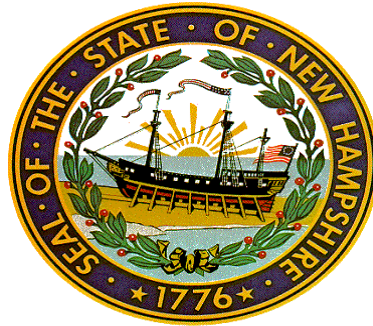




# **State of New Hampshire Department of Health and Human Services**

REQUEST FOR PROPOSALS (RFP) #15-DHHS-DPHS-TPCP-04

FOR

New Hampshire Tobacco Prevention and Control Program

June 23, 2014



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## 1. INTRODUCTION

### 1.1. Purpose and Overview

The purpose of this RFP is to solicit proposals for the development and implementation of projects leading to voluntary adoption of tobacco free policies on campuses of Community Colleges and/or Universities in New Hampshire. Tobacco free policies should promote healthy campus norms and optimal learning environments by eliminating tobacco use and exposure to secondhand and thirdhand smoke. Efforts should be targeted to Community Colleges/Universities and/or a consortium representing multiple campuses in the State of New Hampshire.

The Department is seeking a vendor(s) that will use evidence-based practices to improve the health and well-being of adults who live, work, play and visit college campuses in New Hampshire. The vendor(s) will assist and provide support to stakeholders for the adoption and implementation of voluntary tobacco free policies, strategies and plans. The vendor(s) will be responsible for planning, implementation, monitoring and reporting progress back to TPCP.

Activities and anticipated outcomes are aligned with ongoing regional activities referred to as the New England Tobacco Free College Campus Coalition, a project supported by the US Department of Health and Human Services, Assistant Health Secretary, Dr. Howard Koh through the Region 1; Office of the Assistant Secretary for Health (OASH).

### 1.2. Request For Proposal Terminology

1. ANR - Americans for Non-Smokers Rights
2. Bidder - Organization submitting a proposal in response to the RFP
3. Campus - Defined as grounds and parking lots, rented, leased, owned, or maintained facilities, including vehicles.
4. CDC/OSH - Center for Disease Control and Prevention/Office on Smoking and Health
5. DHHS - New Hampshire Department of Health and Human Services
6. DPHS - Division of Public Health Services
7. ENDS - Electronic Nicotine Delivery System
8. G&C - Governor and Executive Council
9. OASH - Office of the Assistant Secretary for Health
10. RFP - Request for Proposal
11. SME - Subject Matter Experts
12. SFY - State fiscal year, a term that begins on July 1 and ends on June 30
13. SHS - Secondhand Smoke
14. SMART - Specific, Measurable, Achievable, Realistic, and Time-Bound
15. THS - Thirdhand Smoke
16. TPCP - Tobacco Prevention and Control Program
17. Vendor - Contractor



18. National Prevention Strategy: America's Plan for Better Health and Wellness – This Plan addresses strategies to create healthy community environments, reduce exposure to second and thirdhand smoke, and resources to those that want to quit tobacco use/addiction, <http://www.surgeongeneral.gov/initiatives/prevention/strategy/report.pdf>.
19. HP2020 - The Healthy People 2020 plan promotes a vision to improve the health of all people by creating social and physical environments that promote good health for all, promote quality of life, healthy development, and healthy behaviors across all life stages. <http://www.cdc.gov/dhdsdp/hp2020.htm>

### 1.3. **Contract Period**

The contractor(s) will begin providing services on September 1, 2014 or date of Governor and Executive Council approval of the contract, whichever is later, and shall continue to provide services until August 31, 2016, with the potential of an extension of up to two years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council.

## 2. **BACKGROUND AND REQUIRED SERVICES**

### 2.1. **New Hampshire DHHS Tobacco Prevention & Control Program**

More than 80% of tobacco use begins before the age of 18 with 99% of use occurring by the age of 26. Anecdotal evidence has uncovered a relatively new phenomenon where by youth and young adults' transition from high school to attend college and in doing so take up smoking and/or vaping (ENDS use) and develop a "2 or 4-year quit plan." As graduation approaches, students realize that quitting tobacco use is more difficult than they first thought.

Increasing the number and types of places that prohibit tobacco use aligns with the *National Prevention Strategy*, Tobacco Free Living: Support comprehensive tobacco free and other evidence-based tobacco control policies. Smokefree and tobacco free policies improve indoor air quality, reduce negative health outcomes among nonsmokers, decrease cigarette consumption, encourage smokers to quit, and improves the appearance of college campuses. Comprehensive policies, that prohibit smoking/all forms of tobacco use, can be adopted by multiple settings such as workplaces, multi-unit housing, and college campuses.

Secondhand smoke, also known as environmental tobacco smoke, is a mixture of smoke produced by the burning end of tobacco products (side stream smoke) and mainstream smoke exhaled by smokers. Exposure to secondhand smoke is harmful and hazardous to the health of the general public and particularly dangerous to children. Secondhand smoke increases the risk of serious respiratory problems in children, such as a greater number and severity of asthma attacks and lower respiratory tract



infections, and increases the risk for middle ear infections. It is also a known human cancer-causing agent. Inhaling secondhand smoke causes lung cancer and coronary heart disease in nonsmoking adults and children.

Thirdhand smoke is generally considered to be residual nicotine and other chemicals left on a variety of indoor surfaces by tobacco smoke that builds up over time. This residue is thought to react with common indoor pollutants to create a toxic mix. This toxic mix of thirdhand smoke contains cancer-causing substances, posing a potential health hazard to nonsmokers who are exposed to it.

Studies show that third hand smoke clings to hair, skin, clothes, furniture, drapes, walls, bedding, carpets, dust, vehicles and other surfaces, even long after smoking has stopped. Infants, children and nonsmoking adults may be at risk of tobacco-related health problems when they inhale, ingest or touch substances containing third hand smoke. Third hand smoke is a relatively new concept, and researchers are still studying its possible dangers. According to former Surgeon General, Richard D. Carmona, MD, MPH, FACS, the bottom line is there is No Risk-Free Level of Exposure to Secondhand Smoke.

Campus Environmental Impact: Cigarette litter is the number one source of waste. Each year 5.6 trillion cigarette butts are discarded into the global environment; Cigarette butts are the single most commonly collected waste item found each year in park and beach clean-ups; Cigarette butts comprise 25-50% of all collected litter from roads and streets; Cigarette litter is not biodegradable and is in fact poisonous to animals, birds, and children who may ingest discarded materials.



## 3. STATEMENT OF WORK

### 3.1. Covered Populations and Services

The populations served by this RFP include people who live, work, play, and visit university/college campuses in New Hampshire. The bidder shall demonstrate that they are qualified to provide services to include the development and implementation of projects leading to voluntary adoption of tobacco free policies that promote healthy campus norms and optimal learning environments by eliminating tobacco use and exposure to secondhand and thirdhand smoke on the campuses of Community Colleges/Universities and/or a consortium representing multiple campuses in the State of New Hampshire. The bidder shall use evidence-based practices to improve the health and well-being of adults who live, work, play and visit college campuses in New Hampshire. Assist and provide support to stakeholders for the adoption and implementation of voluntary tobacco free policies, strategies and plans.

### 3.2. Anticipated Outcomes

- Process objectives will be determined by the applicant and outlined in the narrative and in year one of the work plan, for example: *Establish a broad based coalition, committee, or working group to assess social norms and issues, develop a draft policy, and roll out implementation* is critical to the success of your policy.
- Outcome objectives (SMART) to be determined by the applicant relative to policy. The scope of the objective will be determined by the applicant. *Example: By August 1, 2016, XYZ campus will implement a 100% tobacco free campus policy.*
- Anticipated health outcomes of broad based policy change have been well documented in terms of decreased emergency room visits for exacerbated asthma attacks and myocardial infarct.

### 3.3. Minimum Required Services

The Contractor shall develop and implement a project(s) leading to voluntary adoption of tobacco-free policies that promote healthy campus norms and optimal learning environments by eliminating tobacco use and exposure to secondhand and thirdhand smoke on the campuses of Community Colleges/Universities and/or a consortium representing multiple campuses in the State of New Hampshire. (See Appendix E for Resources).

- Demonstrate evidence based practices for oversight and monitoring of the project;
- Assist and provide support to stakeholders for the adoption and implementation of voluntary tobacco- free policies, strategies and plans.
- Ensure plans include communication about local tobacco-use treatment resources and 1-800-QUIT-NOW



- Upon notice of selection, the bidder agrees to work with TPCP to finalize the year one (1) work plan within 30 days.
- At intervals specified by DHHS, the Contractor will submit reports on their progress towards meeting the performance measures.
- The Contractor will meet with TPCP staff as needed

Incorporate the answers to the sixteen questions below into a succinct narrative format, provide thorough detail about your company, partners, sub-contractors, expertise, experience and vision so that DPHS will have sufficient information to evaluate your proposal. Provide detail responses to the following statements, describe how you would:

- Q1. Align your organization's goals and mission with the purpose of this request for proposal.*
- Q2. Demonstrate sufficient experience and capacity to carry out the proposed activities, including demonstrated experience and documented objective evidence of successful outcomes.*
- Q3. Describe concisely and completely the population(s) and geographic areas to be served including numbers and service area.*
- Q4. Describe concisely and completely how the project(s) will be managed; and who will carry out the activities including roles and responsibilities.*
- Q5. Provide as attachments current resumes (excluding home addresses; telephone numbers; and email identifiers.)*
- Q6. Intend to engage collaborating partners in order to meet performance measures.*
- Q7. Establish working relationships with key stakeholders and partners throughout the project period. Identify those key stakeholders and partners, and how this benefits all populations in the selected environments.*
- Q8. Approach to assist and support individuals with the new policy to include a communication plan relative to 1-800-Quit-Now (1-800-784-8669).*
- Q9. Plan to assemble, coordinate and facilitate required meetings with a university system and/or community college(s) etc. who have agreed in principle to partner with your organization. Provide Letters of Commitment from universities or colleges that agree, in principle, to assess the feasibility of campus tobacco use policy change.*
- Q10. Describe capacity to provide technical assistance to a university system and/or community colleges who have agreed in principle to partner with your organization as evidenced by Letters of Commitment to assess the feasibility of campus tobacco use policy change.*
- Q11. Collaborate with TPCP, regional and national organizations focused on tobacco free campus policy initiatives.*
- Q12. Engage subject matter experts (SME).*
- Q13. Identify numerators and denominators; examples include # of colleges/universities engaged/not engaged; # students attending; # staff working.*
- Q14. Plan steps to meet performance measure target identified in your proposal. (outcome narrative)*



*Q15. Approach to provide clear lines of communication with DPHS as to the activities, initiatives outlined in this Scope-of-Work.*

### 3.4. **Performance Indicators/Measures**

- Increase the number of Community Colleges/Universities in New Hampshire adopting tobacco-free campus policies.

### 3.5. **Staffing**

The Contractor shall be required to provide staffing to fulfill the roles and responsibilities to support activities of this project.

The bidder shall address the details to the following requirements to ensure adequate staffing is provided.

1. Provide sufficient staff to perform all tasks specified in this RFP. The bidder shall maintain a level of staffing necessary to perform and carry out all of the functions, requirements, roles, and duties in a timely fashion.
2. The bidder shall ensure that all staff has appropriate training, education, experience, and orientation to fulfill the requirements of the positions they hold and shall verify and document that it has met this requirement. This includes keeping up-to-date records and documentation of all individuals requiring licenses and/or certifications and such records shall be available for DHHS inspection.
3. The bidder shall develop a Staffing Contingency Plan, after receiving contract award, including but not limited to:
  - a. The process for replacement of personnel in the event of loss of key personnel or other personnel before or after signing of the Agreement;
  - b. Allocation of additional resources to the Agreement in the event of inability to meet any performance standard;
  - c. Discussion of time frames necessary for obtaining replacements;
  - d. Bidder's capabilities to provide, in a timely manner, replacement staff with comparable experience; and
  - e. The method of bringing replacement staff up-to-date regarding the activities of this project.
4. Include staffing models that will be used by the subcontractors, if applicable.

*Q16. Please describe and submit your specific staffing proposal, including numbers of staff and qualifications.*

*Q17. Please submit your plans for subcontracting any of these services.*



## 4. FINANCE

### 4.1. Financial Standards

Funds for this project are anticipated to be available in an amount of not more than \$90,000 per SFY for a total of \$180,000 for the two-year term, which may be awarded to one (1) or more contractors.

Estimates of available funding and time periods presented here are subject to adjustment. The continuance of contract payments is contingent upon the availability and continued appropriations of funds. The Department may renegotiate the terms and conditions of the contract in the event applicable local, state, or federal law, regulations or policy are altered from those existing at the time of the contract in order to be in continuous compliance therewith.

### 4.2. Appropriate Use of Funds

Funded contractors/vendors are required to keep detailed financial records of their activities related to DHHS' funded programs and services. Payment for contracted services will be made on a line item cost reimbursement basis on monthly invoices for allowable costs incurred. Allowable costs and expenses shall be determined by DHHS in accordance with applicable state and federal laws and regulations.

Funds may be used to pay for salaries and benefits of program staff and/or consultants, expenses incurred to provide group training, meeting expenses, travel for program purposes, promotional materials, postage, supplies, rent, telephone, data collection and evaluation costs, and indirect expenses. Indirect expenses must be kept to a minimum. Funds cannot be spent on office equipment, computers or printers.

Funded Contractors/vendors will be accountable for meeting the scope of services outlined in the statement of work. Failure to meet the scope of services may jeopardize the funded contractor/vendor's current and/or future funding. Corrective action may include actions such as a contract amendment or termination of the contract.

### 4.3. Matching of Funds

There is no matching fund requirement, although bidders are strongly encouraged to leverage existing resources or provide description of in-kind services, if applicable.

### 4.4. Financial Reporting Requirements

Contractors shall file monthly Financial Reports to DHHS utilizing the reporting tool provided by DHHS. Expenses will be reported for reimbursement by budget line item and funding sources.

### 4.5. Budget Form

A detailed cost proposal shall be provided for all costs included in the proposal. The Budget Form shall be completed with the direct and indirect fixed costs including the



allocation method for the indirect fixed costs and the amount of match required. The Budget shall include a detailed budget narrative with line item detail for direct and for indirect costs (as detailed in the Budget Forms) in order to be considered. The narratives must clearly address staff utilization for each area of required services detailed in Section 3 – Statement of Work, and clearly tie to the Program Staff List form. Supporting information shall be provided in sufficient detail so that the State can clearly understand the reasonableness of the cost proposal. Information shall include, but is not limited to, the basis for determining individual salaries, benefit rates, rates for supporting professional development, insurance, and indirect cost, including indirect cost directly related to oversight of subcontractors.

The Budgets and detailed budget narratives submitted shall represent the total program cost; the State will not provide reimbursement for any operational or other costs outside of the budget, which shall become part of the resulting contract.

A Budget Form (Appendix C) and detailed budget narrative shall be completed for each State Fiscal Year. The Budget Workbook Forms are set up by tab, one for each State Fiscal Year.

A Program Staff List form shall be completed for each program for each State Fiscal Year (Appendix D).

The Budget Workbooks and Program Staff List forms (Excel) are made available by request to the Procurement Coordinator.



