefits	\$ 11,233	\$ 1,966	\$ 13,199				\$ 11,233	\$ 1,966	\$ 13,199
3. Consultants	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 575	\$ 101	\$ 676				\$ 575	\$ 101	\$ 676
6. Travel	\$ 1,000	\$ 175	\$ 1,175				\$ 1,000	\$ 175	\$ 1,175
7. Occupancy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ 470	\$ 82	\$ 552				\$ 470	\$ 82	\$ 552
Postage/Printing	\$ 319	\$ 56	\$ 375				\$ 319	\$ 56	\$ 375
Subscriptions	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ 659	\$ 115	\$ 774				\$ 659	\$ 115	\$ 774
insurance	\$ 451	\$ 79	\$ 530				\$ 451	\$ 79	\$ 530
Allocated Office Expenses	\$ 470	\$ 82	\$ 552				\$ 470	\$ 82	\$ 552
9. Software (includes Internet access)	\$ 845	\$ 148	\$ 993				\$ 845	\$ 148	\$ 993
10. Marketing/Communications	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
13. Other-	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 65,947</b>	<b>\$ 11,541</b>	<b>\$ 77,488</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 65,947</b>	<b>\$ 11,541</b>	<b>\$ 77,488</b>
Indirect As A Percent of Direct	17.5%								

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

Bidder/Program Name: North County Health Consortium

Budget Request for: COC

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 25,662	\$ 4,491	\$ 30,153				\$ 25,662	\$ 4,491	\$ 30,153
2. Employee Benefits	\$ 5,774	\$ 1,010	\$ 6,784				\$ 5,774	\$ 1,010	\$ 6,784
3. Consultants	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 500	\$ 88	\$ 588				\$ 500	\$ 88	\$ 588
6. Travel	\$ 1,000	\$ 175	\$ 1,175				\$ 1,000	\$ 175	\$ 1,175
7. Occupancy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ 241	\$ 42	\$ 284				\$ 241	\$ 42	\$ 284
Postage/Printing	\$ 164	\$ 29	\$ 193				\$ 164	\$ 29	\$ 193
Subscriptions	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ 338	\$ 59	\$ 397				\$ 338	\$ 59	\$ 397
Insurance	\$ 232	\$ 41	\$ 272				\$ 232	\$ 41	\$ 272
Allocated Office Expenses	\$ 241	\$ 42	\$ 284				\$ 241	\$ 42	\$ 284
9. Software (includes internet access)	\$ 385	\$ 67	\$ 453				\$ 385	\$ 67	\$ 453
10. Marketing/Communications	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
13. Other-	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Translator	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 34,537</b>	<b>\$ 6,044</b>	<b>\$ 40,581</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 34,537</b>	<b>\$ 6,044</b>	<b>\$ 40,581</b>
Indirect As A Percent of Direct	17.5%								

Exhibit B-18 Budget, Amendment #8

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: YAS

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 50,587	\$ 8,853	\$ 59,439				\$ 50,587	\$ 8,853	\$ 59,439
2. Employee Benefits	\$ 11,382	\$ 1,992	\$ 13,374				\$ 11,382	\$ 1,992	\$ 13,374
3. Consultants	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 1,500	\$ 263	\$ 1,763				\$ 1,500	\$ 263	\$ 1,763
6. Travel	\$ 1,500	\$ 263	\$ 1,763				\$ 1,500	\$ 263	\$ 1,763
7. Occupancy	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ 476	\$ 83	\$ 559				\$ 476	\$ 83	\$ 559
Postage/Printing	\$ 323	\$ 57	\$ 380				\$ 323	\$ 57	\$ 380
Subscriptions	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ 666	\$ 117	\$ 783				\$ 666	\$ 117	\$ 783
Insurance	\$ 457	\$ 80	\$ 537				\$ 457	\$ 80	\$ 537
Allocated Office Expenses	\$ 476	\$ 83	\$ 559				\$ 476	\$ 83	\$ 559
9. Software (includes Internet access)	\$ 719	\$ 126	\$ 844				\$ 719	\$ 126	\$ 844
10. Marketing/Communications	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
13. Other-	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
translator	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 68,085</b>	<b>\$ 11,915</b>	<b>\$ 80,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 68,085</b>	<b>\$ 11,915</b>	<b>\$ 80,000</b>
Indirect As A Percent of Direct	17.5%								

\$80,000

Contractor Initials 

Date 5/17/2021

Exhibit B-19 Budget, Amendment #8

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: SBC

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 7,285	\$ 1,275	\$ 8,560				\$ 7,285	\$ 1,275	\$ 8,560
2. Employee Benefits	\$ 1,639	\$ 287	\$ 1,926				\$ 1,639	\$ 287	\$ 1,926
3. Consultants		\$ -	\$ -				\$ -	\$ -	\$ -
4. Equipment:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental		\$ -	\$ -				\$ -	\$ -	\$ -
Repair and Maintenance		\$ -	\$ -				\$ -	\$ -	\$ -
Purchase/Depreciation		\$ -	\$ -				\$ -	\$ -	\$ -
5. Supplies:		\$ -	\$ -				\$ -	\$ -	\$ -
Educational		\$ -	\$ -				\$ -	\$ -	\$ -
Lab		\$ -	\$ -				\$ -	\$ -	\$ -
Pharmacy		\$ -	\$ -				\$ -	\$ -	\$ -
Medical		\$ -	\$ -				\$ -	\$ -	\$ -
Office	\$ 500	\$ 88	\$ 588				\$ 500	\$ 88	\$ 588
6. Travel	\$ 500	\$ 88	\$ 588				\$ 500	\$ 88	\$ 588
7. Occupancy		\$ -	\$ -				\$ -	\$ -	\$ -
8. Current Expenses		\$ -	\$ -				\$ -	\$ -	\$ -
Telephone	\$ 69	\$ 12	\$ 81				\$ 69	\$ 12	\$ 81
Postage/Printing	\$ 47	\$ 8	\$ 55				\$ 47	\$ 8	\$ 55
Subscriptions		\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ 96	\$ 17	\$ 113				\$ 96	\$ 17	\$ 113
Insurance	\$ 66	\$ 12	\$ 77				\$ 66	\$ 12	\$ 77
Allocated Office Expenses	\$ 69	\$ 12	\$ 81				\$ 69	\$ 12	\$ 81
9. Software (includes Internet access)	\$ 246	\$ 43	\$ 290				\$ 246	\$ 43	\$ 290
10. Marketing/Communications		\$ -	\$ -				\$ -	\$ -	\$ -
11. Staff Education and Training		\$ -	\$ -				\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
13. Other-Agreement	\$ 2,250	\$ 394	\$ 2,644				\$ 2,250	\$ 394	\$ 2,644
Translator		\$ -	\$ -				\$ -	\$ -	\$ -
Indirect	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 12,766</b>	<b>\$ 2,234</b>	<b>\$ 15,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 12,766</b>	<b>\$ 2,234</b>	<b>\$ 15,000</b>
Indirect As A Percent of Direct	17.5%								

\$15,000

Contractor Initials BM

Date 5/17/2021

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: HPP (MRC)

Budget Period: 7/1/2021-6/30/2022

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 6,309	\$ 1,104	\$ 7,413				\$ 6,309	\$ 1,104	\$ 7,413
2. Employee Benefits	\$ 1,420	\$ 248	\$ 1,668				\$ 1,420	\$ 248	\$ 1,668
3. Consultants									
4. Equipment:									
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:									
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ 175	\$ 31	\$ 206				\$ 175	\$ 31	\$ 206
6. Travel	\$ 175	\$ 31	\$ 206				\$ 175	\$ 31	\$ 206
7. Occupancy									
8. Current Expenses									
Telephone	\$ 59	\$ 10	\$ 70				\$ 59	\$ 10	\$ 70
Postage/Printing	\$ 40	\$ 7	\$ 47				\$ 40	\$ 7	\$ 47
Subscriptions									
Audit and Legal	\$ 83	\$ 15	\$ 98				\$ 83	\$ 15	\$ 98
Insurance	\$ 57	\$ 10	\$ 67				\$ 57	\$ 10	\$ 67
Allocated Office Expenses	\$ 59	\$ 10	\$ 70				\$ 59	\$ 10	\$ 70
9. Software (includes Internet access)	\$ 133	\$ 23	\$ 156				\$ 133	\$ 23	\$ 156
10. Marketing/Communications									
11. Staff Education and Training									
12. Subcontracts/Agreements									
13. Other-Agreement									
Translator									
Indirect									
TOTAL	\$ 8,511	\$ 1,489	\$ 10,000				\$ 8,511	\$ 1,489	\$ 10,000
Indirect As A Percent of Direct	17.5%								

\$10,000

Contractor Initials BM

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

Bidder/Program Name: North Country Health Consortium

Budget Request for: Regional Public Health Network- Amendment #8 - COVID-19 Response

Budget Period: 4/1/2021 - 6/30/2021

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total	Direct Incremental	Indirect Fixed	Total
1. Total Salary/Wages	\$ 4,044	\$ 404	\$ 4,448				\$ 4,044	\$ 404	\$ 4,448
2. Employee Benefits	\$ 910	\$ 91	\$ 1,001				\$ 910	\$ 91	\$ 1,001
3. Consultants									
4. Equipment:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Rental									
Repair and Maintenance									
Purchase/Depreciation									
5. Supplies:	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Educational									
Lab									
Pharmacy									
Medical									
Office	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
6. Travel	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
7. Occupancy									
8. Current Expenses									
Telephone	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Postage/Printing	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Subscriptions	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Audit and Legal	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Insurance	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
Allocated Office Expenses	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
9. Software (includes Internet access)	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
10. Marketing/Communications									
11. Staff Education and Training									
12. Subcontracts/Agreements	\$ 50,000	\$ -	\$ 50,000				\$ 50,000	\$ -	\$ 50,000
13. Other-	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
translator									
indirect	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
indirect	\$ -	\$ -	\$ -				\$ -	\$ -	\$ -
<b>TOTAL</b>	<b>\$ 54,954</b>	<b>\$ 495</b>	<b>\$ 55,449</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 54,954</b>	<b>\$ 495</b>	<b>\$ 55,449</b>
Indirect As A Percent of Direct		10.0%							

Vendor Initials: \_\_\_\_\_  
Date: \_\_\_\_\_

Contractor Initials 

# State of New Hampshire

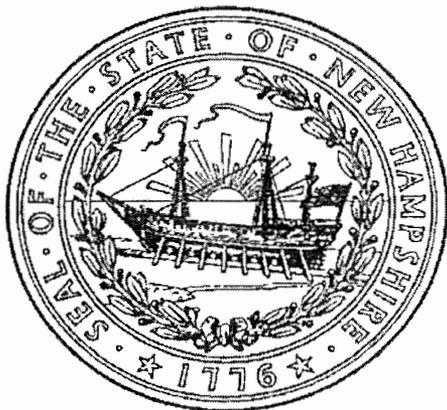
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that NORTH COUNTRY HEALTH CONSORTIUM is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on October 05, 1998. 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: **301456**

Certificate Number: **0005335098**



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 1st day of April A.D. 2021.

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

William M. Gardner  
Secretary of State

**CERTIFICATE OF VOTE**

I, Michael Lee, do hereby certify that:

1. I am a duly elected Officer of North Country Health Consortium.
2. The following is a true copy of the resolution duly adopted at a meeting of the Board of Directors of the Agency duly held on April 9, 2021.

**RESOLVED:** *Be it resolved that North Country Health Consortium enters into contracts with the State of New Hampshire, acting through its Department of Health and Human Services.*

**RESOLVED:** *Be it resolved that the Executive Director and/or Board President is hereby authorized on behalf of this corporation to enter into said contracts with the State and to execute any and all documents, agreements, and other instruments; and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable, or appropriate. Becky McEnany is the Executive Director of the corporation.*

3. The forgoing resolutions have not been amended or revoked and remain in full force and effect as of the 17<sup>th</sup> day of May, 2021.
4. Becky McEnany is the duly appointed Executive Director of the Agency.

IN WITNESS WHEREOF, I have hereunto set my hand as the President of the North Country Health Consortium this 17<sup>th</sup> day of May, 2021.

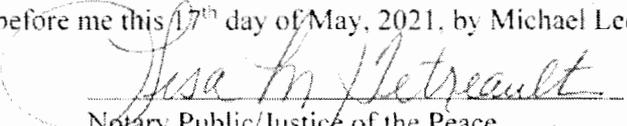
  
Michael Lee

Michael Lee, President

STATE OF NEW HAMPSHIRE

COUNTY OF Cross

The forgoing instrument was acknowledged before me this 17<sup>th</sup> day of May, 2021, by Michael Lee.

  
Notary Public/Justice of the Peace

My Commission Expires: 11/14/23



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
05/18/2021

**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).**

<b>PRODUCER</b> Geo M Stevens & Son Co 149 Main Street  Lancaster NH 03584	<b>CONTACT NAME:</b> Patricia Bigelow-Emery <b>PHONE (A/C, No, Ext):</b> (603) 788-2555 <b>FAX (A/C, No):</b> (603) 788-3901 <b>E-MAIL ADDRESS:</b> pemery@gms-ins.com														
<b>INSURED</b> North Country Health Consortium Inc 262 Cottage Street, Suite 230  Littleton NH 03561	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A: Philadelphia Insurance Companies</td> <td></td> </tr> <tr> <td>INSURER B: Eastern Alliance Insurance Company</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Philadelphia Insurance Companies		INSURER B: Eastern Alliance Insurance Company		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Philadelphia Insurance Companies															
INSURER B: Eastern Alliance Insurance Company															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

**COVERAGES**                      **CERTIFICATE NUMBER:** CL2151813062                      **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		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
		INSD	WVD					
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PHPK2200175	01/01/2021	01/01/2022	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
				GENERAL AGGREGATE	\$ 2,000,000			
				PRODUCTS - COMP/OP AGG	\$ 2,000,000			
				Professional Liability	\$ 2,000,000			
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> OTHER:			PHUB744295	01/01/2021	01/01/2022	COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
								\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			PHUB744295	01/01/2021	01/01/2022	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$
								\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY    Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		01-0000114697-03	01/01/2021	01/01/2022	<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 100,000
							E.L. DISEASE - EA EMPLOYEE	\$ 100,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 Health Consortium  
 NH Workers Compensation--excluded officers are Michael Lee, Karen Woods, Kenneth Gordon

<b>CERTIFICATE HOLDER</b>  State of NH Dept of Health and Human Services 129 Pleasant Street  Concord NH 03301-3857	<b>CANCELLATION</b>  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  
--	--



## North Country Health Consortium Mission Statement:

*“To lead innovative collaboration to improve the health status of the region.”*

The North Country Health Consortium (NCHC) is a non-profit 501(c)3 rural health network, created in 1997, as a vehicle for addressing common issues through collaboration among health and human service providers serving Northern New Hampshire.

NCHC is engaged in activities for:

- Solving common problems and facilitating regional solutions
- Creating and facilitating services and programs to improve population health status
- Health professional training, continuing education and management services to encourage sustainability of the health care infrastructure
- Increasing capacity for local public health essential services
- Increasing access to health care for underserved and uninsured residents of Northern New Hampshire.



**NORTH COUNTRY HEALTH  
CONSORTIUM, INC. AND SUBSIDIARY**

**CONSOLIDATED FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2019 AND 2018**

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## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of  
North Country Health Consortium, Inc. and Subsidiary  
Littleton, New Hampshire

### **Report on the Financial Statements**

We have audited the accompanying consolidated financial statements of North Country Health Consortium, Inc. (a nonprofit organization) and Subsidiary, which comprise the consolidated statements of financial position as of September 30, 2019 and 2018, and the related consolidated statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### ***Management's Responsibility for the 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 audits. We conducted our audits 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 from 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.

- 1 -

A.M. PEISCH & COMPANY, LLP

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Rutland, VT 05702  
(802) 773-2721

50 Congress Street  
Suite 201  
St. Albans, VT 05478  
(802) 527-0505

1020 Memorial Drive  
St. Johnsbury, VT 05819  
(802) 745-5651

24 Airport Road  
Suite 402  
West Lebanon, NH 03784  
(603) 306-0100

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 North Country Health Consortium, Inc. and Subsidiary as of September 30, 2019 and 2018, and the changes in its net assets, functional expenses, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Other Matters***

***Other Information***

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

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated March 17, 2020, on our consideration of North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering North Country Health Consortium, Inc. and Subsidiary's internal control over financial reporting and compliance.

St. Albans, Vermont  
March 17, 2020  
VT Reg. No. 92-0000102

*A.M. Peisch & Company, LLP*

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENTS OF FINANCIAL POSITION**  
**SEPTEMBER 30, 2019 AND 2018**

	2019	2018
<b>ASSETS</b>		
Current assets		
Cash and cash equivalents	\$ 947,618	\$ 687,847
Accounts receivable, net		
Grants and contracts	1,011,598	966,962
Dental services	-	898
Certificates of deposit	126,701	126,065
Prepaid expenses	33,068	21,356
Restricted cash - IDN	2,340,257	1,987,216
Total current assets	<u>4,459,242</u>	<u>3,790,344</u>
Property and equipment:		
Computers and equipment	147,392	147,392
Dental equipment	10,815	32,808
Furnitures and fixtures	30,045	30,045
Vehicles	18,677	18,677
Accumulated depreciation	(181,007)	(170,735)
Property and equipment, net	<u>25,922</u>	<u>58,187</u>
Other assets		
Restricted cash - IDN	400,000	800,000
Total other assets	<u>400,000</u>	<u>800,000</u>
Total assets	<u>\$ 4,885,164</u>	<u>\$ 4,648,531</u>
<b>LIABILITIES AND NET ASSETS</b>		
Current liabilities		
Accounts payable	\$ 204,323	\$ 396,039
Accrued expenses	13,389	8,983
Accrued wages and related liabilities	354,015	265,717
Deferred revenue	2,849,839	1,854,420
Total current liabilities	<u>3,421,566</u>	<u>2,525,159</u>
Long-term liabilities		
Deferred revenue - Long term portion	400,000	800,000
Total long-term liabilities	<u>400,000</u>	<u>800,000</u>
Total liabilities	<u>3,821,566</u>	<u>3,325,159</u>
Net assets		
Without donor restrictions	1,063,598	1,323,372
Total net assets	<u>1,063,598</u>	<u>1,323,372</u>
Total liabilities and net assets	<u>\$ 4,885,164</u>	<u>\$ 4,648,531</u>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS**  
**FOR THE YEARS ENDED SEPTEMBER 30, 2019 AND 2018**

	2019	2018
Support:		
Grant and contract revenue	<u>\$ 4,956,424</u>	<u>\$ 5,017,825</u>
Revenue:		
Dental patient revenue	15,462	101,092
Fees for programs and services	1,733,329	1,455,860
Interest income	6,337	6,085
Other income	2,050	12,766
Total revenue	<u>1,757,178</u>	<u>1,575,803</u>
Total support and revenue	<u>6,713,602</u>	<u>6,593,628</u>
Program expenses:		
Workforce	2,201,736	3,263,756
Public health	108,996	198,719
Molar	103,152	219,335
Friendship house	2,390,474	1,654,782
CSAP	1,670,554	869,873
Total program expenses	<u>6,474,912</u>	<u>6,206,465</u>
Management and general	<u>495,512</u>	<u>485,028</u>
Total expenses	<u>6,970,424</u>	<u>6,691,493</u>
Loss on sale of property and equipment	<u>(2,952)</u>	<u>-</u>
Change in net assets	(259,774)	(97,865)
NET ASSETS, beginning of the year	<u>1,323,372</u>	<u>1,421,237</u>
NET ASSETS, end of the year	<u>\$ 1,063,598</u>	<u>\$ 1,323,372</u>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED SEPTEMBER 30, 2019**

	<u>Workforce</u>	<u>Public Health</u>	<u>Molar</u>	<u>Friendship House</u>	<u>CSAP</u>	<u>Total Program</u>	<u>Management &amp; General</u>	<u>Total</u>
<b>Personnel:</b>								
Salaries	\$ 969,231	\$ 72,859	\$ 72,634	\$ 1,454,659	\$ 831,437	\$ 3,400,820	\$ 306,627	\$ 3,707,447
Payroll taxes and employee benefits	186,721	15,348	13,385	296,250	156,563	668,267	47,097	715,364
Subtotal	<u>1,155,952</u>	<u>88,207</u>	<u>86,019</u>	<u>1,750,909</u>	<u>988,000</u>	<u>4,069,087</u>	<u>353,724</u>	<u>4,422,811</u>
<b>Site expenses:</b>								
Computer fees	10,804	830	990	17,033	8,027	37,684	4,468	42,152
Medical and pharmacy supplies, MOA	646,669	1,810	8,811	28,179	396,126	1,081,595	834	1,082,429
Office supplies	6,044	2,800	324	45,308	25,439	79,915	17,126	97,041
Food	-	-	-	74,719	-	74,719	-	74,719
Subtotal	<u>663,517</u>	<u>5,440</u>	<u>10,125</u>	<u>165,239</u>	<u>429,592</u>	<u>1,273,913</u>	<u>22,428</u>	<u>1,296,341</u>
<b>General:</b>								
Bad debts	-	-	-	12,153	-	12,153	-	12,153
Depreciation	-	-	3,134	3,735	-	6,869	20,443	27,312
Dues, memberships, education, and subscriptions	145,997	30	265	16,659	478	163,429	9,571	173,000
Staff development	1,299	626	201	293	1,449	3,868	262	4,130
Equipment and maintenance	20,044	-	-	4,597	14,128	38,769	2,517	41,286
Rent and occupancy	44,146	3,773	921	222,386	31,257	302,483	21,088	323,571
Insurance	5,520	1,188	930	7,989	4,371	19,998	5,213	25,211
Miscellaneous	24,114	-	(2,285)	2,502	13,183	37,514	5,969	43,483
Payroll processing fees	115	50	-	995	131	1,291	9,140	10,431
Postage	1,130	69	65	1,277	785	3,326	691	4,017
Printing	3,800	180	250	4,690	4,935	13,855	1,863	15,718
Professional fees	9,327	793	386	136,619	5,895	153,020	11,740	164,760
Training fees and supplies	36,593	2,983	83	11,655	73,172	124,486	13,586	138,072
Travel	50,677	4,704	2,094	22,416	50,437	130,328	7,139	137,467
Telephone	10,014	953	397	20,608	6,033	38,005	1,141	39,146
Vehicle expense	-	-	567	5,752	-	6,319	(162)	6,157
Event facility fees	29,491	-	-	-	46,708	76,199	9,159	85,358
Subtotal	<u>382,267</u>	<u>15,349</u>	<u>7,008</u>	<u>474,326</u>	<u>252,962</u>	<u>1,131,912</u>	<u>119,360</u>	<u>1,251,272</u>
<b>Total expenses</b>	<u>\$ 2,201,736</u>	<u>\$ 108,996</u>	<u>\$ 103,152</u>	<u>\$ 2,390,474</u>	<u>\$ 1,670,554</u>	<u>\$ 6,474,912</u>	<u>\$ 495,512</u>	<u>\$ 6,970,424</u>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES**  
**FOR THE YEAR ENDED SEPTEMBER 30, 2018**

	<u>Workforce</u>	<u>Public Health</u>	<u>Molar</u>	<u>Friendship House</u>	<u>CSAP</u>	<u>Total Program</u>	<u>Management &amp; General</u>	<u>Total</u>
<b>Personnel:</b>								
Salaries	\$ 987,365	\$ 115,572	\$ 112,796	\$ 1,102,500	\$ 377,817	\$ 2,696,050	\$ 281,983	\$ 2,978,033
Payroll taxes and employee benefits	185,492	20,750	21,938	191,092	70,231	489,503	48,518	538,021
Subtotal	<u>1,172,857</u>	<u>136,322</u>	<u>134,734</u>	<u>1,293,592</u>	<u>448,048</u>	<u>3,185,553</u>	<u>330,501</u>	<u>3,516,054</u>
<b>Site expenses:</b>								
Computer fees	16,218	1,186	3,392	14,158	4,688	39,642	3,161	42,803
Medical and pharmacy supplies, MOA	1,610,212	36,431	55,217	20,063	307,207	2,029,130	4,967	2,034,097
Office supplies	17,314	2,634	448	55,007	9,892	85,295	30,617	115,912
Food	-	-	-	58,405	-	58,405	-	58,405
Subtotal	<u>1,643,744</u>	<u>40,251</u>	<u>59,057</u>	<u>147,633</u>	<u>321,787</u>	<u>2,212,472</u>	<u>38,745</u>	<u>2,251,217</u>
<b>General:</b>								
Bad debt	-	-	-	12,847	-	12,847	-	12,847
Depreciation	-	-	6,869	-	-	6,869	26,613	33,482
Dues, memberships, education, and subscriptions	203,919	59	76	1,448	3,429	208,931	8,658	217,589
Education and training	2,108	-	140	-	1,050	3,298	45	3,343
Equipment and maintenance	22,299	-	544	3,787	-	26,630	2,420	29,050
Rent and occupancy	51,842	5,628	6,099	96,708	19,061	179,338	20,556	199,894
Insurance	5,364	972	1,173	5,254	1,902	14,665	5,016	19,681
Miscellaneous	-	-	219	6,757	975	7,951	-	7,951
Payroll processing fees	150	50	-	600	94	894	9,105	9,999
Postage	1,646	168	178	1,073	562	3,627	313	3,940
Printing	4,208	366	1,175	2,835	1,495	10,079	1,756	11,835
Professional fees	26,047	1,000	2,797	34,789	3,784	68,417	19,353	87,770
Training fees and supplies	53,602	914	1,000	10,580	9,968	76,064	4,758	80,822
Travel	47,224	2,806	1,475	26,851	27,947	106,303	8,423	114,726
Telephone	10,222	1,116	501	9,997	2,351	24,187	1,327	25,514
Vehicle expense	-	-	3,298	31	-	3,329	497	3,826
Event facility fees	18,524	9,067	-	-	27,420	55,011	6,942	61,953
Subtotal	<u>447,155</u>	<u>22,146</u>	<u>25,544</u>	<u>213,557</u>	<u>100,038</u>	<u>808,440</u>	<u>115,782</u>	<u>924,222</u>
Total expenses	<u>\$ 3,263,756</u>	<u>\$ 198,719</u>	<u>\$ 219,335</u>	<u>\$ 1,654,782</u>	<u>\$ 869,873</u>	<u>\$ 6,206,465</u>	<u>\$ 485,028</u>	<u>\$ 6,691,493</u>

See accompanying notes.

**NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY**  
**CONSOLIDATED STATEMENTS OF CASH FLOWS**  
**FOR THE YEARS ENDED SEPTEMBER 30, 2019 AND 2018**

	2019	2018
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Change in net assets	\$ (259,774)	\$ (97,865)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	27,312	33,482
Bad debt expense	12,153	12,847
Loss on sale of property and equipment	2,952	-
(Increase) decrease in operating assets:		
Accounts receivable - Grants and contracts	(56,789)	(431,418)
Accounts receivable - Dental services	898	(34)
Prepaid expenses	(11,712)	(11,396)
Restricted cash - IDN	46,959	(565,828)
Increase (decrease) in operating liabilities:		
Accounts payable	(191,716)	290,694
Accrued expenses	4,406	2,062
Accrued wages and related liabilities	88,298	111,263
Deferred revenue	595,419	269,155
Net cash provided (used) by operating activities	<u>258,406</u>	<u>(387,038)</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Reinvestment of certificates of deposit interest	(636)	(525)
Proceeds from sale of property and equipment	2,001	-
Net cash provided (used) by investing activities	<u>1,365</u>	<u>(525)</u>
Net increase (decrease) in cash and cash equivalents	259,771	(387,563)
Beginning cash and cash equivalents	<u>687,847</u>	<u>1,075,410</u>
Ending cash and cash equivalents	<u>\$ 947,618</u>	<u>\$ 687,847</u>

See accompanying notes.

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

### Note 1. Nature of Activities and Summary of Significant Accounting Policies

#### Nature of activities

North Country Health Consortium, Inc. and Subsidiary (NCHC) (the Organization) is a not-for-profit health center chartered under the laws of the State of New Hampshire. The Organization's mission is to lead innovative collaboration to improve the health status of the region. NCHC is engaged in promoting and facilitating access to services and programs that improve the health status of the area population, provide health training and educational opportunities for healthcare purposes, and provide region-wide dental services for an underserved and uninsured residents.

The Organization's wholly owned subsidiary, North Country ACO (the ACO), is a non-profit 501(c)(3) charitable corporation formed in December 2011. This entity was formed as an accountable care organization (ACO) with its purpose to support the programs and activities of the ACO participants to improve the overall health of their respective populations and communities. A nominal cash balance remains and activities have ceased.

The Organization's primary programs are as follows:

*Network and Workforce Activities* – To provide workforce education programs and promote oral health initiatives for the Organization's dental services.

*Public Health and CSAP* – To conduct community substance abuse prevention activities, coordination of public health networks, and promote community emergency response plan.

*Dental Services and Molar* – To sustain a program offering oral health services for children and low income adults in northern New Hampshire.

*Friendship House* – A residential facility to provide patient drug and alcohol treatment and recovery.

Following is a summary of the significant accounting policies used in the preparation of these consolidated financial statements.

#### Financial statement presentation

Financial statements presentation follows the recommendations of the Financial Accounting Standards Board in its Statement of Financial Accounting Standards (SFAS) No. 117, *Financial Statement of Not-for-Profit Organizations* and the provisions of Accounting Standards Update (ASU) No. 2016-14, *Not-For-Profit Entities: Presentation of Financial Statements of Not-or-Profit Entities*. Under ASU No. 2016-14, the Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. The Organization had no net assets with donor restrictions at September 30, 2019 and 2018.

#### Basis of accounting

Basis of accounting refers to when revenues and expenses are recognized in the accounts and reported in the financial statements. Basis of accounting relates to the timing of the measurements made, regardless of the measurement focus applied.

**Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

The Organization uses the accrual basis of accounting. Under the accrual basis of accounting, revenues are recorded when susceptible to accrual, i.e., measurable and earned. Measurable refers to the ability to quantify in monetary terms the amount of the revenue and receivable. Expenses are recognized when they become liable for payment.

**Principles of consolidation**

The accompanying consolidated financial statements include the accounts of North Country Health Consortium, Inc. and its wholly owned subsidiary, North Country ACO. All inter-company transactions and balances have been eliminated in consolidation.

**Use of estimates**

In preparing the consolidated financial statements in conformity with accounting principles generally accepted in the United States of America, management is required to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**Concentration of risk**

The Organization's operations are affected by various risk factors, including credit risk and risk from geographic concentration and concentrations of funding sources. Management attempts to manage risk by obtaining and maintaining revenue funding from a variety of sources. A substantial portion of the Organization's activities are funded through grants and contracts with private, federal, and state agencies. As a result, the Organization may be vulnerable to the consequences of change in the availability of funding sources and economic policies at the agency level. The Organization generally does not require collateral to secure its receivables.

**Revenue recognition**

Below are the revenue recognition policies of the Organization:

*Dental Patient Revenue*

Dental services are recorded as revenue within the fiscal year related to the service period.

*Grant and Contract Revenue*

Grants and contracts are recorded as revenue in the period they are earned by satisfaction of grant or contract requirements.

*Fees for Programs and Services*

Fees for programs and services are recorded as revenue in the period the related services were performed.

**Cash and cash equivalents**

For purposes of the statement of cash flows, the Organization considers all highly liquid investments with an original maturity of three months or less to be cash equivalents.

**Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)****Restricted cash - IDN**

Restricted cash – IDN consists of advanced funding received from The State of New Hampshire Department of Health and Human Services for the Integrated Delivery Network program (IDN). The original advance of funds of \$2,000,000 is to be used to fund the Organization’s cost of administering the IDN over a period of five years, beginning in fiscal year 2017. The remaining balance is to be distributed to participants.

For the years ending September 30, 2019 and 2018, these amounts were restricted as follows:

	2019	2018
Administration fee to the Organization	\$ 800,000	\$ 1,200,000
Distributions to participants	<u>1,940,257</u>	<u>1,587,216</u>
	<u>\$ 2,740,257</u>	<u>\$ 2,787,216</u>

**Accounts receivable**

The Organization has receivable balances due from dental services provided to individuals and from grants and contracts received from federal, state, and private agencies. Management reviews the receivable balances for collectability and records an allowance for doubtful accounts based on historical information, estimated contractual adjustments, and current economic trends. Management considers the individual circumstances when determining the collectability of past due amounts. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to earnings and a credit to accounts receivable. Any collection fees or related costs are expensed in the year incurred. The Organization recorded an allowance for doubtful accounts for estimated contractual adjustments for dental service of \$0 and \$598 as of September 30, 2019 and 2018, respectively, and an allowance for doubtful accounts for grants and contracts of \$25,000 and \$12,847 as of September 30, 2019 and 2018, respectively. The Organization does not charge interest on its past due accounts, and collateral is generally not required.

**Certificates of deposit**

The Organization has three certificates of deposit that may be withdrawn without penalty with one financial institution. These certificates carry original terms of 12 months to 24 months, have interest rates ranging from .50% to .55%, and mature at various dates through September 2020.

**Property and equipment**

Property and equipment is stated at cost less accumulated depreciation. The Organization generally capitalizes property and equipment with an estimated useful life in excess of one year and installed costs over \$2,500. Lesser amounts are generally expensed. Purchased property and equipment is capitalized at cost.

**Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

Property and equipment are depreciated using the straight-line method using the following ranges of estimated useful lives:

Computers and equipment	3-7 years
Dental equipment	5-7 years
Furniture and fixtures	5-7 years
Vehicles	5 years

Depreciation expense totaled \$27,312 and \$33,482 for the years ended September 30, 2019 and 2018, respectively.

**Deferred revenue**

Deferred revenue is related to advance payments on grants or advance billings relative to anticipated expenses or events in future periods. The revenue is realized when the expenses are incurred or as services are provided in the period earned.

**Net assets**

The Organization is required to report information regarding its financial position and activity according to two classes of net assets: without donor restrictions and with donor restrictions.

*Net assets without donor restrictions* – consist of unrestricted amounts that are available for use in carrying out the mission of the Organization.

*Net assets with donor restrictions* – consist of those amounts that are donor restricted for a specific purpose. When a donor restriction expires, either by the passage of a stipulated time restriction or by the accomplishment of a specific purpose restriction, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. The Organization has elected, however, to show those restricted contributions whose restrictions are met in the same reporting period as they are received as unrestricted support. The Organization had no net assets with donor restrictions at September 30, 2019 and 2018.

**Income taxes**

The Organization and the ACO are exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and are not classified as private foundations. However, income from certain activities not directly related to the Organization's tax-exempt purpose is subject to taxation as unrelated business income. The Organization had no unrelated business income activity subject to taxation for the years ended September 30, 2019 and 2018.

The Organization had adopted the provisions of FASB ASC 740-10. FASB ASC 740-10 prescribes a recognition threshold and measurement attributable for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return, and provides guidance on derecognition, classification, interest and penalties, accounting in interim periods, disclosure, and transition. Based on management's evaluation, management has concluded that there were no significant uncertain tax positions requiring recognition in the financial statements at September 30, 2019 and 2018.

## **Note 1. Nature of Activities and Summary of Significant Accounting Policies (Continued)**

Although the Organization is not currently the subject of a tax examination by the Internal Revenue Service or the State of New Hampshire, the Organization's tax years ended September 30, 2016 through September 30, 2019 are open to examination by the taxing authorities under the applicable statute of limitations.

### **Functional expenses**

The costs of providing the various programs and activities have been summarized on a functional basis in the Statement of Activities. Expenses are charged to programs based on direct expenses incurred and certain costs, including salaries and fringe benefits, are allocated to the programs and supporting services based upon related utilization and benefit.

### **Change in accounting principle**

The Organization adopted the provisions of ASU No. 2016-14, *Not-For-Profit Entities: Presentation of Financial Statements of Not-For-Profit Entities* during fiscal year 2019. The ASU was issued to improve reporting by not-for-profit entities in the areas of net asset classifications and information provided about liquidity. Upon adoption of this standard the Organization has disclosed classifications of net assets in Note 1, and disclosed information about liquidity and availability in Note 8 of the financial statements. There is no effect on the change in net assets for the 2019 and 2018 fiscal years.

### **Implementation of new accounting pronouncements**

Management is reviewing the following Accounting Standards Updates (ASU) issued by the Financial Accounting Standards Board, which are effective for future years, for possible implementation and to determine their effect on the Organization's financial reporting.

ASU No. 2015-14, *Revenue from Contracts with Customers*. This ASU includes new revenue measurement and recognition guidance, as well as required additional disclosures. The ASU is effective for annual reporting beginning after December 15, 2018, and interim reporting periods within annual reporting beginning after December 15, 2019. The effect of this ASU has not been quantified.

ASU No. 2016-02, *Leases (Topic 842)*. This ASU requires lessees to recognize the following for all leases (with the exception of short-term leases) at the commencement date: (1) a lease liability, which is the lessee's obligation to make lease payments arising from a lease, measured on a discounted basis; and (2) a right-of-use asset which is an asset that represents the lessee's right to use, or control the use of, a specified asset for the lease term. For short-term leases (term of twelve months or less), a lessee is permitted to make an accounting policy election by class of underlying asset not to recognize lease assets and lease liabilities. If a lessee makes the election, it should recognize lease expense for such leases generally on a straight-line basis over the lease term. The ASU is effective for annual periods, and interim reporting periods within those annual periods, beginning after December 15, 2019. The effect of this ASU has not been quantified.

ASU No. 2016-18, *Statement of Cash Flows: Restricted Cash*. This ASU clarifies how to report restricted cash in the statement of cash flows. This ASU is effective for fiscal years beginning after December 15, 2018, and interim periods within fiscal years beginning after December 15, 2019. This ASU will have minimal effect on the Organization's financial statements.

**Note 2. Cash Concentrations**

The Organization maintains cash balances at two financial institutions. Their bank accounts at the institutions are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 per financial institution. Cash balances at the institutions did not exceed federally insured limits as of September 30, 2019, but may have exceeded the limits during the year. Management believes the Organization is not exposed to any significant credit risk on cash as of September 30, 2019.

The Organization manages credit risk relative to cash concentrations by utilizing “sweep” accounts. The Organization maintains ICS Sweep accounts that invest cash balances in other financial institutions at amounts that do not exceed FDIC insurable limits. All cash at these institutions is held in interest-bearing money market accounts. Interest rates on these balances ranged from .10% to .15% as of September 30, 2019.

**Note 3. Operating Leases**

The Organization leases office space in Littleton, NH under a three year operating lease that expires in October 2020. The Organization has the option to renew the lease for two additional years.

The Organization operates the Friendship House, an outpatient drug and alcohol treatment facility and program. The Organization leases the premises under a five-year operating lease that expires March 2023, with monthly rent and CAM fee payments of \$19,582. The CAM fee portion is to be adjusted annually.

The Organization leases satellite offices in Lebanon, NH, Berlin, NH, Tamworth, NH, Woodsville, NH, and Conway, NH under month-to-month operating lease agreements.

In addition, the Organization leases various copiers with lease terms ranging from thirty-six months to sixty months, expiring on various dates through March 2023.

Future minimum rental payments under lease commitments are as follows:

Year Ended September 30,	
2020	\$ 341,896
2021	243,916
2022	234,985
2023	117,492
Thereafter	-
	<u>\$ 938,289</u>

Lease expense for the aforementioned leases was \$323,073 and \$132,746 for the years ended September 30, 2019 and 2018, respectively.

**Note 4. Deferred Revenue**

The summary of the components of deferred revenue as of September 30, are as follows:

	2019	2018
Deferred Revenue - IDN	\$ 2,992,839	\$ 2,387,744
Deferred Revenue - Other	<u>257,000</u>	<u>266,676</u>
Total	<u>\$ 3,249,839</u>	<u>\$ 2,654,420</u>

**Deferred revenue - IDN**

Under the terms of an agreement between the Centers for Medicare and Medicaid Services (CMS) and the State of New Hampshire Department of Health and Human Services, various Integrated Delivery Networks (IDN) are to be established within geographic regions across the state to develop programs to transform New Hampshire's behavioral health delivery system by strengthening community-based mental health and substance use disorder services and programs to combat the opioid crisis. The Organization has been designated to be the administrative lead of one of these IDNs.

In September 2016, the Organization was awarded a five-year demonstration project from the CMS, passed through the State of New Hampshire Department of Health and Human Services. At that date, the Organization was advanced \$2,413,256 upon fulfillment of the condition of successful submission and state approval of an IDN Project Plan. Of that amount, \$2,000,000 will be retained by the Organization as administrative fees for five years and the remaining funds will be disbursed to participants. For years two through five, the IDNs will continue to earn performance-based incentive funding by achieving defined targets and any funds received will be passed through to the participants.

**Note 5. Line of Credit**

The Organization entered into a line of credit agreement with a local bank. The Organization has \$500,000 of available borrowing capacity under this line of credit, of which all is unused. The line of credit bears interest at the Wall Street Journal Prime Rate plus .50% and is secured by all assets of the Organization. The line of credit is due on demand and matures February 2020.

**Note 6. Related Party Transactions**

A majority of the Organization's members and the Organization are also members of a Limited Liability Company. There were no transactions between the Limited Liability Company and the Organization's members in 2019 and 2018.

The Organization contracts various services from other organizations of which members of management of these other organizations may also be board members of North Country Health Consortium, Inc. and Subsidiary. Amounts paid to these organizations were \$279,120 and \$898,736 for the years ended September 30, 2019 and 2018, respectively. Outstanding amounts due to these organizations as of September 30, 2019 and 2018 amounted to \$200 and \$33,214, respectively. Outstanding amounts due from these organizations as of September 30, 2019 and 2018 amounted to \$1,000 and \$5,210, respectively.

**Note 7. Retirement Plan**

The Organization offers a defined contribution savings and investment plan (the Plan) under section 403(b) of the Internal Revenue Code. The Plan is available to all employees who are 21 years of age or older. There is no service requirement to participate in the Plan. Employee contributions are permitted and are subject to IRS limitations. Monthly employer contributions are \$50 for each part-time employee and \$100 for each full-time employee. Employer contributions for the years ended September 30, 2019 and 2018 were \$77,366 and \$61,990, respectively.

**Note 8. Liquidity and Availability**

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the balance sheet date, comprise of the following:

Cash and cash equivalent	\$ 947,618
Accounts receivable, net	
Grants and contracts	1,011,598
Certificates of deposit	<u>126,701</u>
	<u>\$ 2,085,917</u>

In addition to financial assets available to meet general expenditures over the next 12 months, the Organization operates with a balanced budget and anticipates collecting sufficient revenue to cover general expenditures. In the event of further liquidity needs, the Organization could draw upon \$500,000 of an available line of credit as described in Note 5.

**Note 9. Commitment and Contingencies**

The Organization receives a significant portion of its support from various funding sources. Expenditure of these funds requires compliance with terms and conditions specified in the related contracts and agreements. These expenditures are subject to audit by the contracting agencies. Any disallowed expenditures would become a liability of the Organization requiring repayment to the funding sources. Liabilities resulting from these audits, if any, will be recorded in the period in which the liability is ascertained. Management estimates that any potential liability related to such audits will be immaterial.

**Note 10. Federal Reports**

Additional reports, required by *Government Auditing Standards* and Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, including the Schedule of Expenditures of Federal Awards, are included in the supplements to this report.

**Note 11. Reclassifications**

Certain reclassifications have been made to the financial statements for the year ended September 30, 2018 to conform with the current year presentation.

**Note 12. Subsequent Events**

On March 11, 2020, the World Health Organization declared the outbreak of a coronavirus (COVID-19) a pandemic. As a result, economic uncertainties have arisen which are likely to negatively impact the Organization's financial operations. Other financial impact could occur though such potential impact is unknown at this time.

The Organization has evaluated subsequent events through March 17, 2020, the date the financial statements were available to be issued.



**NORTH COUNTRY HEALTH  
CONSORTIUM, INC. AND SUBSIDIARY**

**ADDITIONAL REQUIRED REPORTS**

**September 30, 2019**

## NORTH COUNTRY HEALTH CONSORTIUM, INC. AND SUBSIDIARY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
FOR THE YEAR ENDED SEPTEMBER 30, 2019

Federal Grantor/Pass through Grantor/Program Title	Federal CFDA Number	Grant No.	Pass-through Grantor's Subgrant No.	Federal Expenditures
<b>U.S Department of Health and Human Services</b>				
<i>Direct Programs:</i>				
Network Development	93 912	D06RH28031		\$ 426,829
Rural Health Care Services Outreach Program (Opioid)	93 912	D04RH31641		185,022
Rural Health Opioid Program	93 912	H1URH32387		157,548
Rural Communities Opioid Response Implementation	93 912	GA1RH33527		<u>5,367</u>
				<u>774,766</u>
Rural Communities Opioid Response (Planning)	93 211	G2SRH32457		<u>200,000</u>
Drug-Free Communities (SAMHSA)	93 276	1179SP021539-01		<u>129,144</u>
<i>Total direct programs:</i>				<u>1,103,910</u>
<i>Passed through the State of New Hampshire:</i>				
Public Health Emergency Preparedness	93 074		U90TP000535	50,487
Disaster Behavioral Health Response Teams	93 074		U90TP000535	3,613
Hep A Vaccination	93 074		U90TP000535	8,228
Lead	93 074		U90TP000536	1,877
MRC	93 074		U90TP000536	<u>2,160</u>
				<u>66,365</u>
SAP	93 243		SP020796	212,061
Young Adult Strategies	93 243		SP020796	84,044
Young Adult Leadership	93 243		SP020796	<u>5,833</u>
				<u>301,938</u>
School-Based Immunization	93 268		11231P00757	<u>10,103</u>
Continuum of Care	93 959		T1010035-14	34,813
Continuum of Care	93 959		T1010035	12,069
Substance Misuse Prevention	93 959		T1010035-14	60,300
Substance Misuse Prevention	93 959		T1010035	18,829
Student Assistance Program Federal Block Grant	93 959		T1010035	96,238
Public Health Advisory Council	93 959		T1010035	1,370
Substance Use Disorder (Friendship House)	93 959		T1010035-14	107,410
Substance Use Disorder (Friendship House)	93 959		T1010035	<u>36,190</u>
				<u>367,219</u>
Substance Use Disorder (Friendship House - SOR)	93 788		1179T10S16W	206,100
Substance Use Disorder (Friendship House - SOR)	93 788		1179T10S16W	<u>68,700</u>
				<u>274,800</u>
Community Health Workers	93 757		NU58DP004821	<u>31,807</u>
Public Health Advisor Council	93 758		B010T00937	<u>12,306</u>
Public Health Advisory Council	93 991		NB10T009205-01-01	<u>2,077</u>
<i>Total passed through the State of New Hampshire:</i>				<u>1,066,615</u>
<i>Passed through the University of Dartmouth Area Health Education Center:</i>				
AHEC Supplement	93 107		U77HP03627-15-01	18,916
Area Health Education Centers	93 107		U77HP03627-09-01	<u>83,379</u>
				<u>102,295</u>
<i>Passed through the University of New Hampshire:</i>				
Practice Transformation Network	93 638		Agreement #16-039	<u>437,995</u>
<b>Total Expenditures of Federal Awards</b>				<u>\$ 2,710,815</u>

See accompanying notes to schedule of expenditures of federal awards.

**NORTH COUNTRY HEALTH CONSORTIUM, INC.  
AND SUBSIDIARY**

**Notes to Schedule of Expenditures of Federal Awards  
For the Year Ended September 30, 2019**

**Note 1. Basis of Presentation**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of North Country Health Consortium, Inc. and Subsidiary (the Organization) under programs of the federal government for the year ended September 30, 2019. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Organization, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

**Note 2. Summary of Significant Accounting Policies**

- (1) Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance whereby certain types of expenditures are not allowable or are limited as to reimbursement.
- (2) Pass-through entity identifying numbers are presented where available.
- (3) The Organization did not elect to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.



**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 of  
North Country Health Consortium, Inc. and Subsidiary  
Littleton, New Hampshire

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 North Country Health Consortium, Inc. and Subsidiary (the Organization) (a New Hampshire nonprofit organization), which comprise the consolidated statements of financial position as of September 30, 2019, and the related consolidated statements of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated March 17, 2020.

**Internal Control over Financial Reporting**

In planning and performing our audit of the consolidated financial statements, we considered North Country Health Consortium, Inc. and Subsidiary'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 North Country Health Consortium, Inc. and Subsidiary'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 entity'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 North Country Health Consortium, Inc. and Subsidiary'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**

The 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.

St. Albans, Vermont  
March 17, 2020  
VT Reg. No. 92-0000102

*A.M. Peitch & Company, LLP*



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

To the Board of Directors of  
North Country Health Consortium, Inc. and Subsidiary  
Littleton, New Hampshire

**Report on Compliance for Each Major Federal Program**

We have audited North Country Health Consortium, Inc. and Subsidiary's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of North Country Health Consortium, Inc. and Subsidiary's major federal programs for the year ended September 30, 2019. North Country Health Consortium, Inc. and Subsidiary's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

***Management's Responsibility***

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

***Auditor's Responsibility***

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

### ***Opinion on Each Major Federal Program***

In our opinion, North Country Health Consortium, Inc. and Subsidiary complied, in all material respects, with the types of 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, 2019.

### **Report on Internal Control Over Compliance**

Management of North Country Health Consortium, Inc. and Subsidiary 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 North Country Health Consortium, Inc. and Subsidiary's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of North Country Health Consortium, Inc. and Subsidiary's internal control over compliance.

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

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

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

St. Albans, Vermont  
March 17, 2020  
VT Reg. No. 92-0000102

*A.M. Peioch & Company, LLP*

**NORTH COUNTRY HEALTH CONSORTIUM, INC.  
AND SUBSIDIARY**

**Schedule of Findings and Questioned Costs  
For the Year Ended September 30, 2019**

**A. SUMMARY OF AUDITOR'S RESULTS**

1. The independent auditor's report expresses an unmodified opinion on whether the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary were prepared in accordance with GAAP.
2. No material weakness or significant deficiencies relating to the audit of the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary are reported in the Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of the Financial Statements Performed in Accordance with *Governmental Auditing Standards*.
3. No instances of noncompliance material to the consolidated financial statements of North Country Health Consortium, Inc. and Subsidiary, which would be required to be reported in accordance with *Government Auditing Standards*, were disclosed during the audit.
4. No material weakness or significant deficiencies relating to internal control over compliance for major federal award programs are reported in the Independent Auditor's Report on Compliance for Each Major Program and on Internal Control over Compliance Required by the Uniform Guidance.
5. The auditor's report on compliance for the major federal award programs for North Country Health Consortium, Inc. and Subsidiary expresses an unmodified opinion on the major federal program.
6. There were no audit findings that are required to be reported in this schedule in accordance with 2 CFR Section 200.516(a).
7. The program tested as a major program was U.S. Department of Health and Human Services – Rural Health Care Services: Network Development, Rural Healthcare Services Outreach Program(opioid), Rural Health Opioid Program and Rural Communities Opioid Response Implementation (CFDA Number 93.912).
8. The threshold for distinguishing Types A and B programs was \$750,000.
9. North Country Health Consortium, Inc. and Subsidiary was determined to be a low-risk auditee.

**B. FINDINGS – FINANCIAL STATEMENT AUDIT**

There were no reported findings related to the audit of the consolidated financial statements for the year ended September 30, 2019.

**C. FINDINGS AND QUESTIONED COSTS – MAJOR FEDERAL AWARD PROGRAM AUDIT**

There were no reported findings related to the audit of the federal program for the year ended September 30, 2019.

**NORTH COUNTRY HEALTH CONSORTIUM, INC.  
AND SUBSIDIARY**

**Summary Schedule of Prior Audit Findings  
For the Year Ended September 30, 2019**

**2018 and 2017 – AUDITs OF MAJOR FEDERAL AWARD PROGRAMS**

**2018:** There were no reported findings related to the audit of the major federal program for the year ended September 30, 2018.

**2017:** There were no reported findings related to the audit of the major federal program for the year ended September 30, 2017.



## 2020 - 2021 Board of Directors

### OFFICERS

<p><b><i>Michael Lee, President (2023)</i></b> Weeks Medical Center President</p>	<p><b><i>Ken Gordon, Vice-President (2023)</i></b> Coos County Family Health Services Chief Executive Officer</p>
<p><b><i>Suzanne Gaetjens-Oleson, Treasurer (2023)</i></b> Northern Human Services Regional Mental Health Administrator</p>	<p><b><i>Karen Woods, Secretary (2023)</i></b> Cottage Hospital Administrative Director</p>

### DIRECTORS

<p><b><i>Scott Colby (2022)</i></b> Upper Connecticut Valley Hospital President and CEO</p>	<p><b><i>Greg Cully (2020)</i></b> Indian Stream Health Center Interim Chief Executive Officer</p>
<p><b><i>Tara MacKillop (2020)</i></b> Androscoggin Valley Home Care Executive Director</p>	<p><b><i>Jeanne Robillard (2022)</i></b> Tri-County Community Action Program Chief Operating Officer</p>
<p><b><i>Mary Ann Aldrich</i></b> North Country Home Health and Hospice Dir. Of Comm. Relations &amp; Development</p>	<p><b><i>Michael Peterson (2020)</i></b> Androscoggin Valley Hospital President &amp; CEO</p>
<p><b><i>Lars Nielson, MD (2021)</i></b> Weeks Medical Center Chief Medical Officer</p>	<p><b><i>Ed Duffy, MD (2021)</i></b> Littleton Regional Healthcare Executive Vice President, Chief Medical Officer</p>

Anna Shum

## Qualifications Profile

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**Communications:** Clearly deliver health and medical information with command of plain language and health literacy principals, health communication theory, and research methodology.

**Technical Proficiencies:** Solid command of Microsoft Office Suite, Survey Monkey, Constant Contact, and social media platforms.

## Relevant Experience/Projects

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**Communications & Marketing Coordinator** 2016- Present  
*North Country Health Consortium, Littleton, NH*

- Manage and facilitate NCHC programmatic website updates, social media sites, implementing and sustaining strategic plan for marketing and communications, and community relations.
- Coordinate with program and other staff to prepare outreach/marketing copy, materials, and documents including pamphlets, newsletters, letters, brochures, flyers, and advertisements.
- Participate in development of projects, grant applications, and reports to funding agencies and other interested parties.
- Assume Public Information Officer (PIO) role for the North Country Regional Public Health Network; provide public information and risk communication during COVID-19 pandemic to Northern NH Public Health Network partners and community members.

**Health Communication Graduate Consultant:** 2012-2013  
*Skydive New England (SNE), Lebanon, ME*

- Conceptualized and spearheaded pre-participation screening procedures for the benefit of skydiving instructor staff and SNE students.
- Prepared review of literature and conducted focus groups, online surveys, and telephone interviews with SNE staff and students to serve as needs-assessments for proposed programming.
- Produced a manual to guide users through pre-participation screening procedures.

**Technical Writer Intern:** 2010-2011  
*Procor, Lovin Cardiovascular Research Foundation, Brookline, MA*

- Synthesized technical reports, on implementation of a global strategy to fight cardiovascular disease, into advocacy material to be used for a United Nations high-level summit on non-communicable diseases.
- Prepared cardiovascular disease prevention news updates using Procor's style guide, posting to the organization's website and listserv.

**Freelance Copywriter:** 2009-2010  
*Catalyst, Framingham, MA*

- Authored marketing content covering multiple industries and applications.
- Produced website content for a startup technology-based publishing consultancy.

## Education

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**EMERSON COLLEGE, IN COLLABORATION WITH TUFTS UNIVERSITY SCHOOL OF MEDICINE, Boston, MA**  
M.A. in Health Communication

Coursework included: Health Communication Theory, Research Methodology, Writing for Health & Medicine, Marketing Communication, Health Literacy, Epidemiology & Biostatistics

**COLBY COLLEGE, Waterville, ME**

B.A. in English

*Graduated Magna cum Laude*

## Contact



## Top Skills

Healthcare  
Personnel Management  
Health Promotion

## Languages

French (Native or Bilingual)  
English (Native or Bilingual)

## Certifications

Chronic Disease Self-Management  
Program Leader  
Plant-based Nutrition  
Certified Application Counselor

# Francine Morgan

Director of Communications and Human Resources at North Country Health Consortium

Littleton, CO

## Summary

Experienced Program Director with a demonstrated history of working in public health and hospitality organizations. Strong professional skilled in Nonprofit Organizations, Human Resources Management, Community Organizing, Program Evaluation, Prevention, Volunteer Management, Communications and Health Promotion. More than 25 years of management experience with 10+ years in non-profit, public health and grants management (Federal, State and Foundation funding).

## Experience

North Country Health Consortium

10 years 10 months

Director of Communications and Human Resources

December 2018 - Present (2 years 6 months)

Littleton, CO

An internally and externally facing role leading Human Resources efforts, managing relationships in the community, and leading program development. A member of the senior leadership team, participates in strategic planning and budgeting initiatives, coordinates the creation and updating of policies and procedures, and collaborative problem solving.

Leads marketing and communications for the organization including strategic integration of program branding, graphic design and video creation to increase awareness of public health initiatives. Coordination of social media platforms to ensure a consistent voice. Public facing contact for news organizations, public relations and elected officials. Works within the guidelines and mission of the North Country Health Consortium.

Experience in the planning and achievement of a three-year CARF accreditation (Commission on the Accreditation of Rehabilitation Facilities) for a 28-bed Substance Use Disorder Treatment Facility.

Coordination of public health messaging for the North Country Public Health Network's COVID-19 Response for Northern New Hampshire. Created original graphic designs for print and digital media campaigns.

Program Director: Drug Treatment Court of Grafton County  
2018 - Present (3 years)

Lead the transition of the Drug Treatment Court of Grafton County from a county-run program to the North Country Health Consortium. Using a collaborative and team-based approach, ensure adherence to the NH Judicial Bureau contract and National Association of Drug Court Professionals best practices, appropriate staffing, growth of community based connections, and supports for the program and its participants.

Program Director  
July 2016 - December 2019 (3 years 6 months)

Coos and Northern Grant Counties, Vermont

Responsible for operational success of Molar Express (public health mobile dental program) and Communications and Marketing organization-wide. In addition, directing a variety of healthcare workforce initiatives, ensuring seamless team management and development, program delivery, quality control, budget oversight and evaluation.

Experience includes grants management such as the Community's Health Worker Program (creating infrastructure, coordinating systems to capture social determinants of health, curriculum development, training and supervision), community organizing to promote the Chronic Disease Self Management Program and management of Substance Misuse Prevention programs. Experience leading a variety of outreach and education campaigns such as Marketplace Outreach and Enrollment, The Heart Truth and Live Heart Smart.

An externally facing role managing relationships in the community and a member of the senior management team, participating in strategic planning and budgeting initiatives, problem solving and communications. Works within the guidelines, policies and mission of the North Country Health Consortium.

The Molar Express Program Manager/Director  
June 2012 - September 2019 (7 years 4 months)

Coos, Northern Grafton Counties NH

Molar Express: Public Health Portable Dental Program. Continuing management responsibilities since 2012. Expanded coordination and collaboration for projects as needed, such as project management consulting for Federally Qualified Health Center (FQHC) dental initiatives in the region.

Senior Program Manager  
October 2013 - June 2016 (2 years 9 months)

Molar Express: Public Health Portable Dental Program. Continuing management responsibilities since 2012. Expanded coordination and collaboration for projects as needed, such as project management consulting for Federally Qualified Health Center (FQHC) dental initiatives in the region.

Substance Misuse Prevention and Continuum of Care program oversight for the North Country Public Health region of NH.

Marketplace Outreach and Enrollment: health access responsibilities including management and coordination of the ACA Health Insurance Marketplace Enrollment and Outreach initiatives for Northern NH with responsibilities for assessing, interpreting and incorporating new and revised regulatory and government contract requirements into operations.

Area Health Education Center (AHEC) Program Coordinator  
August 2010 - June 2012 (1 year 11 months)

Northern New Hampshire Area Health Education Center (AHEC) promotes excellence in the health care system of northern New Hampshire through support of community and academic partnerships for training, continuing education and access to information resources.

Granite State College  
Adjunct Faculty  
2009 - 2012 (3 years)

HR Vision Consulting, LLC  
Human Resources Consultant  
September 2007 - May 2011 (3 years 9 months)

Masters of Business Administration with a specialty in Human Resources Management (MBA/HRM) .

Human Resources consulting services including strategic alignment of compensation, job descriptions, training, employee retention initiatives, and other services based on an organization-specific needs assessment.

Kendal at Hanover  
Human Resources Representative  
2001 - 2008 (7 years)

Marriott International  
3 years 11 months

Senior Event Manager  
June 1999 - June 2001 (2 years 1 month)  
Boston, Massachusetts, United States

- Managed complex conventions along with all Event Management responsibilities
- Handled conventions from 200-3000+ attendees

Event Manager  
April 1998 - June 1999 (1 year 3 months)  
Boston, Massachusetts, United States

- Coordinated all details for a customer's conference and integrate teams to carry out events
- Handled groups and conventions from 2-200 attendees
- Ensured proper group rooms and catering cost forecasting to maximize usage and profitability

Assistant Banquet Manager  
August 1997 - April 1998 (9 months)  
Boston, Massachusetts, United States

- Expedited banquet functions from 2 to 2,500 people and 60+ staff
- Responsible for staff attendance records, progressive discipline, staff reviews

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## Education

University of Phoenix  
MBA, Concentration in Human Resources · (2006 - 2008)

University of New Hampshire Peter T. Paul College of Business and Economics  
B.S., Hospitality Management · (1993 - 1997)

**CONTRACTOR NAME**

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Francine Morgan	Marketing Director	\$86,382	12%	\$10,366
Anna Shum	Marketing Coordinator	\$65,108	12%	\$7,813



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

Lori A. Shibanette  
 Commissioner

Lisa M. Morris  
 Director

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

February 1, 2021

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

**INFORMATIONAL ITEM**

Pursuant to RSA 4:45, RSA 21-P:43, and Section 4 of Executive Order 2020-04 as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, 2020-18, 2020-20, 2020-21, 2020-23, 2020-24, and 2020-25, Governor Sununu has authorized the Department of Health and Human Services, Division of Public Health Services, to enter into **Retroactive, Sole Source** amendments to existing contracts with the vendors listed below to recruit and train COVID-19 vaccine staff as part of the State's COVID-19 vaccination response, by increasing the total price limitation by \$1,300,000 from \$11,474,809 to \$12,774,809, with no change to the contract completion dates of June 30, 2021, effective retroactive to December 26, 2020, upon 100% Federal Funds.

The individual contracts were approved by Governor and Council as specified in the table below.

Vendor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	Approval History
City of Manchester	177433	Greater Manchester	\$1,387,385	\$100,000	\$1,487,385	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
City of Nashua	177441	Greater Nashua	\$956,156	\$100,000	\$1,056,156	O: September 18, 2019, item #25 A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 10/5/20 A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/17/2020, II-TBD
County of Cheshire	177372	Greater Monadnock	\$699,792	\$100,000	\$799,792	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: 12/17/2020, II-TBD
Granite United Way	160015	Concord, Carroll County, and South Central	\$2,537,071	\$300,000	\$2,837,071	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD

Greater Seacoast Community Health	154703	Strafford County	\$843,300	\$100,000	\$943,300	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
Lakes Region Partnership for Public Health	165635	Winnepesaukee	\$817,716	\$100,000	\$917,716	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
Lamprey Health Care	177677	Seacoast	\$881,467	\$100,000	\$981,467	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
Mary Hitchcock Memorial Hospital	177160	Greater Sullivan and Upper Valley	\$1,716,907	\$200,000	\$1,916,907	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
Mid-State Health Center	158055	Central NH	\$800,378	\$100,000	\$900,378	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
North Country Health Consortium	158557	North Country	\$834,637	\$100,000	\$934,637	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-12/18/20 (#B) A5: 12/18/2020, item #10 A6: 12/17/2020, II-TBD
		Total	\$11,474,809	\$1,300,000	\$12,774,809	

Funds are available in the following accounts for State Fiscal Year 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**See attached fiscal details.**

**EXPLANATION**

These amendments are **Retroactive** because the Department, in the interest of the public's health and safety, needed to quickly mobilize vaccine staff due to the forthcoming arrival of the COVID-19 vaccine. These amendments are **Sole Source** because the contracts were originally approved as sole source and MOP 150 requires any subsequent amendments to be labeled as sole source. Additionally, the Regional Public Health Networks have been coordinating public health emergency planning and responses for the past fifteen (15) years and have the

existing infrastructure to support this vaccine initiative. The Contractors are therefore uniquely qualified to provide these services in the interest of the public's health and safety.

The purpose of these amendments is to support the Contractors in recruiting and training COVID-19 vaccine staff. The Contractors will ensure the COVID-19 vaccine staff are equipped to administer vaccines, participate in vaccine-related training, and support the planning and operations of conducting mobile and other COVID-19 vaccine clinics. The Contractors oversee clinics as part of the Department's comprehensive vaccination campaign. In addition, food and supplies are being provided to COVID-19 vaccine staff, as supported by FEMA.

The Contractors will administer COVID-19 vaccines as supplied by the New Hampshire Immunization Program. The Immunization Program will provide trainings and each Contractor will enter into a vaccine provider agreement with the Department. Contractors will coordinate with the Department to administer and track vaccinations with the provided technology. The Contractors will follow all vaccination protocols as directed by the Department.

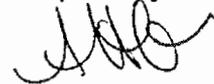
The population served includes residents in each of the respective public health regions statewide. The exact number of residents of the State of New Hampshire that will be served will depend on the trajectory of the COVID-19 pandemic.

Area served: Statewide

Source of Funds: CFDA # 97.036; FAIN #4516DRNH00000001

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

Respectfully submitted,



Lori A. Shibinette  
Commissioner



**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

County of Cheshire Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Greater Seacoast Community Health Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Capitol Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way -South Central Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Lamprey Health Care Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000
			<b>SUB TOTAL</b>	<b>\$390,000</b>	<b>\$0</b>	<b>\$390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**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**

**74% Federal Funds & 26% General Funds**

CFDA #93.069

FAIN #U90TP922018

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$197,673	\$0	\$197,673
2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$194,673	\$0	\$194,673
			Sub-Total	\$392,346	\$0	\$392,346

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
			Sub Total 2020	\$92,910	\$0	\$92,910
2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
			Sub Total 2021	\$89,910	\$0	\$89,910
			Sub-Total	\$182,820	\$0	\$182,820

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Community Health			Sub Total 2020	\$92,580	\$0	\$92,580
2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$92,580	\$0	\$92,580
			Sub-Total	\$185,160	\$0	\$185,160

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
- Capitol Region			Sub Total 2020	\$96,430	\$0	\$96,430
2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
			Sub Total 2021	\$93,430	\$0	\$93,430
			Sub-Total	\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,360	\$0	\$97,360
2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
			Sub Total 2020	\$89,750	\$0	\$89,750
2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$288,223	\$0	\$288,223
2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
Mary Hitchcock Memorial Hospital - Sullivan County Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
Mary Hitchcock Memorial Hospital - Upper Valley Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
Mid-State Health Center			Sub Total 2020	\$83,600	\$0	\$83,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
North Country Health Consortium			Sub Total 2020	\$91,550	\$0	\$91,550
2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			<b>SUB TOTAL</b>	<b>\$2,942,102</b>	<b>\$0</b>	<b>\$2,942,102</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS**

97% Federal Funds & 3% General Funds

CFDA #93.959

FAIN #TI010035

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2020	\$132,405	\$0	\$132,405
2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2021	\$132,405	\$0	\$132,405
			Sub-Total	\$264,810	\$0	\$264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2020	\$133,986	\$0	\$133,986
2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2021	\$133,986	\$0	\$133,986
			Sub-Total	\$267,972	\$0	\$267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$85,917	\$0	\$85,917
2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2020	\$131,551	\$0	\$131,551
2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2021	\$128,014	\$0	\$128,014
			Sub-Total	\$259,565	\$0	\$259,565

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2020	\$133,264	\$0	\$133,264
2021	102-500731	Contracts for Prog Svc	92057502	\$93,015	\$0	\$93,015
2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2021	\$133,265	\$0	\$133,265
			Sub-Total	\$266,529	\$0	\$266,529

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2020	\$133,385	\$0	\$133,385
2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2021	\$133,385	\$0	\$133,385
			Sub-Total	\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
-South Central Region			Sub Total 2020	\$133,512	\$0	\$133,512
2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2021	\$133,512	\$0	\$133,512
			Sub-Total	\$267,024	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2020	\$131,149	\$0	\$131,149
2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2021	\$131,149	\$0	\$131,149
			Sub-Total	\$262,298	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
Partnership for Public Health			Sub Total 2020	\$129,008	\$0	\$129,008
2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2021	\$129,008	\$0	\$129,008
			Sub-Total	\$258,016	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
Department			Sub Total 2020	\$135,845	\$0	\$135,845
2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2021	\$135,845	\$0	\$135,845
			Sub-Total	\$271,690	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
Memorial Hospital - Sullivan County Region			Sub Total 2020	\$136,362	\$0	\$136,362
2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
			Sub Total 2021	\$136,362	\$0	\$136,362
			Sub-Total	\$272,724	\$0	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
				Sub Total 2020	\$133,162	\$0
						\$133,162
2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
				Sub Total 2021	\$136,612	\$0
						\$136,612
			Sub-Total	\$269,774	\$0	\$269,774

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
				Sub Total 2020	\$118,551	\$0
						\$118,551
2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
				Sub Total 2021	\$133,551	\$0
						\$133,551
			Sub-Total	\$252,102	\$0	\$252,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
				Sub Total 2020	\$133,069	\$0
						\$133,069
2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
				Sub Total 2021	\$133,069	\$0
						\$133,069
			Sub-Total	\$266,138	\$0	\$266,138
			SUB TOTAL	\$3,445,412	\$0	\$3,445,412

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
				Sub-Total	\$195,375	\$0
						\$195,375

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
				Sub-Total	\$194,991	\$0
						\$194,991

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
		Sub-Total		\$229,099	\$0	\$229,099

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
		Sub-Total		\$189,678	\$0	\$189,678

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
2021	102-500731	Contracts for Prog Svc	92052410	\$82,432	\$0	\$82,432
		Sub-Total		\$188,308	\$0	\$188,308

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
		Sub-Total		\$180,000	\$0	\$180,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
		Sub-Total		\$207,249	\$0	\$207,249

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
2021	102-500731	Contracts for Prog Svc	92052410	\$80,852	\$0	\$80,852
		Sub-Total		\$161,602	\$0	\$161,602

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
2021	102-500731	Contracts for Prog Svc	92052410	\$83,220	\$0	\$83,220
		Sub-Total		\$210,507	\$0	\$210,507

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
		Sub-Total		\$180,000	\$0	\$180,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
		Sub-Total		\$180,000	\$0	\$180,000
		<b>SUB TOTAL</b>		<b>\$2,116,809</b>	<b>\$0</b>	<b>\$2,116,809</b>

**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**

100% Federal Funds

CFDA #93.268

FAIN #H231P000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$43,182	\$0	\$43,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$73,182	\$0	\$73,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$73,180	\$0	\$73,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$73,182	\$0	\$73,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$50,182	\$0	\$50,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$43,182	\$0	\$43,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$73,182	\$0	\$73,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$42,000	\$0	\$42,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
		Sub-Total		\$42,000	\$0	\$42,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
			Sub-Total	\$73,182	\$0	\$73,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
			Sub-Total	\$80,182	\$0	\$80,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
			Sub-Total	\$71,058	\$0	\$71,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$35,000	\$0	\$35,000
			Sub-Total	\$73,182	\$0	\$73,182
			<b>SUB TOTAL</b>	<b>\$810,876</b>	<b>\$0</b>	<b>\$810,876</b>

**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 Funds

CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000
		<b>SUB TOTAL</b>		<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

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 PREVENTION

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$3,000	\$0	\$3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
		Sub-Total		\$13,145	\$0	\$13,145

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
2020	102-500731	Contracts for Prog Svc	90036000	\$42,108	\$0	\$42,108
2021	102-500731	Contracts for Prog Svc		\$4,124	\$0	\$4,124
		Sub-Total		\$53,146	\$0	\$53,146

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
		Sub-Total		\$13,145	\$0	\$13,145
		<b>SUB TOTAL</b>		<b>\$171,350</b>	<b>\$0</b>	<b>\$171,350</b>

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,820	\$0	\$8,820

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$1,818	\$0	\$1,818

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$1,818	\$0	\$1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,818	\$0	\$8,818
		<b>SUB TOTAL</b>		<b>\$83,000</b>	<b>\$0</b>	<b>\$83,000</b>

**05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
		Sub-Total		\$80,000	\$0	\$80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$29,511	\$0	\$29,511
		Sub-Total		\$69,511	\$0	\$69,511
		<b>SUB TOTAL</b>		<b>\$149,511</b>	<b>\$0</b>	<b>\$149,511</b>

**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**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
		Sub-Total		\$7,930	\$0	\$7,930

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
		Sub-Total		\$0	\$0	\$0

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,069	\$0	\$7,069
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
		Sub-Total		\$13,254	\$0	\$13,254

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333
		Sub-Total		\$13,355	\$0	\$13,355

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
		Sub-Total		\$10,309	\$0	\$10,309

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
		Sub-Total		\$13,255	\$0	\$13,255
		<b>SUB TOTAL</b>		<b>\$120,750</b>	<b>\$0</b>	<b>\$120,750</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90027027	\$190,000	\$0	\$190,000
		Sub-Total		\$190,000	\$0	\$190,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$240,000	\$0	\$240,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$240,000	\$0	\$240,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$55,000	\$0	\$55,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$55,000	\$0	\$55,000

Mid-State Health Center Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

North Country Health Consortium Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$49,999	\$0	\$49,999
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$49,999	\$0	\$49,999
		<b>SUB TOTAL</b>		<b>\$984,999</b>	<b>\$0</b>	<b>\$984,999</b>

**05-95-095-950010-1919 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH,**

City of Nashua Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

County of Cheshire Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Greater Seacoast Community Health Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Granite United Way - Capitol Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Granite United Way - Carroll County Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Granite United Way -South Central Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	95010890	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	95010890	\$0	\$100,000	\$100,000
		Sub-Total		\$0	\$100,000	\$100,000
		<b>SUB TOTAL</b>		<b>\$0</b>	<b>\$1,300,000</b>	<b>\$1,300,000</b>

<b>TOTAL ALL</b>				<b>\$11,474,809</b>	<b>\$1,300,000</b>	<b>\$12,774,809</b>
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**State of New Hampshire  
Department of Health and Human Services  
Amendment #7**

This 7<sup>th</sup> Amendment to the Regional Public Health Network Services contract (hereinafter referred to as "Amendment #7") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and City of Manchester, (hereinafter referred to as "the Contractor").

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on June 19, 2019, (Item #78E), as amended on February 5, 2020, (Item #7), as amended on May 6, 2020 (Item # 47), as amended with Governor approval on July 10, 2020 and presented to the Executive Council as an Informational Item on August 26, 2020 (Item #L), and as amended with Governor approval on November 17, 2020 and presented to the Executive Council as an Informational Item on December 18, 2020 (Item #B), as amended with Governor and Executive Council approval on December 18, 2020 (Item #10), and as amended with Governor approval on December 17, 2020 and to be presented to the Executive Council as an Informational Item on TBD, the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, the Contract may be amended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

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

1. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$1,487,385.
2. Add Exhibit A-1 Additional Scope of Services - COVID-19 Response, Section 1.5. Distribution and Use of Materials, Subsection 1.5.4., to read:
  - 1.5.4. The Contractor shall recruit and train COVID-19 vaccine staff, and pay no more than \$65 per hour per vaccine staff member, unless otherwise approved by the Department, to provide services, which includes but is not limited to:
    - 1.5.4.1. Administering vaccines.
    - 1.5.4.2. Participating in training, as requested.
    - 1.5.4.3. Supporting the planning and operations of conducting mobile and other COVID-19 vaccine clinics.
  - 1.5.5. The Contractor shall provide vaccine employees and volunteers with water, snacks, and/or meals while performing vaccine administration work. All food, drinks, and meal materials will be provided to staff on site and may include individually packaged meals in lieu of buffet or family style options given that operations are occurring in a pandemic environment.
3. Modify Exhibit B-1, Program Funding, Amendment #6 by deleting it in its entirety and replacing it with Exhibit B-1 Program Funding, Amendment #7, which is attached hereto and incorporated by reference herein.

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**

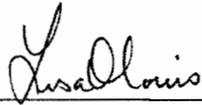


All terms and conditions of the Contract and prior amendments not inconsistent with this Amendment #7 remain in full force and effect. This amendment shall be effective retroactively to December 26, 2020, upon the Governor's approval, as issued under the Executive Order 2020-04, as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, 2020-18, 2020-20, 2020-21, 2020-2023, 2020-24, and 2020-25, and any subsequent extensions.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

2/11/2021  
Date

  
Name: Lisa Morris  
Title: Director, NH Division of Public Health Services

City of Manchester

2/8/21  
Date

  
Name: Joyce Craig  
Title: Mayor

**New Hampshire Department of Health and Human Services  
Regional Public Health Network Services**



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

OFFICE OF THE ATTORNEY GENERAL

02/12/21

Date

*Catherine Pinos*

Name:

Title: Catherine Pinos, Attorney

I hereby certify that the foregoing Amendment was approved by the Governor approval issued under the Executive Order 2020-04 as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, 2020-18, 2020-20, 2020-21, 2020-23, 2020-24, and 2020-25, and any subsequent extensions.

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:

Vendor Name: City of Manchester  
 Contract Name: Regional Public Health Network Services  
 Region: Greater Manchester

Program Name and Funding Amounts

State Fiscal Year	Immunization	Public Health Advisory Council	Public Health Emergency Preparedness	Public Health Crisis Response	Public Health Emergency Preparedness-Medical Reserve Corp	Substance Misuse Prev	Continuum of Care	Young Adult Substance Misuse Prevention Strategies*	Child Lead P Prev Com Asse
2019		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ -
2020		\$ 30,000.00	\$ 285,223.00	\$240,000	\$ 10,000.00	\$ 80,404.00	\$ 40,441.00	\$ 117,249.00	\$ -
2021	\$135,000	\$ 30,000.00	\$ 285,223.00		\$ 10,000.00	\$ 80,404.00	\$ 40,441.00	\$ 90,000.00	\$ -



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

Lori A. Shibinette  
 Commissioner

Lisa M. Morris  
 Director

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

December 22, 2020

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

**INFORMATIONAL ITEM**

Pursuant to RSA 4:45, RSA 21-P:43, and Section 4 of Executive Order 2020-04 as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, 2020-18, 2020-20, 2020-21, and 2020-23, Governor Sununu has authorized the Department of Health and Human Services, Division of Public Health Services, to enter into **Retroactive, Sole Source** amendments to existing contracts with the Contractors listed below for the provision of supplies and funding as part of the State's COVID-19 vaccination response, by increasing the total price limitation by \$335,000 from \$11,139,809 to \$11,474,809 with no change to the contract completion dates of June 30, 2021, effective retroactive to December 1, 2020, upon Governor approval. 100% Federal Funds.

The original contracts were approved by Governor and Council or the Governor under his Emergency Order authority as indicated in the table below.

Vendor Name	Vendor Code	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
City of Manchester	177433	Greater Manchester	\$1,362,385	\$25,000	\$1,387,385	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
City of Nashua	177441	Greater Nashua	\$931,156	\$25,000	\$956,156	O: September 18, 2019, item #25 A1: February 5, 2020, item #(7) A2: May 6, 2020, item #47 A3: GA - 10/5/20 A4: GA - 11/17/20 II-TBD
County of Cheshire	177372	Greater Monadnock	\$664,792	\$35,000	\$699,792	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7) A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L)
Granite United Way	160015	Concord, Carroll County, and South Central	\$2,462,071	\$75,000	\$2,537,071	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD

Greater Seacoast Community Health	154703	Strafford County	\$818,300	\$25,000	\$843,300	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
Lakes Region Partnership for Public Health	165635	Winnepesaukee	\$792,716	\$25,000	\$817,716	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
Lamprey Health Care	177677	Seacoast	\$856,467	\$25,000	\$881,467	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
Mary Hitchcock Memorial Hospital	177160	Greater Sullivan and Upper Valley	\$1,666,907	\$50,000	\$1,716,907	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
Mid-State Health Center	158055	Central NH	\$775,378	\$25,000	\$800,378	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
North Country Health Consortium	158557	North Country	\$809,637	\$25,000	\$834,637	O: June 19, 2019, item #78E A1: February 5, 2020, item #7 A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: GA - 11/17/20 II-TBD A5: TBD
		Total	\$11,139,809	\$335,000	\$11,474,809	

Funds are available in the following accounts for State Fiscal Year 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**See attached fiscal details.**

**EXPLANATION**

This item is **Retroactive** because the Department, in the interest of the public's health and safety, needed to quickly mobilize due to the forthcoming arrival of the COVID-19 vaccine. This item is **Sole Source** because the contracts were originally approved as sole source and MOP 150 requires any subsequent amendments to be labeled as sole source. Additionally, the Regional Public Health Networks have been coordinating public health emergency planning and responses for the past fifteen (15) years and have the existing infrastructure to support this vaccine initiative. The Contractors are therefore uniquely qualified to provide these services in the interest of the public's health and safety.

The purpose of these amendments is to support the Contractors' mobile and other clinics in providing COVID-19 vaccinations. The Department will provide the Contractors with computers and tablets to track the vaccinations, which will be returned to the Department after the completion of the agreement. The Contractors will implement vaccination clinics as one component of the

Department's comprehensive vaccination campaign once the Centers for Disease Control and Prevention and the U.S. Food and Drug Administration approve a COVID-19 vaccine. The COVID-19 vaccination campaign will be implemented in phases to populations identified by the Department.

The population served includes residents in each of the respective public health regions statewide. The exact number of residents of the State of New Hampshire that will be served will depend on the trajectory of the COVID-19 pandemic.

The Contractors will administer COVID-19 vaccines as supplied by the New Hampshire Immunization Program. The Immunization Program will provide trainings and each Contractor will enter into a vaccine provider agreement with the Department. Contractors will coordinate with the Department to administer and track vaccinations with the provided technology. The Contractors will follow all vaccination protocols as directed by the Department.

The Department will monitor contracted services by ensuring all vaccinations are tracked, as directed by the Department and by ensuring the vaccinations are distributed to the approved individuals.

Area served: Statewide

Source of Funds: CFDA #93.268, FAIN # NH23IP922595

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

Respectfully submitted,



Lori A. Shibinette  
Commissioner



10  
MMA



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

Lori A. Shibanette  
Commissioner

Lisa M. Morris  
Director

29 HAZEN DRIVE, CONCORD, NH 03301  
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www.dhhs.nh.gov

November 9, 2020

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **Retroactive, Sole Source** contracts with the vendors listed in **bold** below for additional funding for the Young Adult Strategies program, by increasing the total price limitation by \$601,824 from \$10,414,931 to \$11,016,755 with no change to the contract completion dates of June 30, 2021 effective retroactive to October 1, 2020 upon Governor and Council approval. 100% Federal Funds.

The original contracts were approved by Governor and Council as indicated in the table below.

Vendor Name	Vendor Code	Contract Number	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
<b>City of Manchester</b>	<b>177433</b>	<b>1068192</b>	<b>Greater Manchester</b>	<b>\$1,294,885</b>	<b>\$67,500</b>	<b>\$1,362,385</b>	O: June 19, 2019, item (#78E) A1: February 5, 2020, item (#7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
<b>City of Nashua</b>	<b>177441</b>	<b>1070165</b>	<b>Greater Nashua</b>	<b>\$931,156</b>	<b>\$0</b>	<b>\$931,156</b>	O: September 18, 2019, item (#25) A1: February 5, 2020, item (#7) A2: May 6, 2020, item (#47) A3: GA - 10/5/20

County of Cheshire	177372	1068196	Greater Monadnock	\$664,792	\$0	\$664,792	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II-8/26/20 (#L)
Granite United Way	160015	1068198	Concord, Carroll County, and South Central	\$2,259,571	\$202,500	\$2,462,071	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
Greater Seacoast Community Health	154703	1068193	Strafford County	\$750,800	\$67,500	\$818,300	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
Lakes Region Partnership for Public Health	165635	1068197	Winnipesaukee	\$725,216	\$67,500	\$792,716	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item (#47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
Lamprey Health Care	177677	1068952	Seacoast	\$794,643	\$61,824	\$856,467	O: June 19, 2019, item (#78E) A1: February 5,

							2020, item #(7) A2: May 6, 2020, item #(47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
Mary Hitchcock Memorial Hospital	177160	177160	Greater Sullivan and Upper Valley	\$1,543,853	\$0	\$1,543,853	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
Mid-State Health Center	158055	1068190	Central NH	\$707,878	\$67,500	\$775,378	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item #47 A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
North Country Health Consortium	158557	1068199	North Country	\$742,137	\$67,500	\$809,637	O: June 19, 2019, item (#78E) A1: February 5, 2020, item #(7) A2: May 6, 2020, item #(47) A3: GA - 7/10/20 II-8/26/20 (#L) A4: TBD
			<b>Total</b>	<b>\$10,414,931</b>	<b>\$601,824</b>	<b>\$11,016,755</b>	

Funds are available in the following accounts for State Fiscal Year 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**See attached fiscal details.**

### EXPLANATION

This request is **Retroactive** because the Department did not receive the notice of award for funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) until September 22, 2020 granting the Department authority to extend funding and services. This request is **Sole Source** because the contracts were originally approved as sole source and MOP 150 requires any subsequent amendments to be labelled as sole source.

The purpose of this request is to add additional funding to seven (7) of the Contractors, to enhance services and expand outreach to young adults between the ages of 18 and 25 to prevent and reduce the use of alcohol, marijuana, and non-medical prescription drugs including opioids and illicit opioids.

The Contractors will provide evidence-informed services and programs that are appropriate and culturally relevant for young adults between the ages of 18 to 25 years in high-risk high-need communities. Approximately 8,000 individuals will be served from April 1, 2019 to June 30, 2021.

The Contractors will continue ensuring evidenced-informed substance misuse prevention strategies are available in a variety of settings including workplaces, college campuses, community centers, and within homes via home visiting services. The strategies are designed for the targeted populations with the goals of reducing risky behaviors while enhancing protective factors to positively impact healthy decisions around the use of substances and increase knowledge of the consequences of substance misuse.

The Department will monitor contracted services by having participants complete a survey where the following outcomes will be measured:

- Participants report a decrease in past 30-day alcohol use.
- Participants report a decrease in past 30-day non-medical prescription drug use.
- Participants report a decrease in past 30-day illicit drug use including illicit opioids.
- Participants report a decrease in negative consequences from substance misuse.

Should the Governor and Executive Council not authorize this request, young adults who are most vulnerable and at risk for misusing substances and for developing a substance use disorder will not benefit from prevention and early intervention strategies.

Area served: Statewide

Source of Funds: CFDA #93.243, FAIN # SP020796

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

Respectfully submitted,



Lori A. Shibinette  
Commissioner



**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000
		<b>SUB TOTAL</b>		<b>\$390,000</b>	<b>\$0</b>	<b>\$390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

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

74% Federal Funds & 26% General Funds  
CFDA #93.069 FAIN #U90TP922018

City of Nashua		Vendor # 177441-B011				
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$197,673	\$0	\$197,673
2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$194,673	\$0	\$194,673
			Sub-Total	\$392,346	\$0	\$392,346

County of Cheshire		Vendor # 177372-B001				
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
			Sub Total 2020	\$92,910	\$0	\$92,910
2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
			Sub Total 2021	\$89,910	\$0	\$89,910
			Sub-Total	\$182,820	\$0	\$182,820

Greater Seacoast Community Health		Vendor # 154703-B001				
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Community Health			Sub Total 2020	\$92,580	\$0	\$92,580
2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$92,580	\$0	\$92,580
			Sub-Total	\$185,160	\$0	\$185,160

Granite United Way - Capitol Region		Vendor # 160015-B001				
Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
- Capitol Region			Sub Total 2020	\$96,430	\$0	\$96,430
2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
			Sub Total 2021	\$93,430	\$0	\$93,430
			Sub-Total	\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
Carroll County Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
South Central Region			Sub Total 2020	\$97,360	\$0	\$97,360
2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
Partnership for Public Health			Sub Total 2020	\$89,750	\$0	\$89,750
2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
Health Department			Sub Total 2020	\$288,223	\$0	\$288,223
2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
Mary Hitchcock Memorial Hospital - Sullivan County Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
Mary Hitchcock Memorial Hospital - Upper Valley Region			Sub Total 2020	\$86,600	\$0	\$86,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
Mid-State Health Center			Sub Total 2020	\$83,600	\$0	\$83,600
2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
North Country Health Consortium			Sub Total 2020	\$91,550	\$0	\$91,550
2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			SUB TOTAL	\$2,942,102	\$0	\$2,942,102

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS**

97% Federal Funds & 3% General Funds  
CFDA #93.959

FAIN #TI010035

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2020	\$132,405	\$0	\$132,405
2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2021	\$132,405	\$0	\$132,405
			Sub-Total	\$264,810	\$0	\$264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2020	\$133,986	\$0	\$133,986
2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2021	\$133,986	\$0	\$133,986
			Sub-Total	\$267,972	\$0	\$267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$85,917	\$0	\$85,917
2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2020	\$131,551	\$0	\$131,551
Community Health						
2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2021	\$128,014	\$0	\$128,014
			Sub-Total	\$259,565	\$0	\$259,565

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2020	\$133,264	\$0	\$133,264
Capitol Region						
2021	102-500731	Contracts for Prog Svc	92057502	\$93,015	\$0	\$93,015
2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2021	\$133,265	\$0	\$133,265
			Sub-Total	\$266,529	\$0	\$266,529

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2020	\$133,385	\$0	\$133,385
Carroll County Region						
2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2021	\$133,385	\$0	\$133,385
			Sub-Total	\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
-South Central Region			Sub Total 2020	\$133,512	\$0	\$133,512
2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2021	\$133,512	\$0	\$133,512
			Sub-Total	\$267,024	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2020	\$131,149	\$0	\$131,149
2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2021	\$131,149	\$0	\$131,149
			Sub-Total	\$262,298	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
Partnership for Public Health			Sub Total 2020	\$129,008	\$0	\$129,008
2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2021	\$129,008	\$0	\$129,008
			Sub-Total	\$258,016	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
Health Department			Sub Total 2020	\$135,845	\$0	\$135,845
2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2021	\$135,845	\$0	\$135,845
			Sub-Total	\$271,690	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
Memorial Hospital - Sullivan County Region			Sub Total 2020	\$136,362	\$0	\$136,362
2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
			Sub Total 2021	\$136,362	\$0	\$136,362
			Sub-Total	\$272,724	\$0	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
Memorial Hospital - Upper Valley Region			Sub Total 2020	\$133,162	\$0	\$133,162
2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
			Sub Total 2021	\$136,612	\$0	\$136,612
			Sub-Total	\$269,774	\$0	\$269,774

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
Health Center			Sub Total 2020	\$118,551	\$0	\$118,551
2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2021	\$133,551	\$0	\$133,551
			Sub-Total	\$252,102	\$0	\$252,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
North Country Health Consortium			Sub Total 2020	\$133,069	\$0	\$133,069
2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
			Sub Total 2021	\$133,069	\$0	\$133,069
			Sub-Total	\$266,138	\$0	\$266,138
			<b>SUB TOTAL</b>	<b>\$3,445,412</b>	<b>\$0</b>	<b>\$3,445,412</b>

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
			Sub-Total	\$127,875	\$67,500	\$195,375

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
			Sub-Total	\$127,491	\$67,500	\$194,991

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$161,599	\$67,500	\$229,099

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$122,178	\$67,500	\$189,678

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
2021	102-500731	Contracts for Prog Svc	92052410	\$20,608	\$61,824	\$82,432
		Sub-Total		\$126,484	\$61,824	\$188,308

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$112,500	\$67,500	\$180,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$139,749	\$67,500	\$207,249

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
2021	102-500731	Contracts for Prog Svc	92052410	\$20,213	\$0	\$20,213
		Sub-Total		\$100,963	\$0	\$100,963

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
2021	102-500731	Contracts for Prog Svc	92052410	\$20,805	\$0	\$20,805
		Sub-Total		\$148,092	\$0	\$148,092

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$112,500	\$67,500	\$180,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$67,500	\$90,000
		Sub-Total		\$112,500	\$67,500	\$180,000
		SUB TOTAL		\$1,391,931	\$601,824	\$1,993,755

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

100% Federal Funds  
CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$0	\$0
		Sub-Total		\$8,182	\$0	\$8,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,180	\$0	\$48,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
		Sub-Total		\$48,182	\$0	\$48,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$25,182	\$0	\$25,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$18,182	\$0	\$18,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$48,182	\$0	\$48,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$17,000	\$0	\$17,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$17,000	\$0	\$17,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$48,182	\$0	\$48,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$55,182	\$0	\$55,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$46,058	\$0	\$46,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
2021	102-500731	Contracts for Prog Svc	90023205	\$10,000	\$0	\$10,000
			Sub-Total	\$48,182	\$0	\$48,182
			SUB TOTAL	\$475,876	\$0	\$475,876

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 Funds

CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000
		<b>SUB TOTAL</b>		<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
		Sub-Total		\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
		Sub-Total		\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**Manchester Health Department**

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$3,000	\$0	\$3,000

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
			Sub-Total	\$13,145	\$0	\$13,145

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
2020	102-500731	Contracts for Prog Svc	90036000	\$42,108	\$0	\$42,108
2021	102-500731	Contracts for Prog Svc		\$4,124	\$0	\$4,124
			Sub-Total	\$53,146	\$0	\$53,146

**Mid-State Health Center**

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

**North Country Health Consortium**

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
			Sub-Total	\$13,145	\$0	\$13,145
			SUB TOTAL	\$171,350	\$0	\$171,350

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

**County of Cheshire**

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**Greater Seacoast Community Health**

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**Granite United Way - Capitol Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$8,820	\$0	\$8,820
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Granite United Way - Carroll County Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Granite United Way -South Central Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

Lamprey Health Care Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Lakes Region Partnership for Public Health Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Sullivan County Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818
			SUB TOTAL	\$83,000	\$0	\$83,000

05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
			Sub-Total	\$80,000	\$0	\$80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
2021	102-500731	Contracts for Prog Svc	90007936	\$29,511	\$0	\$29,511
			Sub-Total	\$69,511	\$0	\$69,511
			SUB TOTAL	\$149,511	\$0	\$149,511

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$10,309	\$0	\$10,309
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**Granite United Way - Carroll County Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

**Granite United Way -South Central Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

**Lamprey Health Care**

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

**Lakes Region Partnership for Public Health**

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

**Manchester Health Department**

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
			Sub-Total	\$0	\$0	\$0

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,069	\$0	\$7,069
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,254	\$0	\$13,254

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333
			Sub-Total	\$13,355	\$0	\$13,355

**Mid-State Health Center**

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

**North Country Health Consortium**

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,255	\$0	\$13,255
			<b>SUB TOTAL</b>	<b>\$120,750</b>	<b>\$0</b>	<b>\$120,750</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
2021	102-500731	Contracts for Prog Svc	90027027	\$190,000	\$0	\$190,000
		Sub-Total		\$190,000	\$0	\$190,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lampray Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$240,000	\$0	\$240,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$240,000	\$0	\$240,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$55,000	\$0	\$55,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$55,000	\$0	\$55,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$50,000	\$0	\$50,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
2020	102-500731	Contracts for Prog Svc	90027027	\$49,999	\$0	\$49,999
2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
		Sub-Total		\$49,999	\$0	\$49,999
		<b>SUB TOTAL</b>		<b>\$984,999</b>	<b>\$0</b>	<b>\$984,999</b>

<b>TOTAL ALL</b>				<b>\$10,414,931</b>	<b>\$601,824</b>	<b>\$11,016,755</b>
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**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
***DIVISION OF PUBLIC HEALTH SERVICES***

Lori A. Shibanette  
 Commissioner

Lisa M. Morris  
 Director

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November 19, 2020

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

**INFORMATIONAL ITEM**

Pursuant to RSA 4:45, RSA 21-P:43, and Section 4 of Executive Order 2020-04 as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, 2020-18, 2020-20, and 2020-21, Governor Sununu has authorized the Department of Health and Human Services, Division of Public Health Services to enter into **Sole Source** amendments to existing contracts with the Contractors listed below for the Regional Public Health Networks to reduce the burden on the health care system responding to COVID-19 by administering adult influenza vaccinations by increasing the total price limitation by \$120,000 from \$10,294,931 to \$10,414,931, with no change to the contract completion date of June 30, 2021. 100% Federal Funds.

The original contracts were approved by Governor and Council on June 19, 2019 (Item #78E). They were subsequently amended with Governor and Council approval on February 5, 2020, (Item #7) and on May 6, 2020, (Item #47). The contracts were subsequently amended with Governor approval on July 10, 2020, and presented to the Executive Council on August 26, 2020 (Informational Item #L).

Vendor Name	Vendor Code	Contract Number	Area Served	Current Amount	Increase (Decrease)	Revised Amount
City of Manchester	177433	1068192	Greater Manchester	\$1,284,885	\$10,000	\$1,294,885
City of Nashua	177441	1070165	Greater Nashua	\$921,156	\$10,000	\$931,156
County of Cheshire	177372	1068196	Greater Monadnock	\$664,792	\$0	\$664,792
Granite United Way	160015	1068198	Concord, Carroll County, and South Central	\$2,229,571	\$30,000	\$2,259,571
Greater Seacoast Community Health	154703	1068193	Strafford County	\$740,800	\$10,000	\$750,800

<b>Lakes Region Partnership for Public Health</b>	<b>165635</b>	<b>1068197</b>	<b>Winnepesaukee</b>	<b>\$715,216</b>	<b>\$10,000</b>	<b>\$725,216</b>
<b>Lamprey Health Care</b>	<b>177677</b>	<b>1068952</b>	<b>Seacoast</b>	<b>\$784,643</b>	<b>\$10,000</b>	<b>\$794,643</b>
<b>Mary Hitchcock Memorial Hospital</b>	<b>177160</b>	<b>177160</b>	<b>Greater Sullivan and Upper Valley</b>	<b>\$1,523,853</b>	<b>\$20,000</b>	<b>\$1,543,853</b>
<b>Mid-State Health Center</b>	<b>158055</b>	<b>1068190</b>	<b>Central NH</b>	<b>\$697,878</b>	<b>\$10,000</b>	<b>\$707,878</b>
<b>North Country Health Consortium</b>	<b>158557</b>	<b>1068199</b>	<b>North Country</b>	<b>\$732,137</b>	<b>\$10,000</b>	<b>\$742,137</b>
			<b>Total</b>	<b>\$10,294,931</b>	<b>\$120,000</b>	<b>\$10,414,931</b>

Funds are available in the following accounts for State Fiscal Year 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**See attached fiscal details.**

**EXPLANATION**

This item is **Sole Source** because the contracts were originally approved as sole source and MOP 150 requires any subsequent amendments to be labeled as sole source. Additionally, the Regional Public Health Networks have been coordinating public health emergency planning and responses for the past fifteen (15) years and have the existing infrastructure to support this vaccine initiative; the Contractors are therefore uniquely qualified to provide these services in the interest of the public's health and safety.

The purpose of this item is to increase the number of adults vaccinated for the seasonal influenza in order to decrease the burden on the health care system during the ongoing COVID-19 pandemic. During the 2019-2020 influenza season in New Hampshire, 61% of visits to hospital emergency department visits for acute respiratory illness were among adults age 25 or greater. Increasing the number of adults vaccinated will reduce the number of hospitalizations resulting from influenza, thereby improving the ability of the healthcare system to respond to the COVID-19 pandemic.

The population served includes adult residents in each of the respective public health regions statewide. Approximately 7,500 residents will be vaccinated through this initiative.

The Contractors will administer influenza vaccines as supplied by the New Hampshire Immunization Program to individuals eighteen (18) years or older. Eight (8) of the Contractors currently administer vaccinations through a school-based vaccination program for youth. The Contractors will coordinate with the Department to create agreements with health care entities, as identified by the Department, to distribute and track vaccinations. The Contractors will follow all vaccination protocol as directed by the Department.

The Department will monitor contracted services by requiring the Contractors to submit:

- Annual year-end self-evaluation and improvement plans.
- Total number of adults vaccinated by age ranges and other demographic indicators.

Area served: Statewide

Source of Funds: CFDA #93.268, FAIN # IP922595

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

Respectfully submitted,



Lori A. Shibinette  
Commissioner

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH,  
BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000
			<b>SUB TOTAL</b>	<b>\$390,000</b>	<b>\$0</b>	<b>\$390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**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**

**74% Federal Funds & 26% General Funds**

CFDA #93.069

FAIN #U90TP922018

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$197,673	\$0	\$197,673
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$194,673	\$0	\$194,673
			Sub-Total	\$392,346	\$0	\$392,346

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
			Sub Total 2020	\$92,910	\$0	\$92,910
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
			Sub Total 2021	\$89,910	\$0	\$89,910
			Sub-Total	\$182,820	\$0	\$182,820

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$80,580	\$0	\$80,580
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$92,580	\$0	\$92,580
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$92,580	\$0	\$92,580
			Sub-Total	\$185,160	\$0	\$185,160

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
			Sub Total 2020	\$96,430	\$0	\$96,430
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
			Sub Total 2021	\$93,430	\$0	\$93,430
			Sub-Total	\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,360	\$0	\$97,360
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
			Sub Total 2020	\$89,750	\$0	\$89,750
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$288,223	\$0	\$288,223
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2020	\$83,600	\$0	\$83,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
			Sub Total 2020	\$91,550	\$0	\$91,550
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			<b>SUB TOTAL</b>	<b>\$2,942,102</b>	<b>\$0</b>	<b>\$2,942,102</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS**

**97% Federal Funds & 3% General Funds**

CFDA #93.959

FAIN #TI010035

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
		Sub Total 2020		\$132,405	\$0	\$132,405
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
		Sub Total 2021		\$132,405	\$0	\$132,405
		Sub-Total		\$264,810	\$0	\$264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
		Sub Total 2020		\$133,986	\$0	\$133,986
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
		Sub Total 2021		\$133,986	\$0	\$133,986
		Sub-Total		\$267,972	\$0	\$267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$85,917	\$0	\$85,917
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
		Sub Total 2020		\$131,551	\$0	\$131,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
		Sub Total 2021		\$128,014	\$0	\$128,014
		Sub-Total		\$259,565	\$0	\$259,565

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
		Sub Total 2020		\$133,264	\$0	\$133,264
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,015	\$0	\$93,015
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
		Sub Total 2021		\$133,265	\$0	\$133,265
		Sub-Total		\$266,529	\$0	\$266,529

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
		Sub Total 2020		\$133,385	\$0	\$133,385
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
		Sub Total 2021		\$133,385	\$0	\$133,385
		Sub-Total		\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2020	\$133,512	\$0	\$133,512
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2021	\$133,512	\$0	\$133,512
			Sub-Total	\$267,024	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2020	\$131,149	\$0	\$131,149
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2021	\$131,149	\$0	\$131,149
			Sub-Total	\$262,298	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2020	\$129,008	\$0	\$129,008
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2021	\$129,008	\$0	\$129,008
			Sub-Total	\$258,016	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2020	\$135,845	\$0	\$135,845
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2021	\$135,845	\$0	\$135,845
			Sub-Total	\$271,690	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
			Sub Total 2020	\$136,362	\$0	\$136,362
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
			Sub Total 2021	\$136,362	\$0	\$136,362
			Sub-Total	\$272,724	\$0	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
		Sub Total 2020		\$133,162	\$0	\$133,162
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
		Sub Total 2021		\$136,612	\$0	\$136,612
		Sub-Total		\$269,774	\$0	\$269,774

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
		Sub Total 2020		\$118,551	\$0	\$118,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
		Sub Total 2021		\$133,551	\$0	\$133,551
		Sub-Total		\$252,102	\$0	\$252,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
		Sub Total 2020		\$133,069	\$0	\$133,069
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
		Sub Total 2021		\$133,069	\$0	\$133,069
		Sub-Total		\$266,138	\$0	\$266,138
		<b>SUB TOTAL</b>		<b>\$3,445,412</b>	<b>\$0</b>	<b>\$3,445,412</b>

**05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2**

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
		Sub-Total		\$127,875	\$0	\$127,875

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
		Sub-Total		\$127,491	\$0	\$127,491

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$161,599	\$0	\$161,599

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$122,178	\$0	\$122,178

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,608	\$0	\$20,608
			Sub-Total	\$126,484	\$0	\$126,484

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$139,749	\$0	\$139,749

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,213	\$0	\$20,213
			Sub-Total	\$100,963	\$0	\$100,963

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,805	\$0	\$20,805
			Sub-Total	\$148,092	\$0	\$148,092

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500
			<b>SUB TOTAL</b>	<b>\$1,391,931</b>	<b>\$0</b>	<b>\$1,391,931</b>

**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**

**100% Federal Funds**

CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$8,182	\$10,000	\$18,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$38,182	\$10,000	\$48,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$38,180	\$10,000	\$48,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$38,182	\$10,000	\$48,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$15,182	\$10,000	\$25,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$8,182	\$10,000	\$18,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$38,182	\$10,000	\$48,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$7,000	\$10,000	\$17,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$7,000	\$10,000	\$17,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$38,182	\$10,000	\$48,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$45,182	\$10,000	\$55,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$36,058	\$10,000	\$46,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023205	\$0	\$10,000	\$10,000
			Sub-Total	\$38,182	\$0	\$48,182
			<b>SUB TOTAL</b>	<b>\$355,876</b>	<b>\$120,000</b>	<b>\$485,876</b>

**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 Funds**

CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000
			<b>SUB TOTAL</b>	<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

**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 PREVENTION**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200		\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$3,000	\$0	\$3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
SFY 2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
			Sub-Total	\$13,145	\$0	\$13,145

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$42,108	\$0	\$42,108
SFY 2021	102-500731	Contracts for Prog Svc		\$4,124	\$0	\$4,124
			Sub-Total	\$53,146	\$0	\$53,146

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
SFY 2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
			Sub-Total	\$13,145	\$0	\$13,145
			<b>SUB TOTAL</b>	<b>\$171,350</b>	<b>\$0</b>	<b>\$171,350</b>

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,820	\$0	\$8,820

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818
			<b>SUB TOTAL</b>	<b>\$83,000</b>	<b>\$0</b>	<b>\$83,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH,  
BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
			Sub-Total	\$80,000	\$0	\$80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	\$29,511	\$0	\$29,511
			Sub-Total	\$69,511	\$0	\$69,511
			<b>SUB TOTAL</b>	<b>\$149,511</b>	<b>\$0</b>	<b>\$149,511</b>

**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**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
			Sub-Total	\$0	\$0	\$0

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$7,069	\$0	\$7,069
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,254	\$0	\$13,254

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333
			Sub-Total	\$13,355	\$0	\$13,355

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,255	\$0	\$13,255
			<b>SUB TOTAL</b>	<b>\$120,750</b>	<b>\$0</b>	<b>\$120,750</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$190,000	\$0	\$190,000
			Sub-Total	\$190,000	\$0	\$190,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$240,000	\$0	\$240,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$240,000	\$0	\$240,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$55,000	\$0	\$55,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$55,000	\$0	\$55,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$49,999	\$0	\$49,999
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$49,999	\$0	\$49,999
			<b>SUB TOTAL</b>	<b>\$984,999</b>	<b>\$0</b>	<b>\$984,999</b>

			<b>TOTAL ALL</b>	<b>\$10,294,931</b>	<b>\$120,000</b>	<b>\$10,414,931</b>
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Lori A. Shilbnette  
Commissioner

Lisa M. Morris  
Director

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

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

October 8, 2020

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

**INFORMATIONAL ITEM**

Pursuant to RSA 4:45, RSA 21-P:43, and Section 4 of Executive Order 2020-04 as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, and 2020-18, Governor Sununu has authorized the Department of Health and Human Services, Division of Public Health Services, to enter into a **Retroactive, Sole Source** amendment to an existing contract with the vendor listed in **bold** below to support emergency operations conducted by the Regional Public Health Networks statewide in response to the COVID-19 pandemic, by increasing the price limitation by \$190,000 from \$10,104,931 to \$10,294,931, effective retroactive to March 16, 2020, with no change to the contract completion date of June 30, 2021. 100% Federal Funds.

The contracts and subsequent amendments were approved by Governor and Council, as indicated below.

Vendor Name	Vendor Code	Contract Number	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
City of Manchester	177433	1068192	Greater Manchester	\$1,284,885	\$0	\$1,284,885	O:6/19/19 (Item #78E)  A1:02/05/20 (Item #7)  A2:05/06/20 (Item #47)  A3: 8/26/2020 (Item #L)
City of Nashua	177441	1070165	Greater Nashua	\$731,156	\$190,000	\$921,156	O:09/18/19 (Item #26)  A1:02/05/20 (Item #7)  A2:05/06/20 (Item #47)
County of Cheshire	177372	1068196	Greater Monadnock	\$664,792	\$0	\$664,792	O:6/19/19 (Item #78E)  A1:02/05/20

							(Item #7) A2:05/06/20 (Item #47) A3: 8/26/2020 (Item #L)
Granite United Way	160015	1068198	Concord, Carroll County, and South Central	\$2,229,571	\$0	\$2,229,571	O:6/19/19 (Item #78E) A1:02/05/20 (Item #7) A2:05/06/20 (Item #47) A3: 8/26/2020 (Item #L)
Greater Seacoast Community Health	154703	1068193	Strafford County	\$740,800	\$0	\$740,800	O:6/19/19 (Item #78E) A1:02/05/20 (Item #7) A2:05/06/20 (Item #47) A3: 8/26/2020 (Item #L)
Lakes Region Partnership for Public Health	165635	1068197	Winnepesaukee	\$715,216	\$0	\$715,216	O:6/19/19 (Item #78E) A1:02/05/20 (Item #7) A2:05/06/20 (Item #47) A3: 8/26/2020 (Item #L)
Lamprey Health Care	177677	1068952	Seacoast	\$784,643	\$0	\$784,643	O:6/19/19 (Item #78E) A1:02/05/20 (Item #7) A2:05/06/20 (Item #47) A3: 8/26/2020 (Item #L)
Mary Hitchcock	177160	177160	Greater Sullivan and Upper Valley	\$1,523,853	\$0	\$1,523,853	O:6/19/19 (Item #78E)

Memorial Hospital							A1:02/05/20 (Item #7)  A2:05/06/20 (Item #47)  A3: 8/26/2020 (Item #L)
Mid-State Health Center	158055	1068190	Central NH	\$697,878	\$0	\$697,878	O:6/19/19 (Item #78E)  A1:02/05/20 (Item #7)  A2:05/06/20 (Item #47)  A3: 8/26/2020 (Item #L)
North Country Health Consortium	158557	1068199	North Country	\$732,137	\$0	\$732,137	O:6/19/19 (Item #78E)  A1:02/05/20 (Item #7)  A2:05/06/20 (Item #47)  A3: 8/26/2020 (Item #L)
			<b>Total</b>	<b>\$10,104,931</b>	<b>\$190,000</b>	<b>\$10,294,931</b>	

Funds are available in the following accounts for State Fiscal Years 2020 and 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**Fiscal Details Attached**

**EXPLANATION**

This amendment is **retroactive** because the Regional Public Health Networks began mobilizing emergency operations across their respective regions in response to COVID-19 in March 2020. The City of Nashua took longer to execute the amendment due to municipal approval procedures. Governor Sununu approved the other amendments on July 10, 2020, which were included as Informational Item #L on the August 26, 2020, Governor and Council Agenda. This amendment is **Sole Source** because MOP 150 requires any amendment to a contract be labeled as sole source when the contract was originally approved as sole source.

The Contractor is activating its region's Multi-Agency Coordination Entity at a level appropriate to meet the needs of the COVID-19 response. The Contractor will continue to improve the regional public health response and support the healthcare system response, while making sure the regional response actions incorporate the latest guidelines and direction issued by the Department. To ensure the health and safety of the response workforce in its region, the

Contractor is also implementing staff resiliency programs, information, and referrals to responder mental health support. Information is being disseminated to the public by the Contractor in coordination with the Department's messaging. In addition to these activities, the Contractor is making preparations to conduct additional operations once a COVID-19 vaccine becomes available.

The population served by the Contractor encompasses the Greater Nashua area. The Regional Public Health Networks coordinate public health response activities across municipalities and community sectors to ensure shared situational awareness and coordinated actions. The network has been coordinating the planning and response of public health emergencies for the past fifteen (15) years. The experience and knowledge the network brings to assist the Department to the COVID-19 Pandemic will immensely assist in the current efforts.

The Department will monitor contracted services by requiring the Contractor to submit:

- Quarterly public health emergency preparedness progress reports using an online system administered by the DPHS.
- After Action Reports and Improvement Plans.
- Documentation of each COVID-19 response activity completed.

Area served: Greater Nashua

Source of Funds: CFDA #93.354, FAIN # NU90TP922106

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

Respectfully submitted,



Lori A. Shibanette  
Commissioner

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH,  
BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000
			<b>SUB TOTAL</b>	<b>\$390,000</b>	<b>\$0</b>	<b>\$390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**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**

**74% Federal Funds & 26% General Funds**

**CFDA #93.069**

**FAIN #U90TP922018**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2020		\$197,673	\$0	\$197,673
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2021		\$194,673	\$0	\$194,673
		Sub-Total		\$392,346	\$0	\$392,346

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
		Sub Total 2020		\$92,910	\$0	\$92,910
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
		Sub Total 2021		\$89,910	\$0	\$89,910
		Sub-Total		\$182,820	\$0	\$182,820

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$80,580	\$0	\$80,580
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2020		\$92,580	\$0	\$92,580
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
		Sub Total 2021		\$92,580	\$0	\$92,580
		Sub-Total		\$185,160	\$0	\$185,160

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
		Sub Total 2020		\$96,430	\$0	\$96,430
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
		Sub Total 2021		\$93,430	\$0	\$93,430
		Sub-Total		\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,360	\$0	\$97,360
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
			Sub Total 2020	\$89,750	\$0	\$89,750
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$288,223	\$0	\$288,223
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2020	\$83,600	\$0	\$83,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
			Sub Total 2020	\$91,550	\$0	\$91,550
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			<b>SUB TOTAL</b>	<b>\$2,942,102</b>	<b>\$0</b>	<b>\$2,942,102</b>

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS

97% Federal Funds & 3% General Funds  
 CFDA #93.959

FAIN #TI010035

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2020	\$132,405	\$0	\$132,405
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2021	\$132,405	\$0	\$132,405
			Sub-Total	\$264,810	\$0	\$264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2020	\$133,986	\$0	\$133,986
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2021	\$133,986	\$0	\$133,986
			Sub-Total	\$267,972	\$0	\$267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$85,917	\$0	\$85,917
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2020	\$131,551	\$0	\$131,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2021	\$128,014	\$0	\$128,014
			Sub-Total	\$259,565	\$0	\$259,565

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2020	\$133,264	\$0	\$133,264
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,015	\$0	\$93,015
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2021	\$133,265	\$0	\$133,265
			Sub-Total	\$266,529	\$0	\$266,529

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2020	\$133,385	\$0	\$133,385
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2021	\$133,385	\$0	\$133,385
			Sub-Total	\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2020	\$133,512	\$0	\$133,512
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2021	\$133,512	\$0	\$133,512
			Sub-Total	\$267,024	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2020	\$131,149	\$0	\$131,149
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2021	\$131,149	\$0	\$131,149
			Sub-Total	\$262,298	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2020	\$129,008	\$0	\$129,008
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2021	\$129,008	\$0	\$129,008
			Sub-Total	\$258,016	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2020	\$135,845	\$0	\$135,845
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2021	\$135,845	\$0	\$135,845
			Sub-Total	\$271,690	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
			Sub Total 2020	\$136,362	\$0	\$136,362
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
			Sub Total 2021	\$136,362	\$0	\$136,362
			Sub-Total	\$272,724	\$0	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
		Sub Total 2020		\$133,162	\$0	\$133,162
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
		Sub Total 2021		\$136,612	\$0	\$136,612
		Sub-Total		\$269,774	\$0	\$269,774

Mid-State Health Center Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
		Sub Total 2020		\$118,551	\$0	\$118,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
		Sub Total 2021		\$133,551	\$0	\$133,551
		Sub-Total		\$252,102	\$0	\$252,102

North Country Health Consortium Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
		Sub Total 2020		\$133,069	\$0	\$133,069
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
		Sub Total 2021		\$133,069	\$0	\$133,069
		Sub-Total		\$266,138	\$0	\$266,138
		SUB TOTAL		\$3,445,412	\$0	\$3,445,412

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
		Sub-Total		\$127,875	\$0	\$127,875

Granite United Way - Capitol Region Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
		Sub-Total		\$127,491	\$0	\$127,491

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$161,599	\$0	\$161,599

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$122,178	\$0	\$122,178

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,608	\$0	\$20,608
			Sub-Total	\$126,484	\$0	\$126,484

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$139,749	\$0	\$139,749

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,213	\$0	\$20,213
			Sub-Total	\$100,963	\$0	\$100,963

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,805	\$0	\$20,805
			Sub-Total	\$148,092	\$0	\$148,092

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500
			<b>SUB TOTAL</b>	<b>\$1,391,931</b>	<b>\$0</b>	<b>\$1,391,931</b>

**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**

100% Federal Funds  
CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,182	\$0	\$8,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,180	\$0	\$38,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$15,182	\$0	\$15,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,182	\$0	\$8,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$7,000	\$0	\$7,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$7,000	\$0	\$7,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$45,182	\$0	\$45,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$36,058	\$0	\$36,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182
			<b>SUB TOTAL</b>	<b>\$355,876</b>	<b>\$0</b>	<b>\$355,876</b>

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 Funds

CFDA #93.074 & 93.889

FAIN #J90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
		Sub-Total		\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000
			<b>SUB TOTAL</b>	<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

**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 PREVENTION**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200		\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333
			Sub-Total	\$13,355	\$0	\$13,355

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,255	\$0	\$13,255
			<b>SUB TOTAL</b>	<b>\$120,750</b>	<b>\$0</b>	<b>\$120,750</b>

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$190,000	\$190,000
			Sub-Total	\$0	\$190,000	\$190,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$50,000	\$0	\$50,000
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**Granite United Way -South Central Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

**Lamprey Health Care**

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

**Lakes Region Partnership for Public Health**

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

**Manchester Health Department**

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$240,000	\$0	\$240,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$240,000	\$0	\$240,000

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$55,000	\$0	\$55,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$55,000	\$0	\$55,000

**Mid-State Health Center**

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$50,000	\$0	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$50,000	\$0	\$50,000

**North Country Health Consortium**

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$49,999	\$0	\$49,999
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$49,999	\$0	\$49,999

FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)

			SUB TOTAL	\$794,999	\$190,000	\$984,999
			TOTAL ALL	\$10,104,931	\$190,000	\$10,294,931



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

Lori A. Shabinette  
Commissioner

Lisa M. Morris  
Director

29 HAZEN DRIVE, CONCORD, NH 03301  
603-271-4501 1-800-852-3345 Ext. 4501  
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July 13, 2020

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

**INFORMATIONAL ITEM**

Pursuant to RSA 4:45, RSA 21-P:43, and Section 4 of Executive Order 2020-04, as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, and 2020-14, Governor Sununu has authorized the Department of Health and Human Services, Division of Public Health Services, to enter into **Retroactive, Sole Source** amendments to existing contracts with vendors listed in **bold** below to support emergency operations conducted by the Regional Public Health Networks statewide in response to the COVID-19 pandemic, by increasing the price limitation by \$794,999 from \$9,309,932 to \$10,104,931, effective retroactive to March 16, 2020, with no change to the contract completion date of June 30, 2021. 100% Federal Funds.

The original contracts were approved by Governor and Council on June 19, 2019, item #78E. They were then subsequently amended with Governor and Council approval on February 5, 2020, item #7; and on May 6, 2020, item #47.

Vendor Name	Vendor Code	Contract Number	Area Served	Current Amount	Increase (Decrease)	Revised Amount
<b>City of Manchester</b>	<b>177433</b>	<b>1068192</b>	<b>Greater Manchester</b>	<b>\$1,044,885</b>	<b>\$240,000</b>	<b>\$1,284,885</b>
City of Nashua*	177441	1070165	Greater Nashua	\$731,156	\$0	\$731,156
<b>County of Cheshire</b>	<b>177372</b>	<b>1068196</b>	<b>Greater Monadnock</b>	<b>\$614,792</b>	<b>\$50,000</b>	<b>\$664,792</b>
<b>Granite United Way</b>	<b>160015</b>	<b>1068198</b>	<b>Concord, Carroll County, and South Central</b>	<b>\$2,079,571</b>	<b>\$150,000</b>	<b>\$2,229,571</b>
<b>Greater Seacoast Community Health</b>	<b>154703</b>	<b>1068193</b>	<b>Strafford County</b>	<b>\$690,800</b>	<b>\$50,000</b>	<b>\$740,800</b>
<b>Lakes Region Partnership for Public Health</b>	<b>165635</b>	<b>1068197</b>	<b>Winnepesaukee</b>	<b>\$665,216</b>	<b>\$50,000</b>	<b>\$715,216</b>
<b>Lamprey Health Care</b>	<b>177677</b>	<b>1068952</b>	<b>Seacoast</b>	<b>\$734,643</b>	<b>\$50,000</b>	<b>\$784,643</b>

Mary Hitchcock Memorial Hospital	177160	177160	Greater Sullivan and Upper Valley	\$1,418,853	\$105,000	\$1,523,853
Mid-State Health Center	158055	1068190	Central NH	\$647,878	\$50,000	\$697,878
North Country Health Consortium	158557	1068199	North Country	\$682,138	\$49,999	\$732,137
			Total	\$9,309,932	\$794,999	\$10,104,931
*The amendment with the City of Nashua is currently pending and will be submitted to a future G&C meeting.						

