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

Lori A. Weaver
Commissioner

Morissa Henn
Deputy Commissioner

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December 1, 2023

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, to enter into an educational tuition agreement and to pay said costs in an amount of \$1290.00 as follows:

Institution:	NHTI Attn. Bursar Office 31 College Dr. Concord, NH 03301
Course Titles:	Database Design and Management Programming Fundamentals
Course Dates:	Begin: 01/16/2024 End: 05/04/2024
Employee:	Jamie Hill
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Courses:	\$1290.00 (\$645.00 per course)
State Share:	\$1290.00
Source of Funds:	Employee Training; 20% Federal, 80% General

EXPLANATION

This education will benefit the Department of Health and Human Services (DHHS) and Jamie Hill by improving the overall efficiency of the employee's work. This employee will develop skills needed to conduct deeper analyses of data, and use creative problem-solving skills and strategic vision to determine ideal courses of action when allocating resources to individuals disproportionately affected by the social determinants of health.

Database Design and Management introduces basic concepts used in database design to develop understanding of concepts and terminology.

Programming Fundamentals introduces design and development of computer programming using the C# language. This employee will learn and resolve a range of programming problems by applying techniques of design, structured coding, problem analysis, program documentation, normalizing a database, and write moderately complex SQL queries.

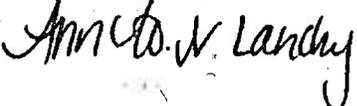
Jamie Hill has been employed with the DHHS for eight (8) years and currently serves as an Eligibility Technician within the Division of Developmental Services. In this position, the employee is responsible for reviewing and investigating medical and financial data used in determining state and federal compliance and appropriate eligibility of applicants for services.

The Department of Health and Human Services encourages and supports employees who wish to further their professional growth through continuing education in disciplines that are mutually advantageous. Successful completion of the courses will add to the overall strength of the Department to perform its mission for the residents of New Hampshire.

This course will not be taken on State time.

Attached is a fully executed Tuition Agreement for your review.

Respectfully submitted,


for:

Lori A. Weaver
Commissioner



THE STATE OF NEW HAMPSHIRE
EDUCATIONAL TUITION AGREEMENT

Agreement dated this 22nd day of November 2023 by and through the Department of Health and Human Services (hereinafter referred to as the "State") and Jamie Hill (hereinafter referred to as the "Recipient"). The State and the Recipient do hereby mutually agree as follows:

1. The State shall pay to the named institution the sum of \$645, which monies shall be used for the purpose of enrolling the Recipient in: Programming Fundamentals (course name), which course(s) is being offered by NHTI and which course(s) shall commence on 1/16 2024 and terminate on 5/4/24.
2. The Recipient shall complete and achieve a passing grade in each course named in paragraph 1.
3. Should the Recipient fail to complete or achieve a passing grade in each course named in paragraph 1, the Recipient shall pay to the State the sum set forth in paragraph 1, provided, however, that if more than one course is named in paragraph 1, the amount which shall be paid to the State shall be calculated on a pro rata basis.
4. Upon the satisfactory completion of the courses named in paragraph 1, the Recipient shall continue in the employ of the State in his/her current position (or in such other position, at equal or greater compensation, to which he/she may be assigned) for a period of six (6) months.
5. The Recipient shall work in any area of the State to which he/she may be assigned, provided that such assignment will not constitute a severe hardship to said Recipient.
6. Should the Recipient breach any of the conditions set forth in paragraphs 4 and 5, the Recipient shall pay to the State a sum equal to all monies previously paid by the State for the Recipient pursuant to the Agreement, provided, however, that the Recipient shall receive a credit for each month in which he/she is employed by the State subsequent to the date upon which the named course(s) are satisfactorily completed, the value of said credit to be calculated on a pro rata basis.
7. The Recipient shall not raise any setoff or counterclaim against the State in any action brought by the State to collect any amount due under this agreement.
8. Should any amount be found to be due the State in any action brought against the Recipient pursuant to this Agreement, the State shall, in addition to said amount, be entitled to an award of costs and a reasonable amount in "attorney" fees.

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

RECIPIENT

(signature)

Jamie Hill

(printed name)

Jamie Hill

NOTARY

State of New Hampshire, County of Merrimack:

On this the 30 day of NOV, 2023, before me, Katelyn Lavoie the undersigned officer, personally appeared, Jamie Hill (recipient) known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes herein contained.

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

Katelyn Lavoie
Notary Public Justice of the Peace

THE STATE OF NEW HAMPSHIRE

(signature)

Ann Landay

(date)

11/30/23

KATELYN M. LAVOIE - Notary Public
State of New Hampshire

My Commission Expires March 25, 2025

(printed name, title)

Ann Landay, Associate Commissioner



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

RECIPIENT (signature) [Handwritten Signature] (printed name) Jamie Hill

NOTARY State of New Hampshire, County of Merrimack:

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In witness whereof I hereunto set my hand and official seal. [Handwritten Signature] Notary Public Justice of the Peace

THE STATE OF NEW HAMPSHIRE (signature) [Handwritten Signature] (date) 11/30/23 (printed name, title) Ann Landry, Associate Commissioner

KATELYN M. LAVOIE - Notary Public State of New Hampshire My Commission Expires March 25, 2025