## 5. PROPOSAL EVALUATION

### 5.1. Technical Proposal – 100 Points

- Proposal Formatting and Adherence to Instructions: (10 points)
- Background: (25 points)  
Bidders must provide a description of relevant background information that includes the context of the problem. The core information must help reviewers understand how the applicant's response to the RFP will address the public health problem and support public health priorities. (Q1 - Q5)
- Strategy and Activities: (25 Points)  
Bidders must provide a clear and concise description of the strategies and activities they will to use to achieve the project period outcomes: (Q6 – Q11)
- Outcomes: (25 Points)  
Bidders must clearly identify the outcomes they expect to achieve by the end of the project period. Outcomes are the results that the program intends to achieve. All outcomes must indicate the intended direction of change (i.e., increase, decrease, or maintain). (Q12 – Q15)
- Staffing Plan (15 points)  
(Q16 – Q17)

### 5.2. Cost Proposal – 40 Points

- Budget 10 points
- Budget Narrative 10 points
- Indirect 10 points
- Program Staff List 10 points



## 6. PROPOSAL PROCESS

### 6.1. Contact Information: - Sole Point of Contact

The sole point of contact, the Procurement Coordinator, for this RFP relative to the bid or bidding process for this RFP, from the RFP issue date until the selection of a Bidder, and approval of the resulting Contract by the Governor and Executive Council is:

State of New Hampshire  
 Department of Health and Human Services  
 Bobbie Aversa  
 Contracts & Procurement  
 Brown Building  
 129 Pleasant St.  
 Concord, New Hampshire 03301  
 Email: baversa@dhhs.state.nh.us  
 Fax: 603-271-8431  
 Phone: 603-271-9563

Other personnel are NOT authorized to discuss this RFP with Bidders before the proposal Submission deadline. Contact regarding this RFP with any State personnel not listed above could result in disqualification. The State will not be held responsible for oral responses to Bidders regardless of the source.

### 6.2. Procurement Timetable

| Procurement Timetable |                                             |                     |
|-----------------------|---------------------------------------------|---------------------|
| Item                  | Action                                      | Date                |
| 1.                    | Release RFP                                 | 06/23/2014          |
| 2.                    | Mandatory Letter of Intent                  | 07/08/2014          |
| 3.                    | RFP Technical and Cost Proposal Conference  | 07/10/2014 10:00 AM |
| 4.                    | RFP Technical and Cost questions due        | 07/10/2014 4:00 PM  |
| 5.                    | DHHS answers to Technical questions posted  | 07/14/2014          |
| 6.                    | Technical and Cost Bids due at DHHS         | 07/29/2014 3:00 PM  |
| 7.                    | Tentative Oral Presentations and Interviews | 08/05/2014          |
| 8.                    | Anticipated selection of successful Bidder  | 08/08/2014          |
| 9.                    | Anticipated Contract Effective Date         | 09/01/2014          |

All times are according to Eastern Time.

DHHS reserves the right to modify these dates at its sole discretion.

### 6.3. Letter of Intent

A letter of intent to submit a proposal in response to this RFP must be received by the date and time identified in Section 6.2: Procurement Timetable.



Receipt of the Letter of Intent by DHHS will be required in order to receive any correspondence regarding this RFP, any RFP amendments in the event such are produced, or any further materials on this project, including electronic files containing tables required for response to this RFP, any addenda, corrections, schedule modifications, or notifications regarding any informational meetings for bidders, or responses to comments or questions.

The Letter of Intent may be transmitted by e-mail to the procurement coordinator identified in 6.1, but must be followed by delivery of a paper copy within two (2) business days to the procurement coordinator identified in 6.1.

The potential bidder is responsible for successful e-mail transmission. DHHS will provide confirmation if the name and e-mail address or fax number of the person to receive such confirmation is provided.

The Letter of Intent must include the name, telephone number, mailing address and e-mail address of the Bidder's designated contact to which DHHS will direct correspondence.

Proposals submitted by entities that did not submit a Letter of Intent shall not be considered.

### **6.4. Bidders' Questions and Answers**

#### **6.4.1. Bidders' Questions**

All questions about this RFP, including but not limited to requests for clarification, additional information or any changes to the RFP must be made in writing, citing the RFP page number and part or subpart, and submitted to the Procurement Coordinator identified in Section 6.1.

DHHS may consolidate or paraphrase questions for efficiency and clarity. Questions that are not understood will not be answered. Statements that are not questions will not receive a response.

Questions will only be accepted from those Bidders who have submitted a Letter of Intent by the deadline given in Section 6.2, Procurement Timetable. Questions from all other parties will be disregarded. DHHS will not acknowledge receipt of questions.

The questions may be submitted by fax or e-mail; however, DHHS assumes no liability for assuring accurate and complete fax and e-mail transmissions.

Questions must be received by the deadline given in Section 6.2 Procurement Timetable.



### 6.4.2. Vendors' Conferences

#### 6.4.2.1. *Technical Proposal Conference*

The Vendors' Technical Proposal Conference will be held on the date specified in Section 6.2 Procurement Timetable, via a conference call. The conference will serve as an opportunity for Vendors to ask specific questions of State staff concerning the technical requirements of the RFP.

Attendance at the Vendors' Technical Conference is not mandatory, but highly recommended. Contact the Procurement Coordinator to register for the Technical Proposal Conference.

#### 6.4.2.2. *Cost Proposal Conference*

The Vendors' Cost Proposal Conference will be held on the date specified in Section 6.2 Procurement Timetable, via a conference call. The conference will serve as an opportunity for Vendors to ask specific questions of State staff concerning the cost requirements of the RFP.

Attendance at the Vendors' Cost Conference is not mandatory, but highly recommended. Contact the Procurement Coordinator to register for the Cost Proposal Conference.

Vendors may attend the Cost Proposal Conference via webinar. Contact the Procurement Coordinator, specified in 6.1, for information about attending this webinar.

### 6.4.3. DHHS Answers

DHHS intends to issue responses to properly submitted questions by the deadline specified in Section 6.2 Procurement Timetable. Oral answers given at the conference are non-binding. Written answers to questions asked at the respective conferences will be posted on the DHHS Public website (<http://www.dhhs.nh.gov/business/rfp/index.htm>) and sent as an attachment in an e-mail to the contact identified in accepted Letters of Intent. This date may be subject to change at DHHS's discretion.

## 6.5. **RFP Amendment**

DHHS reserves the right to amend this RFP, as it deems appropriate prior to the proposal submission deadline on its own initiative or in response to issues raised through Vendor questions. In the event of an amendment to the RFP, DHHS, at its sole discretion, may extend the proposal submission deadline. Vendors who submitted a Letter of Intent will receive notification of the amendment, and the amended language will be posted on the DHHS Internet site.



### 6.6. **Proposal Submission**

Proposals submitted in response to this RFP must be received no later than the time and date specified in Section 6.2: Procurement Timetable. Proposals must be addressed for delivery to the Procurement Coordinator, as specified in 6.1, and marked with RFP #15-DHHS-DPHS-TPCP-04.

Late submissions will not be accepted and will remain unopened. Disqualified submissions will be discarded if not re-claimed by the bidding Bidder by the time the contract is awarded. Delivery of the Proposals shall be at the Bidder's expense. The time of receipt shall be considered when a Proposal has been officially documented by DHHS, in accordance with its established policies, as having been received at the location designated above. The State accepts no responsibility for mislabeled mail. Any and all damage that may occur due to shipping shall be the Bidder's responsibility.

### 6.7. **Compliance**

Bidder must be in compliance with applicable federal and state laws, rules and regulations, and applicable policies and procedures adopted by the Department of Health and Human Services currently in effect, and as they may be adopted or amended during the contract period.

### 6.8. **Non-Collusion**

The Bidder's required signature on the Transmittal Cover Letter for a proposal submitted in response to this RFP guarantees that the prices, terms and conditions, and services quoted have been established without collusion with other Bidders and without effort to preclude DHHS from obtaining the best possible competitive proposal.

### 6.9. **Collaborative Proposals**

Proposals must be submitted by one organization. Any collaborating organization must be designated as subcontractor subject to the terms of Exhibit C Special Provisions (see Appendix B: Contract minimum requirements).

### 6.10. **Validity of Proposal**

Proposals must be valid for two hundred forty (240) days following the Closing Date for receipt of proposals as listed in Section 6.2, Procurement Timetable or until the effective date of any resulting contract, whichever is later. This period may be extended by mutual written agreement between the Bidder and DHHS.

### 6.11. **Property of Department**

All material property submitted and received in response to this RFP will become the property of DHHS and will not be returned to the Bidder. DHHS reserves the right to use



any information presented in any proposal provided that its' use does not violate any copyrights or other provisions of law.

### 6.12. **Proposal Withdrawal**

Prior to the Closing Date for receipt of proposals, a submitted Letter of Intent or proposal may be withdrawn by submitting a written request for its withdrawal to Procurement Coordinator identified in Section 6.1.

### 6.13. **Public Disclosure**

A Proposal must remain confidential until the Governor and Executive Council have approved a contract as a result of this RFP. A Bidder's disclosure or distribution of Proposals other than to the State will be grounds for disqualification.

The content of each Bidder's proposal and addenda thereto will become public information once the Governor and Executive Council have approved a contract. Any information submitted as part of a bid in response to this RFP may be subject to public disclosure under RSA 91-A. In addition, in accordance with RSA 9-F:1, any contract entered into as a result of this RFP will be made accessible to the public online via the website Transparent NH ([www.nh.gov/transparentnh/](http://www.nh.gov/transparentnh/)). Accordingly, business financial information and proprietary information such as trade secrets, business and financials models and forecasts, and proprietary formulas may be exempt from public disclosure under RSA 91-A:5, IV.

Insofar as a Bidder seeks to maintain the confidentiality of its confidential commercial, financial or personnel information, the Bidder must clearly identify in writing the information it claims to be confidential and explain the reasons such information should be considered confidential. This should be done by separate letter identifying by page number and proposal section number the specific information the bidder claims to be exempt from public disclosure pursuant to RSA 91-A:5.

Each Bidder acknowledges that DHHS is subject to the Right-to-Know Law New Hampshire RSA Chapter 91-A. DHHS shall maintain the confidentiality of the identified confidential information insofar as it is consistent with applicable laws or regulations, including but not limited to New Hampshire RSA Chapter 91-A. In the event DHHS receives a request for the information identified by a Bidder as confidential, DHHS shall notify the Bidder and specify the date DHHS intends to release the requested information. Any effort to prohibit or enjoin the release of the information shall be the Bidder's responsibility and at the Bidder's sole expense. If the Bidder fails to obtain a court order enjoining the disclosure, DHHS may release the information on the date DHHS specified in its notice to the Bidder without incurring any liability to the Bidder.



### 6.14. **Non-Commitment**

Notwithstanding any other provision of this RFP, this RFP does not commit DHHS to award a Contract. DHHS reserves the right to reject any and all proposals or any portions thereof, at any time and to cancel this RFP and to solicit new proposals under a new bid process.

### 6.15. **Liability**

By submitting a Letter of Intent to submit a proposal in response to this RFP, a Bidder agrees that in no event shall the State be either responsible for or held liable for any costs incurred by a Bidder in the preparation or submittal of or otherwise in connection with a proposal, or for work performed prior to the Effective Date of a resulting contract.

### 6.16. **Request for Additional Information or Materials**

During the period from date of proposal submission to the date of Contractor selection, DHHS may request of any Bidder additional information or materials needed to clarify information presented in the proposal. Such a request will be issued in writing and will not provide a Bidder with an opportunity to change, extend, or otherwise amend its proposal in intent or substance. Key personnel shall be available for interviews.

### 6.17. **Oral Presentations and Discussions**

DHHS reserves the right to require some or all Bidders to make oral presentations of their proposal. Any and all costs associated with an oral presentation shall be borne entirely by the Bidder. Bidders may be requested to provide demonstrations of any proposed automated systems. Such a request will be in writing and will not provide a Bidder with an opportunity to change, extend, or otherwise amend its proposal in intent or substance.

### 6.18. **Contract Negotiations and Unsuccessful Bidder Notice**

If a Bidder(s) is selected, the State will notify the Successful Bidder(s) in writing of their selection and the State's desire to enter into contract negotiations. Until the State successfully completes negotiations with the selected Bidder(s), all submitted Proposals remain eligible for selection by the State. In the event contract negotiations are unsuccessful with the selected Bidder(s), the evaluation team may recommend another Bidder(s).

In accordance with New Hampshire Statutes Chapter 21-I:13-a, no information shall be available to the public, the members of the general court or its staff, notwithstanding the provisions of RSA 91-A:4, concerning specific invitations to bid or other proposals for public bids, from the time the invitation or proposal is made public until the bid is actually awarded, in order to protect the integrity of the public bidding process. This means unsuccessful Bidders shall not be notified until after the Governor and Executive Council have approved the selected bid awards. No information can be provided to



non-selected bidders until after contracts are awarded, at which time non-selected bidders may submit a written request for more information about the reasons for not being selected and recommendations that may make future proposals more effective. Such requests are not considered appeals. Once a bidder has submitted a letter, DHHS will attempt to accommodate such requests within a reasonable time.

### 6.19. **Scope of Award and Contract Award Notice**

DHHS reserves the right to award a service, part of a service, group of services, or total proposal and to reject any and all proposals in whole or in part. The notice of the intended contract award will be sent by certified mail or overnight mail to the selected Bidder. A contract award is contingent on approval by the Governor and Executive Council.

If a Contract is awarded, the Bidder must obtain written consent from the State before any public announcement or news release is issued pertaining to any Contract award.

### 6.20. **Site Visits**

DHHS reserves the right to request a site visit for DHHS Staff to review Vendor's organization structure, subcontractors, policy and procedures, and any other aspect of the proposal that directly affects the provisions of the RFP and the delivery of services. Any and all costs associated with the site visits incurred by the bidder shall be borne by the bidder.

Prior to implementation, DHHS reserves the right to make a pre-delegation audit by DHHS staff to the bidders site to determine that the bidder is prepared to initiate required activities. Any and all costs associated with this pre-delegation visit shall be borne by the bidder.

### 6.21. **Protest of Intended Award**

Any protests of intended award or otherwise related to the RFP, shall be governed by the appropriate State requirements and procedures and the terms of this RFP. In the event that a legal action is brought challenging the RFP and selection process, and in the event that the State of New Hampshire prevails, the Bidder agrees to pay all expenses of such action, including attorney's fees and costs at all stages of litigations. Legal action shall include administrative proceedings.

### 6.22. **Contingency**

Aspects of the award may be contingent upon changes to State or federal laws and regulations.



## 7. PROPOSAL OUTLINE AND REQUIREMENTS

### 7.1. Presentation and Identification

#### 7.1.1. Overview

- Bidders are expected to examine all documentation and other requirements. Failure to observe the terms and conditions in completion of the Proposal are at the Bidder's risk and may, at the discretion of the State, result in disqualification.
- Proposals must conform to all instructions, conditions, and requirements included in the RFP.
- Acceptable Proposals must offer all services identified in Section 3 - Statement of Work, unless an allowance for partial scope is specifically described in Section 3, and agree to the contract conditions specified throughout the RFP.
- Proposals should be received by the date and time specified in the Procurement Timetable identified in Section 6.2 and delivered, under sealed cover, to Procurement Coordinator identified in Section 6.1
- Fax or email copies will not be accepted
- Bidders shall submit a Technical Proposal and a Cost Proposal.

#### 7.1.2. Presentation

- Original copies of Technical and Cost Proposals in separate three-ring binders
- Copies in a bound format (for example wire bound, coil bound, saddle stitch, perfect bound etc. at minimum stapled)  
NOTE: loose proposals will not be accepted
- Major sections of the Proposal separated by tabs
- Standard eight and one-half by eleven inch (8 ½" x 11") white paper
- Font size of 10 or larger

#### 7.1.3. Technical Proposal

- Original in 3 ring binder marked as "Original"
- The original Transmittal Letter (described in Section 7.2.2.1) must be the first page of the Technical Proposal and marked as "Original"
- 4 copies in bound format marked as "Copy"
- 1 electronic copy (divided into folders that correspond to and are labeled the same as the hard copies)

NOTE: In the event of any discrepancy between the copies, the hard copy marked "Original" will control.

- Front cover labeled with
  - Name of company / organization
  - RFP#
  - Technical Proposal



### 7.1.4. Cost Proposal

- Original in 3 ring binder marked as "Original"
- A copy of the Transmittal Letter marked as "Copy" as the first page of the Cost Proposal
- 2 copies in bound format marked as "Copy"
- 1 electronic copy (divided into folders that correspond to and are labeled the same as the hard copies)

NOTE: In the event of any discrepancy between the copies, the hard copy marked "Original" will control.

- Front cover labeled with
  - Name of company / organization
  - RFP#
  - Cost Proposal

## 7.2. Outline and Detail

### 7.2.1. Proposal Contents - Outline

Each Proposal shall contain the following, in the order described in this section:  
(Each of these components must be separate from the others and uniquely identified with labeled tabs)

#### **Technical Proposal**

- Transmittal Cover Letter
- Table of Contents
- Executive Summary
- Proposal Narrative, Project Approach, and Technical Response
- Description of Organization
- Bidder's References
- Bidder's Staff and Resumes (if applicable)
- Subcontractor Letters of Commitment (if applicable)
- License, Certificates and Permits as Required
- Affiliations – Conflict of Interest statement
- Required Attachments

#### **Cost Proposal** (in separate binder)

- Transmittal Cover Letter
- Cost Proposal
- Statement of Bidder's Financial Condition
- Required Attachments



### 7.2.2. Technical Proposal Contents - Detail

#### 7.2.2.1. *Transmittal Cover Letter*

A Transmittal Cover Letter must be:

- On the Bidding Company's letterhead
- Signed by an individual who is authorized to bind the Bidding Company to all statements, including services and prices contained in the proposal
- Contain the following:
  - Identify the submitting organization
  - Identify the name, title, mailing address, telephone number and email address of the person authorized by the organization to contractually obligate the organization
  - Identify the name, title, mailing address, telephone number and email address of the fiscal agent of the organization
  - Identify the name, title, telephone number, and e-mail address of the person who will serve as the Bidder's representative for all matters relating to the RFP
  - Acknowledge that the Bidder has read this RFP, understands it, and agrees to be bound by its requirements
  - Explicitly state acceptance of terms, conditions, and general instructions stated in Section 8 Mandatory Business Specifications, Contract Terms and Conditions
  - Confirm that Appendix A Exceptions to Terms and Conditions is included in the proposal
  - Explicitly state that the Bidder's submitted Proposal is valid for a minimum of two hundred forty (240) days from the Closing Date for receipt of proposals
  - Date proposal was submitted
  - Signature of authorized person

#### 7.2.2.2. *Table of Contents*

The required elements of the Proposal shall be numbered sequentially and represented in the Table of Contents.

#### 7.2.2.3. *Executive Summary*

The Bidder shall submit an executive summary to:

- Provide DHHS with an overview of the bidder's organization and what is intended to be provided by the Bidder.
- Demonstrate the Bidder's understanding of the services requested in this RFP and any problems anticipated in accomplishing the work.
- Show the Bidder's overall design of the project in response to achieving the deliverables as defined in this RFP.
- Specifically demonstrate the Bidder's familiarity with the project elements, its solutions to the problems presented and knowledge of the requested services.



### 7.2.2.4. *Proposal Narrative, Project Approach, and Technical Response*

The Bidder must answer all questions and must include all items requested for the proposal to be considered. The Bidder must address every section of Section 3 Statement of Work, even though certain sections may not be scored.

Responses must be in the same sequence and format as listed in Section 3 Statement of Work and must, at a minimum, cite the relevant section, subsection, and paragraph number, as appropriate.

### 7.2.2.5. *Description of Organization*

Bidders must include in their Proposal a summary of their company's organization, management and history and how the organization's experience demonstrates the ability to meet the needs of requirements in this RFP.

- At a minimum respond to:
  - General Company Overview
  - Ownership and Subsidiaries
  - Company Background and Primary Lines of Business
  - Number of Employees
  - Headquarters and Satellite Locations
  - Current Project commitments
  - Major Government and Private Sector Clients
  - Mission Statement
- This section must include information on:
  - the programs and activities of the organization,
  - the number of people served,
  - programmatic accomplishments.
- And also include:
  - reasons why the organization is capable to effectively complete the services outlined in the RFP;
  - all strengths that are considered an asset to the program.
- The Bidder should demonstrate:
  - the length, depth, and applicability of all prior experience in providing the requested services;
  - the skill and experience of staff and the length, depth and applicability of all prior experience in providing the requested services.



### 7.2.2.6. *Bidder's References*

The Proposal must include relevant information about at least three (3) similar or related contracts or subcontracts awarded to the Bidder and must also include client testimonials. Particular emphasis should be placed on previous contractual experience with government agencies. DHHS reserves the right to contact any reference so identified. The information must contain the following:

- Name, address, telephone number, and website of the customer
- A description of the work performed under each contract
- A description of the nature of the relationship between the Bidder and the customer
- Name, telephone number, and e-mail address of the person whom DHHS can contact as a reference
- Dates of performance

### 7.2.2.7. *Staffing and Resumes*

Each Bidder shall submit an Organizational Chart and a staffing plan for the program. For persons currently on staff with the Bidder, it shall provide names, title, qualifications and resumes. For staff to be hired, Bidder shall describe the hiring process and the qualifications for the position and the job description. The State reserves the right to accept or reject dedicated staff individuals.

### 7.2.2.8. *Subcontractor Letters of Commitment (If Applicable)*

If subcontractors are part of this proposal, signed letters of commitment from the subcontractor are required as part of the RFP. The Bidder shall be solely responsible for meeting all requirements and terms and conditions specified in this RFP, its Proposal, and any resulting contract, regardless of whether or not it proposes to use any subcontractors. The Bidder and any subcontractors shall commit to the entire contract period stated within the RFP, unless a change of subcontractors is specifically agreed to by the State. The State reserves the right to approve or reject subcontractors for this project and to require the Bidder to replace subcontractors found to be unacceptable.

### 7.2.2.9. *License, Certificates and Permits as Required*

This includes: a Certificate of Good Standing or assurance of obtaining registration with the New Hampshire Office of the Secretary of State. Required licenses or permits to provide services as described in Section 3 of this RFP.

### 7.2.2.10. *Affiliations – Conflict of Interest*

The Bidder must include a statement regarding any and all affiliations that might result in a conflict of interest. Explain the relationship and how the affiliation would not represent a conflict of interest.



### 7.2.2.11. *Required Attachments*

The following are required statements that must be included with the Proposal. The Bidder must complete the correlating forms found in the RFP Appendices and submit them as the "Required Attachments" section of the Proposal.

Bidder Information and Declarations will include:

- Exceptions to Terms and Conditions Appendix A

### 7.2.3. Cost Proposal Contents - Detail

#### 7.2.3.1. *Cost Bid Requirements*

Cost proposals may be adjusted based on the final negotiations of the scope of work. Reference Section 4 for specific requirements.

#### 7.2.3.2. *Statement of Bidder's Financial Condition*

The organization's financial solvency will be evaluated. The Bidder's ability to demonstrate adequate financial resources for performance of the contract or the ability to obtain such resources as required during performance under this contract will be considered.

