



TERMS OF EMERGENCY MANGEMENT DIRECTIVE
COVID-19 VACCINATION AID

This document sets forth the terms of this Emergency Management Directive (“EMD”), dated this _____ day of _____ 2021, and is entered into between the State of New Hampshire, Department of Health and Human Services, Office of the Commissioner, (hereinafter referred to as the “State”) and _____ (New Hampshire First Responder Organization), with a principal place of business of _____, (hereinafter referred to as the “First Responder Organization”) for the provision of aid in the administration of the New Hampshire Coronavirus Disease 2019 Vaccination Plan. This EMD is retroactively effective to January 15, 2021, upon the signature of both parties and the completion date is September 30, 2021, unless terminated earlier in accordance with Section 4 below.

WHEREAS, First Responder Organizations are experiencing personnel costs associated with assisting the State with implementing New Hampshire’s Coronavirus Disease 2019 Vaccination Plan;

WHEREAS, the State seeks to enter into an EMD for the purpose of reimbursing First Responder Organizations for personnel costs related to assisting the State vaccinating qualifying New Hampshire residents against COVID-19 in accordance with New Hampshire’s Coronavirus Disease 2019 Vaccination Plan;

WHEREAS, RSA 21-P:44 requires the Governor to “utilize the services, equipment, supplies, and facilities of existing departments, offices, and agencies of the state and its political subdivisions to the maximum extent practicable, and the officers and personnel of all such departments, offices, and agencies are directed to cooperate with and extend such services and facilities to the governor, and to the emergency management organizations of the state upon request;”

WHEREAS, RSA 21-P:43 provides the Governor with the authority to accept federal funds for the purpose of emergency management subject to the terms of the offer and may accept services from political subdivisions to perform emergency management services;

WHEREAS, the First Responder Organization is authorized to accept funding for emergency management services from the State subject to certain terms pursuant to RSA 21-P:43; and

WHEREAS this EMD was approved pursuant to RSA 4:45, RSA 21-P:43, and Section 4 of Executive Order 2020-04 as extended by Executive Orders 2020-05, 2020-08, 2020-09, 2020-10, 2020-14, 2020-15, 2020-16, 2020-17, 2020-18, 2020-20, 2020-21, 2020-23, 2020-24, 2020-25, 2021-01, and 2021-02.

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions set forth herein, the Governor hereby directs that the First Responder Organization, pursuant to RSA 21-P:44, conduct emergency management services under the direction of the State pursuant to the terms of this EMD, adopted pursuant to RSA 21-P:43. The parties agree as follows:

1. REIMBURSABLE SERVICES

- 1.1 The State shall reimburse the First Responder Organization for actual personnel expenditures incurred, which may include, but are not limited to, salary, wages, administrative expenses, stipends, and fringe benefits (“personnel expenditures”), by the First Responder Organization for employees who assist the State with vaccination efforts between January 15, 2021, through September 30, 2021, provided that such personnel expenditures are incurred while at a state-run fixed vaccine site or another state-approved point of dispensing vaccine site, and while working under the direction of the State as an emergency management worker in compliance with RSA 21-P:35, *et seq.* The State shall only reimburse for personnel expenditures incurred for hours worked at vaccine sites and



shall not reimburse expenses related to travel time to or from the vaccine sites.

2. FEE SCHEDULE AND PAYMENT CONDITIONS

- 2.1 Funding for this EMD is a shared price limitation of \$10,000,000 across all participating First Responder Organizations from January 15, 2021, through September 30, 2021.
- 2.2 Payment for services billed to the State in accordance with Section 1, Reimbursable Services, shall be on a cost reimbursement basis for actual personnel expenditures incurred in the fulfillment of this EMD.
- 2.3 The First Responder Organization shall complete the online Vaccination Reimbursement Request Form (Form) located on the New Hampshire Department of Safety, Homeland Security and Emergency Management's website (https://prd.blogs.nh.gov/dos/hsem/?page_id=11123) by the fifteenth (15th) calendar day of the following month. The completion of this online Form shall serve as a formal invoice submission by the First Responder Organization to the State for actual personnel expenditures incurred.
- 2.4 The State shall make payment to the First Responder Organization within thirty (30) days of receipt of each Form, subsequent to approval of the submitted Form and sufficient funds being available, subject to Paragraph 3 Conditional Nature of Agreement.
- 2.5 The final Form shall be due to the State no later than November 9, 2021.

3. CONDITIONAL NATURE OF EMD

- 3.1 The First Responder Organization acknowledges that no funds will be paid to the First Responder Organization once the price limitation is reached.
- 3.2 Notwithstanding any provision of this EMD to the contrary, all obligations of continuance of payments, in whole or in part under this EMD, are contingent upon the continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds.

4. RIGHT OF TERMINATION/EVENT OF DEFAULT

- 4.1 This EMD may be terminated by either party for any reason by providing a thirty (30) day written notice to the other party.

5. CHOICE OF LAW AND FORUM

- 5.1 This EMD shall be governed, interpreted and construed in accordance with the laws of the State of New Hampshire. Any actions arising out of this EMD shall be brought and maintained in a New Hampshire Superior Court which shall have exclusive jurisdiction thereof.

6. AMENDMENT

- 6.1 This EMD 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 of the State of New Hampshire unless no such approval is required under the circumstances pursuant to State law, rule, or policy.

7. ENTIRE AGREEMENT

- 7.1 This EMD, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire agreement and understanding between the parties, and supersedes all prior agreements and understandings with respect to the subject matter hereof.

**New Hampshire Department of Health and Human Services
EMD - COVID-19 Vaccination Aid**



Print Name:
Print Title:
First Responder Organization
Duly Authorized

Date

Lori Weaver, Deputy Commissioner
NH Department of Health of Human Services

Date

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

OFFICE OF THE ATTORNEY GENERAL

Date

Name:
Title: