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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 8, 2025

Her Excellency, Governor Kelly A. Ayotte
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 \$1,500.00 as follows:

Institution:	University of Florida 300 Southwest 13 th Street Gainesville, FL 32611
Course Title(s):	Probiotics
Course Date(s):	Begin: 01/12/2026 End: 04/22/2026
Employee:	Caitlin Costello
Funding Source:	05-95-95-953010-56770000-066-500544
Total Cost of Course(s):	\$1,712.25
State Share:	\$1,500.00
Source of Funds:	Employee Training; 27.49% Federal, 67.95% General, 4.56% Other

EXPLANATION

This education will benefit the Department of Health and Human Services (DHHS) and Caitlin Costello by improving the overall efficiency of the employees' work in the Division of Public Health Services (DPHS). It will enhance Caitlin's knowledge of a wide variety of bacterial and viral pathogens that affect human health. Caitlin will become more familiar with how microorganisms interact with each other both in the environment and within human hosts. She then can apply this knowledge to the clinical testing and the whole-genome sequencing work that she performs within the NH Public Health Laboratories (NH PHL).

This course, *Probiotics*, will provide information on how the microbiome influences human health and the consequences of dysbiosis (an imbalance of microorganisms in your body) in terms of opportunistic pathogens. It will explore current research into probiotics and symbiotics that can improve human health and protect against infection and colonization by common pathogens. This will help Caitlin to deepen her understanding of the One Health approach that combats shared health threats through a collaborative effort between public health, animal health, and environmental health professionals. Completing this course is part of Caitlin's pursuit of a Master of Science in Medical Microbiology and Biochemistry.

Caitlin Costello has been employed with DHHS for almost two (2) years, in the position of 19-1020 Biological Scientist-3 (Laboratory Scientist III) within the DPHS Bureau of Laboratory Services. Her current position is in the molecular diagnostics unit funded by the FDA's Laboratory Flexible Funding Model (LFFM) grant. In this role, Caitlin performs routine pathogen surveillance in food, sequences bacterial and viral isolates, and carries out clinical specimen testing. Her regular duties include clinical testing for norovirus, influenza, measles, and many other viral pathogens. Other responsibilities include new method development, reagent management and ordering (to maintain laboratory efficiency), and document writing.

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,


Lori A. Weaver
Commissioner



THE STATE OF NEW HAMPSHIRE
EDUCATIONAL TUITION AGREEMENT

Agreement dated this 14 day of 11 2025 by and through the Department of Health and Human Services (hereinafter referred to as the "State") and Caitlin Costello (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 \$1,500.00, which monies shall be used for the purpose of enrolling the Recipient in: Probiotics (course name), which course is being offered by: University of Florida and which course shall commence on January 12 20 26 and terminate on April 22 20 26.
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) [Signature] (printed name) Caitlin Costello

NOTARY State of New Hampshire, County of NH
On this the 14 day of 11, 2025, before me, Holly Zielonko, the undersigned officer, personally appeared, Caitlin Costello (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.
[Signature]
HOLLY E. ZIELONKO - Notary Public
State of New Hampshire
My Commission Expires December 7, 2027
Notary Public/Justice of the Peace Signature

THE STATE OF NEW HAMPSHIRE
DHHS Commissioner or Designee Signature [Signature]
(printed name, title) Ann H. Landry, Assoc. Commissioner
(date) 12/16/25