Each Bidder must submit audited financial statements for the four (4) most recently completed fiscal years that demonstrate the Bidder's organization is in sound financial condition. Statements must include a report by an independent auditor that expresses an unqualified or qualified opinion as to whether or not the accompanying financial statements are presented fairly in accordance with generally accepted accounting principles. A disclaimer of opinion, an adverse opinion, a special report, a review report, or a compilation report will be grounds for rejection of the proposal.

Complete financial statements must include the following:

- Opinion of Certified Public Accountant
- Balance Sheet;
- Income Statement
- Statement of Cash Flow
- Statement of Stockholder's Equity of Fund Balance; and
- Complete Financial Notes
- Consolidating and Supplemental Financial Schedules.

A Bidder, which is part of a consolidated financial statement, may file the audited consolidated financial statements if it includes the consolidating schedules as supplemental information. A Bidder, which is part of a consolidated financial statement, but whose certified consolidated financial statements do not contain the consolidating schedules as supplemental information, shall, in addition to the audited consolidated financial statements, file unaudited financial statements for the Bidder alone



accompanied by a certificate of authenticity signed by an officer of the corporation, partner, or owner under penalty of unsworn falsification which attests that the financial statements are correct in all material respects.

If a bidder is not otherwise required by either state or federal statute to obtain a certification of audit of its financial statements, and thereby elects not to obtain such certification of audit, the bidder shall submit as part of its proposal:

- 1) Uncertified financial statements; and
- 2) A certificate of authenticity which attests that the financial statements are correct in all material respects and is signed by an officer of the corporation, partner, or owner under penalty of unsworn falsification.

### 7.2.3.3. *Required Attachments*

The following are required statements that must be included with the Proposal. The Bidder must complete the correlating forms found in the RFP Appendices and submit them as the "Required Attachments" section of the Proposal.

Bidder Information and Declarations will include:

- Budget – Appendix C
- Budget Narrative
- Program Staff List Form – Appendix D
- Audited Financial Statements (4 most recent years)
- Required Attachments



## **8. MANDATORY BUSINESS SPECIFICATIONS**

### **8.1. Contract Terms, Conditions and Penalties, Forms**

The State of New Hampshire sample contract is attached; bidder to agree to minimum requirement as set forth in the Appendix B.

The Department and the Contractor agree that the actual damages that the Department will sustain in the event the Vendor fails to maintain the required performance standards throughout the life of the contract will be uncertain in amount and difficult and impracticable to determine. The Contractor acknowledges and agrees that any failure to achieve required performance levels by the Contractor will more than likely substantially delay and disrupt the Department's operations. Therefore the parties agree that liquidated damages shall be determined as part of the contract specifications.

Assessment of liquidated damages shall be in addition to, and not in lieu of, such other remedies as may be available to the Department. Except and to the extent expressly provided herein, the Department shall be entitled to recover liquidated damages applicable to any given incident.

The Department will determine compliance and assessment of liquidated damages as often as it deems reasonable necessary to ensure required performance standards are met. Amounts due the State as liquidated damages may be deducted by the State from any fees payable to the Contractor and any amount outstanding over and above the amounts deducted from the invoice will be promptly tendered by check from the Contractor to the State.

The State intends to negotiate with the awarded vendor to include liquidated damages in the Contract in the event any deliverables are not met.

## **9. ADDITIONAL INFORMATION**

- 9.1. Appendix A - Exceptions to Terms and Conditions**
- 9.2. Appendix B - Contract minimum requirements**
- 9.3. Appendix C - Budget**
- 9.4. Appendix D - Program Staff List Form**
- 9.5. Appendix E - Resource List**

## EXCEPTIONS TO TERMS AND CONDITIONS

**RESPONDERS ARE CAUTIONED THAT BY TAKING ANY EXCEPTION THEY MAY BE MATERIALLY DEVIATING FROM THE RFP SPECIFICATIONS. IF A RESPONDER MATERIALLY DEVIATES FROM A RFP SPECIFICATION, ITS PROPOSAL MAY BE REJECTED.**

**INSTRUCTIONS:** Responders must explicitly list all exceptions to State of NH minimum terms and conditions. Reference the actual number of the State's term and condition and Exhibit number for which an exception(s) is being taken. If no exceptions exist, state "NONE" specifically on the form below. Whether or not exceptions are taken, the Responder must sign and date this form and submit it as part of their Proposal. *(Add additional pages if necessary.)*

|                                                         |                                        |
|---------------------------------------------------------|----------------------------------------|
| <b>Responder Name:</b>                                  |                                        |
| <b><u>Term &amp; Condition<br/>Number/Provision</u></b> | <b><u>Explanation of Exception</u></b> |
|                                                         |                                        |

Date \_\_\_\_\_

# Appendix B

FORM NUMBER P-37 (version 1/09)

Subject: \_\_\_\_\_

## AGREEMENT

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

### GENERAL PROVISIONS

#### 1. IDENTIFICATION.

|                                                                                                                                                                                                                                                                                                                                                |                           |                                                                                                             |                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------|
| <b>1.1 State Agency Name</b>                                                                                                                                                                                                                                                                                                                   |                           | <b>1.2 State Agency Address</b><br>129 Pleasant Street, Brown Building<br>Concord, New Hampshire 03301-3857 |                             |
| <b>1.3 Contractor Name</b>                                                                                                                                                                                                                                                                                                                     |                           | <b>1.4 Contractor Address</b>                                                                               |                             |
| <b>1.5 Contractor Phone Number</b><br>)                                                                                                                                                                                                                                                                                                        | <b>1.6 Account Number</b> | <b>1.7 Completion Date</b>                                                                                  | <b>1.8 Price Limitation</b> |
| <b>1.9 Contracting Officer for State Agency</b>                                                                                                                                                                                                                                                                                                |                           | <b>1.10 State Agency Telephone Number</b>                                                                   |                             |
| <b>1.11 Contractor Signature</b>                                                                                                                                                                                                                                                                                                               |                           | <b>1.12 Name and Title of Contractor Signatory</b>                                                          |                             |
| <b>1.13 Acknowledgement:</b> State of_____, County of _____<br><br>On _____, before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12. |                           |                                                                                                             |                             |
| <b>1.13.1 Signature of Notary Public or Justice of the Peace</b><br><br>[Seal]                                                                                                                                                                                                                                                                 |                           |                                                                                                             |                             |
| <b>1.13.2 Name and Title of Notary or Justice of the Peace</b>                                                                                                                                                                                                                                                                                 |                           |                                                                                                             |                             |
| <b>1.14 State Agency Signature</b>                                                                                                                                                                                                                                                                                                             |                           | <b>1.15 Name and Title of State Agency Signatory</b>                                                        |                             |
| <b>1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)</b><br><br>By: _____ Director, On: _____                                                                                                                                                                                                      |                           |                                                                                                             |                             |
| <b>1.17 Approval by the Attorney General (Form, Substance and Execution)</b><br><br>By: _____ On: _____                                                                                                                                                                                                                                        |                           |                                                                                                             |                             |
| <b>1.18 Approval by the Governor and Executive Council</b><br><br>By: _____ On: _____                                                                                                                                                                                                                                                          |                           |                                                                                                             |                             |

## Appendix B

**2. EMPLOYMENT OF CONTRACTOR/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 A 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, this Agreement, and all obligations of the parties hereunder, shall not become effective until the date the Governor and Executive Council approve this Agreement ("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, and 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 terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account 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 B 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 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 opportunity laws. In addition, the Contractor shall comply with all applicable copyright 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 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further 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.

## Appendix B

### 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 remedied, 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 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 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

### 9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 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.

9.2 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.

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

**10. TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall 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 A.

**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.** The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written consent of the N.H. Department of Administrative Services. None of the Services shall be subcontracted by the Contractor without the prior written consent of the State.

**13. INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. 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 maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$250,000 per claim and \$2,000,000 per occurrence; and

14.1.2 fire and extended coverage insurance covering all property subject to subparagraph 9.2 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 fifteen (15) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each

## Appendix B

certificate(s) of insurance shall contain a clause requiring the insurer to endeavor to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than ten (10) days prior written notice of cancellation or modification of the policy.