Funds are available in the following accounts for State Fiscal Years 2020 and 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

#### Fiscal Details Attached

#### EXPLANATION

The Department requested that the Governor **retroactively** approve these amendments because the Regional Public Health Networks began mobilizing emergency operations across their respective regions in response to COVID-19 in March 2020. This item is **Sole Source** because MOP 150 requires any amendment to a contract be labeled as sole source when: (1) the contracts were originally approved as sole source; and (2) the funding increase exceeds the original price limitation by 10 percent. The Contractors are activating their regions' Multi-Agency Coordination Entity at a level appropriate to meet the needs of the COVID-19 response. The Contractors will continue to improve the regional public health response and support the healthcare system response, while making sure the regional response actions incorporate the latest guidelines and direction issued by the Department. To ensure the health and safety of the response workforce in each region, the Contractors are also implementing staff resiliency programs, information, and referrals to responder mental health support. Information is being disseminated to the public by the Contractors in coordination with the Department's messaging. In addition to these activities, the Contractors are making preparations to conduct additional operations once a COVID-19 vaccine becomes available.

The population served are all residents in each of the respective public health regions statewide. Every community is assigned to a public health region. The Regional Public Health Networks coordinate public health response activities across municipalities and community sectors to ensure share situational awareness and coordinated actions. The Contractors have been coordinating the planning and response of public health emergencies for the past fifteen (15) years. The experience and knowledge each of these networks brings to assist the Department to the COVID-19 Pandemic will immensely assist in the current efforts.

The Department will monitor contracted services by requiring the Contractors to submit:

- Quarterly public health emergency preparedness progress reports using an online system administered by the DPHS.
- After Action Reports and Improvement Plans.
- Documentation of each COVID-19 response activity completed.

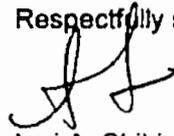
His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
Page 3 of 3

Area served: Statewide

Source of Funds: CFDA #93.354, FAIN # NU90TP922106

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

Respectfully submitted,



Lori A. Shibinette  
Commissioner



**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH,  
BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
		Sub-Total		\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000
			<b>SUB TOTAL</b>	<b>\$390,000</b>	<b>\$0</b>	<b>\$390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**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**

74% Federal Funds & 26% General Funds

CFDA #93.069

FAIN #U90TP922018

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$182,673	\$0	\$182,673
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$197,673	\$0	\$197,673
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$179,673	\$0	\$179,673
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$194,673	\$0	\$194,673
			Sub-Total	\$392,346	\$0	\$392,346

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
			Sub Total 2020	\$92,910	\$0	\$92,910
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
			Sub Total 2021	\$89,910	\$0	\$89,910
			Sub-Total	\$182,820	\$0	\$182,820

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$80,580	\$0	\$80,580
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$92,580	\$0	\$92,580
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$92,580	\$0	\$92,580
			Sub-Total	\$185,160	\$0	\$185,160

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
			Sub Total 2020	\$96,430	\$0	\$96,430
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
			Sub Total 2021	\$93,430	\$0	\$93,430
			Sub-Total	\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,360	\$0	\$97,360
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
			Sub Total 2020	\$89,750	\$0	\$89,750
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2020	\$288,223	\$0	\$288,223
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000	\$0	\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2020	\$83,600	\$0	\$83,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$167,200	\$0	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
			Sub Total 2020	\$91,550	\$0	\$91,550
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			<b>SUB TOTAL</b>	<b>\$2,942,102</b>	<b>\$0</b>	<b>\$2,942,102</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS**

**97% Federal Funds & 3% General Funds  
CFDA #93.959**

**FAIN #TI010035**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2020	\$132,405	\$0	\$132,405
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2021	\$132,405	\$0	\$132,405
			Sub-Total	\$264,810	\$0	\$264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2020	\$133,986	\$0	\$133,986
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2021	\$133,986	\$0	\$133,986
			Sub-Total	\$267,972	\$0	\$267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$85,917	\$0	\$85,917
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2020	\$131,551	\$0	\$131,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2021	\$128,014	\$0	\$128,014
			Sub-Total	\$259,565	\$0	\$259,565

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2020	\$133,264	\$0	\$133,264
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,015	\$0	\$93,015
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2021	\$133,265	\$0	\$133,265
			Sub-Total	\$266,529	\$0	\$266,529

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2020	\$133,385	\$0	\$133,385
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2021	\$133,385	\$0	\$133,385
			Sub-Total	\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
		Sub Total 2020		\$133,512	\$0	\$133,512
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
		Sub Total 2021		\$133,512	\$0	\$133,512
		Sub-Total		\$267,024	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
		Sub Total 2020		\$131,149	\$0	\$131,149
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
		Sub Total 2021		\$131,149	\$0	\$131,149
		Sub-Total		\$262,298	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
		Sub Total 2020		\$129,008	\$0	\$129,008
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
		Sub Total 2021		\$129,008	\$0	\$129,008
		Sub-Total		\$258,016	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
		Sub Total 2020		\$135,845	\$0	\$135,845
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
		Sub Total 2021		\$135,845	\$0	\$135,845
		Sub-Total		\$271,690	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
		Sub Total 2020		\$136,362	\$0	\$136,362
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,087	\$0	\$37,087
		Sub Total 2021		\$136,362	\$0	\$136,362
		Sub-Total		\$272,724	\$0	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$96,125	\$0	\$96,125
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
			Sub Total 2020	\$133,162	\$0	\$133,162
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
			Sub Total 2021	\$136,612	\$0	\$136,612
			Sub-Total	\$269,774	\$0	\$269,774

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$78,453	\$0	\$78,453
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2020	\$118,551	\$0	\$118,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2021	\$133,551	\$0	\$133,551
			Sub-Total	\$252,102	\$0	\$252,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
			Sub Total 2020	\$133,069	\$0	\$133,069
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
			Sub Total 2021	\$133,069	\$0	\$133,069
			Sub-Total	\$266,138	\$0	\$266,138
			SUB TOTAL	\$3,445,412	\$0	\$3,445,412

**05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2**

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$105,375	\$0	\$105,375
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$127,875	\$0	\$127,875

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$127,491	\$0	\$127,491

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$161,599	\$0	\$161,599

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$122,178	\$0	\$122,178

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$105,876	\$0	\$105,876
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,608	\$0	\$20,608
			Sub-Total	\$126,484	\$0	\$126,484

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$139,749	\$0	\$139,749

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$80,750	\$0	\$80,750
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,213	\$0	\$20,213
			Sub-Total	\$100,963	\$0	\$100,963

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,805	\$0	\$20,805
			Sub-Total	\$148,092	\$0	\$148,092

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500
			<b>SUB TOTAL</b>	<b>\$1,391,931</b>	<b>\$0</b>	<b>\$1,391,931</b>

**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**

100% Federal Funds

CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,182	\$0	\$8,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,180	\$0	\$38,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$15,182	\$0	\$15,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,182	\$0	\$8,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$7,000	\$0	\$7,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$7,000	\$0	\$7,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$45,182	\$0	\$45,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$6,058	\$0	\$6,058
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$36,058	\$0	\$36,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182
			<b>SUB TOTAL</b>	<b>\$355,876</b>	<b>\$0</b>	<b>\$355,876</b>

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 Funds  
CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000
			<b>SUB TOTAL</b>	<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

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 PREVENTION

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200		\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$5,403	\$0	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$2,467	\$0	\$2,467
			Sub-Total	\$9,070	\$0	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$3,000	\$0	\$3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
SFY 2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
			Sub-Total	\$13,145	\$0	\$13,145

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$42,108	\$0	\$42,108
SFY 2021	102-500731	Contracts for Prog Svc		\$4,124	\$0	\$4,124
			Sub-Total	\$53,146	\$0	\$53,146

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$6,484	\$0	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$3,207	\$0	\$3,207
			Sub-Total	\$10,891	\$0	\$10,891

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$7,822	\$0	\$7,822
SFY 2021	102-500731	Contracts for Prog Svc		\$4,123	\$0	\$4,123
			Sub-Total	\$13,145	\$0	\$13,145
			<b>SUB TOTAL</b>	<b>\$171,350</b>	<b>\$0</b>	<b>\$171,350</b>

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$8,818	\$0	\$8,818
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**Granite United Way - Capitol Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,820	\$0	\$8,820

**Granite United Way - Carroll County Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**Granite United Way -South Central Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

**Lamprey Health Care**

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**Lakes Region Partnership for Public Health**

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818
			SUB TOTAL	\$83,000	\$0	\$83,000

**05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
			Sub-Total	\$80,000	\$0	\$80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	\$29,511	\$0	\$29,511
			Sub-Total	\$69,511	\$0	\$69,511
			SUB TOTAL	\$149,511	\$0	\$149,511

**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**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$4,230	\$0	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$3,700	\$0	\$3,700
			Sub-Total	\$7,930	\$0	\$7,930

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$0	\$0
			Sub-Total	\$0	\$0	\$0

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$7,069	\$0	\$7,069
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,254	\$0	\$13,254

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$6,022	\$0	\$6,022
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$7,333	\$0	\$7,333

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

			Sub-Total	\$13,355	\$0	\$13,355
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Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$5,498	\$0	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$4,811	\$0	\$4,811
			Sub-Total	\$10,309	\$0	\$10,309

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$7,070	\$0	\$7,070
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$6,185	\$0	\$6,185
			Sub-Total	\$13,255	\$0	\$13,255
			<b>SUB TOTAL</b>	<b>\$120,750</b>	<b>\$0</b>	<b>\$120,750</b>

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$0	\$0

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$240,000	\$240,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$240,000	\$240,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$55,000	\$55,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$55,000	\$55,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$50,000	\$50,000
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$50,000	\$50,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90027027	\$0	\$49,999	\$49,999
SFY 2021	102-500731	Contracts for Prog Svc	90027027	\$0	\$0	\$0
			Sub-Total	\$0	\$49,999	\$49,999
			<b>SUB TOTAL</b>	<b>\$0</b>	<b>\$794,999</b>	<b>\$794,999</b>

			<b>TOTAL ALL</b>	<b>\$9,309,932</b>	<b>\$794,999</b>	<b>\$10,104,931</b>
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STATE OF NEW HAMPSHIRE  
 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 DIVISION OF PUBLIC HEALTH SERVICES

Lori A. Shilbinette  
 Commissioner

Lisa M. Morris  
 Director

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April 9, 2020

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a **Retroactive, Sole Source** amendment to an existing contract with the vendors listed below for the provision of Regional Public Health Network (RPHN) services statewide, by increasing the total price limitation by \$165,636 from \$9,144,296 to \$9,309,932 with no change to the contract completion dates of June 30, 2021 retroactive to April 1, 2020 upon Governor and Council approval. The original contracts were approved by Governor and Council on June 19, 2019, item (#78E) and City of Nashua on September 18, 2019 (Item #25) and most recently amended with Governor and Council approval on February 5, 2020, item #(7). 100% Federal Funds.

Vendor Name	Vendor Code	Contract Number	Area Served	Current Amount	Increase (Decrease)	Revised Amount	G&C Approval
City of Manchester	177433	1068192	Greater Manchester	\$1,044,885	\$0	\$1,044,885	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
City of Nashua	177441	1070165	Greater Nashua	\$717,156	\$14,000	\$731,156	O: September 18, 2019, item #25 A1: February 5, 2020, item #(7)
County of Cheshire	177372	1068196	Greater Monadnock	\$600,792	\$14,000	\$614,792	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
Granite United Way	160015	1068198	Concord, Carroll County, and South Central	\$2,033,370	\$46,201	\$2,079,571	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
Greater Seacoast Community Health	154703	1068193	Strafford County	\$669,063	\$21,737	\$690,800	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)

Lakes Region Partnership for Public Health	165635	1068197	Winnepesaukee	\$647,016	\$18,200	\$665,216	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
Lamprey Health Care	177677	1068952	Seacoast	\$732,539	\$2,104	\$734,643	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
Mary Hitchcock Memorial Hospital	177160	177160	Greater Sullivan and Upper Valley	\$1,390,935	\$27,918	\$1,418,853	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
Mid-State Health Center	158055	1068190	Central NH	\$649,802	\$(1,924)	\$647,878	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
North Country Health Consortium	158557	1068199	North Country	\$658,738	\$23,400	\$682,138	O: June 19, 2019, item #78E A1: February 5, 2020, item #(7)
			Total	\$9,144,296	\$165,636	\$9,309,932	

Funds are available in the following accounts for State Fiscal Years 2020 and 2021, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**05-95-090-901510-79640000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CHILHOOD LEAD**

**05-95-090-900510-5173000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFORMATICS, ENVIRONMENTAL PUBLIC HEALTH TRACKING**

See attached fiscal details.

**EXPLANATION**

This request is **Retroactive** because the contract review and approval process took longer than anticipated and the current vendors need to continue to move forward in their work. This request is **Sole Source** because the current vendors have successfully met performance measures under the current agreement. The Regional Public Health Networks received funding to pilot a lead initiative in their original contract. This additional funding will expand the services that the regions identified as priorities under this initiative. As the Regional Public Health Network model is currently in place, continuing with these regions is the most effective and efficient method to get these services to clients. As previously stated, the original contract was approved by Governor and Council on June 19, 2019, Item #78E. It was then subsequently amended with Governor and Council approval on February 5, 2020, Item #7.

The purpose of this request is to expand lead prevention strategies that will reduce lead poisoning in young children under the age of six (6). All thirteen (13) Public Health Networks received \$3,000 each between June and September of 2019, to support the lead initiative pilot. This funding has allowed the regions to partner with the Department's Environmental Public Health Tracking Program (EPHT) and the Healthy Homes and Lead Poisoning Prevention Program (HHLPPP) to utilize the Department's data on childhood lead testing rates and blood lead elevations to understand each region's lead exposures. The Department developed Regional Lead Exposure Data Briefs that summarized the above referenced data, allowing each region to identify their high risk communities. Previous funding associated with the pilot also supported the regions to work with stakeholders to identify potential short, medium and long-term primary prevention strategies. In October 2019, each region submitted a summary report to the Department that provided information on primary lead prevention strategies and the stage of "readiness" with respect to implementation of those strategies. This summary report will set the stage for understanding what additional funding/resources each region needs to accomplish their primary prevention goals.

An estimated 84,000 children under the age of six across New Hampshire have the potential to be impacted by lead poisoning. In 2018, 2,566 children under the age of six that were tested for lead poisoning had elevated blood lead levels of three micrograms per deciliter or higher. Those children most at risk for lead poisoning are low income, and living in rental housing or homes in disrepair. Though New Hampshire has communities across the state that are at risk, those communities at highest risk are Berlin, Franklin, Farmington, Hinsdale, Laconia, Manchester, Nashua, Rochester, Newport, Claremont, and Concord.

This funding will help Public Health Regions focus on building a prevention framework within each region that will identify and implement primary lead prevention strategies to eliminate lead poisoning among young children. These strategies will be implemented from April 1, 2020 to June 31, 2021 and will include the following:

- Modifying the building permit process.
- Implementing the Environmental Protection Agency's Renovate, Repair and Painting lead safe work practice training into the curriculum of the local school district's Career and Technical Center.
- Implement pro-active inspections of rental housing and licensed childcare facilities.
- Inventory pre-1978 Housing and develop an outreach plan.
- Conduct outreach and education to property owners, families, schools, and the medical community.
- Train local contractors in the Environmental Protection Agency's Renovate, Repair and Painting lead safe work practice training.

The Department will monitor contracted services using the following performance measures:

- At least one (1) representative from the RPHN attends a one-day meeting hosted by the HHLPPP to review data pertaining to the burden of lead in the region.
- At least six (6) diverse partners from the region participate in an educational session on the burden of lead poisoning.
- Implementing strategies identified to reduce the burden of lead poisoning

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
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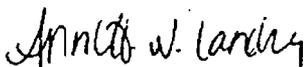
Should the Governor and Executive Council not authorize this request, valuable funding for primary prevention - the removal of lead hazards from the environment before a child is exposed - will not be provided to the Public Health Regions. Primary prevention is the most effective way to ensure that children do not experience the harmful effects of lead exposure.

Area served: Statewide

Source of Funds: CFDA# 93.197/FAIN# NUE2EH001408 and CFDA #93.070/FAIN# NUE1EH001357

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

Respectfully submitted,

  
Lori A. Shibinette  
Commissioner

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	\$15,000	\$0	\$15,000
			Sub-Total	\$30,000	\$0	\$30,000
			<b>SUB TOTAL</b>	<b>\$390,000</b>	<b>\$0</b>	<b>\$390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**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**

**74% Federal Funds & 26% General Funds**

**CFDA #93.069**

**FAIN #U90TP922018**

**City of Nashua**

**Vendor # 177441-B011**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$182,673		\$182,673
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
		Sub Total 2020		\$197,673	\$0	\$197,673
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$179,673		\$179,673
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
		Sub Total 2021		\$194,673	\$0	\$194,673
		Sub-Total		\$392,346	\$0	\$392,346

**County of Cheshire**

**Vendor # 177372-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$92,910	\$0	\$92,910
		Sub Total 2020		\$92,910	\$0	\$92,910
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$89,910	\$0	\$89,910
		Sub Total 2021		\$89,910	\$0	\$89,910
		Sub-Total		\$182,820	\$0	\$182,820

**Greater Seacoast Community Health**

**Vendor # 154703-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$80,580	\$0	\$80,580
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
		Sub Total 2020		\$95,580	-\$3,000	\$92,580
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$77,580	\$0	\$77,580
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
		Sub Total 2021		\$92,580	\$0	\$92,580
		Sub-Total		\$188,160	-\$3,000	\$185,160

**Granite United Way - Capitol Region**

**Vendor # 160015-B001**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$96,430	\$0	\$96,430
		Sub Total 2020		\$96,430	\$0	\$96,430
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$93,430	\$0	\$93,430
		Sub Total 2021		\$93,430	\$0	\$93,430
		Sub-Total		\$189,860	\$0	\$189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,360	\$0	\$82,360
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
			Sub Total 2020	\$97,360	\$0	\$97,360
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,360	\$0	\$79,360
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
			Sub Total 2021	\$94,360	\$0	\$94,360
			Sub-Total	\$191,720	\$0	\$191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$82,675	\$0	\$82,675
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
			Sub Total 2020	\$97,675	\$0	\$97,675
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$79,675	\$0	\$79,675
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
			Sub Total 2021	\$94,675	\$0	\$94,675
			Sub-Total	\$192,350	\$0	\$192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$89,750	\$0	\$89,750
			Sub Total 2020	\$89,750	\$0	\$89,750
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$86,750	\$0	\$86,750
			Sub Total 2021	\$86,750	\$0	\$86,750
			Sub-Total	\$176,500	\$0	\$176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$273,223	\$0	\$273,223
SFY 2020	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
			Sub Total 2020	\$288,223	\$0	\$288,223
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$270,223	\$0	\$270,223
SFY 2021	102-500731	Contracts for Prog Svc	90077028	\$15,000		\$15,000
			Sub Total 2021	\$285,223	\$0	\$285,223
			Sub-Total	\$573,446	\$0	\$573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	\$0	\$86,600
			Sub Total 2020	\$86,600	\$0	\$86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	\$0	\$170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$86,600	-\$3,000	\$83,600
			Sub Total 2020	\$86,600	-\$3,000	\$83,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$83,600	\$0	\$83,600
			Sub Total 2021	\$83,600	\$0	\$83,600
			Sub-Total	\$170,200	-\$3,000	\$167,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	\$91,550	\$0	\$91,550
			Sub Total 2020	\$91,550	\$0	\$91,550
SFY 2021	102-500731	Contracts for Prog Svc	90077410	\$88,550	\$0	\$88,550
			Sub Total 2021	\$88,550	\$0	\$88,550
			Sub-Total	\$180,100	\$0	\$180,100
			SUB TOTAL	\$2,948,102	-\$6,000	\$2,942,102

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS

97% Federal Funds & 3% General Funds  
CFDA #93.959

FAIN #TI010035

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2020	\$132,405	\$0	\$132,405
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$91,162	\$0	\$91,162
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$41,243	\$0	\$41,243
			Sub Total 2021	\$132,405	\$0	\$132,405
			Sub-Total	\$264,810	\$0	\$264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2020	\$133,986	\$0	\$133,986
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$94,324	\$0	\$94,324
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$39,662	\$0	\$39,662
			Sub Total 2021	\$133,986	\$0	\$133,986
			Sub-Total	\$267,972	\$0	\$267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$3,537	\$85,917
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2020	\$128,014	\$3,537	\$131,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$82,380	\$0	\$82,380
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$45,634	\$0	\$45,634
			Sub Total 2021	\$128,014	\$0	\$128,014
			Sub-Total	\$256,028	\$3,537	\$259,565

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$0	\$93,014
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2020	\$133,264	\$0	\$133,264
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,014	\$1	\$93,015
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,250	\$0	\$40,250
			Sub Total 2021	\$133,264	\$1	\$133,265
			Sub-Total	\$266,528	\$1	\$266,529

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2020	\$133,385	\$0	\$133,385
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,121	\$0	\$93,121
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,264	\$0	\$40,264
			Sub Total 2021	\$133,385	\$0	\$133,385
			Sub-Total	\$266,770	\$0	\$266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2020	\$133,512	\$0	\$133,512
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,375	\$0	\$93,375
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,137	\$0	\$40,137
			Sub Total 2021	\$133,512	\$0	\$133,512
			Sub-Total	\$267,024	\$0	\$267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2020	\$131,149	\$0	\$131,149
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$88,649	\$0	\$88,649
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$42,500	\$0	\$42,500
			Sub Total 2021	\$131,149	\$0	\$131,149
			Sub-Total	\$262,298	\$0	\$262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2020	\$129,008	\$0	\$129,008
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$84,367	\$0	\$84,367
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$44,641	\$0	\$44,641
			Sub Total 2021	\$129,008	\$0	\$129,008
			Sub-Total	\$258,016	\$0	\$258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2020	\$135,845	\$0	\$135,845
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$98,040	\$0	\$98,040
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,805	\$0	\$37,805
			Sub Total 2021	\$135,845	\$0	\$135,845
			Sub-Total	\$271,690	\$0	\$271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,187	-\$100	\$37,087
			Sub Total 2020	\$136,462	\$0	\$136,362
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,275	\$0	\$99,275
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,187	-\$100	\$37,087
			Sub Total 2021	\$136,462	-\$100	\$136,362
			Sub-Total	\$272,924	-\$100	\$272,724

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$99,575	-\$3,450	\$96,125
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
			Sub Total 2020	\$136,612	-\$3,450	\$133,162
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$99,575	\$0	\$99,575
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$37,037	\$0	\$37,037
			Sub Total 2021	\$136,612	\$0	\$136,612
			Sub-Total	\$273,224	-\$3,450	\$269,774

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$93,453	-\$15,000	\$78,453
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2020	\$133,551	-\$15,000	\$118,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$93,453	\$0	\$93,453
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,098	\$0	\$40,098
			Sub Total 2021	\$133,551	\$0	\$133,551
			Sub-Total	\$267,102	-\$15,000	\$252,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2020	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
			Sub Total 2020	\$133,069	\$0	\$133,069
SFY 2021	102-500731	Contracts for Prog Svc	92057502	\$92,488	\$0	\$92,488
SFY 2021	102-500731	Contracts for Prog Svc	92057504	\$40,581	\$0	\$40,581
			Sub Total 2021	\$133,069	\$0	\$133,069
			Sub-Total	\$266,138	\$0	\$266,138
			SUB TOTAL	\$3,460,524	-\$15,012	\$3,445,412

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$102,375	\$3,000	\$105,375
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$124,875	\$3,000	\$127,875

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$104,991	\$0	\$104,991
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$127,491	\$0	\$127,491

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$139,099	\$0	\$139,099
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$161,599	\$0	\$161,599

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$99,678	\$0	\$99,678
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$122,178	\$0	\$122,178

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$107,283	-\$1,407	\$105,876
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,608	\$0	\$20,608
			Sub-Total	\$127,891	-\$1,407	\$126,484

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$112,500	\$0	\$112,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$117,249	\$0	\$117,249
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
			Sub-Total	\$139,749	\$0	\$139,749

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$96,082	-\$15,332	\$80,750
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,213	\$0	\$20,213
			Sub-Total	\$116,295	-\$15,332	\$100,963

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$127,287	\$0	\$127,287
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$20,805	\$0	\$20,805
			Sub-Total	\$148,092	\$0	\$148,092

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
		Sub-Total		\$112,500	\$0	\$112,500

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	\$90,000	\$0	\$90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	\$22,500	\$0	\$22,500
		Sub-Total		\$112,500	\$0	\$112,500
		<b>SUB TOTAL</b>		<b>\$1,405,670</b>	<b>-\$13,739</b>	<b>\$1,391,931</b>

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

100% Federal Funds  
CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182		\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
		Sub-Total		\$8,182	\$0	\$8,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
		Sub-Total		\$38,182	\$0	\$38,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,180	\$0	\$8,180
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
		Sub-Total		\$38,180	\$0	\$38,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
		Sub-Total		\$38,182	\$0	\$38,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182		\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000	\$0	\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$15,182	\$0	\$15,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc		\$0		
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,182	\$0	\$8,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182		\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$7,000	\$0	\$7,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
SFY 2020	102-500731	Contracts for Prog Svc	90023103	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$7,000	\$0	\$7,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182		\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$22,000	\$0	\$22,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$45,182	\$0	\$45,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	-\$2,124	\$6,058
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	-\$2,124	\$36,058

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	\$8,182	\$0	\$8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	\$15,000	\$0	\$15,000
			Sub-Total	\$38,182	\$0	\$38,182
			SUB TOTAL	\$358,000	-\$2,124	\$355,876

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 Funds

CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	\$10,000	\$0	\$10,000
			Sub-Total	\$20,000	\$0	\$20,000
			<b>SUB TOTAL</b>	<b>\$260,000</b>	<b>\$0</b>	<b>\$260,000</b>

**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 PREVENTION**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$3,603	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$2,467	\$2,467
			Sub-Total	\$3,000	\$6,070	\$9,070

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$3,603	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$2,467	\$2,467
			Sub-Total	\$3,000	\$6,070	\$9,070

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$4,684	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$3,207	\$3,207
			Sub-Total	\$3,000	\$7,891	\$10,891

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$4,684	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$3,207	\$3,207
			Sub-Total	\$3,000	\$7,891	\$10,891

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200		\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$3,603	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$2,467	\$2,467
			Sub-Total	\$3,000	\$6,070	\$9,070

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$3,603	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$2,467	\$2,467
			Sub-Total	\$3,000	\$6,070	\$9,070

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$3,603	\$5,403
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$2,467	\$2,467
			Sub-Total	\$3,000	\$6,070	\$9,070

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$4,684	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$3,207	\$3,207
			Sub-Total	\$3,000	\$7,891	\$10,891

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$0	\$1,800
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$3,000	\$0	\$3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$6,022	\$7,822
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$4,123	\$4,123
			Sub-Total	\$3,000	\$10,145	\$13,145

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$6,914	\$0	\$6,914
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$36,086	\$6,022	\$42,108
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$4,124	\$4,124
			Sub-Total	\$43,000	\$10,146	\$53,146

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$4,684	\$6,484
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$3,207	\$3,207
			Sub-Total	\$3,000	\$7,891	\$10,891

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	\$1,200	\$0	\$1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	\$1,800	\$6,022	\$7,822
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$4,123	\$4,123
			Sub-Total	\$3,000	\$10,145	\$13,145
			<b>SUB TOTAL</b>	<b>\$79,000</b>	<b>\$92,350</b>	<b>\$171,350</b>

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Granite United Way - Capitol Region

Vendor # 160015-B001

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,820	\$0	\$1,820
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,820	\$0	\$8,820

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc		\$0		\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc		\$0		\$0
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$1,818	\$0	\$1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	\$1,818	\$0	\$1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	\$7,000		\$7,000
SFY 2021	102-500731	Contracts for Prog Svc		\$0	\$0	\$0
			Sub-Total	\$8,818	\$0	\$8,818
			SUB TOTAL	\$83,000	\$0	\$83,000

05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
			Sub-Total	\$80,000	\$0	\$80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	\$40,000	\$0	\$40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	\$40,000	-\$10,489	\$29,511
			Sub-Total	\$80,000	-\$10,489	\$69,511
			SUB TOTAL	\$160,000	-\$10,489	\$149,511

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

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,230	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$3,700	\$3,700
			Sub-Total	\$0	\$7,930	\$7,930

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,230	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$3,700	\$3,700
			Sub-Total	\$0	\$7,930	\$7,930

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$5,498	\$5,498

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,811	\$4,811
			Sub-Total	\$0	\$10,309	\$10,309

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$5,498	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,811	\$4,811
			Sub-Total	\$0	\$10,309	\$10,309

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,230	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$3,700	\$3,700
			Sub-Total	\$0	\$7,930	\$7,930

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,230	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$3,700	\$3,700
			Sub-Total	\$0	\$7,930	\$7,930

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,230	\$4,230
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$3,700	\$3,700
			Sub-Total	\$0	\$7,930	\$7,930

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$5,498	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,811	\$4,811
			Sub-Total	\$0	\$10,309	\$10,309

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0		\$0
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0		\$0
			Sub-Total	\$0	\$0	\$0

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$7,069	\$7,069
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$6,185	\$6,185
			Sub-Total	\$0	\$13,254	\$13,254

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$6,022	\$6,022
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$7,233	\$7,233
			Sub-Total	\$0	\$13,255	\$13,255

Mid-State Health Center

Vendor # 158055-B001

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$5,498	\$5,498
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$4,811	\$4,811
			Sub-Total	\$0	\$10,309	\$10,309

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90004100	\$0	\$7,070	\$7,070
SFY 2021	102-500731	Contracts for Prog Svc	90004100	\$0	\$6,185	\$6,185
			Sub-Total	\$0	\$13,255	\$13,255
			<b>SUB TOTAL</b>	<b>\$0</b>	<b>\$120,650</b>	<b>\$120,650</b>

			<b>TOTAL ALL</b>	<b>\$9,144,296</b>	<b>\$165,636</b>	<b>\$9,309,932</b>
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**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
***DIVISION OF PUBLIC HEALTH SERVICES***

Kerrin A. Rounds  
Acting Commissioner

Lisa M. Morris  
Director

29 HAZEN DRIVE, CONCORD, NH 03301  
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December 26, 2019

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to amend existing agreements with the vendors listed below for the provision of Regional Public Health Network (RPHN) services, statewide, by increasing the total price limitation by \$197,543 from \$8,946,753 to \$9,144,296, with no change to the completion date of June 31, 2021, effective upon Governor and Executive Council approval. 100% Federal Funds

This agreement was originally approved by the Governor and Executive Council on June 19, 2019 (Item #78E) for nine (9) of the ten (10) items below and on September 18, 2019 (Item #25), City of Nashua.

Vendor Name	Vendor Number	Region	Current (Modified) Budget	Increased (Decreased) Amount	Revised Modified Budget
City of Manchester	177433	Greater Manchester	\$1,017,636	\$27,249	\$1,044,885
City of Nashua	177441	Greater Nashua	\$717,156	\$0	\$717,156
County of Cheshire	177372	Greater Monadnock	\$600,792	\$0	\$600,792
Granite United Way	160015	Concord, Carroll County and South Central	\$1,959,602	\$73,768	\$2,033,370
Greater Seacoast Community Health	154703	Strafford County	\$656,688	\$12,375	\$669,063
Lakes Region Partnership for Public Health	165635	Winnepesaukee	\$647,016	\$0	\$647,016
Lamprey Health Care	177677	Seacoast	\$707,687	\$24,852	\$732,539
Mary Hitchcock Memorial Hospital	177160	Greater Sullivan and Upper Valley	\$1,331,636	\$59,299	\$1,390,935
Mid-State Health Center	158055	Central NH	\$649,802	\$0	\$649,802
North Country Health Consortium	158557	North Country	\$658,738	\$0	\$658,738
		Total:	\$8,946,753	\$197,543	\$9,144,296

Funds are available in the following accounts for State Fiscal Years 2020 and 2021, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office, if needed and justified.

**Please See Attached Fiscal Details**

### EXPLANATION

The purpose of the agreement is to add in separate budgets for each program that is administered by the Regional Public Health Networks. Per the original contract, Exhibit B, section 2.2.3, stated that budgets needed to be incorporated into the contract by Amendment. Additionally, funding was added to five (5) of the RPHN, as each of these RPHN had funding remaining from 2019, to enhance services and expand outreach to young adults between the ages of 18 and 25 to prevent and reduce the use of alcohol, marijuana, and non-medical prescription drugs including opioids and illicit opioids.

The Regional Public Health Networks provide regional public health emergency preparedness, promoting awareness and access to substance misuse prevention, treatment and recovery, school-based seasonal influenza clinics, childhood lead poisoning prevention services, climate and health prevention services, Hepatitis A response services, and host a Public Health Advisory Council to advise the region in the provision of public health services. Each Public Health Network site serves a defined Public Health Region with every municipality in the state assigned to a region, thereby ensuring statewide Public Health Network services.

The Regional Public Health Advisory Council engages senior-level leaders from throughout each region to serve in an advisory capacity for the services funded through these agreements. Over time, the Division of Public Health Services and the Bureau of Drug and Alcohol Services expect that the Regional Public Health Advisory Councils will expand this function to other public health and substance use related services funded by the Department. The goal is for the Regional Public Health Advisory Council to set regional priorities that are data-driven, evidence-based, responsive to the needs of the region, and to serve in this advisory role over all public health and substance use related activities occurring in their region.

The vendors will lead coordinated efforts with regional public health, health care and emergency management partners to develop and exercise regional public health emergency response plans to improve the region's ability to respond to public health emergencies. These regional activities are integral to the State's capacity to respond to public health emergencies and are being utilized for the Hepatitis A outbreak response, by implementing targeted vaccination clinics to at-risk populations.

All Regional Public Health Networks are implementing planning processes to improve blood lead screening rates among children in accordance with state statute and other prevention strategies to reduce the number of children at risk for exposure to lead based paint.

Regional Public Health Networks will also conduct seasonal influenza clinics in local primary and secondary schools to increase access to vaccination. In State Fiscal Year 2019, almost 7,000 children were vaccinated through this effort.

Should Governor and Executive Council not authorize this request, young adults who are most vulnerable and at risk for misusing substances and for developing a substance use disorder will not benefit from prevention and early intervention strategies. Also, essential public health services as stated above will not be implemented, putting safety of the population at risk. Further, these agreements will not include detailed budgets approved by the Department.

Area served: Statewide.

Source of Funds: 100% Federal Funds from the US Department of Health and Human Services,  
Substance Abuse and Mental Health Services Administration

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

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'KAR', is written over the typed name.

Kerrin A. Rounds  
Acting Commissioner

**FINANCIAL DETAIL ATTACHMENT SHEET**  
**Regional Public Health Networks (RPHN)**

**05-95-90-901010-8011 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH,  
 BUREAU OF POLICY AND PERFORMANCE, PREVENTIVE HEALTH BLOCK GRANT**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	:	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
		Sub-Total		30,000	-	30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
			Sub-Total	30,000	-	30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
			Sub-Total	30,000	-	30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
			Sub-Total	30,000	-	30,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
			Sub-Total	30,000	-	30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
			Sub-Total	30,000	-	30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000	-	15,000
			Sub-Total	30,000	-	30,000
			<b>SUB TOTAL</b>	<b>390,000</b>	<b>-</b>	<b>390,000</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

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

74% Federal Funds & 26% General Funds  
CFDA #93.069

FAIN #U90TP922018

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	182,673		182,673
SFY 2020	102-500731	Contracts for Prog Svc	90077028	15,000		15,000
			Sub Total 2020	197,673	-	197,673
SFY 2021	102-500731	Contracts for Prog Svc	90077410	179,673		179,673
SFY 2021	102-500731	Contracts for Prog Svc	90077028	15,000		15,000
			Sub Total 2021	194,673	-	194,673
			Sub-Total	392,346	-	392,346

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	92,910	-	92,910
			Sub Total 2020	92,910	-	92,910
SFY 2021	102-500731	Contracts for Prog Svc	90077410	89,910	-	89,910
			Sub Total 2021	89,910	-	89,910
			Sub-Total	182,820	-	182,820

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	80,580	-	80,580
SFY 2020	102-500731	Contracts for Prog Svc	90077028	15,000		15,000
			Sub Total 2020	95,580	-	95,580
SFY 2021	102-500731	Contracts for Prog Svc	90077410	77,580	-	77,580
SFY 2021	102-500731	Contracts for Prog Svc	90077028	15,000		15,000
			Sub Total 2021	92,580	-	92,580
			Sub-Total	188,160	-	188,160

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	96,430	-	96,430
			Sub Total 2020	96,430	-	96,430
SFY 2021	102-500731	Contracts for Prog Svc	90077410	93,430		93,430
			Sub Total 2021	93,430	-	93,430
			Sub-Total	189,860	-	189,860

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	86,600	-	86,600
			Sub Total 2020	86,600	-	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600	-	83,600
			Sub Total 2021	83,600	-	83,600
			Sub-Total	170,200	-	170,200

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	82,360	-	82,360
SFY 2020	102-500731	Contracts for Prog Svc	90077028	15,000	-	15,000
			Sub Total 2020	97,360	-	97,360
SFY 2021	102-500731	Contracts for Prog Svc	90077410	79,360	-	79,360
SFY 2021	102-500731	Contracts for Prog Svc	90077028	15,000	-	15,000
			Sub Total 2021	94,360	-	94,360
			Sub-Total	191,720	-	191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	82,675	-	82,675
SFY 2020	102-500731	Contracts for Prog Svc	90077028	15,000	-	15,000
			Sub Total 2020	97,675	-	97,675
SFY 2021	102-500731	Contracts for Prog Svc	90077410	79,675	-	79,675
SFY 2021	102-500731	Contracts for Prog Svc	90077028	15,000	-	15,000
			Sub Total 2021	94,675	-	94,675
			Sub-Total	192,350	-	192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	89,750	-	89,750
			Sub Total 2020	89,750	-	89,750
SFY 2021	102-500731	Contracts for Prog Svc	90077410	86,750	-	86,750
			Sub Total 2021	86,750	-	86,750
			Sub-Total	176,500	-	176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	273,223	-	273,223
SFY 2020	102-500731	Contracts for Prog Svc	90077028	15,000	-	15,000
			Sub Total 2020	288,223	-	288,223
SFY 2021	102-500731	Contracts for Prog Svc	90077410	270,223	-	270,223
SFY 2021	102-500731	Contracts for Prog Svc	90077028	15,000	-	15,000
			Sub Total 2021	285,223	-	285,223
			Sub-Total	573,446	-	573,446

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	86,600	-	86,600
			Sub Total 2020	86,600	-	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600	-	83,600
			Sub Total 2021	83,600	-	83,600
			Sub-Total	170,200	-	170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	86,600	-	86,600
			Sub Total 2020	86,600	-	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600	-	83,600
			Sub Total 2021	83,600	-	83,600
			Sub-Total	170,200	-	170,200

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	86,600	-	86,600
			Sub Total 2020	86,600	-	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600	-	83,600
			Sub Total 2021	83,600	-	83,600
			Sub-Total	170,200	-	170,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077410	91,550	-	91,550
			Sub Total 2020	91,550	-	91,550
SFY 2021	102-500731	Contracts for Prog Svc	90077410	88,550	-	88,550
			Sub Total 2021	88,550	-	88,550
			Sub-Total	180,100	-	180,100
			<b>SUB TOTAL</b>	<b>2,948,102</b>	<b>-</b>	<b>2,948,102</b>

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS

97% Federal Funds & 3% General Funds

CFDA #93.959

FAIN #TI010035

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	91,162	-	91,162
SFY 2020	102-500731	Contracts for Prog Svc	92057504	41,243	-	41,243
			Sub Total 2020	132,405	-	132,405
SFY 2021	102-500731	Contracts for Prog Svc	92057502	91,162	-	91,162
SFY 2021	102-500731	Contracts for Prog Svc	92057504	41,243	-	41,243
			Sub Total 2021	132,405	-	132,405
			Sub-Total	264,810	-	264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	94,324	-	94,324
SFY 2020	102-500731	Contracts for Prog Svc	92057504	39,662	-	39,662
			Sub Total 2020	133,986	-	133,986
SFY 2021	102-500731	Contracts for Prog Svc	92057502	94,324	-	94,324
SFY 2021	102-500731	Contracts for Prog Svc	92057504	39,662	-	39,662
			Sub Total 2021	133,986	-	133,986
			Sub-Total	267,972	-	267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	82,380	-	82,380
SFY 2020	102-500731	Contracts for Prog Svc	92057504	45,634	-	45,634
			Sub Total 2020	128,014	-	128,014
SFY 2021	102-500731	Contracts for Prog Svc	92057502	82,380	-	82,380
SFY 2021	102-500731	Contracts for Prog Svc	92057504	45,634	-	45,634
			Sub Total 2021	128,014	-	128,014
			Sub-Total	256,028	-	256,028

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,014	-	93,014
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,250	-	40,250
			Sub Total 2020	133,264	-	133,264
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,014	-	93,014
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,250	-	40,250
			Sub Total 2021	133,264	-	133,264
			Sub-Total	266,528	-	266,528

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,121	-	93,121
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,264	-	40,264
			Sub Total 2020	133,385	-	133,385
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,121	-	93,121
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,264	-	40,264
			Sub Total 2021	133,385	-	133,385
			Sub-Total	266,770	-	266,770

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,375	-	93,375
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,137	-	40,137
			Sub Total 2020	133,512	-	133,512
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,375	-	93,375
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,137	-	40,137
			Sub Total 2021	133,512	-	133,512
			Sub-Total	267,024	-	267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	88,649	-	88,649
SFY 2020	102-500731	Contracts for Prog Svc	92057504	42,500	-	42,500
			Sub Total 2020	131,149	-	131,149
SFY 2021	102-500731	Contracts for Prog Svc	92057502	88,649	-	88,649
SFY 2021	102-500731	Contracts for Prog Svc	92057504	42,500	-	42,500
			Sub Total 2021	131,149	-	131,149
			Sub-Total	262,298	-	262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	84,367	-	84,367
SFY 2020	102-500731	Contracts for Prog Svc	92057504	44,641	-	44,641
			Sub Total 2020	129,008	-	129,008
SFY 2021	102-500731	Contracts for Prog Svc	92057502	84,367	-	84,367
SFY 2021	102-500731	Contracts for Prog Svc	92057504	44,641	-	44,641
			Sub Total 2021	129,008	-	129,008
			Sub-Total	258,016	-	258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	98,040	-	98,040
SFY 2020	102-500731	Contracts for Prog Svc	92057504	37,805	-	37,805
			Sub Total 2020	135,845	-	135,845
SFY 2021	102-500731	Contracts for Prog Svc	92057502	98,040	-	98,040
SFY 2021	102-500731	Contracts for Prog Svc	92057504	37,805	-	37,805
			Sub Total 2021	135,845	-	135,845
			Sub-Total	271,690	-	271,690

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	99,275	-	99,275
SFY 2020	102-500731	Contracts for Prog Svc	92057504	37,187	-	37,187
			Sub Total 2020	136,462	-	136,462
SFY 2021	102-500731	Contracts for Prog Svc	92057502	99,275	-	99,275
SFY 2021	102-500731	Contracts for Prog Svc	92057504	37,187	-	37,187
			Sub Total 2021	136,462	-	136,462
			Sub-Total	272,924	-	272,924

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	99,575	-	99,575
SFY 2020	102-500731	Contracts for Prog Svc	92057504	37,037	-	37,037
			Sub Total 2020	136,612	-	136,612
SFY 2021	102-500731	Contracts for Prog Svc	92057502	99,575	-	99,575
SFY 2021	102-500731	Contracts for Prog Svc	92057504	37,037	-	37,037
			Sub Total 2021	136,612	-	136,612
			Sub-Total	273,224	-	273,224

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,453	-	93,453
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,098	-	40,098
			Sub Total 2020	133,551	-	133,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,453	-	93,453
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,098	-	40,098
			Sub Total 2021	133,551	-	133,551
			Sub-Total	267,102	-	267,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92057502	92,488	-	92,488
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,581	-	40,581
			Sub Total 2020	133,069	-	133,069
SFY 2021	102-500731	Contracts for Prog Svc	92057502	92,488	-	92,488
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,581	-	40,581
			Sub Total 2021	133,069	-	133,069
			Sub-Total	266,138	-	266,138
			SUB TOTAL	3,460,524	-	3,460,524

05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2

100% Federal Funds  
CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	12,375	102,375
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	12,375	124,875

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	14,991	104,991
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	14,991	127,491

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	49,099	139,099
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	49,099	161,599

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	9,678	99,678
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	9,678	122,178

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	82,431	24,852	107,283
SFY 2021	102-500731	Contracts for Prog Svc	92052410	20,608	-	20,608
			Sub-Total	103,039	24,852	127,891

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	-	90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	-	112,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	27,249	117,249
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	27,249	139,749

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	80,850	15,232	96,082
SFY 2021	102-500731	Contracts for Prog Svc	92052410	20,213	-	20,213
			Sub-Total	101,063	15,232	116,295

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	83,220	44,067	127,287
SFY 2021	102-500731	Contracts for Prog Svc	92052410	20,805	-	20,805
			Sub-Total	104,025	44,067	148,092

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	-	90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	-	112,500

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000	-	90,000
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500	-	22,500
			Sub-Total	112,500	-	112,500
			SUB TOTAL	1,208,127	197,543	1,405,670

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

100% Federal Funds

CFDA #93.268

FAIN #H23IP000757

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc		-	-	-
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,182	-	8,182

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,182	-	38,182

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,180	-	8,180
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,180	-	38,180

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,182	-	38,182

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023103	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	15,182	-	15,182

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc		-	-	-
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,182	-	8,182

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,182	-	38,182

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		-	-	-
SFY 2020	102-500731	Contracts for Prog Svc	90023103	7,000		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	7,000	-	7,000

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc		-	-	-
SFY 2020	102-500731	Contracts for Prog Svc	90023103	7,000		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	7,000	-	7,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,182	-	38,182

Mary Hitchcock Memorial Hospital - Upper Valley Region Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	22,000	-	22,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	45,182	-	45,182

Mid-State Health Center Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,182	-	38,182

North Country Health Consortium Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90023103	8,182	-	8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000	-	15,000
			Sub-Total	38,182	-	38,182
			SUB TOTAL	358,000	-	358,000

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 Funds

CFDA #93.074 & 93.889

FAIN #U90TP000535

City of Nashua Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000

County of Cheshire Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
		Sub-Total		20,000	-	20,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
		Sub-Total		20,000	-	20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
		Sub-Total		20,000	-	20,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
		Sub-Total		20,000	-	20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
		Sub-Total		20,000	-	20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
		Sub-Total		20,000	-	20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000	-	10,000
			Sub-Total	20,000	-	20,000
			SUB TOTAL	260,000	-	260,000

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 PREVENTION

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Granite United Way - Capitol Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	6,914	-	6,914
SFY 2020	102-500731	Contracts for Prog Svc	90036000	36,086	-	36,086
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	43,000	-	43,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90036000	1,200	-	1,200
SFY 2020	102-500731	Contracts for Prog Svc	90036000	1,800	-	1,800
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	3,000	-	3,000
			SUB TOTAL	79,000	-	79,000

05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, Disease Control

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

**Granite United Way - Capitol Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,820	-	1,820
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,820	-	8,820

**Granite United Way - Carroll County Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

**Granite United Way - South Central Region**

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc		-	-	-
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	1,818	-	1,818

**Lamprey Health Care**

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

**Lakes Region Partnership for Public Health**

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

**Mary Hitchcock Memorial Hospital - Sullivan County Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

**Mary Hitchcock Memorial Hospital - Upper Valley Region**

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc		-	-	-
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	1,818	-	1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2019	102-500731	Contracts for Prog Svc	90027026	1,818	-	1,818
SFY 2020	102-500731	Contracts for Prog Svc	90027026	7,000	-	7,000
SFY 2021	102-500731	Contracts for Prog Svc		-	-	-
			Sub-Total	8,818	-	8,818
			SUB TOTAL	83,000	-	83,000

**05-95-90-901510-7936 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF PUBLIC HEALTH PROTECTION, CLIMATE CHANGE ADAPTATION**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	40,000	-	40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	40,000	-	40,000
			Sub-Total	80,000	-	80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Modified Budget
SFY 2020	102-500731	Contracts for Prog Svc	90007936	40,000	-	40,000
SFY 2021	102-500731	Contracts for Prog Svc	90007936	40,000	-	40,000
			Sub-Total	80,000	-	80,000
			SUB TOTAL	160,000	-	160,000
			TOTAL ALL	8,946,753	197,543	9,144,296

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Jeffrey A. Meyers  
Commissioner

Lisa M. Morris  
Director

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

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

June 7, 2019

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into **retroactive, sole source** agreements with the vendors listed below for the provision of Regional Public Health Network (RPHN) services, statewide, in an amount not to exceed \$8,229,597, effective **retroactive** to April 1, 2019 upon Governor and Executive Council approval through June 30, 2021. 85.76% Federal Funds, 14.24% General Funds.

