



STATE OF CONNECTICUT
OFFICE OF EARLY CHILDHOOD



Dannel P. Malloy
Governor
Nancy Wyman
Lt. Governor

Linda Goodman
Acting Commissioner

September 13, 2016

Ms. Lucille Janatka
President and Chief Executive Officer
The Hospital of Central Connecticut
100 Grand Street
New Britain, CT 06050

Contract #: **15OEC8301TA Amendment 1**
Maternal, Infant, and Early Childhood Home Visiting Program
Period: **03/31/15 – 12/31/16**
Amount as Amended: **\$1,144,108.00**

Dear Ms. Janatka:

I am pleased to inform you that the above referenced contract amendment has been fully executed and approved. Attached is a scanned copy of the original contract for your files.

Requests for Payment should be completed and directed to the contact identified below. The OEC will process requests for payment in accordance with the terms of the contract. Your receipt of payment is contingent upon the continued availability of funds and your agency's compliance with the terms of the contract.

For issues or concerns related to this contract, please direct your inquiries to:

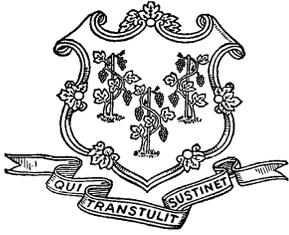
Scope of Work:
Catherine Lenihan
(860) 713-5333
catherine.lenihan@ct.gov

Payments:
Linda Harris
(860) 713-7009
linda.harris@ct.gov

Sincerely,

Linda Goodman
Acting Commissioner

C: Contract file



**STATE OF CONNECTICUT
OFFICE OF EARLY CHILDHOOD
CONTRACT AMENDMENT**

Contractor: The Hospital of Central Connecticut
Contractor Address: 100 Grand Street, New Britain, CT 06050
Contract Number: 15OEC8301TA
Amendment Number: A1
Amount as Amended: **\$1,144,108.00**
Contract Term as Amended: 3/31/2015 – 12/31/2016

The contract between The Hospital of Central Connecticut (*the "Contractor"*) and the Office of Early Childhood (*the "Agency"*), which was last executed by the parties on effective date 11/2/2015, is hereby amended as follows:

1. Page 1 and Part I, Section F.1 of the contract are amended because the total maximum amount payable under this contract has increased by \$428,776.00 from \$715,332.00 to \$1,144,108.00 due to an increase in available Federal funding for the period 1/1/16 through 12/31/16.
2. Part I, Section C.3.c of this contract is hereby deleted and the following is substituted in lieu thereof:
 - c. The Contractor shall submit Program Status Reports for the Program, in a format(s) determined by the OEC, on the following schedule:

Reporting Period	Reports Due on or before
March 31, 2015 – June 30, 2015	July 31, 2015
July 1, 2015 – September 30, 2015	October 31, 2015
October 1, 2015 – December 31, 2015	January 31, 2016
January 1, 2016 – March 31, 2016	April 30, 2016
April 1, 2016 – June 30, 2016	July 31, 2016
July 1, 2016 – September 30, 2016	October 31, 2016
October 1, 2016 – December 31, 2016	January 31, 2017

3. Part I, Section C.3.d.ii of this contract is hereby deleted and the following is substituted in lieu thereof:
 - ii. Semi-annual reporting periods from Form One, Part I (demographic data) and Form Two (benchmark data) are as follows:

Reporting Period	Reports Due on or before
October 1, 2014 – September 30, 2015	October 15, 2015
October 1, 2015 – March 30, 2016	April 15, 2016
October 1, 2015 – June 30, 2016	July 15, 2016
October 1, 2015 – September 30, 2016	October 15, 2016
October 1, 2016 – December 31, 2016	January 15, 2017

4. Part I, Section C.4.a of this contract is hereby deleted and the following is substituted in lieu thereof:
 - a. The Contractor shall submit to the OEC fiscal reports on forms provided by the OEC on the following schedule:

Reporting Period	Reports Due on or before
March 31, 2015 – September 30, 2015	October 31, 2015
March 31, 2015 – December 31, 2015	January 31, 2016
January 1, 2016 – June 30, 2016	July 31, 2016
January 1, 2016 – September 30, 2016	October 31, 2016
January 1, 2016 – December 31, 2016	January 31, 2017

5. The budget on page 9 of the contract is hereby deleted and the following is substituted in lieu thereof:

Effective Date: **6/17/2016**
 CONTRACT NUMBER: **15OEC8301TA A#1-\$715,332** 3/31/15-12/31
 CONTRACT PERIOD: **03/31/2015 through 12/31/2016**
 ST FISCAL YR (SFY): **2015**
 PROVIDER: **THE HOSPITAL OF CENTRAL CONNECTICUT**
 Approved by: **CappuccittiM**

4000 INCOME		MIECHV- Extension BR2014	X02-1	X02-2	MHV	Total Income
Program Funding Period:		03/31/2015 through 12/31/2016	03/31/2015 through 12/31/2016	03/31/2015 through 12/31/2016	03/31/2015 through 12/31/2016	
		Funding from 3/31/15-12/31/15 \$321,582	Funding from 3/31/15-3/30/16 \$225,000	Funding from 3/31/16-12/31/16 \$168,750	Funding from 1/1/16-12/31/16 \$428,776	
4100 CONTRACT FUNDING	SID	\$ 321,582	\$ 225,000	\$ 168,750	\$ 428,776	\$ 1,144,108
4102 Federal/Other Funds	22709	\$ 321,582			\$ 428,776	\$ 750,358
4102 Federal/Other Funds	22683		\$ 225,000	\$ 168,750		\$ 393,750
TOTAL INCOME		\$ 321,582	\$ 225,000	\$ 168,750	\$ 428,776	\$ 1,144,108
5000 DIRECT EXPENSES		MIECHV- Extension BR2014	X02-1	X02-2	MHV	Total Expenses
5100 SALARIES		\$ 228,968	\$ 163,904	\$ 123,173	\$ 318,416	\$ 834,461
5101 Staff Salaries & Wages		\$ 228,968	\$ 163,904	\$ 123,173	\$ 318,416	\$ 834,461
5200 FRINGE BENEFITS		\$ 64,111	\$ 45,893	\$ 34,488	\$ 84,381	\$ 228,873
5400 TRANSPORTATION		\$ 5,380	\$ 1,600	\$ -	\$ 3,162	\$ 10,142
5401 Staff Travel Reimbursement		\$ 5,380	\$ 1,600	\$ -	\$ 3,162	\$ 10,142
5500 MATERIALS AND SUPPLIES		\$ 3,025	\$ 4,591	\$ 6,580	\$ -	\$ 14,196
5501 Food		\$ 140	\$ 100	\$ 2,250	\$ -	\$ 2,490
5504 Other Mtrls and Sppls (specify in narrative)		\$ 2,885	\$ 4,491	\$ 4,330	\$ -	\$ 11,706
5600 FACILITIES		\$ 10,600	\$ -	\$ -	\$ 10,537	\$ 21,137
5604 Utilities		\$ 10,600	\$ -	\$ -	\$ 10,537	\$ 21,137
5700 CAPITAL EXPENSES (> \$5,000)		\$ -	\$ 6,012	\$ 4,509	\$ -	\$ 10,521
5702 Depreciation		\$ -	\$ 6,012	\$ 4,509	\$ -	\$ 10,521
5800 OTHER EXPENSES		\$ 7,800	\$ -	\$ -	\$ 12,280	\$ 20,080
5801 Communications		\$ 7,800	\$ -	\$ -	\$ 8,580	\$ 16,380
5804 Staff Training and Conferences		\$ -	\$ -	\$ -	\$ 3,700	\$ 3,700
5900 CLIENT SUBSIDIES		\$ 1,698	\$ 3,000	\$ -	\$ -	\$ 4,698
5901 Transportation		\$ 1,698	\$ 3,000	\$ -	\$ -	\$ 4,698
5902 Nutrition/Food Vouchers		\$ -	\$ 3,000	\$ -	\$ -	\$ 3,000
TOTAL DIRECT EXPENSES		\$ 321,582	\$ 225,000	\$ 168,750	\$ 428,776	\$ 1,144,108
7000 INDIRECT EXPENSES		MIECHV- Extension BR2014	X02-1	X02-2	MHV	Total Expenses
TOTAL INDIRECT EXPENSES		\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL EXPENSES		\$ 321,582	\$ 225,000	\$ 168,750	\$ 428,776	\$ 1,144,108
INCOME/EXPENSE SUMMARY		MIECHV- Extension BR2014	X02-1	X02-2	MHV	Total
TOTAL INCOME		\$ 321,582	\$ 225,000	\$ 168,750	\$ 428,776	\$ 1,144,108
TOTAL EXPENSES		\$ 321,582	\$ 225,000	\$ 168,750	\$ 428,776	\$ 1,144,108
EXCESS/(SHORTAGE)		\$ -	\$ -	\$ -	\$ -	\$ -

6. All terms and conditions of the original Contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Contract by their duly authorized representatives with full knowledge of and agreement with its terms and conditions.

SIGNATURES AND APPROVALS

15OEC8301TA
Amendment 1

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

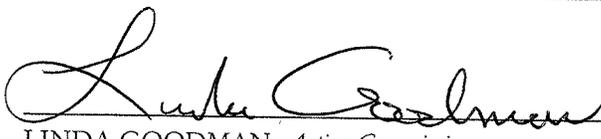
CONTRACTOR - THE HOSPITAL OF CENTRAL CONNECTICUT



LUCILLE JANATKA, *President and Chief Executive Officer*

9/21/16
Date

OFFICE OF EARLY CHILDHOOD



LINDA GOODMAN, *Acting Commissioner*

9/13/16
Date

CONNECTICUT ATTORNEY GENERAL (APPROVED)

This contract amendment, prepared on a template previously reviewed and approved by the Connecticut Attorney General, is therefore exempt from individual review and approval pursuant to a Memorandum of Agreement between the Connecticut Office of Early Childhood and the Connecticut Attorney General as amended on July 15, 2015.