### **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. 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. WAIVER OF BREACH.** 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.

**17. 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.

**18. 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.

### **19. CONSTRUCTION OF AGREEMENT AND TERMS.**

This Agreement shall be 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.

**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 provisions set forth in the attached EXHIBIT C 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 relating hereto.



### SPECIAL PROVISIONS

Contractors Obligations: The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

1. **Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.
2. **Time and Manner of Determination:** Eligibility determinations shall be made on forms provided by the Department for that purpose and shall be made and remade at such times as are prescribed by the Department.
3. **Documentation:** In addition to the determination forms required by the Department, the Contractor shall maintain a data file on each recipient of services hereunder, which file shall include all information necessary to support an eligibility determination and such other information as the Department requests. The Contractor shall furnish the Department with all forms and documentation regarding eligibility determinations that the Department may request or require.
4. **Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.
5. **Gratuities or Kickbacks:** The Contractor agrees that it is a breach of this Contract to accept or make a payment, gratuity or offer of employment on behalf of the Contractor, any Sub-Contractor or the State in order to influence the performance of the Scope of Work detailed in Exhibit A of this Contract. The State may terminate this Contract and any sub-contract or sub-agreement if it is determined that payments, gratuities or offers of employment of any kind were offered or received by any officials, officers, employees or agents of the Contractor or Sub-Contractor.
6. **Retroactive Payments:** Notwithstanding anything to the contrary contained in the Contract or in any other document, contract or understanding, it is expressly understood and agreed by the parties hereto, that no payments will be made hereunder to reimburse the Contractor for costs incurred for any purpose or for any services provided to any individual prior to the Effective Date of the Contract and no payments shall be made for expenses incurred by the Contractor for any services provided prior to the date on which the individual applies for services or (except as otherwise provided by the federal regulations) prior to a determination that the individual is eligible for such services.
7. **Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractors costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party fundors for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party fundors, the Department may elect to:
  - 7.1. Renegotiate the rates for payment hereunder, in which event new rates shall be established;
  - 7.2. Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;



- 7.3. Demand repayment of the excess payment by the Contractor in which event failure to make such repayment shall constitute an Event of Default hereunder. When the Contractor is permitted to determine the eligibility of individuals for services, the Contractor agrees to reimburse the Department for all funds paid by the Department to the Contractor for services provided to any individual who is found by the Department to be ineligible for such services at any time during the period of retention of records established herein.

RECORDS: MAINTENANCE, RETENTION, AUDIT, DISCLOSURE AND CONFIDENTIALITY:

8. **Maintenance of Records:** In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:
- 8.1. Fiscal Records: books, records, documents and other data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor during the Contract Period, said records to be maintained in accordance with accounting procedures and practices which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.
- 8.2. Statistical Records: Statistical, enrollment, attendance or visit records for each recipient of services during the Contract Period, which records shall include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.
- 8.3. Medical Records: Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.
9. **Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the agency fiscal year. It is recommended that the report be prepared in accordance with the provision of Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non Profit Organizations" and the provisions of Standards for Audit of Governmental Organizations, Programs, Activities and Functions, issued by the US General Accounting Office (GAO standards) as they pertain to financial compliance audits.
- 9.1. Audit and Review: During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts.
- 9.2. Audit Liabilities: 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.
10. **Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.



Notwithstanding anything to the contrary contained herein the covenants and conditions contained in the Paragraph shall survive the termination of the Contract for any reason whatsoever.

11. **Reports:** Fiscal and Statistical: The Contractor agrees to submit the following reports at the following times if requested by the Department.
  - 11.1. Interim Financial Reports: Written interim financial reports containing a detailed description of all costs and non-allowable expenses incurred by the Contractor to the date of the report and containing such other information as shall be deemed satisfactory by the Department to justify the rate of payment hereunder. Such Financial Reports shall be submitted on the form designated by the Department or deemed satisfactory by the Department.
  - 11.2. Final Report: A final report shall be submitted within thirty (30) days after the end of the term of this Contract. The Final Report shall be in a form satisfactory to the Department and shall contain a summary statement of progress toward goals and objectives stated in the Proposal and other information required by the Department.
12. **Completion of Services:** Disallowance of Costs: Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.
13. **Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:
  - 13.1. The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.
14. **Prior Approval and Copyright Ownership:** All materials (written, video, audio) produced or purchased under the contract shall have prior approval from DHHS before printing, production, distribution or use. The DHHS will retain copyright ownership for any and all original materials produced, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports. Contractor shall not reproduce any materials produced under the contract without prior written approval from DHHS.
15. **Operation of Facilities: Compliance with Laws and Regulations:** In the operation of any facilities for providing services, the Contractor shall comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which shall impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit shall be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Contract the facilities shall comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.
16. **Subcontractors:** DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to



subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.

When the Contractor delegates a function to a subcontractor, the Contractor shall do the following:

- 16.1. Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
- 16.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate
- 16.3. Monitor the subcontractor's performance on an ongoing basis
- 16.4. Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed
- 16.5. DHHS shall, at its discretion, review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

## **DEFINITIONS**

As used in the Contract, the following terms shall have the following meanings:

**COSTS:** Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

**DEPARTMENT:** NH Department of Health and Human Services.

**FINANCIAL MANAGEMENT GUIDELINES:** Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

**PROPOSAL:** If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

**UNIT:** For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

**FEDERAL/STATE LAW:** Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

**CONTRACTOR MANUAL:** Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act. NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

**SUPPLANTING OTHER FEDERAL FUNDS:** The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.



**REVISIONS TO GENERAL PROVISIONS**

1. Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:
  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, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability 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 of Services provided in Exhibit A, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.
2. Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language:
  - 10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.
  - 10.2 In the event of early termination, 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, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.
  - 10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.
  - 10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.
  - 10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.



**CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS**

The Contractor 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 GRANTEES 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

**Appendix B**  
**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.

Contractor Name:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



**CERTIFICATION REGARDING LOBBYING**

The Contractor 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.

Contractor Name: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



**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



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 (I)(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: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



**CERTIFICATION REGARDING**  
**THE AMERICANS WITH DISABILITIES ACT COMPLIANCE**

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:

1. By signing and submitting this proposal (contract) the Contractor agrees to make reasonable efforts to comply with all applicable provisions of the Americans with Disabilities Act of 1990.

Contractor Name:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



**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:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



Exhibit I

**HEALTH INSURANCE PORTABILITY 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.



Exhibit I

- l. "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.

**(3) 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



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



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



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.



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.

\_\_\_\_\_  
The State

\_\_\_\_\_  
Name of the Contractor

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Name of Authorized Representative

\_\_\_\_\_  
Name of Authorized Representative

\_\_\_\_\_  
Title of Authorized Representative

\_\_\_\_\_  
Title of Authorized Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



**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: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name:  
Title:



**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: \_\_\_\_\_
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                      \_\_\_\_\_ 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                      \_\_\_\_\_ 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: _____ |
| Name: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |

# Budget Form

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

Bidder/Program Name: \_\_\_\_\_

Budget Request for: \_\_\_\_\_  
 (Name of RFP)

Budget Period: \_\_\_\_\_

| Line Item                               | Direct Incremental | Indirect Fixed | Total       | Allocation Method for Indirect/Fixed Cost |
|-----------------------------------------|--------------------|----------------|-------------|-------------------------------------------|
| 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             | \$ -               | \$ -           | \$ -        |                                           |
| 13. Other (specific details mandatory): | \$ -               | \$ -           | \$ -        |                                           |
|                                         | \$ -               | \$ -           | \$ -        |                                           |
|                                         | \$ -               | \$ -           | \$ -        |                                           |
|                                         | \$ -               | \$ -           | \$ -        |                                           |
| <b>TOTAL</b>                            | <b>\$ -</b>        | <b>\$ -</b>    | <b>\$ -</b> |                                           |

Indirect As A Percent of Direct

#DIV/0!