Vendor Name	Vendor Number	Region	Contract Amount
City of Manchester	177433	Greater Manchester	\$1,017,636
County of Cheshire	177372	Greater Monadnock	\$600,792
Granite United Way	160015	Concord, Carroll County and South Central	\$1,959,602
Greater Seacoast Community Health	154703	Strafford County	\$656,688
Lakes Region Partnership for Public Health	165635	Winnepesaukee	\$647,016
Lamprey Health Care	177677	Seacoast	\$707,687
Mary Hitchcock Memorial Hospital	177160	Greater Sullivan and Upper Valley	\$1,331,636
Mid-State Health Center	158055	Central NH	\$649,802
North Country Health Consortium	158557	North Country	\$658,738
		<b>Total:</b>	<b>\$8,229,597</b>

Funding for this request is available in State Fiscal Year 2019 and is anticipated to be available in State Fiscal Years 2020 and 2021 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.

**Please See Attached Fiscal Details**

**EXPLANATION**

This request is **retroactive** because the Department of Health and Human Services has declared a public health incident in order to respond to the current statewide outbreak of Hepatitis A. The Regional Public Health Networks were immediately activated to assist in this response and have begun conducting vaccination clinics to at-risk populations. An amount of \$110,000 is being requested to support these activities during State Fiscal Year 2019.

This request is **sole source** because the current vendors have successfully met performance measures under the current agreement. The Department is seeking new agreements to continue services. The scope of work has been modified since the original Request for Proposals for State Fiscal Year 2018. These modifications are to meet the requirements to the federal grantors and to meet the public health needs. The Department is submitting nine (9) of ten (10) agreements. The remaining agreement with the City of Nashua will be submitted at a future Governor and Executive Council meeting.

The purpose of the agreements is to provide regional public health emergency preparedness, substance misuse prevention and substance use disorders continuum of care services, school-based seasonal influenza clinics, childhood lead poisoning prevention services, climate and health prevention services, Hepatitis A response services, and to host a Public Health Advisory Council to coordinate other public health services, statewide. Each Public Health Network site serves a defined Public Health Region with every municipality in the state assigned to a region, thereby ensuring statewide Public Health Network services.

The Regional Public Health Advisory Council engages senior-level leaders from throughout each region to serve in an advisory capacity over the services funded through these agreements. Over time, the Division of Public Health Services and the Bureau of Drug and Alcohol Services expect that the Regional Public Health Advisory Council will expand this function to other public health and substance use related services funded by the Department. These functions are being implemented to identify strategies that can be implemented within each region to address childhood lead poisoning and to mitigate the potential health risks from climate, such as increases in ticks that spread disease. The goal is for the Regional Public Health Advisory Council to set regional priorities that are data-driven, evidence-based, responsive to the needs of the region, and to serve in this advisory role over all public health and substance use related activities occurring in their region.

The vendors will lead coordinated efforts with regional public health, health care and emergency management partners to develop and exercise regional public health emergency response plans to improve the region's ability to respond to public health emergencies. These regional activities are integral to the State's capacity to respond to public health emergencies and are being utilized for the Hepatitis A response.

According to the 2012-2013 National Survey on Drug Use and Health, the most recent data available demonstrates that 49% of NH's 18-25 year olds reported binge drinking in the past 30 days. This rate is the third highest in the country and much higher than the national average of 38.7%. For pain reliever abuse, 10.5% of NH young adults reported this behavior in the past year, and 10% of young adults reported illicit drug use other than marijuana. This last prevalence indicator is important for several reasons. First, it is the most accessible data point relative to young adult opioid use because the illicit drug use indicator includes opioids. Secondly, NH's rate of 10% for 18-25 year olds reporting regular illicit drug use is the highest in the country and is 1.5 percentage points higher than the next closest state (Rhode Island, 8.6%) and higher than the national average of 6.9%. Furthermore, there were five times greater the number of heroin-related deaths in NH in 2014 than there were in 2008. Heroin-related Emergency Department visits and administrations of naloxone to prevent death from an overdose have also multiplied exponentially in the last two years. Consequently, alcohol and drug misuse cost NH more than \$1.84 billion in 2012 in lost productivity and earnings, increased expenditures for healthcare, and public safety costs. In addition to economic costs, substance misuse impacts and is influenced by poor mental health. From 2007 to 2011, suicide among those aged 10-24 was the second leading cause of death for NH compared to the third leading cause nationally.

In NH, youth have rates of substance use significantly higher than the national average and the other northeast (NE) states as demonstrated in Table 2.

<b>18-25 year olds</b>	<b>NH</b>	<b>NE</b>	<b>US</b>	<b>Significant differences</b>
Binge Drinking	49.0%	43.0%	38.7%	NH Higher than NE and US
Marijuana Use	27.8%	21.0%	18.9%	NH Higher than NE and US
Nonmedical use of pain relievers	10.5%	8.6%	9.5%	No significant difference
Dependent/abusing alcohol or illicit drugs	23.7%	19.1%	18.1%	NH Higher than NE and US

Youth and families across NH describe having little access to services and supports for Substance Use Disorder in NH. In fact, according to the National Survey on Drug Use and Health, NH ranks worst among the states in percentage of 18-25 year olds "needing but not receiving treatment" for alcohol or illicit drug use and is also among the bottom states for 12-17 year olds. Additionally, among 12-20 year olds, NH ranks highest and above the overall national average in both underage alcohol use in past month (NH: 35.72%, US: 23.52%) and underage binge alcohol use in past month (NH: 23.21%, US: 14.75%).

Coordination of community based services in the realms of public health and substance use disorders has become a necessity as an increase in the need for services is faced with a reduction in services that are available.

Eight Regional Public Health Networks will also conduct seasonal influenza clinics in local primary and secondary schools to increase access to vaccination. In State Fiscal Year 2019, almost 7,000 children were vaccinated through this effort.

Should Governor and Executive Council not authorize this Request, these public health and substance use related services will be less coordinated and comprehensive. Developing strong, regionally-based infrastructure to convene, coordinate, and facilitate an improved systems-based approach to addressing these health issues will, over time, reduce costs, improve health outcomes, and reduce health disparities.

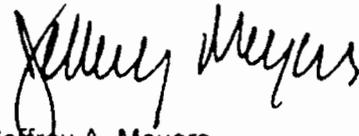
The attached performance measures will be used to measure the effectiveness of the agreement.

Area served: Statewide.

Source of Funds: 85.76%% Federal Funds from the US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration and the Centers for Disease Control and Prevention, Hospital Preparedness Program and Public Health Emergency Preparedness Aligned Cooperative Agreement, and 14.24% 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,

A handwritten signature in black ink, appearing to read "Jeffrey Meyers". The signature is written in a cursive, slightly slanted style.

Jeffrey A. Meyers  
Commissioner

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)  
05-95-90-901010-8011**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90001022	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90001022	15,000
			Sub-Total	30,000
			<b>SUB TOTAL</b>	<b>360,000</b>

**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**

73% Federal Funds & 27% General Funds

CFDA #93.074 & 93.069

FAIN #U90TP000535

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	89,910
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	92,910
SFY 2021	102-500731	Contracts for Prog Svc	90077410	89,910
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	89,910
			Sub-Total	182,820

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	92,580
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	95,580
SFY 2021	102-500731	Contracts for Prog Svc	90077410	92,580
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	92,580
			Sub-Total	188,160

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	93,430
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	96,430
SFY 2021	102-500731	Contracts for Prog Svc	90077410	93,430
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	93,430
			Sub-Total	189,860

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	83,600
			Sub-Total	170,200

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	94,360
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	97,360
SFY 2021	102-500731	Contracts for Prog Svc	90077410	94,360
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	94,360
			Sub-Total	191,720

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	94,675
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	97,675
SFY 2021	102-500731	Contracts for Prog Svc	90077410	94,675
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	94,675
			Sub-Total	192,350

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	86,750
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	89,750
SFY 2021	102-500731	Contracts for Prog Svc	90077410	86,750
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	86,750
			Sub-Total	176,500

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	203,055
SFY 2020	102-500731	Contracts for Prog Svc	90077028	57,168
SFY 2020	102-500731	Contracts for Prog Svc	90077408	25,000
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	288,223
SFY 2021	102-500731	Contracts for Prog Svc	90077410	203,055
SFY 2021	102-500731	Contracts for Prog Svc	90077028	57,168
SFY 2021	102-500731	Contracts for Prog Svc	90077408	25,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	285,223
			Sub-Total	573,446

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	83,600
			Sub-Total	170,200

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	83,600
			Sub-Total	170,200

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	86,600
SFY 2021	102-500731	Contracts for Prog Svc	90077410	83,600
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	83,600
			Sub-Total	170,200

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077410	88,550
SFY 2020	102-500731	Contracts for Prog Svc		3,000
			Sub Total 2020	91,550
SFY 2021	102-500731	Contracts for Prog Svc	90077410	88,550
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub Total 2021	88,550
			Sub-Total	180,100
			<b>SUB TOTAL</b>	<b>2,555,756</b>

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:  
BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PREVENTION SVS  
97% Federal Funds & 3% General Funds  
CFDA #93.959 FAIN #TI010035**

City of Nashua

Vendor # 177441-B011

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	91,162
SFY 2020	102-500731	Contracts for Prog Svc	92057504	41,243
			Sub Total 2020	132,405
SFY 2021	102-500731	Contracts for Prog Svc	92057502	91,162
SFY 2021	102-500731	Contracts for Prog Svc	92057504	41,243
			Sub Total 2021	132,405
			Sub-Total	264,810

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	94,324
SFY 2020	102-500731	Contracts for Prog Svc	92057504	39,662
			Sub Total 2020	133,986
SFY 2021	102-500731	Contracts for Prog Svc	92057502	94,324
SFY 2021	102-500731	Contracts for Prog Svc	92057504	39,662
			Sub Total 2021	133,986
			Sub-Total	267,972

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	82,380
SFY 2020	102-500731	Contracts for Prog Svc	92057504	45,634
			Sub Total 2020	128,014
SFY 2021	102-500731	Contracts for Prog Svc	92057502	82,380
SFY 2021	102-500731	Contracts for Prog Svc	92057504	45,634
			Sub Total 2021	128,014
			Sub-Total	256,028

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,014
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,250
			Sub Total 2020	133,264
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,014
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,250
			Sub Total 2021	133,264
			Sub-Total	266,528

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,121
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,264
			Sub Total 2020	133,385
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,121
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,264
			Sub Total 2021	133,385
			Sub-Total	266,770

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,375
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,137
			Sub Total 2020	133,512
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,375
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,137
			Sub Total 2021	133,512
			Sub-Total	267,024

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	88,649
SFY 2020	102-500731	Contracts for Prog Svc	92057504	42,500
			Sub Total 2020	131,149
SFY 2021	102-500731	Contracts for Prog Svc	92057502	88,649
SFY 2021	102-500731	Contracts for Prog Svc	92057504	42,500
			Sub Total 2021	131,149
			Sub-Total	262,298

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	84,367
SFY 2020	102-500731	Contracts for Prog Svc	92057504	44,641
			Sub Total 2020	129,008
SFY 2021	102-500731	Contracts for Prog Svc	92057502	84,367
SFY 2021	102-500731	Contracts for Prog Svc	92057504	44,641
			Sub Total 2021	129,008
			Sub-Total	258,016

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	98,040
SFY 2020	102-500731	Contracts for Prog Svc	92057504	37,805
			Sub Total 2020	135,845
SFY 2021	102-500731	Contracts for Prog Svc	92057502	98,040
SFY 2021	102-500731	Contracts for Prog Svc	92057504	37,805
			Sub Total 2021	135,845
			Sub-Total	271,690

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	99,275
SFY 2020	102-500731	Contracts for Prog Svc	92057504	37,187
			Sub Total 2020	136,462
SFY 2021	102-500731	Contracts for Prog Svc	92057502	99,275
SFY 2021	102-500731	Contracts for Prog Svc	92057504	37,187
			Sub Total 2021	136,462
			Sub-Total	272,924

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	99,575
SFY 2020	102-500731	Contracts for Prog Svc	92057504	37,037
			Sub Total 2020	136,612
SFY 2021	102-500731	Contracts for Prog Svc	92057502	99,575
SFY 2021	102-500731	Contracts for Prog Svc	92057504	37,037
			Sub Total 2021	136,612
			Sub-Total	273,224

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	93,453
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,098
			Sub Total 2020	133,551
SFY 2021	102-500731	Contracts for Prog Svc	92057502	93,453
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,098
			Sub Total 2021	133,551
			Sub-Total	267,102

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92057502	92,488
SFY 2020	102-500731	Contracts for Prog Svc	92057504	40,581
			Sub Total 2020	133,069
SFY 2021	102-500731	Contracts for Prog Svc	92057502	92,488
SFY 2021	102-500731	Contracts for Prog Svc	92057504	40,581
			Sub Total 2021	133,069
			Sub-Total	266,138
			<b>SUB TOTAL</b>	<b>3,460,524</b>

**05-95-92-920510-3395 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:  
BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL, PFS2**

100% Federal Funds

CFDA #93.243

FAIN #SP020796

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	82,431.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	20,608.00
			Sub-Total	103,039.00

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	80,850.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	20,213.00
			Sub-Total	101,063.00

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	83,220.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	20,805.00
			Sub-Total	104,025.00

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	92052410	90,000.00
SFY 2021	102-500731	Contracts for Prog Svc	92052410	22,500.00
			Sub-Total	112,500.00
			<b>SUB TOTAL</b>	<b>1,208,127.00</b>



**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000
			Sub-Total	38,182

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	22,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000
			Sub-Total	45,182

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000
			Sub-Total	38,182

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		8,182
SFY 2020	102-500731	Contracts for Prog Svc	90023013	15,000
SFY 2021	102-500731	Contracts for Prog Svc	90023013	15,000
			Sub-Total	38,182
			<b>SUB TOTAL</b>	<b>351,000</b>

**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 Funds  
CFDA #93.074 & 93.889 FAIN #U90TP000535**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	10,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	10,000
			Sub-Total	20,000
			<b>SUB TOTAL</b>	<b>240,000</b>

05-95-90-901510-7964

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Granite United Way -South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Manchester Health Department

Vendor # 177433-B009

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		6,914
SFY 2020	102-500731	Contracts for Prog Svc	90077700	36,086
SFY 2021	102-500731	Contracts for Prog Svc	90077700	-
			Sub-Total	43,000

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,200
SFY 2020	102-500731	Contracts for Prog Svc		1,800
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	3,000
			<b>SUB TOTAL</b>	<b>76,000</b>

**05-95-90-902510-5170 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS:  
DIVISION OF PUBLIC HEALTH, Disease Control**

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

Greater Seacoast Community Health

Vendor # 154703-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

Granite United Way - Capital Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,820
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,820

Granite United Way - Carroll County Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

Granite United Way - South Central Region

Vendor # 160015-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		-
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	1,818

**FINANCIAL DETAIL ATTACHMENT SHEET  
Regional Public Health Networks (RPHN)**

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

Lakes Region Partnership for Public Health

Vendor # 165635-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

Mary Hitchcock Memorial Hospital - Sullivan County Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

Mary Hitchcock Memorial Hospital - Upper Valley Region

Vendor # 177160-B003

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		-
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	1,818

Mid-State Health Center

Vendor # 158055-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818

North Country Health Consortium

Vendor # 158557-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2019	102-500731	Contracts for Prog Svc		1,818
SFY 2020	102-500731	Contracts for Prog Svc		7,000
SFY 2021	102-500731	Contracts for Prog Svc		-
			Sub-Total	8,818
			<b>SUB TOTAL</b>	<b>83,000</b>

05-95-90-901510-7936

County of Cheshire

Vendor # 177372-B001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	40,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	40,000
			Sub-Total	80,000

Lamprey Health Care

Vendor #177677-R001

Fiscal Year	Class / Account	Class Title	Job Number	Total Amount
SFY 2020	102-500731	Contracts for Prog Svc	90077700	40,000
SFY 2021	102-500731	Contracts for Prog Svc	90077700	40,000
			Sub-Total	80,000
			<b>SUB TOTAL</b>	<b>160,000</b>
			<b>TOTAL ALL</b>	<b>8,494,407.00</b>



Jeffrey A. Meyers  
Commissioner

Lisa M. Morris  
Director

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

29 HAZEN DRIVE, CONCORD, NH 03301  
603-271-4501 1-800-852-3345 Ext. 4501  
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August 22, 2019

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

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Public Health Services, to enter into a **retroactive, sole source** agreement with the City of Nashua (Vendor # 177441-B011), 18 Mulberry St. Nashua, NH 03060, to provide Regional Public Health Network (RPHN) services, in an amount not to exceed \$717,156, effective retroactive to June 30, 2019 upon Governor and Executive Council approval through June 30, 2021. 82% Federal Funds, 18% General Funds.

Funds to support this request are anticipated to be available in the following account(s) for State Fiscal Years 2020 and 2021 upon the availability and continued appropriation of funds in the future operating budget, with authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office, if needed and justified.

**Please See Attached Fiscal Details**

**EXPLANATION**

This request is **retroactive** because the Department needs to allow the funds from State Fiscal Year 2019 to be carried forward into State Fiscal Year 2020 in order utilize the federal funding and maximize the effectiveness of the contract within the Greater Nashua Public Health Region. These funds will be utilized to ensure the program can assist at-risk populations that benefit from the wide variety of programs.

This request is **sole source** because the current vendor has successfully met performance measures under the current agreement. The Department is seeking a new agreement to continue

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services. The scope of work has been modified since the original Request for Proposals for State Fiscal Year 2018. These modifications are to meet the requirements to the federal grantors and to meet the public health needs.

This request represents one (1) remaining agreement, nine (9) of the other vendors contracts were approved by the Governor and Executive Council on June 19, 2019 (Item #78E).

The purpose of this request is to provide regional public health emergency preparedness, substance misuse prevention and substance use disorders continuum of care services, childhood lead poisoning prevention services, Hepatitis A response services, and to host a Public Health Advisory Council to coordinate other public health services, statewide. Each Public Health Network site serves a defined Public Health Region with every municipality in the state assigned to a region, thereby ensuring statewide Public Health Network services.

The Regional Public Health Advisory Council engages senior-level leaders from throughout each region to serve in an advisory capacity over the services funded through these agreements. Over time, the Division of Public Health Services and the Bureau of Drug and Alcohol Services expect that the Regional Public Health Advisory Council will expand this function to other public health and substance use related services funded by the Department. These functions are being implemented to identify strategies that can be implemented within each region to address childhood lead poisoning and to mitigate the potential health risks from climate, such as increases in ticks that spread disease. The goal is for the Regional Public Health Advisory Council to set regional priorities that are data-driven, evidence-based, responsive to the needs of the region, and to serve in this advisory role over all public health and substance use related activities occurring in their region.

The vendors will lead coordinated efforts with regional public health, health care and emergency management partners to develop and exercise regional public health emergency response plans to improve the region's ability to respond to public health emergencies. These regional activities are integral to the State's capacity to respond to public health emergencies and are being utilized for the Hepatitis A response.

According to the 2012-2013 National Survey on Drug Use and Health, the most recent data available demonstrates that 49% of NH's 18-25 year olds reported binge drinking in the past 30 days. This rate is the third highest in the country and much higher than the national average of 38.7%. For pain reliever abuse, 10.5% of NH young adults reported this behavior in the past year, and 10% of young adults reported illicit drug use other than marijuana. This last prevalence indicator is important for several reasons. First, it is the most accessible data point relative to young adult opioid use because the illicit drug use indicator includes opioids. Secondly, NH's rate of 10% for 18-25 year olds reporting regular illicit drug use is the highest in the country and is 1.5 percentage points higher than the next closest state (Rhode Island, 8.6%) and higher than the national average of 6.9%. Furthermore, there were five times greater the number of heroin-related deaths in NH in 2014 than there were in 2008. Heroin-related Emergency Department visits and administrations of naloxone to prevent death from an overdose have also multiplied exponentially in the last two years. Consequently, alcohol and drug misuse cost NH more than \$1.84 billion in lost productivity and earnings, increased expenditures for healthcare, and public safety costs. In addition to economic costs, substance misuse impacts and is influenced by poor mental health. From 2007 to 2011, suicide among those aged 10-24 was the second leading cause of

death for NH compared to the third leading cause nationally.

In NH, youth have rates of substance use significantly higher than the national average and the other northeast (NE) states as demonstrated in Table 2.

<b>18-25 year olds</b>	<b>NH</b>	<b>NE</b>	<b>US</b>	<b>Significant differences</b>
Binge Drinking	49.0%	43.0%	38.7%	NH Higher than NE and US
Marijuana Use	27.8%	21.0%	18.9%	NH Higher than NE and US
Nonmedical use of pain relievers	10.5%	8.6%	9.5%	No significant difference
Dependent/abusing alcohol or illicit drugs	23.7%	19.1%	18.1%	NH Higher than NE and US

Youth and families across NH describe having little access to services and supports for Substance Use Disorder in NH. In fact, according to the National Survey on Drug Use and Health, NH ranks worst among the states in percentage of 18-25 year olds "needing but not receiving treatment" for alcohol or illicit drug use and is also among the bottom states for 12-17 year olds. Additionally, among 12-20 year olds, NH ranks highest and above the overall national average in both underage alcohol use in past month (NH: 35.72%, US: 23.52%) and underage binge alcohol use in past month (NH: 23.21%, US: 14.75%).

Coordination of community-based services in the realms of public health and substance use disorders has become a necessity as an increase in the need for services is faced with a reduction in services that are available.

Should Governor and Executive Council not authorize this Request, these public health and substance use related services will be less coordinated and comprehensive. Developing strong, regionally-based infrastructure to convene, coordinate, and facilitate an improved systems-based approach to addressing these health issues will, over time, reduce costs, improve health outcomes, and reduce health disparities.

Area served: Amherst, Brookline, Hollis, Hudson, Litchfield, Lyndeborough, Mason, Merrimack, Milford, Mont Vernon, Nashua, Pelham, and Wilton

Source of Funds: 82% Federal Funds and 18% General Funds.

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

Respectfully submitted,



Jeffrey A. Meyers  
Commissioner

### City of Nashua Fiscal Details

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

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Svc	90001022	\$15,000
2021	102-500731	Contracts for Prog Svc	90001022	\$15,000
			<i>Sub-Total</i>	<b>\$30,000</b>

**05-95-92-902510-7545 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF INFECTIOUS DISEASE CONTROL, EMERGENCY PREPAREDNESS 73% Federal Funds & 27% General Funds**

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Svc	90077410	\$182,673
2020	102-500731	Contracts for Prog Svc	90077028	\$15,000
			<i>Sub-Total</i>	<b>\$197,673</b>
2021	102-500731	Contracts for Prog Svc	90077410	\$179,673
2021	102-500731	Contracts for Prog Svc	90077028	\$15,000
			<i>Sub-Total</i>	<b>\$194,673</b>
			<i>Sub-Total</i>	<b>\$392,346</b>

**05-95-92-920510-3380 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF BEHAVIORAL HEALTH DIV, BUREAU OF DRUG AND ALCOHOL PREVENTION SVS 87% Federal Funds & 13% General Funds**

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Svc	92057502	\$91,162
2020	102-500731	Contracts for Prog Svc	92057504	\$41,243
			<i>Sub-Total</i>	<b>\$132,405</b>
2021	102-500731	Contracts for Prog Svc	92057502	\$91,162
2021	102-500731	Contracts for Prog Svc	92057504	\$41,243
			<i>Sub-Total</i>	<b>\$132,405</b>
			<i>Sub-Total</i>	<b>\$264,810</b>

## City of Nashua Fiscal Details

**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 Funds**

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Svc	90077700	\$10,000
2021	102-500731	Contracts for Prog Svc	90077700	\$10,000
			<b>Sub-Total</b>	<b>\$20,000</b>

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

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Svc	90036000	\$3,000
2021	102-500731	Contracts for Prog Svc	90036000	\$0
			<b>Sub-Total</b>	<b>\$3,000</b>

**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 100% Federal Funds**

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Svc	90023013	\$7,000
2021	102-500731	Contracts for Prog Svc	90023013	\$0
			<b>Sub-Total</b>	<b>\$7,000</b>
			<b>Total</b>	<b>\$717,156</b>