## Appendix D

| <b>Program Staff List</b>                                                                                                                                                                      |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------|--------------|
| <b>New Hampshire Department of Health and Human Services</b>                                                                                                                                   |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| <b>COMPLETE ONE PROGRAM STAFF LIST FOR EACH STATE FISCAL YEAR</b>                                                                                                                              |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| <b>Proposal Agency Name:</b> _____                                                                                                                                                             |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| <b>Program:</b> _____                                                                                                                                                                          |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| <b>Budget Period:</b> _____                                                                                                                                                                    |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| <b>A</b>                                                                                                                                                                                       | <b>B</b>                                                  | <b>C</b>                                                                 | <b>D</b>                        | <b>E</b>                                                             | <b>E</b>                                                              | <b>F</b>     |
| <b>Position Title</b><br><br>Example:<br>Program Coordinator                                                                                                                                   | <b>Current Individual in Position</b><br><br>Sandra Smith | <b>Projected Hrly Rate as of 1st Day of Budget Period</b><br><br>\$21.00 | <b>Hours per Week</b><br><br>40 | <b>Amnt Funded by this program for Budget Period</b><br><br>\$43,680 | <b>Amnt Funded by other sources for Budget Period</b><br><br>\$43,680 | <b>Site*</b> |
| Administrative Salaries                                                                                                                                                                        |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| Total Admin. Salaries                                                                                                                                                                          |                                                           |                                                                          |                                 | \$0                                                                  | \$0                                                                   |              |
| Direct Service Salaries                                                                                                                                                                        |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
|                                                                                                                                                                                                |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| Total Direct Salaries                                                                                                                                                                          |                                                           |                                                                          |                                 | \$0                                                                  | \$0                                                                   |              |
| Total Salaries by Program                                                                                                                                                                      |                                                           |                                                                          |                                 | \$0.00                                                               | \$0.00                                                                |              |
| <b>Please note, any forms downloaded from the DHHS website will NOT calculate. Forms will be sent electronically via e-mail to all programs submitting a Letter of Intent by the due date.</b> |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |
| <b>*Please list which site(s) each staff member works at, if your agency has multiple sites.</b>                                                                                               |                                                           |                                                                          |                                 |                                                                      |                                                                       |              |

## Appendix E: Resource List

### Surgeon General's Reports on Smoking and Tobacco Use

1. [http://www.cdc.gov/tobacco/data\\_statistics/sgr/index.htm](http://www.cdc.gov/tobacco/data_statistics/sgr/index.htm)
2. 2006—The Health Consequences of Involuntary Exposure to Tobacco Smoke
3. 2012—Preventing Tobacco Use Among Youth and Young Adult
4. 2014 – The Health Consequences of Smoking – 50 Years of Progress
5. Healthy People 2020 - <http://www.cdc.gov/dhdsp/hp2020.htm>

### Colleges & Universities:

According the Americans for Non-Smokers' Rights (ANR), as of July 8, 2013, at least 1,182 college or university campuses in the U.S. have adopted 100% smoke free campus policies that eliminate smoking in indoor and outdoor areas across the entire campus, including residences. This number has grown from 530 campuses the same time a two years earlier (July 2011) and 420 campuses three years ago (July 2010). The ANR expects this number to continue to climb rapidly as a result of the growing social norm supporting smoke free environments, and support from within the academic community for such policies for campus health and well-being. As leaders in higher learning, there is a commitment to provide a healthy and safe environment. Smoke free campus policies are examples of this commitment as they benefit students, faculty, staff, visitors, the environment, and the entire community.

- Tobacco use is the leading cause of preventable disease and death in the United States.
  - A tobacco-free policy does not require anyone to quit using tobacco, but does prohibit use on while campus grounds.
    - In all university affiliated buildings (including residence halls, administrative facilities, classrooms, and fraternity and sorority houses)
    - At all university sponsored events – both indoor and outdoor
    - On all university owned or leased grounds
    - In all university owned or leased vehicles
  - Students are accustomed to smoke free/tobacco free environments in New Hampshire.
1. [http://www.rwjf.org/en/blogs/new-public-health/2013/08/tobacco-free\\_campuse.html](http://www.rwjf.org/en/blogs/new-public-health/2013/08/tobacco-free_campuse.html)
  2. [http://www.acha.org/Publications/docs/Position\\_Statement\\_on\\_Tobacco\\_Nov2011.pdf](http://www.acha.org/Publications/docs/Position_Statement_on_Tobacco_Nov2011.pdf)
  3. <http://no-smoke.org/pdf/modeluniversitytobaccofreepolicy.pdf>
  4. <http://tobaccofreecampus.org/> Expert in the field, Clifford Douglas, JD,
  5. <http://www.tobaccofreemass.net/tfcampus.htm>

### Example of a Plan:

Tobacco Free Mass recommends the following five easy steps to establishing and implementing a tobacco-free campus policy: Note: Timeframes will vary depending on the college's readiness to adopt a policy.

#### **1. Establish a broad based coalition, committee, or working group** (complete within 1st month)

Building a broad-based coalition to assess social norms and issues, develop a draft policy, and roll out implementation is critical to the success of your policy. Be sure to include campus safety/police, student leaders, fraternal and athletic organizations, faculty and staff, human resources, and health department/Dean of Students, student affairs, custodial/facilities staff, and even parents of local college

students. Depending on the type and location of your campus you may also want to involve a representative or two from the local community. It is also important that the coalition or committee reflect the diversity of the campus population. It is helpful to have regularly scheduled meetings. Determine at what points along the way campus leaders and decision makers will be consulted and status reports given.

**2. Assess campus norms around tobacco and cigarette use and draft a plan** (complete within 2-3 months)

It will be helpful to determine how, where, and by whom tobacco is used on campus, the social norms around tobacco and cigarette use, tobacco-related policies that already exist, and the level of support on campus for a tobacco-free policy. Assessment activities include surveys of faculty, students, staff, and local residents, as well as focus groups, key informant interviews, and group discussions across the campus. Your working group should include a resource assessment to determine support needed and available to implement a tobacco-free policy. Costs may include design, purchase, and installment of signage, development of a website and use of social media to inform the campus community that the policy is coming, cost to cover cessation services and nicotine replacement therapy for tobacco users who wish to quit, and cost of education and enforcement as the policy is implemented.

**3. Mobilize support for the plan with appropriate decision maker approval** (complete within 3-5 months)

Share the drafted policies with members across the campus community. Ask for input and feedback, including from union representatives, legal counsel, and all other key stakeholders (students, community members, faculty, staff, cultural organizations, tobacco users, etc.). Redraft and get necessary final approval (campus leaders, Board, etc. depending on the structure of your campus).

**4. Plan for implementation, including communications, cessation support, education, and enforcement** (complete within 5-6 months)

Set a date for policy implementation. Identify cessation support services the campus will provide to help all interested tobacco users quit. Nicotine-replacement therapy, along with counseling, has been proven to be the most effective and provide the highest return on investment. Also determine how education and enforcement will be handled. Train all necessary staff and student leaders to assist with policy implementation and enforcement. Well in advance of the policy utilize various communications tools (web, print, campus newspaper, staff and faculty meetings, Student Government meetings, etc.) to inform members of the campus that the campus is becoming a Tobacco-Free Campus. A FAQs page on campus website can also be useful. Focusing on the positives and the benefits to all members of the community will help with the change.

**5. Implement policy & evaluate its impact with an eye on sustainability** (complete within 6-8 months and evaluate ongoing)

Install/update signage, remove ash receptacles, establish a complaint line and monitor it on a regular basis. For ongoing evaluation, assess baseline tobacco use rates among various constituencies. Continue to evaluate cessation support utilization and quit rates as the policy is implemented. Document and share success stories, cost savings, health outcomes, and impacts on the campus environment.